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2007

The phenomenon of gaining sobriety through membership in Alcoholics Anonymous

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THE PHENOMENON OF GAINING SOBRIETY THROUGH MEMBERSHIP IN ALCOHOLICS ANONYMOUS

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Submitted to the Faculty of Education of the University of Lethbridge in Partial Fulfillment of the Requirements of the Degree

MASTER OF EDUCATION

LETHBRIDGE, ALBERTA

March 2007
Dedication

“These are not my people, no, no!
These are not my people,
And it looks like the end, my friend.”

—Joe South, 1960s

This manuscript is dedicated to the “army of people that it took to sober me up.”—to the front line “soldiers”: Nic, Evelyn, Theresa, my unofficial sponsor, Dr. Don M., and my best friend of thirty-six years, Beth.

To the current mainstays of my sobriety, “Bill” and “Bob”, whose stories express so much that I cannot.

It is dedicated to all the soldiers in all the armies of sobriety.
Abstract

This project is devoted to explaining the phenomenon of gaining sobriety through membership in Alcoholics Anonymous. While there are many ways in which a person can achieve freedom from an alcohol addiction, by far the predominant tool in North American society is Alcoholics Anonymous (AA). Historically the alcoholism treatment system and AA developed simultaneously and symbiotically. In other parts of the world AA came later, and is being viewed suspiciously by some, antagonistically by others and cooperatively by many. AA is growing exponentially in Europe and Asia and continues to grow significantly in North America. AA would not be what it is today without the alcoholism treatment industry, and the alcoholism treatment industry would not be the same without AA’s influence.

This study uses four sources to provide a partial exposition of the how and why AA works for some, but not for others: (1) the alcoholism literature, (2) the story of Tom, an alcoholic who gained sobriety primarily through treatment resources maintained it through work as an addictions counsellor, (3) the story of Bill whose initial sobriety came from both treatment resources and AA, and (4) the story of Bob whose initial sobriety came from intense immersion in AA. The three stories provide a rich source for reflection on the process of achieving sobriety, supplemented by the author’s comments.

The results of the study indicate a number of common features: (1) a life centered on alcohol, (2) a later awareness of drinking patterns other than their own, (3) feelings of uniqueness and aloneness, (4) loss of control, over both life and alcohol use, (5) the tendency to exaggerate drinking experiences in an effort to fit into AA, (6) a basic
knowledge of organized religion, (7) the influence of friendship both before and after sobriety, and (8) the significance of helping others.

The study notes that there are specific general areas common to most members who choose to maintain AA affiliation for life: (1) spirituality, (2) affiliation, and (3) a program of living. The intriguing question is whether cultural universals of AA will emerge as world wide AA continues to grow and is researched.
Acknowledgements

To my partner Beth, who must have felt like the spouse of a “practicing” alcoholic on so many of those weekends she spent alone while I worked on this degree.

Thank you to Michael, Cynthia, and Dr. Gary Nixon for their devotion and patience as I struggled through new learnings.

Finally, a sincere thank you goes to “Bill” and “Bob” for their words of encouragement and their invaluable input into the project.
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"Oh, the games people play, now
Every night and every day, now
Never meaning what they say, now
Never saying what they mean.

... God grant me the serenity,
    To just remember who I am."

—Joe South, 1968
Introduction

*Alcoholics Anonymous—Research*

Alcoholics Anonymous (AA) has existed for seventy years. It has become the primary approach for dealing with problems of alcohol abuse in North America. The majority of treatment programs are based on the Twelve Steps of AA. AA currently holds a place of less prominence in other parts of the world, with North America being the one place where the Twelve Steps are the dominant treatment paradigm, as exemplified by the Minnesota Model of treatment. Historically, the relationship between AA and the treatment system has been symbiotic. Currently the majority of AA members have at least minimal experience with alcoholism treatment programs, and AA itself has been strongly influenced by the opinions and practices of treatment practitioners. This symbiotic relationship has helped to produce a wide variety of practices within AA and group cultures vary from place to place throughout North America. Research on AA has been sporadic, inconsistent, and mostly inconclusive (Makela, Arminen, Bloomfield, Eisenbach-Stangl, Bergmark, Kurube, Mariolini, Olafsdottir, Peterson, Phillips, Rehm, Room, Rosenqvist, Rosovsky, Stenius, Swiatkeiwicz, Woronowicz, & Zielinski, 1996; McCrady & Miller, 1993; Spicer, 1993).

Thirty-five professionals from a variety of disciplines met in Albuquerque, New Mexico in February of 1992 to examine and discuss the current state of research into AA. Barbara McCrady and Bill Miller edited a volume which came out in 1993 to summarize the results of this conference. The authors say “Structured as a ‘think tank’ gathering, the participants came from as far away as Finland and Australia, representing diverse disciplines including anthropology, counseling, history, medicine, nursing, philosophy,
psychiatry, psychology, sociology, speech communication, statistics and methodology, and theology” (McCrady & Miller, 1993, p. 4). Partly as a direct result of this conference and the subsequent publication of the conclusions, there has been a growth in research on AA in the years since. As will become clearer below, the text also provided some direction for this growth.

The conference clearly pointed out that there are more questions than answers and that the answers that did exist were speculative and depended greatly on the particular perspective of the individual researcher. The bringing together of this diverse group of individuals also brought together their individual perspectives, and one question emerged as a result. Richard Fuller in the Foreword to Research on Alcoholics Anonymous puts it succinctly:

Knowing why, how, and for whom AA works would help providers to more accurately develop treatment plans for their patients—directing to AA those who would likely benefit from AA meetings and seeking other therapies for those who are not likely to benefit from AA participation”. (McCrady & Miller, 1993, p. ix)

The Project

First, let me address the issue of gender use in the current paper. An issue of The Grapevine, the monthly membership publication of AA, cites the 2004 triennial survey of AA membership world wide. It says, simply, that membership is comprised of “35% women” and “65% men” (Alcoholics Anonymous, 2005, p. 32). AA triennial surveys continue to show greater rates of female membership than the rates of female alcoholism in population surveys, but studies of alcoholism and of AA tend to use primarily white, middle-aged male participants (Emrick et al. in McCrady & Miller, 1993). A number of
possibilities have been postulated to explain this discrepancy. Two are significant. It is suggested that in a male-dominated society such as North America women may find it easier to attend an AA meeting once a week than to commit to an extended treatment program, both for child care reasons, and for fear of being identified as alcoholics in a society in which the dominant assumption is still that alcoholism is primarily a masculine disease. Feeling powerless to manage their own lives, women are more likely to accept the concept of powerlessness, so essential to grasping the AA brand of spirituality (McCrady & Miller, 1993). Given these factors influencing the identification of female alcoholics, population surveys must be considered somewhat suspect; while not substantiated in the literature, I believe that an accurate measure of the proportions of male to female alcoholics in North American society can not be made. Consequently I will vary the use of gender terms throughout this paper.

A note is in order here on the use of AA literature in this paper. In reference to the basic text, Alcoholics Anonymous (1955), members can often be heard referring other members to specific pages by number. The basic texts of AA have not changed since their initial publication, and a reference to a page number applies to all versions, whether recent or original. Some stories have been added to the end of Alcoholics Anonymous since the initial publication, but the first part, containing the essentials of the program has not changed. Thus members can talk to each other by page numbers, regardless of which version a person may have at his disposal.

This project first reviews the challenges inherent in doing research on AA, and then goes on to review recent trends in the growing field of AA research. Following this, AA is analyzed from three perspectives: as a fellowship, as a program of recovery, and as
a spiritual movement. This analysis is eclectic in its research approach and incorporates useful concepts from a variety of methodologies. A brief look at some of these methodologies as they relate to the present study leads into a definition of the questions being asked. Three individuals have been chosen to respond to these questions, and the data are presented in its entirety, followed by comments from a personal perspective.
AA Research

There were two problems with AA research up till the advent of the Conference guidelines. Research to that time was done predominantly on middle-aged male alcoholics, virtually ignoring women as well as younger and older males. Such research as existed used convenience samples of men from twelve-step-based treatment centres and followed them for only a short period of time (Emrick et al in McCrady & Miller, 1993).

Disease Concept

The disease concept, first suggested by Benjamin Rush in 1784, and expanded and detailed by Jellinek (1960), includes the idea that treatment of alcoholism requires a commitment to abstinence (White, 1998). White traces the development of AA from the temperance movement in the first part of the nineteenth century, through the Washingtonians, to the Oxford Groups, of which both of the cofounders of AA were members. It was the temperance movement that shifted thought in North America from moderation to abstinence. Perhaps most significant in this is the shift that occurred from the belief that alcoholism was a moral and social problem to a belief that it is an illness, often characterized as a mental illness, and by AA itself as a spiritual, moral and physical illness (AA, 1955; Spicer, 1993; White, 1998). This implies that the addict is not at fault for acquiring the illness, but could be considered to be at fault if he does not take advantage of every available resource to arrest the illness. AA emphasizes that the illness is capable of being put in remission, but not capable of being cured.
Jellinek’s concept of the disease model is often cited in the literature. He has defined four “species” of alcoholism. “Alpha alcoholism represents a purely psychological continual dependence or reliance upon the effect of alcohol to relieve bodily or emotional pain (Jellinek, 1960, p. 36). It goes against the prevailing morals of the time, but is not characterized by either loss of control or inability to abstain. Beta alcoholism often exhibits polyneuropathy, gastritis, or liver cirrhosis, sometimes occurring without physical or psychological dependence and is developed within the norms of a cultural group or in conjunction with poor nutrition. “Gamma alcoholism means that species so alcoholism in which (1) acquired increased tissue tolerance to alcohol, (2) adaptive cell metabolism…(3) withdrawal symptoms and ‘craving,’ i. e. physical dependence and (4) loss of control are involved” (Jellinek, 1960, p. 37). There is a clear progression from psychological to physical dependence and behaviour changes occur. Loss of control, he suggests is most damaging to social standing, interpersonal relationships, and financial status of all the symptoms of alcoholisms, hence Gamma alcoholism is seen to be the most serious. “Gamma alcoholism is what members of Alcoholics Anonymous recognize as alcoholism to the exclusion of all other species” (Jellinek, 1960, p. 38). Delta alcoholism shows tissue tolerance, adaptations in cell metabolism, but inability to abstain, contrary to gamma alcoholism. He suggests that only a small percentage of alpha alcoholics and virtually no beta alcoholics will seek the help of AA. He offers that there is any number of other species of alcoholism, among them, dipsomania or Epsilon alcoholism, which occurs periodically. Jellinek (1960) concludes this section by stating that only Gamma alcoholism and Delta alcoholism may be
considered diseases, as they involve physiological changes, but the other species should not.

*One criticism of the disease concept—Charles Bufe*

Of all the fronts on which AA has been attacked, it is the adoption of the disease concept which is most often criticized (Wilcox, 1998). Charles Bufe (1998) and a number of others (Peele, 1975; Peele, 1998; Peele and Brodsky, 1991; Peele, Brodsky, and Arnold, 1991; Peele, Bufe, and Brodsky, 2000) declares that the disease concept as presented by AA is dangerous. Bufe worries that a “majority of Alcoholics Anonymous members regard them [the Twelve Steps] in the same reverent manner that fundamentalist Christians regard the 10 Commandments” (Bufe, 1998, p. 64; Peele, 1998). Bufe goes through the twelve steps, critiquing each one in turn. “To put it plainly, this first step can only be seen as harmful in that it stresses personal powerlessness” (Bufe, 1998, p. 67). The reliance on a Higher Power “encourages AA members to be dependent” (Bufe, 1998, p. 69). Bufe feels this dependence discourages “individual effort and responsibility” (Bufe, 1998, p. 70). “Unfortunately, the fourth step doesn’t call for an inventory of irrational beliefs, physical causes, or other contributory factors; it calls for a moral inventory” (Bufe, 1998, p. 70). Bufe expresses concern about the use of sponsors—untrained individuals who often enjoy controlling others. “The sixth step is yet another expression of the Oxford Group belief in an all-powerful, anthropomorphic God with a detailed plan for every human life, and Step Seven is an assertion of “defectiveness, and the desirability of dependency and guilt” (Bufe, 1998, p. 72). “New ageism and AA’s eighth step both ignore the fact that most people (including alcoholics) are the victims of more wrongs than they commit (Bufe, 1998, p. 73). He suggests that
Step Nine should concentrate on making efforts “to change the social conditions that contribute to alcoholism” (Bufe, 1998, p. 73). He sees Steps Ten and Eleven as repeating the negative aspects of previous steps, and the last step is evangelizing. “Members of AA are not urged to help others overcome alcohol problems regardless of their acceptance or nonacceptance of AA’s program” (Bufe, 1998, p. 75). He suggests that socialization into AA develops Gamma alcoholism, as described by Jellinek (1960)—alcoholics who were capable of some control in drinking before AA acculturation become desperation drinkers; membership in AA changes a relatively safe drinking style into a dangerous one. Bufe notes that Frank Buchman, founder of the Oxford Group Movement wished for a God-controlled fascist dictator. AA, through its Twelve Traditions, lays out a plan of anarchist thought. Finally, Bufe points out the pervasiveness of the twelve-step approach in the treatment system in North America, which he sees as dangerous because “there’s some evidence that exposure to AA worsens at least on significant abusive behavior—binge drinking (Bufe, 1998, p. 101).

Another concern—Heather and Robertson

Heather and Robertson (1985), who see social-learning theory as the best paradigm for approaching alcoholism, object to seeing it as a medical problem defined variously as a pre-existent physical abnormality, a psychopathology, or an acquired dependency. The authors suggest that labeling does two things. It stigmatizes the problem, and it changes the nature of the problem itself, causing further problems for the client being treated. The authors suggest a series of components common to most disease theories:
Alcoholism is a discrete entity...Alcoholic drinking results from an involuntary impaired control over drinking and an abnormal craving for alcohol....Impaired control and craving are irreversible....The irreversibility of the disease of alcoholism entails a progressive deterioration in the alcoholic’s condition if drinking is continued. (Heather & Robertson, 1985, pp. 79, 80)

Where Bufe worries that only ten percent of alcoholics succeed in achieving sobriety through AA, Heather and Robertson also suggest that AA and other twelve-step treatment approaches cause a significant number of alcoholics to reject treatment altogether, while alternative modalities could offer some success.

Theory and Explanation

Danny Wilcox, schooled in the discipline of anthropology, adds a qualitative dimension to the academic literature from the perspective of a participant observer. In his own words, he has written “a research report based on the experience of many people in AA, as well as my own” (Wilcox, 1998, p. ix). It combines the perspective of an ethnographic study with the approach of an experiential knowledge of the phenomenon. He observes that a definition of the problem is difficult, given the many different views of those making the definitions. The divergent interests of the many writers in the field contribute to making description of AA particularly difficult.

My own review of the literature has found considerable theory development and very little peer reviewed empirical work. Emrick et al in McCrady and Miller (1993) say “In the final analysis, these opinions, impressions, experiences, beliefs, and revelations are simply that. They do not constitute quantitatively based knowledge, yet they have flourished in the near desert of high quality research into AA” (McCrady & Miller, 1993,
p. 41). AA continues to flourish and grow, but how it does so is pure speculation. A consensus is emerging out of all this, and a direction for future study. Kurtz, in discussing the need for the researcher to gain the respect of his subjects, notes that early research on AA was qualitative and wonders aloud when and why the turn to quantitative research took place. In doing quantitative research we become distant from our subjects, focusing on numbers, not on people’s experiences (McCrady & Miller, 1993).

The Challenge of AA Research—Governance

Perhaps it is the Twelve Traditions of AA which create the most difficulty in doing research on the phenomenon.

Tradition One: Our common welfare should come first; personal recovery depends upon A. A. unity.

Tradition Two: For our group purpose there is but one ultimate authority—a loving God as he may express Himself in our group conscience. Our leaders are but trusted servants; they do not govern.

Tradition Three: The only requirement for A. A. membership is a desire to stop drinking.

Tradition Four: Each group should be autonomous except in matters affecting other groups or A.A. as a whole.

Tradition Five: Each group has but one primary purpose—to carry its message to the alcoholic who still suffers.

Tradition Six: An A. A. group ought never endorse, finance or lend the A. A. name to any related facility or outside enterprise, lest problems of money, property and prestige divert us from our primary purpose.
Tradition Seven: Every A. A. group ought to be fully self-supporting, declining outside contributions.

Tradition Eight: Alcoholics Anonymous should remain forever non-professional, but our service centers may employ special workers.

Tradition Nine: A. A., as such, ought never be organized; but we may create service boards or committees directly responsible to those they serve.

Tradition Ten: Alcoholics Anonymous has no opinion on outside issues; hence the A. A. name ought never be drawn into public controversy.

Tradition Eleven: Our public relations policy is based on attraction rather than promotion; we need always maintain person anonymity at the lever of press, radio and film.

Tradition Twelve: Anonymity is the spiritual foundation of our traditions, ever reminding us to place principles before personalities (Alcoholics Anonymous, 1953).

McCready and Miller (1993) observe that AA does not discourage research, and actually supports it, although no official access to documents is offered by the Central Office in New York. In practice, Tradition Six means that any research done cannot be supported or endorsed by AA as whole, or by individual groups or members of AA. At the same time, the official stance is that members and groups are encouraged to cooperate wherever possible, keeping in mind the intent of the Traditions. Since the primary goal of each group is to carry the message of hope to those still suffering from alcoholism, research must not be seen to interfere with this important element. Nowinski is concerned that some researchers violate the Traditions through their approach. He says:
Those who would study AA and its relation to recovery from alcoholism will do well to understand the traditions that are in fact the substance of this fellowship. Based on such an understanding, plus a respectful appreciation of the somewhat different traditions that researchers and AA members hold dear, those who wish to conduct research may be able to do so while being faithful to the first tradition of the helping professional, which is to do no harm. (McCrady & Miller, 1993, p. 39)

 Traditions Eleven and Twelve encourage anonymity, “the spiritual foundation of our traditions” and this can present a problem for researchers. Research design must be predicated on self-selection, since no records of participants names can be kept, and the use of friends and families of members in the research protocol is not reasonably possible, minimizing the possibility for verification of information gathered. Members include those who are able to grasp the principles quickly and remain sober from the start to those who never gain any significant period of sobriety but maintain affiliation to AA for life. In both of these groups there are those who drift in and out of AA throughout their lives. A researcher has only the testimony of each member to rely on for information, and that information is subject to the personal experience and perceptions of the research participant.

 Traditions Two, Four, Eight, and Nine speak specifically to governance, which is perhaps even more bottom-up in practice than spelled out here. Bill Wilson, one of the co-founders of AA and the writer of a good portion of the literature, in his history of AA says “You are an A. A. member if you say so. No matter what you have done, or still will do, you are an A. A. member as long as you say so” (Alcoholics Anonymous, 1957, p.
Elsewhere is the idea that any group which says it is an AA group, is an AA group. Central Office respects these traditions, and sanctions are not imposed for non-conformity, although letters suggesting practice which has worked for others may be sent out to the group secretary or individual member at times. This produces a great deal of heterogeneity among both AA members and AA groups. Despite the lack of official control, O’Halloran (2005) has recently described a consistent list of unwritten rules of discourse over groups in a wide area. On the other hand, Makela et al (1996) have described a variety of formats and protocols common to AA in different countries. Generalization from research findings in one area to another must be suspect. The heterogeneity of meetings and AA membership is a strength for AA, but a complication for researchers seeking results generalizable to the general AA population. The initial question respecting who is appropriate for AA referral must be tempered with a consideration of the unique features of the organization in each geographic area, and to a lesser extent between different meetings in one location.

Adherents will often choose a group to attend regularly, referred to as their “home group” while attending a number of meetings of other groups. Typically no attendance records are kept, and members of a specific group will often miss their regular meeting for various reasons. There is no consistency, and this causes problems for on-going research. Attendance is not an accurate measure, and double counting is ubiquitous if more than one meeting is used for any kind of quantitative measure. There is nothing close to random sampling available in studying AA, especially since groups are diverse in approach and members are encouraged to find a meeting that they relate to for a home
group. This is perhaps one reason that early work relied on convenience sampling from Twelve Step based treatment programs, not a true reflection of AA.

**Recent Trends in AA Research**

**Effectiveness**

Prior to 1990, the effectiveness of AA was questioned by many in the field. Since then a number of studies have revealed that AA does work to relieve many of the problems associated with alcoholism. Project Match was an extensive evaluation of three different treatment modalities, an effort to explore the effects of matching clients to specific forms of treatment. The first outcome paper from the project came out in 1997. One of the treatment modalities used was Twelve Step Facilitation (TSF), “based on the concept of alcoholism as a spiritual and medical disease. Participants in this therapy were encouraged to develop a commitment to Alcoholics Anonymous (AA) and to work through the Twelve Steps of AA” (Babor & Del Boca, 2003, p. 23). The TSF modality included training in acceptance, surrender, and hope, associated with the first three steps of AA (Babor & Del Boca, 2003). TSF is clearly not AA, but is similar in many respects. Babor and Del Boca, in writing about the results of Project Match, note that the one significant result was that “participants who were highly dependent on alcohol had better post-treatment outcomes in TSF” (Babor & Del Boca, 2003, p. 147). Cloud, Ziegler, and Blondell (2004) found three important items that predicted success in AA: identification as a member, working on the steps, and the number of meetings attended. Moos and Moos (2005) did a sixteen-year follow up study and one conclusion was that “those who participated in AA for an extended interval after the first year had higher stable remission
rates than those who did not enter AA or participated for a shorter time” (Moos & Moos, 2005, p. 344).

In support of this conclusion the diffusion of AA throughout the world is a clear indication of its success. Makela et al (1996) studied AA in California, Mexico, and six European countries. Makela et al also list 40 countries where AA has established either a General Service Board or a Literature Distribution Centre, as of 1992, indicating worldwide activity. The Grapevine, the official monthly magazine of AA, devoted the July 2005 issue to world-wide AA. In it they state that “as of November 2004, there were over 104,000 AA groups worldwide, with over 2 million members in over 180 countries” (AA, 2005, p. 4). This issue was published to coincide with the Sixtieth Anniversary Convention in Toronto, and was likely planned to emphasize AA’s world diffusion for the benefit of members present at the Convention.

Separate from the treatment system

The second trend I identified in my literature search from 1990 to the present is that studies have begun to distinguish between AA and treatment as two separate entities. There is debate and confusion regarding whether AA can be called a treatment approach; the trend is to consider AA as a support movement useful as an adjunct to treatment. Nowinski points out “that AA, while organized, exists not as a treatment program but as a collection of men and women who are connected by common desires: to not drink again and to be in fellowship with one another” (McCrady & Miller, 1993, p. 28). White (1998) suggests a number of points. Treatment takes place in a business environment, while AA takes place in a voluntary social and spiritual community. Treatment programs are usually predicated on a conception of etiology and intervention strategies are designed to
address that etiology, while AA simply starts with the assumption that an alcoholic has a disease, and focuses on dealing with that reality. In the treatment setting an alcoholic may be asked to look at his childhood to attribute causes of the illness, while in AA the alcoholic is asked to take a moral inventory, and deal with current issues that are identified. The focus in treatment is often on gaining a degree of self-understanding, while AA’s focus is more likely to be on accepting oneself and moving on. In treatment the counsellor has control over the process, while in AA the individual decides on the amount and type of contact he receives. Treatment seeks a heightened degree of personal disclosure, while AA seeks to reduce invasiveness. Treatment is hierarchical and time-limited, while AA is egalitarian and continuing. In treatment, diagnosis is made by the counsellor while AA encourages self-diagnosis. Treatment specialists seek degrees and certifications for their work while AA credentials are measured by personal experience. In the treatment system there are defined fees for service while in AA contributions are voluntary. Treatment uses a core technology while AA focuses on only one thing, achieving and maintaining sobriety. Treatment practitioners are guided by professional codes of ethics, while AA is guided by group conscience and historical experience of the movement. Treatment programs maintain extensive records of client interactions, while AA records exist only in the memories of individual members. White (1998) further goes on to emphasize that he is not comparing treatment methods, but treatment and something distinct and different. This is despite the fact that Twelve Step based treatment is still the dominant modality in North America. Part of the concern that Bufe and others have is the fact that courts are still mandating AA attendance for offenders with alcohol-related charges (Peele, Bufe, & Brodsky, 2000), and child welfare workers and others are
beginning to do the same. AA has long been a referral resource used by employers for valuable employees whose productivity is in decline.

*The study of AA is a growth industry*

Dr. Emrick’s review of research on AA…covered 115 studies, without including more than 50 unpublished doctoral dissertations. If all published and unpublished studies with at least some data regarding AA were compiled, they would number in the hundreds….Most have been conducted as less formal and unfunded research, often as graduate theses and dissertations (McCready & Miller, 1993, p.5).

I note that my literature search of one electronic data base for the period 1990 to 2006 identified approximately 850 unique references. Emrick was reviewing a period of 55 years, as compared to my review of 15 years. One result of the Conference reported by McCready and Miller has been the coming together of a variety of disciplines to form a new discipline—the study of AA itself.

*Trend to qualitative work*

Finally, the recent trend has been to return to qualitative work in the study of AA. Kurtz suggests that qualitative and quantitative researchers represent two separate cultures and for the field to progress, each must respect the other’s contribution (McCready & Miller, 1993). O’Halloran (2005) offers a narrative analysis of an AA meeting in Southeast Asia. Studies are becoming more specific, in areas such as attendance and affiliation (Cloud, Ziegler, & Blondell, 2004; Witbrodt & Kaskutas, 2005), and spirituality (Murray, Goggin & Malcarne, 2006; Poage, Ketzenberger, & Olson, 2004; Polcin & Zemore, 2004).
Alcoholics Anonymous—the Phenomenon

Definition

“Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other, that they may solve their common problem and help others to recover from alcoholism” (Alcoholics Anonymous, 2005, p.1). Thus begins the Preamble, read at the beginning of many meetings of AA. Elsewhere, AA literature refers to alcoholism as a “malady” (Alcoholics Anonymous, 1953, p. 24), an “allergy and obsession” (Alcoholics Anonymous, 1957, p. 70), a “mental illness” (Alcoholics Anonymous, 1957, p. 33), a “progressive illness” (Alcoholics Anonymous, 1957, p. 30), and the answer is a “spiritual” one (Alcoholics Anonymous, 1955, p. 27).

We are presented with three distinct aspects of AA. First, it is a fellowship comprised of individuals with a common goal, but with diverse outside interests, who rely on one another for mutual support, and for varying degrees of social contact. For many this contact is desperately needed for survival in the initial stages of sobriety; for some it becomes a way of life and the major source of all social activity. Second, experience, strength and hope is laid out in a formalized program embodied in the Twelve Steps, illustrated and expanded in most of the official literature approved by the General Service Office of Alcoholics Anonymous. For many this becomes a strict guideline for living, a formal treatment program in a very real sense. Third, and perhaps most significantly, it is a spiritual program. Spirituality within AA has often been studied, is little understood, and is an emotional issue often influenced by the particular religious tenets of the researcher writing about the subject.
Fellowship

The meeting

Wilcox (1998) describes “the meeting” as the basic tool of AA. Closed meetings are for members only (by the definition that anyone is a member who says so) and open meetings are for anyone with an interest in the organization. Some Intergroup Offices will put on open meetings targeted at professionals in the community to raise awareness of AA and offer a resource for use in their professional practices. There are two main formats for AA meetings. Discussion meetings offer a variety of perspectives on a topic or topics chosen for the night, and speaker meetings will feature a few individual members chosen for their skill in presenting their stories of recovery. The primary tool of the meeting is the sharing of each participant’s individual story, with the express goals of allowing neophytes to identify, and offering some insight into how the program has worked for the speaker. Often the result of this sharing is the gain of new insight for the speaker himself, and may give the only outlet a new member has for expressing his feelings. It is considered common wisdom that nobody comes to AA by choice. Whether encouraged by the courts, family support systems, physical necessity, or personal defeat, the individual at that point has been forced to seek out the help of AA.

Affiliation

The process of affiliation with AA is preceded by the processes of attendance and identification. While it is generally true that attendance at a meeting is the first step there are numerous anecdotes emphasizing that the process of getting the neophyte to his first meeting can involve a long period of Twelve-Stepping by a member or members before the neophyte is ready for attendance. Whether identification happens before or after the
initial meeting, it is a crucial step. Often it is the first real identification with a distinct group of people a neophyte has experienced in a long time or ever in his life. Affiliation takes it a step further, when the new member comes to think of himself as an alcoholic and as a member of AA. Affiliation may be measured by any number of indicators, such as the number of meetings attended or self-reports of commitment and belief in the values expressed in official AA literature. AA-related activities and non-AA-related activities engaged in by AA members can also be a measure of affiliation. Emrick et al (McCrady & Miller, 1993) suggest use of external support, loss of control, high daily consumption, physical dependence, and anxiety about drinking as good measures of affiliation potential. The authors suggest “that systematic distinctions between AA affiliates and nonaffiliates can be identified; although the literature is not currently developed enough to provide us with a composite profile of the most likely AA affiliates” (McCrady & Miller, 1993, p. 53). Beckman cites two studies which suggest that high levels of affiliation are related to high levels of success, and that this accounts for the high proportion of female members (McCrady & Miller, 1993). Kurtz suggests that “the point here concerns the variety of experiences available within Alcoholics Anonymous—and the consequent reality that all generalizations about Alcoholics Anonymous need careful qualification” (McCrady & Miller, 1993, p. 15). Alan Ogborne, (in McCrady & Miller, 1993) points out that AA does not screen potential failures, as do most treatment programs, and that self-selection of the variety of related activities is a problem for researchers, both for measuring affiliation and for any meaningful measure of success potential. It is the quality of affiliation, not the quantity that is important, as shown by the number of members who demonstrate good solid sobriety without any attendance at
meetings for years at a time. Often, regular contact at work or through social activities is enough for more long time members.

*Extra-meeting activities and sponsorship*

The variety of extra-meeting activities often include sober dances, coffee sessions after meetings, roundups and conferences, sports and social activities and friendships which go well beyond the original AA association. Perhaps most significant in this list should be *sponsorship*—both for the sponsee and the sponsor. Sponsorship is a formal, albeit verbal, agreement between a new member and an older member for a mentorship role in the program. The sponsor is expected to be available as needed (not necessarily as wanted) by the sponsee, to be a confidant, a guide to the Steps, and sometimes a crisis intervention worker. Getting a sponsor is encouraged for new members, and is considered a must by some members. Sponsor-sponsee contact can be regular or infrequent, as needed. There are few guidelines, although a formal portion in which the sponsor guides the sponsee through the Steps is often recommended. For some members, sponsorship is a part of the process referred to as “Twelve-Stepping,” an important element in the system of organizational preservation, since without new members, any organization will die. Polcin and Zemore (2004) used a Helper Therapy Scale in their work which has three subscales: Recovery Helping, Life Helping, and Community Helping. It is the helping element, whether through an AA activity or a non-AA activity, that is important for the individual, while Twelve-Stepping is important for AA itself.

*Acculturation*

*Acculturation* is an important element in the discussion of affiliation. It has been previously suggested that the acculturation process into AA often produces “Gamma
alcoholism" or desperation drinking, where it did not exist beforehand. The other element of acculturation that is significant has to do with the learning of the language of AA. There are aphorisms, common beliefs, unwritten rules of discourse, and new ways of relating to each other. Wilcox (1998) offers that a neophyte must give up, or at least modify his native culture and adopt a new culture in order to survive as an AA member. It is a natural human tendency to not recognize change as it occurs in us, and this applies more to the individual coming through a highly emotional event such as giving up a significant part of his life. The alcoholic who gives up drinking may not recognize that his thinking has changed in some important areas, or he may not be sure when it changed. Data gathered from a long-time member may be considerably different than the same data if gathered from that member when he was a neophyte; often he will not recognize the change.

Twelve-Stepping

Formal Twelve-Stepping is an important element in organizational preservation. In common usage the term *twelve-stepping* has many meanings from the simple act of making coffee or cleaning up after the meeting to the complex process of initiating contact with a prospective member, coaching him along with a view to eventually taking him to a meeting. Sometimes the presence of a long-term member at a meeting, as an example of the benefits of sobriety, is referred to as Twelve-Stepping. Formal Twelve-Stepping involves a deliberate attempt to convince a prospective member that he does indeed need AA. This can be initiated when a prospect contacts the central office or telephone answering service in a community. Most communities in North America have a number listed in the phone book, usually manned by volunteers on a 24 hour basis. It is
often recommended that members go to call on a prospect in pairs, for an element of safety. Twelve-Stepping can be attendance at institutional AA groups, in jails and hospitals, where the majority of the attendees are there for the free coffee and tailor-made cigarettes that members bring with them. Twelve-Stepping also may involve a series of contacts with a friend or relative over a period of years, with the deliberate effort to point out instances in which drinking has been the cause of the individual's problems. Tradition Eleven gives guidance to the process: “Our public relations policy is based on attraction rather than promotion.” The member tells her story in the hope that the prospective member will identify with her.

*The AA Program*

The program is embodied in the Twelve Steps, first outlined by the original members as six steps and later expanded by Bill W, in writing the Big Book, to the current twelve. Trial and error over a few years had resulted in the six steps, and Bill’s concern was that “it might be a long time before readers of the book in distant places and lands could be personally contacted. Therefore our literature would have to be as clear and comprehensive as possible. Our steps would have to be more explicit” (Alcoholics Anonymous, 1957, p. 161). *Alcoholics Anonymous* was thoroughly reviewed and debated by the members of the time, and went through a number of revisions before actually being published. Current AA members often refer to the divine inspiration of Bill W., forgetting the extent of this revision process prior to publication.

There are few interpretations of the Twelve Steps in the research literature. AA literature gives ample explanation. Brown is one exception to this. He writes that the AA program is “a complex multidimensional model of long-term treatment and change that
surpasses any single-focused psychotherapy intervention or treatment for alcoholism” (McCraday & Miller, 1993, p. 145). Steps One to Three attack narcissism. The Big Book says “self-centeredness! That, we think, is the root of our troubles” (Alcoholics Anonymous, 1955, p. 62). Steps Four and Five attack defenses. Steps Six and Seven promote a change in attitude, from egocentricity to acceptance of the need for help. Steps Eight and Nine are about restitution, and introduce a focus on interpersonal relationships. Steps Ten to Twelve are designed to maintain this new attitude, and sobriety (McCraday & Miller, 1993). Bufe fears that “the majority of Alcoholics Anonymous members regard [the Twelve Steps] in the same reverent manner that fundamentalist Christians regard the 10 Commandments,” (Bufe, 1998, p. 64) and that “the 12 steps lead to a life-time of dependency” (Bufe, 1998, p. 75).

*Step One: We admitted we were powerless over alcohol—that our lives had become unmanageable.* (Alcoholics Anonymous, 1953 p. 21)

Step One is about admitting complete defeat, about surrender and powerlessness. It is the crux of the spiritual side of the program, as we shall see later. The “Twelve by Twelve”, as *Twelve Steps and Twelve Traditions* (1953) is often called, discusses each of the Steps in turn. In Step One it talks of alcoholics who still had their families and jobs, who had to admit defeat in the realm of alcohol even though their lives seemed to be in control. It is the defeat in the area of drinking, the acceptance that any drinking, no matter how little, will ultimately lead to loss of control, that is important. The book suggests that without Step One the other Steps are meaningless, that few will sincerely practice the other Steps without such an admission (Alcoholics Anonymous, 1953).
Step Two: Came to believe that a Power greater than ourselves could restore us to sanity. (Alcoholics Anonymous, 1953 p. 25)

Step Two, often referred to as the “God Step,” is a gradual process. The degree of faith brought in by the neophyte may determine the time it takes to absorb Step Two. Since the writing of the “Twelve by Twelve” it has become apparent to many that all that is required to take Step Two is a faith in the power of the group to help the individual. The original program, based on the Christian faith of the Oxford Groups, has changed to gradually include other faiths, even atheism. For many alcoholics now, it is faith in the collective wisdom of the many that is essential. Here, more than anywhere else is a case in which the practice of the AA program differs from the original intent. The belief in a Judeo-Christian God is no longer required, and many will refer to the term G. O. D. as Good Orderly Direction. Many devout atheists currently remain sober through AA affiliation. The second half of this step has to do with the understanding, usually not hard to come to if one is honest with himself, that the actions of a practicing alcoholic, with the often deleterious results could be no less than insanity. For both of these issues, it is the self disclosure, the stories told by members in the meeting venue, which accomplishes the transformation.

Step Three: Made a decision to turn our will and our lives over to the care of God as we understood Him. (Alcoholics Anonymous, 1953 p. 35)

Action is the key word in Step Three. It is a decision to honestly follow one’s conscience in every aspect of one’s daily life. For some, it is simply a matter of accepting a proscribed set of moral values and making a conscious effort to follow them, as suggested in subsequent steps. For others, it is more a matter of making daily decisions
based on the collective wisdom of the people we trust, or the best moral judgment we have at our disposal at any given moment. *Twelve Steps and Twelve Traditions* says “it is when we try to make our will conform to God’s that we begin to use it rightly” (Alcoholics Anonymous, 1953, p. 42).

*Step Four: Made a searching and fearless moral inventory of ourselves.*

(Alcoholics Anonymous, 1953 p. 43)

A moral inventory is often something which the average person takes for granted and of which he is not often consciously aware. Most folks find themselves doing what is right because it is right. Somehow, the alcoholic either missed this important part of daily living or lost it through her drinking. While the average person may be able to live with the occasional lapse in moral judgment, the alcoholic, coming from a history of self-recrimination, risks bad feelings, and so risks drinking, and if he has thoroughly taken the first three steps, risks ultimate death. As currently practiced in many groups, Step Four borrows heavily from the treatment system. There are numerous devices and guides available from the psychologists and counsellors for taking a moral inventory. While Step Four was originally designed after precepts of the Oxford Groups, the treatment industry borrowed the concept, developed it, and most AA groups borrowed it back. This is a good example of the symbiosis of the two. “The sponsor promptly points out that the newcomer has some assets which can be noted along with his liabilities. This tends to clear away morbidity and encourage balance” (Alcoholics Anonymous, 1953, p. 47). A suggestion borrowed from the treatment industry offers that a written moral inventory must start with one asset, and that each liability listed must be followed by the listing of an asset.
Step Five: Admitted to God, to ourselves, and to another human being, the exact nature of our wrongs. (Alcoholics Anonymous, 1953 p. 56)

Step Five has to do with forgiveness. It is the alcoholic who must forgive himself for his perceived wrongs. The process of revealing the exact nature of our wrongs to another human being is this process. A good sponsor, a person of the cloth, or a trusted counsellor can be supportive and accepting of anything which is revealed, and it is often emphasized in AA circles that it is the exact nature of the wrongs, not the specific wrongs themselves which is important for the completion of this step. The other aspect of this step is that another individual, especially one who knows the member well, can offer suggestions and fill in the blanks or point out important issues which the alcoholic may have missed in preparing their “inventory” (Step Four).

Step Six: Were entirely ready to have God remove all these defects of character.

(Alcoholics Anonymous, 1953 p. 64)

“Being ready to have defects of character removed” is akin to being ready to have the obsession with alcohol removed. “This does not mean that we expect all our character defects to be lifted out of us as the drive to drink was. A few of them may be, but with most of them we shall have to be content with patient improvement” (Alcoholics Anonymous, 1953, p. 66). Step Six is an attitude step, and it requires an acceptance of the attitude that God cannot do it by himself. It is the precursor to taking action to right the wrongs of the past, and to working toward becoming a better human being. Perfection is to be sought, but not to be expected; it is a sincere desire to improve, to recognize faults that is important.
Step Seven: Humbly asked Him to remove our shortcomings. (Alcoholics Anonymous, 1953 p. 71)

Humility is the foundation of Step Seven. The treatment industry reminds us that humility is simply an honest evaluation of oneself—admitting to our defects, and accepting our positive qualities. The AA member at this point is beginning to experience periods of calm, real peace of mind. Alcoholics Anonymous says:

No one among us has been able to maintain anything like perfect adherence to these principles. We are not saints. The point is, that we are willing to grow along spiritual lines. The principles we have set down are guides to progress. We claim spiritual progress rather than spiritual perfection. (Alcoholics Anonymous, 1955, p. 60)

This is the point at which to move outward from the self toward others and God. The humility needed to acknowledge defeat in relation to alcohol now becomes essential to overcome the rest of our character flaws.

Step Eight: Made a list of all persons we had harmed, and became willing to make amends to them all. (Alcoholics Anonymous, 1953 p. 79)

To begin Step Eight is to begin transforming personal relationships to something more positive. In one sense, it is a reopening of the moral inventory, only with more specifics. Twelve Steps and Twelve Traditions suggests that if we are to ask forgiveness from those we have wronged we must first forgive those who have wronged us. The text continues:

Though in some cases we cannot make restitution at all, and in some cases action ought to be deferred, we should nevertheless make an accurate and really
exhaustive survey of our past life as it has affected other people. In many instances we shall find that though the harm done others has not been great, the emotional harm we have done ourselves has. Very deep, sometimes quite forgotten, damaging emotional conflicts persist below the level of consciousness. At the time of these occurrences, they may actually have given our emotions violent twists which have since discolored our personalities and altered our lives for the worse. (Alcoholics Anonymous, 1953, p. 82)

There are two points here, stated in different forms in both bodies of literature. First is that the alcoholic must include himself on the list of persons harmed, and second, alluded to in the next step, is the consideration that not all amends should be made.

*Step Nine: Made direct amends to such people wherever possible, except when to do so would injure them or others.* (Alcoholics Anonymous, 1953, p. 85)

“Good judgment, a careful sense of timing, courage, and prudence—these are the qualities we shall need when we take Step Nine” (Alcoholics Anonymous, 1953, p. 85). Step Nine requires a balance between avoiding harm to others and not procrastinating. Some wrongs cannot ever be set right, but it is the sincere desire and honest effort to do so that is important. Alcoholics Anonymous suggests that “if we are painstaking about this phase of our development, we will be amazed before we are half way through. We are going to know a new freedom and happiness” (Alcoholics Anonymous, 1955, p. 83).

*Step Ten: Continued to take personal inventory and when we were wrong promptly admitted it.* (Alcoholics Anonymous, 1953, p. 90)

Having accomplished tremendous growth, the AA member must now turn to maintenance of his new-found peace of mind. In Step Ten, the continuation of regular
inventory of our daily lives is developed into a constructive habit—the program of living becomes a natural phenomenon.

_Step Eleven: 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._ (Alcoholics Anonymous, 1953 p. 98)

Step Eleven returns to the issue of spirituality. Serenity comes from taking the time to reflect on one’s life, whether through Judeo-Christian means or through Eastern meditation practices or another philosophical basis. A sober alcoholic, to remain sober must be willing to be introspective in a positive way. Dwelling on past mistakes is not the answer, but accepting faults, criticism, and problems, and making the best of these things is. AA literature, as has been stated, is based on the Judeo-Christian tradition, but for many it has been adapted to a variety of other belief systems. The important element here is the continuation of every effort to live by a personal moral code. Alcoholics Anonymous suggests a formula for daily prayer and meditation, suggesting habits of conduct which, when developed, will strengthen daily sobriety. It is often heard at meetings, that when a person is feeling disagreeable, it is time to read pages 86, 87, and 88. These three pages suggest a consistent pattern of daily prayer and meditation.

_Step Twelve: Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs._ (Alcoholics Anonymous, 1953 p. 109)

Step Twelve has a number of purposes. Whether stated or not, the primary purpose is the preservation and continuation of AA as an organization. The second purpose has to do with the concept of usefulness, as mentioned previously in the
discussion of fellowship. Finally, it has been the experience of many, if not most, AA members that twelve-step work helps to take an individual out of himself. As long as he is trying to be of assistance to another human being, he does not have time to dwell on his own misfortunes. This concept is reflected in many of the personal stories heard at meetings. Twelve Steps and Twelve Traditions discusses the spiritual awakening, suggesting that at this point all members will have achieved a peace and serenity through a gradual awakening to a new honest and moral life. The other part of the step reminds members that they must continue to work at it to maintain this serenity by practicing these principles in all their affairs.

Morgenstern and McCrady, writing in McCrady and Miller (1993), suggest that there are two dominant models of theory about addictions treatment—the disease model and the behavioral model. The former is based on powerlessness, and the latter on self-efficacy. Bufe (1998) sees powerlessness as harmful. Wilcox (1998) sees change as the main focus of AA. Common practices to facilitate change are exercising humility, living one day at a time, keeping it simple, working the Steps, and eventually, carrying the message. Miller and C’dé Baca (2001) discuss Quantum Change, a total change in personality which is necessary to achieve sobriety, whether through a sudden epiphany or a gradual growing awareness of a new life gained through diligent practice of the Twelve Steps. The authors suggest that a better knowledge of this process could be a powerful tool in treatment.

AA almost became a branch of the treatment system because of its need to access hospital beds for the detoxification of prospective members. Some initial attempts at collaboration with hospitals looked like AA run wards within public hospitals (White,
He cites an AA Grapevine article of 1952 which states “though the work at Knickerbockers was started by A. As, is carried on by A. A. efforts, has the full support of individual A. A.s and all A. A. groups and is, indeed, one of A. A.’s outstanding achievements—it is still completely independent of A. A., as such” (White, 1998, p. 165). White refers to the analogy of the priest and the shaman. The shaman is one who has gained his expertise through personal experience, while the priest gained his expertise in study of religious dogma. The role of the paid shaman is dwindling; he is withdrawing into the volunteer sector (White, 1998). Spicer (1993) notes a growth of professionalism in the industry. The industry is changing to multiple pathways of treatment, and White (1998) considers AA as one possible pathway. Alcoholics Anonymous Comes of Age (1957) discusses “two-hatters”, AA members who make their living in the treatment industry. The authors of Alcoholics Anonymous Comes of Age believed that so long as they are able to separate their AA program from their work, there is no problem.

**Spirituality**

One of the most studied areas in AA research is that of spirituality. Cloud, Ziegler, and Blondell (2004) found that the experience of a “spiritual awakening” was not a significant predictor of success in AA. Poage, Ketzenberger, and Olson (2004) found that length of sobriety was related to spirituality, but not necessarily to greater contentment and lower stress levels. Polcin and Zemore (2004) suggest that individuals with high psychiatric severity are less affected by affiliation and spirituality than other factors. Murray, Goggin and Malcarne (2006) offer that God belief changes with increased involvement with AA. Nowinski offers that faith is an important element in AA and cites the use of the Lord’s Prayer at most meetings (McCrady & Miller, 1993). Some
dispute whether the Lord’s Prayer is as common as Nowinski indicates. Makela et al suggest that use of the Lord’s Prayer is common in North America, but almost non-existent in Europe and other parts of the world (McCready & Miller, 1993). Caetano observes that AA has been adapted to the spirituality of Native Americans, Jews, and others (McCready & Miller, 1993). Bufe (1998) considers AA as having close to cult status, while Galanter (2005) compares AA affiliates to members of the Unification Church (the Moonies) and concludes that the most distressed individuals are the most likely to affiliate. There is no doubt the roots of AA are religious. AA literature takes a Judeo-Christian stance throughout, and the organization developed from the Washingtonians through the Oxford Groups, both Christian based organizations (White, 1998).

_Spiritual awakening_

A footnote in Bill’s history of AA says:

Nearly every A. A. has a spiritual experience that quite transforms his outlook and attitudes. Ordinarily, such occurrences are gradual and may take place over periods of months or even years.

A considerable number of A. A.’s, including Bill, who have had the sudden variety of spiritual experience see no great difference so far as the practical result is concerned between their quick illumination and the slower, more typical kinds of spiritual awakening (Alcoholics Anonymous, 1957, p. 63).

The spiritual awakening is an important concept in AA literature, but whether it is a sudden “white light” experience such as that experienced by Bill W. or a gradual development over time such as experienced by the other co-founder, Dr. Bob, spiritual
awakening requires a gradual development. It is interesting to note that Bill’s
development was more difficult and in many ways he remained a troubled individual for
life (Kurtz, 1979).

Common wisdom in AA says that the program is “spiritual in nature, not
religious”. Official literature confirms this, yet Bill’s writing, especially in the Steps, is
clearly Judeo-Christian in tone. As Makela et al (1996) have noted the program is less
religious as practiced beyond the borders of North America. Connors, Miller, Anton, and
Tonigan offer that “spirituality is an elusive concept considered particularly relevant to
the evaluation of an intervention based on a Twelve Step model” (Babor & Del Boca,
2003, p. 35). Most research into AA spirituality has been conducted from a Judeo-
Christian perspective. It is obvious that Bill, in writing the “Big Book” and the “Twelve
by Twelve” took the stand that adherents who practice the program thoroughly will
eventually develop to a Judeo-Christian perspective of the Higher Power. In suggesting
that an individual member can use any concept he wishes as a higher power, he hastens to
add that the strong member will eventually develop a sense of God as Higher Power.
Often, the initial Higher Power is the power of the collective wisdom of the group

Faith

The essence of the healing process is faith—whether the Christian’s faith in the
restorative powers of belief in Jesus Christ or the atheist’s faith in humanity’s ability for
self-improvement. Galanter (2005) offers that resiliency is an important element of faith.
It is hope that first comes to the neophyte—hope that he can recover. That is the essence
of the meeting structure; the mere presence of so many recovered individuals sharing of
themselves so freely, and laughing at their former exploits instills hope. Hope is the
initial form of faith. For some new members it is the first faith experience ever. Fowler
says that faith is “the dynamic process of finding and creating meaning in one’s life”
(McCrady & Miller, 1993, p. 113) and “oneness with the power of being.” This frees the
member “for a passionate yet detached spending of self in love, devoted to overcoming
division, oppression and violence” (McCrady & Miller, 1993, p. 119). Gorsuch suggests
that the Steps involving restitution and asking forgiveness are important for the alcoholic
who often believes that God will not forgive him his sins (McCrady & Miller, 1993).
Powerlessness has been equated with the disease model. In a strict sense, the original
disease model simply states that a person is not responsible for his alcoholism, but is
responsible to take advantage of every opportunity to recover. The effort is to reduce self-
recrimination. As the model has been developed by AA and adopted by a portion of the
treatment industry, the concept of powerlessness has arisen. This concept comes from
fundamentalist Christian ideas of rebirth, subjecting the individual to the will of the
Higher Power. It is not the idea of disease itself, but this portion of the AA model that has
raised the most objections from AA’s critics. It is often suggested that this powerlessness
creates helplessness and dependency, and that it is the most cult-like aspect of AA.

Gorsuch suggests that “despite the importance of spirituality in Alcoholics
Anonymous’ (AA) 12 steps, addiction research has seldom measured spirituality (Miller,
1991)” (McCrady and Miller, 1993, p. 301) With the current shift away from defining
spirituality by such measures as church attendance and self-rated importance of religion,
and toward defining it by such measures as values and peace of mind, perhaps social
science research about alcoholism is getting closer to understanding AA spirituality.

(Gorsuch in McCrady & Miller, 1993)
The Study

Qualitative Research

The phenomenon of AA can be analyzed from a number of different perspectives, each of which uses a set of scientific tools developed over time and following specific conventions established by practitioners over a period of many years of trial and error, theory generation, and tradition.

Quantitative Research follows the guidelines of traditional Cartesian science, involving random samples and strict guidelines for data gathering and analysis using inferential statistics, while qualitative research prefers to gather data using the principle of saturation—gathering data until all conceivable contingencies have been explored. Elmes, Kantowicz, and Roediger (1992) describe the scientific process as repeatable and self-correcting. “A theory can never be proven; it can only be disproven” (pp. 30, 31).

Osborne (1994) offers that a surge of interest in qualitative research occurred in the 1980s:

The emphasis is on discovery, description, and meaning rather than the traditional natural science criteria of prediction, control, and measurement. Traditional notions of random sampling, reliability, validity, replicability etc. are not necessarily appropriate in the qualitative context. (Osborne, 1994, p. 168)

Kurtz suggests that all quantitative research into AA must be preceded by qualitative research—that the researcher must know the phenomenon at a deep level before any attempt is made to gather or interpret statistical information. He discusses three aspects of research. Accuracy is essential. Objectivity is the “care that the kind of questions asked are true to the phenomenon being studied” (McCrady & Miller, 1993, p.
The researcher must gain the respect of his subjects by understanding them on a deep level. Beutler, Jovanovic, and Williams, also writing in McCrady and Miller (1993), argue that we cannot compare AA to treatment because treatment variables can be controlled; thus while treatment is amenable to quantitative research, AA is not. The dynamic will change from meeting to meeting, depending on the adherents present.

**Phenomenology**

One distinct field of qualitative research is *phenomenology*, aimed at extracting the deeper meaning of a phenomenon by analyzing the experiences of those actively involved in the phenomenon. Osborne says:

> The data sources for phenomenological research are usually spoken or written accounts of personal experience....The aim is to elicit naïve descriptions of the actuality of experience as it is lived rather than to collect embellished and narrative accounts that are based upon what the participant believes is expected by the researcher. (Osborne, 1994, p. 171)

Talbot suggests the aim of phenomenology is “to examine the meaning of life through the lived experiences of individuals” (Talbot, 1995, p. 93). This research project relies heavily on this concept.

**Hermeneutics**

Because the essence of the AA tradition is story-telling, *hermeneutics* offers a rich set of principles for this analysis. It is the process of deriving the deeper, existential meaning of the phenomenon from the participants which is important. Smith notes that:

> Whenever we are engaged in the activity of interpreting our lives and the world around us, we are engaging in what the Greeks called ‘practical philosophy.’ an
activity linkable to the character of Hermes in the Greek pantheon. (Smith, 1999, p. 27)

From Schleiermacher on, three themes in hermeneutic inquiry have always been present: namely, the inherent creativity of interpretation, the pivotal role of language in human understanding and the interplay of part and whole in the process of interpretation. (Smith, 1999, p. 30)

Osborne suggests that “Heidegger formulated the hermeneutic method in order to interpret the meanings which lie beyond descriptive phenomenology because he believed that pure description is limited in its ability to reveal meaning” (Osborne, 1994, p. 173). Van Hesteren (1986) refers to a reciprocal relationship between phenomenology and hermeneutics, and notes that hermeneutics is a process of meaning constitution emphasizing interpretation, explanation, and understanding. O’Halloran (2005) uses the methodology of hermeneutics in his narrative analysis of an AA meeting in Southeast Asia.

Ethnography

Ethnography is a methodology derived from the discipline of anthropology for the study of unique cultures. As Wilcox (1998) has demonstrated, AA is a distinct culture within North American culture, with its own set of beliefs and conventions. Attempts to study AA by quantitative methods have been unsuccessful, because the AA Traditions leave too much to be suspect. Makela et al (1996) have demonstrated that the AA culture is quickly becoming a unique entity within other cultures throughout the world. He describes the phenomenon as a social movement, not in the usual sense implying a desire to change society, but in the sense implying a desire to change its own members and
others eligible for membership. Whether there is a unique AA culture worldwide remains an unanswered question. Two concepts in ethnography play into this research project. Recently, as a result of this research I have come to think of myself as a “participant observer” in the phenomenon of AA. The stories of Bill and Bob in this project are the result of interviews with “key informants” in the phenomenon, albeit, a narrow selection of informants.

Grounded theory

In the simplest of terms, grounded theory can be thought of as theory developed on the basis of information gathered using any or all of the tools of qualitative enquiry. This paper cannot present a theory, but does raise some concerns and perhaps provide some direction in the development of a grounded theory to explain how and why AA is successful—the first step toward understanding which individuals are likely to succeed in AA and which individuals are likely to benefit from other treatment modalities.

Usefulness of the Study

After a number of years as an active member of Alcoholics Anonymous and a counsellor working in the field of addictions I became concerned with the use of AA in the treatment industry. Over the years I observed that many clients resented a referral to AA, and for those who complied reluctantly, the experience often appeared to slow the progress of therapy. Other clients appeared to grasp onto AA and hang on for dear life, graduating very quickly out of the treatment milieu, and into a life based on AA tenets. The usefulness of AA membership was questioned by quite a number of the counsellors with whom I worked. Some authors also question the usefulness of AA (Bupe, 1998; Peele, Bupe, & Brodsky, 2000; Peele & Brodsky, 1991).
In beginning a review of the literature in the field it became evident that the value of AA as an adjunct to treatment was being debated extensively and in actual treatment practice the question of whether to refer a particular client to AA or not depended on the previous experiences, positive or negative, of the case counsellor. In many instances, the choice of whether to refer or not had little to do with the needs of the client in question. Despite evidence questioning the usefulness of the concept, the Twelve Step model is deeply entrenched in the present-day treatment system in the United States and Canada (Doweiko, 1996; McCrady & Miller, 1993; Segal, 1988; White, 1998).

I have witnessed many successes in AA, but I have also witnessed many failures. Similarly, there are those clients who will do well with brief intervention therapy; there are those that require extensive counselling over a long period of time. Brief intervention therapy must be distinguished from Intervention. Brief intervention therapy involves the use of a reality-based approach to treatment in which the client is lead to understand that drinking is a significant factor in his life and then given some choices about how to deal with it, often including a referral to AA. Intervention is a formal method used to entice problem drinkers into treatment or AA membership (Johnson, 1973). For a number of years it was used with varying degrees of success, and occasionally some tragic consequences. Recently the procedure has been discredited for two reasons. One is that too many unskilled individuals were using it. The other is that there is no literature available to accurately predict when intervention will be a success.

Addictions counselling is both a science and an art. Science will only take us so far. Traditional science offers us the tools to work with some clients successfully. It does not give us the tools to deal with the exceptions, those for whom traditional
treatment methods do not work. Counsellors often have to rely on judgment born of experience in the profession to make decisions about the best method to use at any time—that is the art of addictions counselling. Referral to AA is one among the many tools available to the counsellor and it is a worthwhile endeavour to attempt to clarify when referral to AA is appropriate. There are those counsellors that think all alcoholics should be referred to AA and those that think no alcoholics should be referred to AA. At this point it is worthwhile to repeat the central question noted above as stated by Richard K. Fuller, in the Foreword to Research on Alcoholics Anonymous:

For one thing, it is likely that AA does not work for everyone. Just as we have testimonials from those whose lives were profoundly changed by AA, we also have reports from those for whom AA attendance proved unsatisfactory. Some of these individuals achieved sobriety by other means, and others continued to have their lives destroyed by alcoholism. Knowing why, how, and for whom AA works would help providers to more accurately develop treatment plans for their patients—directing to AA those who are likely to benefit from AA meetings and seeking other therapies for those who are not likely to benefit from AA participation. (McCrady & Miller, 1993, page ix)

Both qualitative and quantitative studies have been attempted in an effort to move toward this goal. Kurtz suggests that research into AA was initially predominantly qualitative but has lately taken a turn to the quantitative. Access to AA is an issue. The editors (McCrady & Miller, 1993) suggest participant observation as one tool for research into the question, suggesting that current AA members be solicited and trained to conduct research. As Kurtz (McCrady & Miller, 1993) has suggested, a researcher must have a
deep understanding of the phenomenon, gleaned from qualitative research, before any attempt is made to evaluate specific aspects of the phenomenon quantitatively.

A combination of methodologies

This project combines a review of the literature with examples of the stories of AA members to present a better understanding of the phenomenon of gaining sobriety through AA membership as an initial step toward an understanding of AA's relative usefulness in the treatment system for specific individuals. The literature on qualitative methodologies suggests three areas: phenomenology, grounded theory, and ethnography. As a participant observer, and soliciting stories from two key informants, ethnographic principles have provided some guidance. Wilcox (1998) offers an excellent example of good ethnographic study. This study does not develop theory, but I will make some comments about possible directions for theory development in the conclusion; the sample is clearly limited and unsaturated. An essential aspect of the socialization into the AA program is the development of story-telling abilities. The basic format of the classic AA talk is to describe “What we were like, what happened, and what we are like now.” The best resource available for this type of study is the participants’ own stories, told in their own words. In looking at the participants’ stories a few of the tools of hermeneutics are used, but the study cannot be said to employ hermeneutic methodology.

Ethical Considerations

A respect for the AA tradition of anonymity is essential. Consideration must be given to the fact that the AA group tends to be a close community with members having personal information about each other to which the general public are not privy. It is in this light that the final product avoids the use of all possible identifiers, which may
include specific reminiscences from an individual’s drinking history which may seem inconsequential to the outside observer. Some stories may include anecdotes which are common knowledge to the members of a participant’s group, but may not be known by the participant’s family. Susan Chase states the question and offers a solution as it relates to her particular area of enquiry. In a chapter in Josselson (1996), Chase says:

> We often select a small group of stories from a larger collection to serve as examples of the processes we want to study, and in our writing, we present those examples fully to demonstrate the relationship between specific stories and the cultural context. Thus research participants easily recognize themselves in our texts and readers who know them may recognize them, too, even when pseudonyms and other forms of disguise are used.” (p. 45)

It was therefore essential to have informed consent at all stages of preparation of this research. Chase suggests “sending transcripts and asking for permission to use specific passages gives a certain amount of control to participants and reduces the vulnerability they might feel from exposure of their stories” (p. 48). Further, she says:

> We could promise to inform them if we choose their narratives for close analysis and assure them that we will honor their requests to change or exclude details to protect their identities.... informed consent should be tailored to the processes involved in narrative analysis and even to the processes of specific narrative projects. (p. 57)

This will necessitate an ongoing relationship with the participants. The three participants in this study are me and two other members of my home group.

Communication about progress has been continuous throughout the process; the other
two participants have been assigned the pseudonyms Bill and Bob, and both have agreed to the inclusion of their stories in total, exactly as transcribed from interviews.

Personal Considerations

Van Hesteren (1986) writes:

Within the dialogal-phenomenological framework, the personal experience of the researcher constitutes a legitimate, necessary, and meaning-enhancing dimension of the qualitative data base. Dialogal phenomenologists explicitly acknowledge and actively value the direct involvement of both the researcher and the subject in an intersubjective process of meaning co-constitution. (p. 208)

Smith suggests it is difficult to be objective in the face of the researcher’s subjectivity (Flinders & Mills, 1993). This is an important issue since the researcher is also a participant in the process being studied. In this study, the flexibility issue is less significant, since Bill’s story and Bob’s story were both obtained in an interview format. I wrote my story a number of months ago and it has been transferred directly to the data base. The contributors are participants or, co-researchers as Osborne (1990) suggests, and as such it is their reflection on the phenomenon of gaining sobriety that is important. Bill and Bob have been involved in the research process since first being asked to participate shortly after pilot activity with my own story.

Participants

Demographics are important in any study of this nature. The ideal situation would involve participants from a variety of backgrounds. Gender, ethnicity, socioeconomic status, sexual orientation, age, decade of initiation of sobriety, and even choice of group attended in the initial stages of sobriety are examples. There could be any number of
demographic issues which need to be addressed. A study of this size could not possibly address all of the demographics which critics are likely to bring forward. The essential information which I am after transcends all demographics, since it is the experience of the phenomenon, common to all members, which is important. There is one demographic factor which I believe is important to the nature of the study. That has to do with the resources used to gain sobriety. Since we are dealing with a resource dichotomy that has grown historically over time, we need to represent this dichotomy in the best way possible. I have included three stories in the study. The three core stories represent three different uses of available resources. First is my own story, representing personal growth gained from three distinct sources: AA, treatment resources, and a period of active work as a treatment practitioner. Secondly, “Bill” had his initial introduction through treatment resources and moved into AA as his primary source. Thirdly, “Bob” gained his sobriety through AA alone, not ever feeling the need for treatment resources, although he did attend a treatment group after some years of sobriety at the suggestion of others. I believe these three individuals, through their unique experiences, will give a well-rounded view of the phenomenon of gaining and maintaining sobriety through AA participation.

Each prospective participant was requested to participate with a statement similar to this:

You are probably aware, since I have talked about it at meetings, that I am working toward obtaining a university degree in alcoholism studies, and that I have worked as an addictions counsellor in the past. I am interested in identifying factors which may point to the likelihood for success in the program. I hope to help addictions counsellors to identify clients to refer to AA. You may be aware
that certain counsellors refer to us often, and some never do. It is important for me
to understand the essential nature of gaining sobriety through membership in AA
and this study will help me to do that. I would like you to be a participant, if you
are willing. I need to understand from you what lead you to sobriety, how you
accomplished it, and why you chose to use AA for that purpose.

The Study Questions

The principle question guiding this inquiry is “What is the nature of gaining
sobriety through membership in Alcoholics Anonymous?”

Interviews attempted to answer six major questions. The format of the interviews
deliberately gave as much freedom of response as possible to the participants and sought
to take advantage of the natural story-telling abilities of the participants. This is in
keeping with the predominance of story-telling inherent in actual participation in AA
meetings and mutual support activities. Specific questions were asked only for
clarification or in the event that the interviewer felt a specific query had not been
adequately addressed.

“What were you like before you considered sobriety?” In this question I hoped to
gain an appreciation of each participant’s family history, religious background,
educational, career and life accomplishments, goals and aspirations. I was also interested
in the development of the illness over the time period prior to considering sobriety as a
serious option.

“What happened?” Here I expected each participant to talk about how life was
failing him, the deciding factors which lead to attempting sobriety and to achieving
sobriety, and how he was lead to consider sobriety as an option. I wanted to hear about
the first and subsequent attempts at sobriety, resources used in the initial stages such as formal treatment, other self-help groups, self-help literature, religious organizations, friends and family.

“What are you like now?” This question invited participants to pinpoint the benefits of a sober way of life. I also expected participants’ answers to this question might show the growth process from the time of initial sobriety until the present and to emphasize the importance of continued growth, mentally and spiritually.

“What is alcoholic drinking?” The definition of alcoholic drinking has been demonstrated to be very different for different people, particularly as it relates to AA membership. Alcoholics, whether through a process of socialization or through an awareness that grows on them in early stages of the development of the illness, recognize a difference between the way they drink, and the way others drink. An important part of understanding the process of sobering up is understanding the development of this awareness.

“What is sobriety?” Similarly, the definition of sobriety is one which changes over time for the alcoholic. It becomes much more than just “not drinking”.

“How has membership in AA changed your thinking about alcohol, sobriety and your life?” Essentially, this question represents the central issue in the study. There can be no doubt that membership in AA profoundly changes the way a person thinks about life and daily living. It is this socialization into AA which produces sobriety, and it may be this socialization process which distinguishes those who continue to attend AA regularly despite many years of sobriety from those who gain sobriety initially through attendance at AA, and subsequently drop out, finding other life activities to sustain them.
in their sober way of life. Of course there are also those who gain sobriety through other means without having any contact with AA. What is this socialization process, and how do those who embrace it differ from those who do not? Through the meeting process, the reading of recommended materials, the use of slogans, and many hours spent talking over a cup of coffee members are socialized into common ways of describing events and feelings. Essentially, members become alike in significant ways. This socialization process is important to our understanding of the phenomenon.

The previous literature review offers an essential component to consider. I hope the review has clearly shown that there are three distinct, yet intermingled aspects to AA membership: the fellowship, the program, and the spiritual component. One must consider these three aspects in the analysis.
The Stories

My Story

I remember being unique right from the start. I was an immigrant with a Scottish accent. When the neighbourhood kids played war, I could not take part because my father did not have a uniform for me to wear. Later I realized his war effort was indeed more significant than many, because he was with the British Civil Service in India through the whole period. Even the story of my birth tells this fact. I was born in Scotland because my mother was forced to flee from Burma when the Japanese invaded, dragging two kids along and carrying the third. My father stayed behind to help with the war effort. (But he was not in uniform.)

My oldest brother, George, tells the story of my mother throwing cutlery in a rage during supper. We were evicted from our first home in Edmonton because of the fighting which went on. I don’t know the extent of my mother’s drinking at that time, but I suspect it was significant. My earliest memories of my mother relate to the learning of artistic pursuits, and writing. I wrote a book consisting of short stories of our life in Burma, retold from my mother’s experience. It sounded exciting. There were stories about the time we had to lie on the floor while bullets whizzed overhead through the thin walls of our home. The Burmese warlords were fighting again. My father’s power must have been significant. There was the story of the family out for a drive. The warlords were at it again. They stopped fighting long enough to let us pass, and we could hear the gunfire start again as we drove out of sight.

I often wonder whether it was an escape from what was happening at home, but I have memories of packing a lunch and heading for the bush south of our place for the
with my binoculars and sketch-pad. My mother had told me that if I enter a clearing and
sit perfectly still the birds will return and I will be able to see them up close. I came home
with many sketches of a variety of birds, and it was fun to identify them in the bird book.
Later on I explored Edmonton, setting out early in a northerly direction and winding up in
a new part of the city every time. I always allowed myself time to get home for bed. So it
was for many happy occasions in my youth. It seems I have always spent a great deal of
time alone, usually with a writing pad or a sketch pad.

About the time I was entering junior high school my mother’s sister came to live
and work in Edmonton, and the two of them began to drink together. When Aunt Pattie
left, mother’s drinking stayed. I remember her as being a confidant and a teacher, and I
was inspired to strive for greatness in my creative pursuits. I was 11 when Aunt Pattie
arrived, and I lost my mother at that time. She was there in body only—sick or drunk or
stoned on prescription medications—until she died when I was 18. Memories of that time
include desperate trips to the bush with a sleeping bag, a can of beans, a hatchet and a
pack of matches. Everything a guy could want to survive a few summer days away from
home. It was irrelevant whether I was alone or with friends.

I do not remember much about my mother’s illness, but I expect I have
experienced much the same in my own life. The difference is that I was able to quit
drinking, although I have never been able to deal with the depression. I remember her
sitting, stoned, in her chair, cigarette burning down as she slept. One of us would
inevitably come and butt it for her. I remember the icy silence when my parents picked
me up from summer camp. I remember the teapot flying across the room and smashing
on the kitchen wall as my father ducked. I left for three days that time.
As the youngest in the family, my father and I lived alone for the last few years with this vegetable smoking in the living room. We took turns helping her to bed, helping her to get up, helping her to the bathroom. The weekends were his. I was out getting drunk. I suspect he was as relieved as I was when she died. We did not talk about it.

Even my creative genius set me apart from my classmates. I remember doing a project in which a friend and I each did a half of the Canadian coat of arms into a poster, and my side was far better than his. I felt badly for him. I was always told that I was a genius, and that I would succeed, and my marks in school indicated the potential. Later this became both a curse and a tool for manipulation. I learned that confession could be a great tool for manipulation. Over and over again my transgressions were forgiven because I was perceived to be honest. When we broke all the windows in the school shop in a rock throwing practice session, I avoided punishment by confessing.

I was a bust at athletics. I remember finding it impossible to do pushups, much to the horror of my Phys. Ed. teacher. I am sure he was convinced that I was lazy, but I have never been physically able to do pushups. My ineptitude in road hockey and lawn football isolated me from my peers. My athletic brother, Alex, could never understand this. Too inept for the jocks, and too strange for the nerds, I fit in where I could, with the drunks. It was a symbiotic relationship. I sold homework for cigarette and booze money. When my friends ran from the cops I stayed behind to give a plausible explanation for our activities. My friends hoped that I would be with them when they got in trouble with the law, because my rich father would always supply a lawyer.

I was unhappy, desperately lonely, and craved love, yet I could not find it because I rejected every girl who showed interest in me. I isolated myself, and I sank deeper into
depression, alleviated only by booze, tobacco, and prescription drugs stolen from my mother. I sabotaged myself regularly by not completing tasks, by only showing glimpses of my genius. When I realized I was flunking Social 20, I stayed home one weekend, missing the parties, reading the textbook. I pulled off a 90% in the midterm exam, and passed the course on the teacher’s evaluation of my potential, not on my overall mark. This was easy for me and I never learned to work hard, or to complete a task.

My one redeeming feature during adolescence was that I was a good listener, and acted as a confidant for all my friends and for many others as well. I was the one who always stood up for the class scapegoat in junior high. When kids wanted to talk about personal problems they would often come to me.

My morality got me into trouble. The first time I had sex, I became attached to the girl and ended up marrying her. It lasted 9 months. I will say that I was honest and moral to a fault, and my self-denigration contributed to my depression. Even today I believe that if I were perfect, I would not need to get depressed.

I married Judy out of a sense of obligation. We married in April; Karen was born in October; I left in January. Having flunked out of a general Arts degree, I returned to get a teaching certificate. We moved in with Judy’s parents, and it did not go well. When I left I moved in with friends, who were willing to collect my room and board after I completed the year. But living with an old drinking buddy caused problems in his marriage, and allowed me to increase my drinking. When the school year was complete I went back to selling bread door to door for the summer, with a teaching position lined up for the fall. Now the drinking was in control. I fit in well with most of the other sellers, who drank from quitting time at 3pm until the bar closed at midnight, and sometimes
later if someone could afford a bottle. We were always up and on the job by 7:00 am, although I don’t know how. Management often looked the other way. Actually, most of the managers drank with us. When I started teaching I cut back to weekend drinking until I ended up in the bar with my salesman buddies one night in October. That was the end of my teaching career.

I knew nothing about alcoholism; my drinking was nothing compared to my mother’s. In August I was picked up for being drunk in a public place and was given time in custody with a requirement that I go with Diamond Duke Parish to the Division of Alcoholism. That afternoon I went back to my favorite bar and we all laughed over the pamphlets I handed out. We had long ago decided we were all members of AA (Alcoholics All-of-us). When I lost my teaching job I knew where to go. At that time the Division of Alcoholism (the precursor of AADAC) emphasized referral to AA, with introductory meetings at the centre.

An important element at this time relates to real good people. Nic, an old drinking buddy who had dropped me when my drinking got bad, supported me in my efforts by attending the information series with me. He was supportive as long as I was not drinking, and has remained a good friend. George’s ex-wife, Evelyn, a social worker by training, became a confidant and support, offering me a room in her home when finances got tight, and always having time for coffee and conversation.

For 18 months I experimented alternately with abstinence and social drinking. I learned to control my drinking. I did not go back to my excessive drinking as AA had told me I would. I learned to drink on weekends and attend AA meetings during the week, so I could work and support myself. While my drinking at the time was worse than
the commonly held definition of social drinking, it was remarkably controlled for me, and I was able to work and support myself. I even returned to school and completed a couple of courses toward my B. Ed. But I lacked ambition. I could not seem to get motivated to become more than a taxi driver. I felt I was wasting my time. Ultimately I decided to quit drinking for a period of one year to try it out.

I first met Theresa while I was drinking casually, attending AA and treatment appointments at the Division of Alcoholism. I joined a small drama group. Dennis, the director, was legally blind, but he managed to get around on what sight he had left. The three of us put together a play involving a love triangle and some issues around the story of Cain and Abel and the Christ story. I remember being moved by the religious issues brought up, but also by the love triangle which existed both on stage and off. Dennis and I were living with Marty, a friend from a treatment group at the Division. Much to Dennis’ frustration, Marty and I would drink together occasionally. We co-owned a taxi for a while, serving the downtown core and operating a bootlegging business on the side. Things changed for me the night Marty and Theresa got drunk and spent the night together. The next morning I challenged Marty to a chess match. That night, both quite drunk, we decided to visit his brother in Vancouver. What I did not know was that Marty had packed all his belongings in the back of his car. He had no intention of returning. Despite packing a healthy quantity of booze we were sober by the time we got to Vancouver. We decided to find an AA meeting. Marty wanted sobriety; I wanted to con some money for booze. I picked a likely mark and was disappointed when he bought me a meal, some sandwiches, and a bus ticket to Edmonton, but gave me no cash. He waited to see me on to the bus, so I could not cash in the ticket. When I returned to Edmonton I
arranged to get into Henwood right away. The long bus ride had given me some time for sober reflection.

When I was kicked out of Henwood 2 ½ months later I returned to taxi driving and proceeded to buy coffee regularly at all the city Burger Kings, where Theresa worked, hoping to find her. I did find her and we began to date steadily. She was an active participant in my sobriety for 9 months, attending meetings and sober dances with me, but between working and other activities with Theresa, her daughter and my daughter, and the occasional visit with Evelyn, I did not have time for regular AA attendance.

Theresa became a positive influence on me as I was on her. I attended AA sporadically, staying sober on the ecstasy of first love. I realize I had never experienced love before, not even from my mother during her sober period. Theresa and I lived in the present, never talking of the future. Had we been able to be open with each other, we might still be together. In simple terms our breakup had to do with the recommendation that I had heard along the way that a person should not make significant life changing commitments during the first year of sobriety. I used this excuse to avoid discussing my feelings for her, and ultimately she could not wait for me any longer. We split up right after my first AA birthday. I had experienced something new and exciting. I did not know what it was, but I wanted more of it, and I knew I had to stay sober to get it, and that was the real beginning of my sobriety.

The experience of first love with Theresa, the experience of true friendship with Nic and Evelyn, and the awareness of my desire to reach my potential were the three contributing factors in my decision to continue on with abstinence. With the loss of
Theresa I needed something to support me. I decided to make a commitment to AA and joined a group whose members were mostly doctors, lawyers, and successful businessmen. Perhaps fittingly, the group presented me with a first year medallion on my second birthday.

I drove a taxi for five years, teaching part-time, going back to complete my degree, and falling in love again. Beth and I have been together for thirty years now. We have four boys: Ian, Ryan, Gregg, and Ross. Ian, the oldest is a computer nerd, working in Toronto. Ryan is starting a Master’s degree at the University of Alberta in swine nutrition. Gregg and Ross are both taking music at the University of Lethbridge. I never dreamed in my youth that I was capable of such happiness or so many blessings. I taught Junior/Senior High School for four years before discovering that I was meant to be a counsellor. It is incidental that I chose to go to work at my old alma mater, Henwood. I could have succeeded as a family counsellor, a youth counsellor, or even, if I had gone that route, as a Chartered Psychologist.

I have been plagued by depression periodically throughout my sobriety. The fact that I chose to get treatment for my alcoholism, rather than depression is perhaps moot. Typical of much of my life, I followed the lead of others. Since it was my alcohol use that first got me to a positive treatment experience, I took alcoholism treatment. I had experienced psychiatry twice before. The first time was at the insistence of my father. What came of that session was a recommendation that my allowance be increased. I decided psychiatrists were too easy to manipulate. The second was at the suggestion of Judy’s parents. What came of that session was a determination that I was not an alcoholic, but was experiencing some normal growing pains, and the stress of marriage
coupled with trying to get an education. I came to believe that psychiatry was a waste of
time.

The first session at the Division was a tremendous relief. I felt supported,
acknowledged and encouraged, and most importantly I knew that I was not just crazy.
There was a name for what was bothering me—alcoholism. That I could deal with. In
retrospect, had I experienced that kind of support from a psychiatrist I likely would have
obtained a formal diagnosis of Bipolar Illness, which I have never had. I talk openly
about having a recurring depression, but the diagnosis is mine, made only after a number
of years working with alcoholics. Most alcoholics experience depression in the first
months of sobriety. For some of us, it continues for years—hence the diagnosis.

I have lost at least two jobs because of my depression, although in retrospect, it is
only family obligations which made me continue on in jobs I was not suited for. I have
gone to a counsellor occasionally when things got tough, because I realize that I cannot
fight the depression on friendship alone. It is indeed true that “Love is not enough.”

The first three years I worked as an addictions counsellor, I experienced
tremendous personal growth, the kind of growth I do not believe I could have had
through attendance at AA alone. When I took a seminar on anger management I learned
to handle my own anger. When I taught anger management, I grew in my understanding
of my own issues. When I took a course on adult children of alcoholic issues, I was able
to come to terms with my mother’s drinking and my father’s helplessness. I presented
groups in Adult Children’s Issues for two years, and I grew personally all the time. I miss
my time as a counsellor, if only because it afforded me growth, but I also realize I do not
want to go back to it. At 60 years of age I can say for the first time that I have the rest of
my life planned and it feels good. I may have to live to 90 to do it, but that is another issue.

In my 35 years of sobriety I have been in and out of AA. I went for five years during part of my 17 years with AADAC without going to a meeting. I am glad I made the decision to return and join a group. I do no 12 step work beyond attending meetings, where I rarely speak, and acting as group treasurer. I get what I want and what I need from AA. I have recently come to the realization that the root of my continued AA attendance has nothing to do with sobriety, personal growth, or friendship. It is spiritual. I get more out of an AA meeting than I ever have from attendance or activity in any church service or event since I discovered God at bible camp at the age of nine. I get that childhood ecstasy back when I hear a newcomer speak at a meeting of his trials, and of his successes. That is my spiritual experience, and I can never leave it. It frustrates me when I hear experts in the field of alcoholism talk of progressing beyond AA. I have experienced life without AA and I want no part of it.

Often when you ask an alcoholic what is meant by drinking, he will respond “Well, there is drinking and then there is drinking.”

From the beginning drinking was to feel good. A common question on alcoholism questionnaires asks if you drink alone. My first taste of alcohol was when I was sleeping over at a friend’s house at the age of 11. We stole a bottle of beer from his dad and snuck out to drink it. Jack didn’t like the taste and decided to pour it out. I grabbed it from him. He went home disgusted with me. I drank alone. From then on I discovered the principle that if a little makes you feel good, more will make you feel better. I progressed to experiment with inhalants, codeine, some prescription sedative-hypnotics, and later,
marijuana, but always returned to alcohol. Sometimes it would take more alcohol to feel good, depending on the seriousness of the depression at the time. There has only been one time in my life that I have been unable to control my alcohol intake, over a period of about six months from the time I obtained my teaching certificate until I lost my first teaching position in October of my first year. When I left school I went to work selling bread door to door, as I had done for a couple of summers previously. Hitting the bar at 3:00 pm and staying until midnight, then up for work at 6:00 am, I was never far from the influence of alcohol. We worked six days a week and the only thing different about Sunday was the opportunity to drink all day long. When I started my teaching career in September I decided that I would have to cut back to weekend drinking, something I had always been able to do before. I was able to do it again for about three weeks, until I wound up in the Corona Hotel with the bread-selling boys, and we drank continuously for a week.

I stayed sober for six months that first time, got another teaching job, and got hooked up with a fellow teacher one evening. Although we only had one date, I could not look at her in the staff room, not knowing if others on the staff knew that we had dated. One morning I could not face the staff room, and did not go in. I decided to see Vancouver, which I had never done, and decided to hitchhike. To justify it I bought a mickey. (Since I am an alcoholic, I guess that when I do stupid things I should drink.) I got to Calgary the first night, staying in a cheap downtown hotel and drinking a bottle of cheap wine. Vancouver was a beautiful experience for me. I had no memory of seeing the ocean, although I obviously must have. I was fascinated and did not drink. I returned to Edmonton, and to taxi driving, learning over the next six months that if I limited myself
to three or four drinks in an evening I could get the good feeling I needed and go home sober. I did occasionally overindulge during this period, but only when I had planned to do so.

Funk and Wagnalls Standard Desk Dictionary (1982) defines sobriety as “moderateness in temper or conduct.” This definition says nothing about the use or non-use of alcohol. When I first entered AA with a sincere desire to stay sober, it meant determination and willpower, a daily struggle to avoid alcohol at all costs. It meant constantly seeking answers to questions, seeking reassurance that I was alright, and seeking fleeting moments of contentment, all through constant contact with friends, AA members, and professionals. It seemed at the time I could not get enough of other people.

Now, sobriety means two things. I am abstinent, and at the same time moderate in most of my daily activities. Perhaps the most important realization I have gained from the latter years of my sobriety is that I do not care for alcohol. Were I to find conclusive proof that I could drink without the negative results experienced during the two year period from the time I started drinking out of control until the day I quit for good, I would not have any desire to drink. To me sobriety means not really caring whether I drink or not. I have discovered that I can spend time by myself and enjoy my own company. In fact, as I get older, I tend to get more isolated from others.

From a different perspective, sobriety also means being happy most of the time; it means knowing where to go and what to do to when I am in trouble. In that case, I came closest to losing sobriety the last time I lost a job. I did not go to a counsellor, as I now know I should have, but struggled on, being a burden on my family for almost two years.
Perhaps the most significant realization which is a part of sobriety came ten years ago when I was facing bypass surgery for the second time. I developed an amazing calmness in the days preceding the operation, as I realized that overall I had a good life, had contributed to the betterment of society through my activities, as a counsellor, as a politician, and as community leader, and the most important of all, as a husband and father. I took careful stock of how we had raised our boys and how I had been influential in Karen’s life and I knew they would turn out to make significant contributions to the world, each in his manner. The down side of this was the realization that they would have to carry on without me, and they would suffer the burden. To me that is the epitome of sobriety, and had I not sought treatment for alcoholism I would not have it.

"What changes have occurred in your thinking as a result of AA membership?" This is a very difficult question to answer. While I am sure that a lot of changes have occurred since my initial introduction to sobriety, it is impossible to pinpoint any change which is the result of AA membership, and what may be the result of extensive treatment, and indeed, experience as a treatment practitioner. One thing can be said. It was the fellowship of AA which allowed me the opportunity to distance myself from my drinking companions. In my first introduction to the treatment system I was quickly introduced to AA. It made immediate sense to me that if I were to stay sober I would have to associate myself with sober people. Twice in that first year and a half I decided to visit my old drinking buddies—one time I got drunk, the next time I was introduced to marijuana, with tremendous adverse effects, including guilt and shame. Outside of my drinking buddies, I had alienated all my acquaintances, except my brother and his wife and my father. I dissociated myself from my brother because he insisted I could learn to drink like a man. (One of the tremendous
satisfactions in my sobriety has been seeing George gain his own freedom from chemical dependency.) My father refused to understand my dilemma. I believe his shame around my mother's drinking made it difficult for him, so I avoided contact with him until I had gained the strength to approach the subject on a matter of fact basis. While he was able to accept the term “alcoholic” when applied to me, he never did apply the term to my mother.

I have lived on the periphery of AA for most of my sober life, attending meetings, even joining a group in my second year of sobriety, and developing deep, long-lasting friendships with AA members, but it has only been in the last eight years that my membership has been significant in my life. This is perhaps the biggest change in my thinking, and it did not occur until after my thirtieth AA birthday. At this time I was no longer working in the treatment system. I had explored religious connections and had joined my church, becoming a board member and teaching Sunday school. I have never been comfortable with church services. I have often said “If they would do away with all the prayin’ and singin’ I could enjoy church.” I recently realized that I could attend AA meetings with a minimum of prayer and ritual, and listen to as many sermons as the number of members who speak—an ideal church service. AA has become my religion, my spiritual connection.

Beyond that epiphany, changes have occurred mostly in my awareness of myself, my significance in the world, and the ways in which I can be a positive force in society. I have learned to cope with my recurrent depression, accessing counselling services every few years to deal with self-esteem issues as they arise.

I have never done the twelve steps of AA in any formal way. I have never had a sponsor. But I can honestly say that I have grown over the years. If I took the AA teachings literally, I would have to designate myself a complete failure in the program. I take them
metaphorically, and I am satisfied that I have completed the steps, and continue to revisit
them through my work, my daily life and my marriage. Perhaps as a result of my treatment
experiences, or perhaps as something inherent in my upbringing, I believe that I speak three
languages—AA, treatment, religion. In my practice as an addictions counsellor, it was
common for me to identify the dominant language used by the client, and speak that language
in dealing with him.

Comments on My Story

My feeling of uniqueness is a predominant theme throughout the story, and it is still a
part of me. My first memories are of being isolated from my peers, not really like them in so
many ways. Growing up I did not fit anywhere, not even really with my chosen group, “the
drunks” as I call them. My relationship with them is defined as *symbiotic*, I brought help with
schoolwork, counselling, and problem solving, and they accepted me as I was where few
others would. Even in the initial attempts at sobriety I was unable to fit in, drifting from
group to group, in and out of AA, never really following the prescribed steps. As I tell the
story of my life one can read between the lines, the frequent changes of employment,
sometimes masked as career moves, or attempts at self-improvement appear to be a search to
become part of the crowd, to fit in. Perhaps it is significant that I am working on a Master’s
degree, and will not have it completed before my sixtieth birthday.

Along with this is the need for acceptance. At the same time I deliberately push
people away, always remaining somewhat aloof and feeding a need to feel superior. The long
period as a cab driver illustrates this contradiction. While rationalizing that I was working my
way through sobriety and through school, I was justified feeling superior, having twice the
education of my fellow workers. Yet I could not remain a cab driver; I knew I had to get
sober to become something better. I am sure I must have been reminded at that time of the many teachers who would shake their heads sadly at the missed potential in this brilliant young man with a C average. In many ways going into teaching was a misguided attempt to help others to avoid the pitfalls of underachievement.

I talk about never really practicing the AA program. I say “I have never done the twelve steps of AA in any formal way. I have never had a sponsor…. If I took the AA teachings literally, I would have to designate myself a complete failure in the program.” This ability to look at prescribed literature metaphorically has a deeply religious root. A literal interpretation of the Bible would not work. I have explored organized religion and rejected it as inadequate. My mother, the daughter of Baptist missionaries, felt a similar ennui, and schooled me in the universality of all religion despite the dogmatism of formal religions. Membership in the fellowship of AA is to me a religious activity, and it gives me the spiritual connection I need. I believe myself to be non-dogmatic and to abhor the rituals so common in organized religion. Mine is a case of using the fellowship of AA, but rejecting the program of AA in preference to resources learned through treatment contacts in my continued search for contented sobriety.

Fellowship was an important element in my initial sobriety. Significantly, through the first eighteen months of attempted sobriety, contact with AA was extensive, as well as during my second year of sobriety. I learned a lot about myself and gained resources for daily living and perhaps more importantly, gained the self confidence to explore new areas of life through my stay at Henwood, and regular outpatient treatment contacts at the Division of Alcoholism. The need for constant coaching and reinforcement is significant during this period. I talk of friends like Nic, Evelyn, Theresa and, finally, Beth as major sources of support during this
period of close to ten years. Ten years appears to be a significant period of growth for most members who gain contented sobriety. The influence of many individuals who were willing to spend inordinate amounts of time talking, coaching, advising and supporting me is significant. At first glance, it may appear that recurrent depression may be a root cause of this neediness, but on examining the stories of Bob and Bill, who do not appear on the surface to be plagued with depression, we will see that the need for extensive contact is significant through the ten year sobering period.

There is restlessness, a constant search for contentment, throughout. If true “contented sobriety” were ever achieved, would AA membership be necessary? By the same token, would church adherence be necessary for those not afflicted with a behavioural illness? Is this what is meant when experts in alcoholism talk of maturing beyond the need for AA?

Is it possible to compare what I am like now to what I was like before? I am the same restless spirit; I suffer from the same periodic depression. I have certainly gained in personal awareness, in understanding of both alcoholism and depression. My spiritual base is much more solid. At one time self-doubt came from an inability to meet the ideal of complete honesty. Somewhere a realization dawned that it is not necessary, nor possible to adhere to complete honesty, but only to strive toward it.

No one among us has been able to maintain anything like perfect adherence to these principles. We are not saints. The point is, that we are willing to grow along spiritual lines. The principles we have set down are guides to progress. We claim spiritual progress rather than spiritual perfection. (Alcoholics Anonymous, 1955, page 60)

This statement from the beginning of Chapter Three, read at the beginning of most meetings, illustrates the point. The insight that I refer to could as easily have come from a meeting with
a counsellor. Given that my initial attempts at sobriety used both resources, we do not know.

Another need that remains constant is the need to help others. While drinking this was part of the symbiotic relationship with my comrades. In sobriety it pushed me into a career in counselling, and beyond that I continue to work in a position allowing me to be of service to others, and attendance at AA meetings provides further opportunity. While I say my continued attendance is for spiritual reasons, a lot of it has to do with the opportunity to provide “twelfth step” support to members and adherents of my home group.

It is interesting that the introduction to treatment and to AA changed my drinking patterns. I could no longer drink with abandon, but thought about it and planned it every time. The problem with continued social drinking arose because the alcohol no longer seemed to medicate the depression, but to cause it.

Sobriety takes on a broader meaning than that considered in terms of alcohol use. It is the more commonly held definition that sobriety is moderation in all aspects of one’s life. Drinking then becomes incidental to the practice of sobriety. Sobriety is being able to live with oneself without the use of chemical relief.

With the intermingling of treatment and AA resources in the achievement of sobriety in the broader sense it is impossible to distinguish anything unique in AA membership that has influenced me in any profound sense. AA membership has been matter of convenience. It has often provided human contact, similar to that gained by membership in a club, organization or church whenever anyone moves to a new community.

*Bill’s Story*

I was born in Calgary at the Grace Hospital in 1946, one o’clock in the morning in a blizzard. I had four sisters and one brother. There’s six of us in the family, siblings. My dad
was a veteran, Second World War, and he was what I believe is an alcoholic. His alcoholism progressed as he went along in life. My mom was from a farm east of Calgary. She had two brothers and two sisters—my uncles and aunts. She was a hairdresser. My dad was a truck driver, worked for Scott National Fruit. When I was about four or five years old, I was always afraid of my dad. He had two step-sisters and he beat them up. I was terrified of him, like his anger and his aggression.

I felt, you know, like sitting at the dinner table, he would, if there was strong vegetables like cabbage or broccoli or cauliflower, or onions—I didn’t like all those vegetables—I would act like I was going to vomit. He slapped me and sent me to bed at four o’clock in the afternoon, until next day, Sunday. And I had to learn to sit by my mother. My other sisters and brother got whacked because they did the same thing, eh. I never started drinking till, well I tried—stole whiskey off him and he used to make wine, sip on that. The alcohol made me vomit. It wasn’t ‘til I was twelve.

One of the worst kids in school was one of my best friends. Grade seven. At the graduation, Grade Seven graduation, my friend bought a mickey off a bootlegger, Walker’s Special Old with a big cap on it. We drank it behind the school; it was warm. I almost vomited then, but I managed to get it down and went around to the front of the school and went up the stairs. The principal was standing there shaking his head. We never got to go in to our grade seven graduation. I don’t know what we did afterwards—got some more booze. But when I was thirteen, I used to go to dances at Victoria Community Hall in Calgary, every Friday or Saturday. I took, I could carry a case of beer in my trench coat and bought this Old Vienna Beer. Had two bottles—it’s lager beer and it’s quite foamy. I went outside and I
puked on my buddy’s ’53 customized Chevy. He hit me in the head. I went back in and drank some more beer after that.

When I was—I used to drink a lot of wine, too. When I was fifteen my mom had a bad accident, she was in a body cast from her neck to her hips. She was in the hospital eighty days. The night of the accident a priest came over—I actually went to a Baptist church, but my dad was Catholic. Priest came over and my dad had drunken about two bottles of whiskey, and he told him to F off. So I couldn’t talk to my dad. I couldn’t talk to my mom—she was in the hospital. And my neighbour, his wife got killed on our front lawn, a car rolled down the hill. He was drunk himself, so, for a week I waited until—it was on a Saturday, I waited till the next Friday to get some money to get some booze so I could forget. I started blackout drinking. Fifteen.

Then I, in high school, grade eleven, I took off, hitchhiked to Vancouver with a friend of mine; I was sixteen years old then. I came back. I phoned my mom and dad; my mom was on the phone and I hear my dad in the background “Leave him there,” but she got me the train fare, and I took the train back to Calgary, and I went and finished grade eleven.

I joined the army, was in the army for a year—young soldiers. The reason I joined the army—I joined with three other guys—you could get booze there. In the morning, the afternoon and at lunch you bought the corporal a drink. The age limit was twenty-one for drinking and we were only sixteen, but you bought the corporal a drink. Then I went to grade twelve—I drank a lot—I used to go to bars. There’s certain bars in Calgary that accept minors. I drank quite a bit, usually on weekends, but during the week sometimes you go at lunchtime. I got out of grade twelve and two weeks later was the Calgary Stampede. I got some booze off a bootlegger.
We were sitting in the Scotchman’s Shell—two of my friends, eh, they were brothers—I said let’s go down to the Stampede, eh. And they said, well, “you’re drinking wine, we don’t want to be around you.” So, I ran out of booze down at the Stampede grounds so a guy said to me “There’s a trailer with a bunch of booze,” so I went there and I broke into it with a bar, crawled in and there was no booze and somebody called the cops, and I got arrested. I went to court the next morning and I was still half drunk. I pleaded guilty. I was on two years probation for stealing a car with my buddy, the judge said “Why’d you do it?” and I said, “Cause I’m an alcoholic.” And he said “That’s no excuse—one year.” So, then my dad came down to the police station in Calgary, and talked on the phone through the glass. He was crying. He said, “Why didn’t you call me? I could have got you the best lawyer in town.” But I was ashamed.

I did the year in jail and while I was in jail I was working in the bakery. I had the key, the only access for the yeast. I stole a bunch of yeast and I got caught but I wouldn’t admit it. I did my time.

When I got out I drank for another eleven years. I worked in hotels, restaurants, usually manager—access to the alcohol. During that time I got this girl pregnant, 1967. She also drank. Then I got engaged and she left me for another guy and went to Vancouver. Then I worked Vancouver, Banff, Golden, Lake Louise, truck stops all over western Canada.

My alcoholism progressed cause from the time I was fifteen I had blackout drinking, also when I was sixteen my dad gave me a car. I had no license, no insurance, no registration, but I used to take it downtown, and wake up in a blackout, driving a car. In 19—it was about 1969, 70, I got in a relationship and I lived with this woman for quite a few years and during that time I was working at the _____ dining room and lounge in Calgary. I used to go to the
race track and I would bet on every horse, eh. I lost my money, all the time. I came home one day. I had a one year old daughter. I came home and all the furniture was gone. All that was left was my two bags and my winter coat. I came down to Lethbridge. I suck holed to my wife to come back down here. That was two years before I quit drinking. I did a lot of drugs, but I went paranoid. I had flashbacks for two years.

When I came to Lethbridge in 1972 I went into what I call underground drinking. I had such a thirst and the “obsession”, and I didn’t want her to know how much I drank. I drank pretty well every day. I’d pick a fight so I could—there was five bars on the way to work—I’d pick a fight two hours before work, so I could go get drunk. I drank, sometimes I drank myself into a blackout three times in one day. I had free booze at work, but I had such a thirst I took an extra bottle. I’d take a cab sometimes and pick up a twenty-six of white rum, and pour it in my coffee, prepare steaks and everything. Like my alcoholism progressed. My wife, we separated. She was going to Contemporary Woman for the welfare. She was—she got access to AA and Alanon through the College. She brought pamphlets home. Like, pamphlets like if you drank one bottle of beer or one glass of wine or a shot of whiskey it’s all the same effect, eh. I drank rum so I ripped that page out. You drink in the morning. I drank, I usually got up at noon, I worked at 3:30, so I ripped that, ripped every page out, eh—rationalized. And I uh, tore them all out. Then we were separated and I tried to quit on my own for two weeks, well two different times. This was before I quit.

First time I quit my wife was working at the Miner’s Library up here, up the street here, north side. She was a bartender, eh. I ordered a coke. It was one o’clock in the afternoon. She turned around and she said “You’ve been a good boy for two weeks. You deserve a beer.” I thought “Well, I better not.” She said, “You deserve it.” She insisted. I
drank it down and I said, “Give me two more. I’m going to the York.” Well, she wouldn’t give me two more. I had to go to the York. The second time I quit for two weeks I quit with the manager at Hys. He had this sclerosis of the liver. He was forty years old and his stomach like, hanging out the side of his belt. The doctor gave him a year to live if he kept drinking, but it’s always better to quit with somebody else. So, he came around after two weeks—it was a hot night in the restaurant. He came around with a bottle of beer, and he said “Our wives will never know.” and he poured me half a mug, eh. I drank that down and went over to the bartender. She gave me two more and a double. I drank them and I went to the house of Wong, and I drank some more and I ordered some Chinese food, went over to my wife’s house, eh. I passed out on the couch. Woke up the next morning and she was standing over me. She said “Do you think you have a problem with alcohol?” I don’t know why, I said “Yes.” “Oh, what are you going to do about it?” I said “Well, I’m going to go to AADAC.”

So I went to AADAC downtown. They gave me the twenty questions. I answered ten yes and ten no. I could’ve answered all twenty. They said at the bottom, if you answered three or more you’re a chronic alcoholic. And I didn’t quite believe her but I said “What do I do now?” and she said “Go to Alcoholics Anonymous for the rest of your life, Henwood for twenty-eight days, or Claresholm for twelve.” I figured I could be cured in twelve days. I went there and it was down there that I admitted I was an alcoholic at my first meeting, after three days there. They had an AA meeting. I admitted it. It was like a golf ball of sandpaper. I spit it out. I didn’t say anything else. And then, the next week, we did step three. Make a decision to turn your will over to God. I laid in my bed and I said “God, whoever you are, wherever you are, take this craving and obsession from me. And He did. I didn’t really feel
like drinking after that. It, it was gone. But I was still, I was still, mentally, physically, emotionally, and spiritually like kind of dead.

When I got back to Lethbridge I got a job. I went back to work. I worked at ____ at a steak house. Like my manager told me before I went to AA, “Don’t go there. Your wife’s a bitch.” He said, “You don’t have to quit drinking. You cook better when you’re sober, or you’re drunk.” After I started back on the job in the restaurant, all the cooks and the manager—the one manager left, but the other one was an alcoholic. I used to go fishing with him every Sunday. We stopped doing that because he was having a drink anymore, eh. The one cook, my head cook, he used to shove a beer in my face, and I said, “You keep doing that I’m going to bring this steel, take this steel pot and spoon. I’m going to drive you crazy.” He said, “You wouldn’t do that to me.” He said, “Well, you got kind of lazy since you sobered up.” And I said, “Yeah, I was doing half your work.” I felt guilty. I used to do everybody’s work—guilt trip on myself. So, I worked there for—I also went to Waterton. I worked there for about three years. I went to Waterton. I was eight months sober. It was down there that like, there was twenty-five, I had twenty-five staff. Most of them were drinking, eh, young kids—the cooks. I came to Lethbridge maybe once a week, or once every two weeks, to a meeting.

But I talked to people there that were sober—had coffee with them, and also the bartender, Norm, his brother had a hotel, the Marquis Hotel, and he had a hotel in Cranbrook. His brother was in AA. He started the Chinook Group, eh. He used to have a meeting down at the Marquis Hotel when it started. He helped me. He told me the history of AA in Lethbridge, what his brother went through, eh. So he was a big help for me, plus he had experience in a hotel. I go in the lounge there and sit and have a coke, and I talked for hours with him. When
I was eleven months sober my son was born, and I came back in October of 76; I worked there a couple of years.

When I was three years sober I had a heart attack. I was meat-cutting at City Packers. It took me four months to recover, and then I got a job at the Lethbridge Lodge, cooking—too heavy work, that meat cutting. I could’ve went back there, they asked me to, but I didn’t, and I ended up working at the Lodge for fourteen months. Then I went to the Sandman, and I worked there for six years. In between then I quit and I went back to working at Marquis, in between there for a sixteen month period. During this time, like 1978 after I had the heart attack, my wife kept saying I was a lazy bastard, and the kids, they’re just like their father. I separated from her because I couldn’t fight her any more, I couldn’t—I was so weak. I was only half breathing, eh. I’d walk half a block and have to sit down. So, she left me, 1978, ah, 79, I should say, and she moved out of town. And then I picked the kids up every three weeks, for eight years. She moved to Claresholm, then Nanton. For eight years I paid maintenance.

During that time, 19__, I met a woman in 1981, like at my church. An AA member introduced me to her, and we got married. She had three kids; I had four kids, plus I had another daughter in Calgary from my first relationship. She was also an alcoholic, but she wouldn’t admit for about a year and a half. We went to a meeting in Calgary, and she heard her story. It went ok for quite a while and then in 1987—I was married to her for six years.

1987 I squashed, well it was 1986 that I squashed my big toe and I got gangrene. A year and a half I had gangrene. I went for quite a few operations, by-passes. I eventually asked them to cut my leg off, because the pain was too much. It was wearing me down. Then 19, I think it was January, 98, my second wife left me, for various reasons. It wasn’t alcohol,
but it was sickness, and living. I had thought it would never end, and she divorced me in 1989. And then I had two amputations, eleven operations; I lived by myself for quite a few years. I’m still by myself today, but uh, I got a girlfriend, 19__, I think it was 19__. Well I knew her for years, but I started going with her in 1994. I found out she was an alcoholic. My daughter was delivering booze. She was living out in Coalhurst. And I found out, and she finally admitted she was, but she said to me she wanted to get married. She had three kids, and there were five of them. She lived on the west side. They broke up in one little house. And then she moved to Coalhurst. Their roof was leaking and all kinds of stuff—wrecked the house. She lost it. She bought the trailer, but she lost it. But I went with her for six months. I finally had to say, I can’t take it any more. She was going out with other guys, I heard, all over town. She said I wouldn’t make a commitment, but she wanted to get married. She said, “You can go on, we can go on welfare.” I said, “I’m not going to do that for nobody.” She didn’t want to get a job. There was nothing physically. there was nothing wrong with her. But, she ended up getting married six months after she left me and she’s been married twice since. She’s with a guy now.

But during that time I started a—I forgot to mention that I went to Mental Health at the beginning, after thirteen months sobriety, in 1976. I went to Mental Health for about a year and a half. Then I went for about a year—I went to Park Meadows Baptist Church. The preacher had a degree in psychology and religion, and he showed me all the slogans in AA, where they are in the Bible. I did my Step 5 with both of them. The first one, though I, the first psychologist, I rationalized and he threw the papers at me. But he showed me how I rationalized, lied, whatever. And then in 1995 my pastor and deacon went down to Los Angeles, Saddleback Church down there. They have 23,000 people in that church. And I
started a twelve-step group in my church with, there was about ten people. Like, it was only a
couple of us to begin with, but when we got going, there was actually twenty-eight that
joined—twenty-five of us finished. It took us a year and a half to do the twelve steps very
thoroughly. When we got to Step 11 in the workbook, and the Bible—whichever Bible we
used. I had two strokes in 1986. They waited a month for me to recover, the group. I was
leading, the facilitator of the group, and we finished the twelve steps. It helped me a lot
because it was very thorough.

When I first joined AA I had to search for all the answers, with the Big Book. I asked
a lot of people and counsellors, and sponsors, but it was all done on paper. It’s a good course.
You know, in Step 11 there it says upon awakening we ask God to guide our thinking, give us
some sop for self-pity. That’s in that workbook, eh. So, I’d been in AA twenty years, and I
didn’t know that I did it the right way, and my recovery partner, we made a participation
agreement to do the twelve steps. He had thirty years. He’s got forty now. He’s still sober too.
He said “I didn’t know if I did it right. That’s why I wanted to come here.” He goes to a
different church in town, but he’s still sober and he still—he goes to the odd meeting, but not
as many as he used to. It was 1996 I had them strokes, and finished the twelve steps shortly
after that.

From 96 till now its eight years, eh. I met another girl, I think it was 1998. I’ve known
her for about six years, eh. Through a girl that used to go to Alanon. My wife used to be her
sponsor. We’ve had a relationship but we both—I said I don’t want to make a commitment
cause I’m on Canada pension and she’s on pension herself. And we’re both physically,
probably not able to handle like the normal things of life, like I was making, 1987 I was
making three times as much as I am now. I’m only making a third as much. I know my
limitations, and it would be nice to have somebody, but I know from my previous wives I
tend to be a perfectionist, workaholic. Now, she has her life. She’s got, I think, thirteen
grandkids; I’ve got ten. There’s a lot of—four members of my family are alcoholics. Some
are using still. She has the same thing, well, her two sons are alcoholics. One’s a drug addict.
So it’s kind of a mixed up mess, eh. But we seem to—she has her program and I have mine.
She’s gone to the program at the church, the twelve step group, and she’s also in another
twelve step group. She’s not as intense as I am. Because she’s not an alcoholic she tends to
have it together. I’ve got it together too, but I’ve got to keep going. She was in Alanon also.
And she also had a problem with drugs, prescription drugs, but I know she’s seemed to
conquer all that by going to counselling and twelve step groups. We both have our own
program. We try to work our own program. That’s about it. I don’t know. Do you want me to
add something that I missed.

Tom: That’s quite a story. I’m interested in different treatments. Like you mentioned
that you’d gone to Mental Health for nine years. So you’ve looked at a lot of other things
beside AA.

Bill: At church. I forgot to mention that. I’ve been an usher, been an evangelist,
Sunday school teacher. I’ve run a twelve step group. I’ve attended Bible study for numerous
years. I’ve studied different parts of the Bible, and I took a discipleship course. I took a
beginners course, and I’ve done other things, eh. Right now I haven’t attended church for the
last couple of months, mainly because over the years I’ve been a caretaker, especially with
my kids and grandkids. I tend to give too much. Tend to give and let myself, like not give
enough to myself. I’ve also sponsored quite a few people. Some—one guy became a
preacher. Some have died in sobriety. Some died drunk. Some are still sober, like ten years,
twenty. One guy's got twenty-four years. Other guys have went back—they're still out there. So, basically, I just do what I can. I've done too much and sometimes too little. Like everybody is not—life not just one bowl of cherries.

Tom: It's one big guessing game as to how much you need to do with people.

Bill: Yeah.

Tom: Did you have any religious involvement before you sobered up, or did this all happen after you sobered up?

Bill: Well, when I was five my dad said to me “You know I got beat up by the nuns.” His dad was an alcoholic also, and his mother died when he was seven, so he got put in a convent, him and his brother. And he ran away when he was thirteen or fifteen, something like that. He came out west in a boxcar. He told me to choose my own conception of God, eh. He said “I’m going to send you to public school, because I don’t believe what they did to me, they might do to you.” I went to Baptist Church with my—about five blocks from my home—with my older sister. Yeah, I could see the other kids there with their parents. My mom and dad, my dad would drink beer on Sundays, play canasta with the neighbours, eh. So I kind of got away from it. Then my mom’s sister, my aunt and uncle, they had this Mennonite vacation Bible school every summer. I used to go out to the farm every summer, and I went to that. I went to the course there, and accepted Jesus, but I didn’t really believe it. When I was in jail—I did a year in jail when I was seventeen—I read the Bible, but I figured God was a punishing god. I didn’t look at him as strictly being there. I looked at him as you know, I can’t get to God. I prayed different times, especially in the drunk tank, “Get me out of this one,” the alcoholic sinner’s prayer. It wasn’t till after I sobered up, like, when I was eight months sober my sister died from a heart attack. She had diabetes pretty bad, or heart,
kidneys. When I went to the funeral the preacher said, “We’re all going to be in this position some day. Are we ready?” And I was sitting there and I thought “No, I’m not ready.” If there’s a God and I go before him he’s going to say “Did you ever read the Bible?” Well I never had time, I would read Playboy. I’m going to Hell. So when I got back to Lethbridge I went down to Good News Book Store, got a Good News Bible, and I started reading the New Testament. I didn’t figure the Old Testament was for old people. I read Matthew, Mark, Luke, and John. I couldn’t get anything out of it. The only thing I got out of it was God was saying, this voice inside me “Go accept me publicly.” I was sending my kids to the Alliance Church every Sunday, 9:30 till noon, eh. I could sleep in. But I decided, after God convinced me to go that church that my kids were going to. And after about a month—a guy came from Calgary on an alter call, and I went up, cause I had thought God wanted me to do that. They had a counsellor downstairs. The guy said “Do you know what you’re doing?” I said, “I’m an alcoholic and I believe God wants me to turn my life over, this way.” That’s the only way I knew, eh. And I never had any contacts with anybody else. After that I started attending regular. There’s one thing about the—they had a new preacher came to town, a Scotchman, Munro. He gave my wife and I counselling one night, one Tuesday night. My ex-wife was arguing with him about who God was. He threw up his hands and said “Go back to AA and Alanon. I can’t help you.” And then after that I went to this Baptist Church. They started in a school. I went with them ever since. They started in Wilson Junior High School. 1977, I think, they built the church. But I was going there in 1976. I’ve been a regular attender, but not recently. I still have contacts with everybody from there.

Tom: You attend AA pretty regularly, though. How many meetings a week do you go to?
Bill: Quite a few, now. Ever since my daughter had that accident I’ve attended more.
And we have noon meetings. I don’t get out as much at night—Saturday night. Sometimes I
don’t even attend at night, eh.

Tom: You mentioned at one time that you worked at 630 House. Was that just a short period?

Bill: I worked there for a couple of years, every weekend, two twelve hour shifts—
twenty-four hours every week. When I worked at 630 House, my sponsor, he was Assistant
Director. I learned after quite a bit of time working there and going to AA meetings. When
I’d walk in the door, their attitude, eh. Alcoholics—you can tell their attitude a mile away.
They’d make comments about me like if they had a resentment. I told—I went down, it was a
Wednesday. I went down to the office and I said to Jerry, my sponsor, I said (He’s got forty-
five years, by the way, still, in Penticton.) I said “Five guys are going to get drunk this
weekend, on Friday.” He said “How do you know?” I said, “By their attitude.” He said,
“Well, this is not AA. This is not Alcoholics Anonymous.” I said “Well, what is it?” He said,
“Well, we have rules here.” I said “Well, what are the rules?” He said, “I don’t know. They’re
right on the wall. I haven’t read them for a year.” I said “You’ve got a bloody anarchy here.”
And nothing was done, and sure enough, on Friday, five guys got drunk. One guy, he had
$500.00 stolen out of his locker. We were told that if they came back—like I worked on
Saturday—we were told that if they came back—by the Director—that we were supposed to
call the cops on them. So, Sunday night it was thirty below. It was about seven, eight o’clock
at night. I walked into the kitchen from the dining room. He came in the back door. His hair
was all messed up. His hands were purple. He was slurring. He was rolling his eyes on me.
Right away I was ready to fight. But at that moment I said “Sit down.” I got compassion—
there’s pity and compassion. I said “Sit down.” I gave him five cups of coffee and five cigarettes. And I said “Where are you living?” He said, “Just down the street, in a room house.” That was 622, and we were 630 House, it’s only about three doors down. I said “Go home and sleep it off.” So he phoned me at seven o’clock the next night, and he said “Are you taking the boys to the meeting?” I said “Yeah, I am.” “Can I get a ride?” I said, “Are you sober?” “Yeah.” He got in my car. He had shoes on, a tie, white shirt, shaved, all cleaned up, trench coat. He got in the front of my car and he said “I want to ask you one thing.” I said “What’s that?” “Why didn’t you call the cops on me?” I said “Because I wasn’t scared of you.” I lost that fear of an alcoholic. My dad, I used to fight him all the time. But I lost the fear.

That guy stayed sober two years. He went to Calgary. He got a job at Canada Packers as an engineer. He got a car. He got a house. After two years he got a girlfriend. And he went back. In two weeks he was dead. Cirrhosis and pneumonia, he died of—two weeks. He was at the end of the road when he came to 630 House. I’ve seen lots of guys like that, even young guys, twenty-one years old—heart attacks, eh, lying on the couch. That was my experience there. I used to cook for Shirley, too, when she went on holidays. I quit that when they, I don’t know when SAM’s opened up. I was on the board there. I quit because they wanted to have bingos. I was at the meeting down at AADAC. They had cops there, and everybody in town, Detox, and treatment centres. This girl from Detox, her name was Sue, I don’t know if she’s still around. She’s not at the Detox any more. She wanted to have bingos to make money. I suggested they have, like, 630 House had a society. I suggested that they have dinners, $25.00 a plate. I was a chef. I know how to do that, eh. I did it for the Academy Chefs. We raised money. We raised $1200.00, a couple of thousand dollars. They sent the
president of the Academy Chefs to the national convention every year. I’ve done that. I quit because it’s one addiction for another, replaces one for another. Also in the board meetings there, they were talking about—they had a handyman’s service. They were talking about cars and trucks and hoes and rakes. I said “What about these guys’ souls?” They looked at me like they had none. I know a lot of people get paid for this work. Being a chef, I did everything for free. I’m not saying there’s anything bad about that, but that was me, eh. And I seen reality and like, my sponsor, I figured he was just in it for the money. He started groups in town. He’s probably starting them out in Penticton, in Cranbrook, all over the place. He’s a good starter, but when it comes right down to it, did he have the heart for it? He was not, he never went to church. He read the Big Book. He taught me how to stay sober, and he helped me to stay sober. But as far as religion goes, he wasn’t religious. Like I know it says in the dictionary, well, in the Big Book, “When the spiritual malady is overcome we straighten out physically and mentally.” Malady, I looked up malady. It says illness or disease. And spiritual, it says in the dictionary pertaining to religion. So if we do these steps religiously, one after another, it’s very simple. Like, people say at meetings, “I’m not religious,” or “I’m spiritual.” But it’s the same thing. There’s no difference.

Tom: It seems like there were really three different sources that you gained your wisdom and your sobriety from, there’s treatment, religion, and AA.

Bill: Like I always say, “It took an army to sober me up.” I remember my preacher when I first started. We had a priest in a pre-church meeting, prayer meeting, Bible study. He said “You know it takes,” this is from his view “it takes about 2,000 laymen and six preachers to bring a person to the Lord.” You hear a word there, a word here. You know, Billy Graham, I used to watch that when I was a kid, eh. He’s been on for years. I always liked him, because
he was blunt, to the point. I don’t just take it from one source. Like my sponsor, strictly AA, and he was New York representative. That Reflections, that little book, he was asked, he was representative for Alberta and Northwest Territories. He was asked to get twelve people to write in that book. So that book’s comprised of 365 days. It’s comprised of people’s messages from all over the world. And it’s funny, you can get it all, it all pertains to like, the spiritual. I wasn’t like that. I didn’t want to be in the front. I’d rather sit in the back. One kid asked me. He got sober. He got killed out front of the El Rancho, twenty-one years old—motorcycle. He wasn’t drunk or anything. He asked me, he joined one of the churches, and he wanted to be like one of these, like Billy Graham or Jimmy Swaggart. I said, “It’s better to be in the back row. Don’t be in front, because the devil can get you worse.” He’s after them guys, eh. Myself, I’d rather be one-to-one basis. I’ve spoke in churches. I’ve spoke at roundups. I spoke at Full Gospel. I was on the board of Full Gospel. I did that too, at one time. And I used to have the supper at the Sandman, every Friday, or Saturday morning, once a month, every Saturday. And I’ve gone to different things, eh. Different churches, like People of Praise, I was in that for a while, half Catholics. They have live-ins. I’ve done many things, like board of directors, Academy Chefs. I’ve been many things to many people.

Tom: Just to kind of sort of narrow down the focus a little bit, you know you’ve got these many sources. A question that kind of narrows it down: How has membership in AA changed your thinking about alcohol, sobriety and your life?

Bill: Well, my thinking from before?

Tom: Um, hum.

Bill: You see, my thoughts before were, “I’m no good; I’m a failure; I’m a bum.”
What’s the use. I may as well get drunk. That was my thought; that was my feelings, eh. My thinking is positive, rather than negative, especially about myself. I think it’s all to do with ourselves. I’ve read different books, like: Master Key to Riches, Success Unlimited. They say success is a state of mind. The Bible says, “As a man thinketh, so is he.” “Think, think, think.” If I think I’m going to get drunk, I’m going to get drunk. It’s premeditated. There’s no such thing as a slip or relapse. We have to think it. My thinking, I can go along in life and think things are getting bad, bad, bad, or worse, worse, worse. They will. But if I think they’re going to get better, better, better, I’ve read many books, like the one book, Sermon on the Mount by Fox. It says, this woman, the broker phoned her. your money’s gone. It was ten o’clock in the morning. She thought that money’s going to be back in the bank. By three o’clock in the afternoon he phoned her, he said that money’s back in there. See, the thinking, eh. Thinking has a lot to do with it—by asking God, practicing page 86 everyday. By doing it, not by—like it says in the book, “Faith without works is dead.” The meeting today was on grieving, eh. But, what comes to mind is don’t let my feelings, emotions, or thoughts, or by circumstances. Go by faith. Faith can, you can have faith in a grain of mustard seed. I used to have a, well I’ve still got a bottle of mustard seeds. I used to throw them on my kids. You’ve got no faith. The whole thing is faith. About three years ago my doctor said “Bill, you shouldn’t be here. You should be dead.” I said “I told you doctors before I’m living by faith, not by sight.” He said “I believe you are.” I had eight doctors when I had all these operations. They all thought, even the physiotherapist, I seen him in Sears. After about four months, he said “I thought you were going to be dead.” I said “Well, at least I have faith.” And anyway, he’s a Presbyterian. I see him on TV, in the choir. He dyed his hair. So it doesn’t matter what people say. The facts and faith—without faith I got nothing. Someone used to say. “I am what
I am. The devil made me do it." Nobody can make you do anything you don’t want to. I don’t know if that.

Tom: That kind of clarifies things. Is there anything else that you think is important that you want to add or do you think that you’ve covered it pretty well?

Bill: To me, in Step 10 it says that sobriety is a gift. We don’t know how it comes or when it comes. It just comes. God gave me the gift. Why? I didn’t measure up. I shouldn’t have got it, but it’s a free gift. Like at Christmas time, I never gave a gift back. I didn’t like some of them, but I kept them. I used to get socks every year. So I think it’s but for the grace. I had to accept it. A lot of people, they get the gift under their tree, but they won’t open it. It sits there to rot.

Comments on Bill’s Story

Bill’s early memories are centered on alcohol and fear. He remembers his father’s drinking, his anger and his aggression. He attempted to follow his father’s pattern of drinking, getting sick and yet returning to it at the next opportunity. He felt isolated; his mother was unavailable; his father was unapproachable. From the beginning, Bill’s drinking was excessive. To him drinking was to get drunk, and getting drunk was to survive.

His initial contact was with the treatment system. Given a choice of twelve days at Lander Centre, twenty-eight days at Henwood, or a lifetime in AA he naturally chose Lander Centre. He acknowledged his alcoholism there and got his introduction to AA. Like many treatment programs in Alberta, Lander Centre was oriented toward AA, and the goal was to get clients started in AA. Alberta treatment centres have since evolved as the treatment system has evolved, and AA orientation is optional.
Bill’s first year of sobriety was plagued by trials to test his determination. He had trouble at work, since people in his business expected him to drink, and encouraged it. Finally, at eight months sober he moved to Waterton, a small town with few AA contacts. Here he was able to get away from the drinking crowd, and made regular contact with sober visitors to town.

Bill went for counselling during his second year of sobriety, and became active in a church whose pastor had a degree in psychology. This mixture of religious counselling, psychological counselling and AA attendance is predominant throughout the first ten years of Bill’s sobriety. In later years and to the present he maintains his sobriety with a mixture of religious affiliation and AA contacts. The difference here is that he now is in a supportive role, acting as a group leader in the church, and a major support and sponsor for a number of new and continuing members of AA.

Organized religion has been an important factor throughout Bill’s life. Initially, he was introduced to religion through family affiliations. He sought religious affiliation upon commencing his sobriety. It was important for Bill to reconcile what he knew of religion from his youth with the teachings of AA, and for him the AA program has been a reflection of his religious beliefs. He continues with affiliation in both areas, but notes that since his daughter’s accident his attendance at AA has been more frequent, perhaps an indication that there is more personal support available through AA than through church membership.

It was through his active work with other alcoholics that Bill lost his fear of the alcoholic. He describes an incident involving a resident of the halfway house where he worked part time. He says of the incident, “I lost the fear of an alcoholic. My dad, I used to fight him all the time. But I lost the fear.”
Sobriety is working with others. His sobriety consists of attendance at meetings and hours spent in the sponsorship activity. He says he is living by faith, and faith, both in God, and in the AA program is his life. He describes sobriety as a gift. He does not question why it was given to him, but accepts it and passes it on whenever the opportunity arises.

Bob's Story

My earliest memory always centers around alcohol. I'm the youngest of nine children and my dad, I'm not sure if he was an alcoholic or not but he was a fairly consistent drinker. I remember, one of my first memories was that he'd brought home a mickey of rum and hidden it in a dresser and I found it and every morning I would go in and I would have a shot from the bottle, eh, and I would come out of the bedroom just spinning for a couple of hours and my mom caught me one time and said “What are you doing?” and I said “I'm drinking Dad’s rum.” And she got rid of it. But those are my earliest memories. I was told that I liked to go visit an aunt when I was even younger because whenever I went there I developed croup, and she would give me brandy and milk. You know. I don’t know if the old, that is to say that I was born as an alcoholic or when I started drinking an alcoholic was born is true, but I sure seem to remember more about alcohol than anything else. Weddings, even before I was 10 going to weddings and finding alcohol. Alcohol just did something for me. It took me out of myself. I was a very shy, quiet person. Bookwork, actually I loved to sit and read. I was not a person to go to a dance or to a party unless I could have something to drink and then I could get out of myself and put on a role. I was never, you know, I never see myself as being good enough to go out and mingle with everybody else and I did actually have a lot of really good friends. But, ah, I still was not comfortable within. And I think that's where a lot of that started from.
A lot of my early childhood memories are also centered around being in hospital. I had a couple of surgeries on my legs to stretch the muscles cause they weren’t growing properly and of course children can be very cruel about stuff like that because of the limp. I don’t now if that’s all part and parcel of it or if it’s just because of the environment I was raised in, you know. I mentioned before my oldest brother’s an alcoholic, but we have a different father, so you know, I’m not sure if it’s environmental or genetic or my mother just had a genius for picking alcoholics. You know, looking at it it’s really funny. When I became a teenager drinking became more, more “Let’s go!” When I was younger I could have a couple of drinks, but as I became a teenager it was, “Let’s finish the bottle!” You know, and it became I found jobs so I could actually buy liquor. My father, excuse me, never had any problem though, going into the liquor store and buying me a case of beer or a bottle of rye or whatever I wanted, as long as he got some of it, he would help supply for parties and that, you know. And I always thought that was absolutely great. So did my friends, of course, you know, because here was an adult buying alcohol for parties. I never seen anything wrong with it. But even so, you know, there was, there was always an edge to my partying. I would go out with other people and they’d be drunk and puking and I’d be like “Whoops,” you know, and then a couple of weeks later I would get drunk on one drink, or get sick after a couple of drinks, you know.

There was never a rhyme or reason to it. It seemed like my metabolism could handle it at one time and not at another. I think a part of that was because I didn’t have a very good diet at the time, too. The teenagers years were just, most of it was a blur, but what good times I did have were all centered around alcohol. There was a lot of other good times, like I used to spend a lot of time down at the beach in Nova Scotia, where I grew up. In the summer time I
lived down there in my bathing suit, you know. I’m not a swimmer, but I just enjoyed being there. Being around the ocean has always been a solace for me. Even when I was drunk I would go hide in the rocks. “Leave me alone,” you know.

Then I, my parents moved out here when I was 18, just before my nineteenth birthday. And I, I had a summer job and I saved up enough money, then I moved out here to Alberta as well. I was really bothered by the fact that the drinking age out here was 18, and I was 19 when I moved here so I missed a good year of drinking—didn’t miss it at all. And the first thing I did here was get drunk. You know I came to Taber. I stopped at my brother’s out at Lackey, then went to Edmonton with one of my other brothers, and moved to Taber, then met one of my other brothers in Taber and went and got drunk, you know—got drunk on the airplane too. It’s bizarre. But yet, you know, looking at that, at that period, when I got I just like, OK, I have to settle down and get things going for myself, and I, I had a grade eight education. I figured I knew enough, and I spent a lot of time in school just slacking, you know. I remember once actually playing hooky and going to the bootlegger, stuff like that. I didn’t find school that fascinating. So when I moved out here it was time to just not worry about school. It was time to be an adult. I got a job at working at Hostess Foods, and making really, really good money. When you’re 19 and irresponsible, good money is just terrible. But I never missed, for a long time I never missed any work because of my drinking. That’s, actually I never missed any work because of my drinking, which in some cases is very unfortunate, because I would go in when I shouldn’t have. I went through the party stage. I would go for maybe a week, week and a half without drinking, and then I would really go out and tie one on for a day or two. It never seemed to be every day I had to drink at that point.
You know, I was 20 years old, 19, 20 years old. I got a roommate that loved cognac, but he was not a person that would sit down and drink it stupid, you know. I would drink myself stupid, he wouldn’t. He would have a couple of drinks, and I think for that was kind of enlightening, because most of my friends didn’t do that, you know, they drank like I drank, because that’s who I hung out with. So it kind of slowed me down a bit. And I began to see that maybe getting drunk all the time isn’t the way to do it, just having a couple of drinks, and that worked for as long as I lived with him. And I moved out on my own, and then it was get drunk, because that’s who I hung out with.

And during that period there was not a lot of girlfriends, because I was very shy. I liked to be by myself. I had a one-bedroom apartment, and I that was perfect for me. I could sit at home and listen to my music or watch TV or read or whatever, just be a hermit. I started getting female friends. A couple of them moved in with me, just to stay there for a while, not as a girlfriend type of thing, I met some people that were into other things, into other drugs. For me that just didn’t do it. You know I guess when I was younger I’d seen a lot of people do drugs and do really stupid things and get hurt. So for me that was kind of like “Yeah, I maybe don’t want to do that.”

I got a girlfriend who, her brother smoked a lot of dope, and he got me some once cause I went over to her house and they were having a party and didn’t seem like a good thing to refuse it, so I smoked some pot with him. It was laced with PCP. And that’s when I really decided that OK drinking is one thing, drugs, no, I can’t do drugs because I don’t know what I’m getting. You know I could get Drano and I decided that alcohol is better. It’s funny looking back at it, but, you know, I’ve often said I made a decision to be an alcoholic with that choice. And I think for me that was the better choice, alcohol I knew what I was getting.
It was always consistent. And there’s still, you see, the thought pattern that, I had to drink to be somebody. You know, I would go to bars, put on a performance. That’s who I was. Like a lot of the people that I worked with would go out and party with me say well you’re not, you’re not the same person at work, you know, you’re not the same person here. It’s like well I’m a party animal. When I start drinking I can be myself. But the problem with that is that I never knew who myself was. I just didn’t know, you know, from moment to moment what was going to happen.

I think that continued on until I met my wife, my first wife. And things got a little bit blurry around then. When I met Terrie a lot of things in my life changed. You know, it’s funny when I met her, I got asked to run a disco at the Heritage, in the banquet room, and the guy was going to train me, and I went in on a Good Friday morning, and really, really hung over. You know, cause I’d been out partying good the night before. And I took my party buddies with me because they’re going to learn too, cause they were going to help me. We made a schlimazel of it and we got kicked out of there by 10 o’clock. “Because, like, you know, if you want to do it, fine, but your buddies can’t stay, because they’re drunken idiots.”

They went to the restaurant in the Heritage. They cleared the place with their big foul mouths. A whole bunch of family people in there and they went in pretending to be riggers, and I went in and I met the lady who was to become my first wife. And I was really rude and I asked her out that night. and she said yes. I got drunk that night and drove her home. And we started seeing each other, and she knew about alcoholism because her. both of her grandfathers were alcoholics. Some of her other family members sure acted like it at times. As our relationship grew. I can’t say that we fell in love because I don’t truly feel that we actually did, or that I did. I am still not sure that I know what that is.
But as things changed in the relationship, I became more desperate drinking. The binges became closer. A lot of that I do believe was because I thought that I didn’t deserve a good relationship. And I still, you know, still did not think that I was worth anything good in my life. The last real drunk that I had, you know, I was taking money for rent and drinking. A lot of that actually came to a head after December of 1982. December 13. Hostess burnt down, so I was unemployed for a while. We went out to Vancouver Island for her mom’s wedding, and I got really, really drunk, and, more blackouts. I had been having blackouts for about 2 years by that time, had a blackout and I guess I made a real ass of myself. I woke up in the morning in a place called Manana Lodge, which is just outside of Ladysmith, and there was a decanter of wine on the side the bed, from the hotel room and I remember just thinking, I need that, and I took a couple of good drinks out of it, and that was the first time I actually drank in the morning. You know, before I would drink around noon or one, but this was about 9 in the morning. Again there’s no warning signs that this was a bad thing, you know, it’s there, so drink. A lot of that trip was spent drunk. And much to my ex-wife’s horror, and her family were not very impressed with me.

In May of that year, in May of 1983 we got married, or actually April. And my ex-mother-in-law said to me “You are not going to get drunk on your wedding day.” And I really didn’t want to get drunk. My family weddings were all a drunken brawl. There was this whole schlitzel of emotions and it seemed like we could never say “I love you” without getting drunk and doing it that way. And I, I didn’t want to do that. I really didn’t. I had the bachelor party the night before and I remember; we didn’t drink that much. There were my two buddies, Roy and Roy, and we had, we had a good amount to drink but we didn’t really go over. My friend Roy, Roy Jones that ended up in the program, says that I tripped out on
him and was hallucinating and I don’t remember that, but possible I did. I was always performing to get attention.

The next morning I woke up and I was really hung over and I saved a beer. You know, because I didn’t want them to drink it on me and I had a beer for breakfast. Shaved, got the hand steady enough so I could shave, and went out for breakfast. had a glass of wine. That was about 10, then I went to my mom and dad’s place and I had a good portion of a mickey of rye there, and then proceeded to go get married, at around three o’clock in the afternoon. After the actual wedding we went out to a friend’s place where we were having the reception. It was an Arabian horse farm outside of Taber. I was taking friends through there showing them these beautiful horses and I was—I was drunk.

You know, my, my dad, being a fairly good drinker, brought a 26 of whiskey, and vodka in the car. So that, because it was just going to be a wine and cheese affair. You know like it was just going to be that, and then we were going to come to Lethbridge for a supper at Sven Erickson’s. And knowing my dad I went out and sat in his car most of the day and drank. You know and missed a lot of the reception. I don’t remember anything after the toast to the bride, which was probably about 4:30. You know it was all, it was a blackout. I know that there was a lot of fights. I do remember my wife’s aunt sticking my head in the toilet to sober me up. Terrie said “Give him coffee.” And she says “No.” she said. “the last thing you want is a wide awake drunk.” Then there was some fights and they took me out of there. my best man kidnapped me and took me out of there cause he was afraid that I was going to get hurt or that I was going to snap at somebody. I didn’t. I never had a reputation for being violent when drinking, or at least I didn’t think I did. I used to say that I did but that was all part of the bluster of how bad was I when I was drunk. Usually I was a very quiet drunk. Just
leave me alone and give me my bottle. He took me home and everybody followed us and then the fights started happening in my apartment. My brother-in-law, Don, was going to beat my wife up and I was in the bathroom being sick and I did a crawling tackle on him because I couldn’t move, I just turned around and grabbed his legs and knocked him down so he wouldn’t hit my wife, and her mother. The next day, the next morning, Terrie that night went on, came to Lethbridge and did the wedding supper and everything, and her family came. Mine, of course, didn’t. She sat me down the next morning and said “I’ve lived with your drinking for a year. It’s time to do something.”

Tom: This was the day after the wedding?

Bob: The day after the wedding, yeah, the tenth of April, 1983. And, my Uncle John came over and his wife and to check on us. It was one of the first times he ever done anything like that for me. I gave him what whiskey I had left, half a bottle of whiskey in the house I gave it to him, told him to take it home cause there was no way I was going to pour it down the drain. Then I called my oldest brother who was in the program and I said “Look, I’ve got a drinking problem.” He said “Yeah, I hear that.” I said “Oh, what am I going to do? You know, what can I do?” He said “Well, you can go to AA or you can go to AADAC.” I’d heard of AADAC. But I didn’t really hear that much about it and I knew that he’d gone to meetings in Taber. So I said “Oh, OK, can you take me?” He said “I’ll take you down to meet an old guy.”

He took me down and met Ralph. and I remember walking into Ralph’s house. The living room was very small, or the dining room where we met was, was quite small. As you walk in there’s a table and it had a setting around it, there was a sink, and it was maybe about three feet wide to walk around the kitchen where the table was. It was very hot in there. It
was very hot, and we’d had a blizzard the night before, and it was quite hot in that house, and I remember thinking “God, I need a drink.” And Ralph met us at the door and he says you know he says “I hear you, do you think you have a problem with alcohol?” Cause if he would have asked me if I was an alcoholic, I would have said “No, I’m not an alcoholic.” But I could say, cause I was still sick, and I was ready to accept the fact, you know I still felt really bad for what happened. I was ready to accept the fact that yeah, alcohol is a problem. We were sitting there, and a couple of other people from AA wandered in and out. I remember thinking that these guys are all crazy because they’re happy. You know they were laughing, and I knew they weren’t laughing at me—they were all happy. Joe and Pat, who had sat there, said “Well, we’ll see you tonight at the meeting, maybe.” It’s like, maybe. What’s a meeting, you know. Ralph said “Look, if you want sobriety and you want to use AA you have to go to meetings. And you go. There’s one tonight at the Catholic Church.” You know. Frank took me to that one. After that I was on my own. You know. I remember walking into this back room of the church and thinking, “Oh God, religion.” I’m not a religious person.

I’ve been around churches and such and I wanted nothing to do with them. When I was younger growing up around in Nova Scotia we went to whatever church was handy. I’ve been to Roman Catholic, the stricto catholic, to the holy rollers, the whole nine yards. And I just, religion was not it for me. I felt very uncomfortable. So walking into that environment, my guard was up. but soon in that room, you know, listening to everybody talk, I began to feel comfortable. I guess I’d bullshitted myself and enough people that I could actually see truth and I knew that these people were for real, and I could listen to their pain. I met one of the guys that was going to be my first real sponsor. First thing they did was appoint a sponsor to me and they appointed Maurice. Now I didn’t know Maurice very much, but he seemed to
be a very spiritual god-like person, which for me was a big no-no. Actually he was the priest of the church. So that was strike three right there, and it actually took me a little while to figure that out. I couldn’t handle it. I could not relate to him. I got Harry as a sponsor a couple weeks later.

He asked me about my drinking and he said, “Well it must be really painful because you don’t talk about it.” And it wasn’t painful, it’s just that, you know, if I don’t talk, then I won’t have a problem. That’s the way I looked at it. If I don’t say anything, then you guys won’t know how bad I am. There was—I started lying then about my drinking—I started making my drinking worse, to get into Alcoholics Anonymous, because I thought that only bad drinkers went there. I could see where I had emotional problems and they didn’t talk about that a lot. They talked about drinking, and Harry asked me if, you know, about my drinking and I thought, I need a sponsor, (they told me that) and so I asked Harry to be my sponsor. And him and I related because we listened to the same music, we read the same books, we liked the same things. At that time I was coming up on my 23rd birthday and he was 30. There was an age gap, but not a huge one.

But we still could relate. I remember going over to Ralph’s occasionally, and Ralph was 74 at the time, and he had sobered up in 1959, and I was born in 1960, so he had good long term sobriety, which for me was scary and I could not believe that anybody could go that long without a drink. And he didn’t smoke. Half his tongue was gone and the left side of his face around his throat was gone from surgery from cancer. This man had been through it, you know, he’d gone through, he had a real life, you know. But yet, he was Harry’s sponsor, so Harry would say, you know, go talk to Ralph when you can’t find me. And I started going over there and Harry got involved in a couple of relationships so he was not available as
much as he was, so I would go talk to Ralph. It was during that process that I actually started to accept the fact that I was an alcoholic. My last drink was May 27, my wife’s birthday, and I had a half a glass of wine with supper, and I would have had more than that but my wife and her friend drank most of my wine, and I said that I could—I wanted to do whatever I could to get more alcohol. You know, the Big Book says that the phenomenon of craving will develop. Well it did big time, and I was just about ready to kill to get a drink. And that’s when I really realized that I was an alcoholic. Twenty-three years old, didn’t matter, I was an alcoholic. Didn’t matter that I’d never lost my license for impaired driving. or wrecked twenty cars, or any of that. if—all of that was academic. What was really important was that when I had a drink I needed more.

Tom: You mentioned that—like you’d stopped drinking at one point and you went for a period before you had that glass of wine, as I recall you mentioned that.

Bill: Yeah I, I’d sobered up the day after the wedding and I lasted two weeks I think, and I went through a—one of my friends called me. He was down at the Legion, and he was too drunk to drive. so he called me to come take him home. During that time actually I did not have a driver’s license. I had a learner’s permit. because I was afraid that I would kill somebody drunken driving. I drove, but it, you know, didn’t stop me. And I went down there and they were all sitting in the Legion around a nice round table like this one, drinking. and I sat in there for two hours with them because I thought they were ready to leave, but obviously they weren’t. Then we went back to my friend’s house and dropped him off and I was going to take the vehicle to his dad’s place and we went into the house and I remember thinking “I’ve got it made. I just sat in the bar for two hours and not drank. I can handle this.” And he said, “Do you want a shot of whiskey?” and I said “OK.” And I had that shot of whiskey and
my wife showed up. She said “Ok, come on, let’s go.” And I took the truck back and you know, well, I can handle it. I didn’t drink again after that, until the end of May. It was really white-knuckling, like I wanted to drink. I was going and seeing people, I was talking to friends, and I needed to drink but I didn’t realize that that’s what it was. The Doctor’s Opinion says “restless, irritable and discontent.” Yes, I could really relate to that, because I need something, I’m not whole, things are not normal in my life. The last drink I remember thinking that, ok, now what do I have to do in order to stay sober, and what do I have do to be happy, cause I wasn’t happy, right? I was having terrible mood swings.

It was an emotional roller coaster, and when you’re used to drowning your emotions with alcohol, now you have to start dealing with them, right. I remember going over and talking to Ralph on Saturday, and saying like, “I drank the night before” and what happened. He says “Well, you know, you have choices.” At my first meeting I was told that if—from this point on I had a choice whether I drank or not. I didn’t realize that I had a problem, so I didn’t know that I had a choice. But that day, he says “You have a choice. You can try working this program or you can just not drink.” I went to the meeting on Sunday night and heard my sponsor and another guy making a bet on how long I was going to last. That’s when the old-ok, I’ll show you guys, I’ll show you guys, I’m going to stay sober for a year. And I did. And I started working on, that first while, the first three months was I just didn’t drink. We went out to Vancouver Island for Christmas, my ex-wife and I. It was really, really hard, because there were drinkers around. And I went to a meeting in Nanaimo, and listened to the guys talk, and it was like, ok, yeah, this is good. And I went back to the house. And I managed not to drink on that trip. That was a really big deal for me, that trip, being around her parents and her friends and family and not drinking, because they all drank. So did mine,
but I was used to that. I was coming up on my first year, and I was still planning to get drunk on my first birthday. A lot of things were going on. I was back to work, but I was working graveyards, and it was really hard on me. I just wasn’t able to get out and do the AA thing like I wanted to.

I remember thinking like “Ok, this book is wonderful, but I need more.” And I didn’t know what more was. I knew I was just not comfortable not drinking, and just going to meetings. There’s got to be more to it than this. And I’m told most people don’t hit that until they’re five years sober. So I was going through that and I went to Ralph’s and I remember listening to him talk. He’s talking about his life, and working in vaudeville in the thirties, and then working at the power stations down in California. This man was an atheist, but he reeked of spirituality. There was just a presence about him, and I remember I said to him “You know. Ralph, I don’t know what you’ve got, but I want it. I want to be comfortable within me.” I could never sit and talk about myself—not without embellishing it. Not without a whole string of bullshit. I could never do that. And he could. I want what you have. He says, “Are you prepared to be twenty-four years older?” I said, “Well, does it take that long?” He said, “It takes as long as it takes.” And I was going through “Do I have to go to those goddamn meetings? How long do I have to go to meetings?” He says “You have to go until you want to go. Then you don’t have to go any more, when you want to go.” Those answers at that time didn’t make sense to me. I heard people say “You got to do what you got to do,” and “You got to do the footwork,” and “Fake it until you make it.” And I just like, this is all bullshit. This is not answers. These are clichés. There’s no truth in them for me. At that time there wasn’t. There is now. But at that time it was just like “I don’t want to hear this. I want clear cut directions.” There is the book. Well when you can’t—I couldn’t read it.
Then I had my first birthday. I remember coming up to Lethbridge here for the birthday. At that time there was three of us, three other ones from Taber, there was three of us from Taber who had our birthday that night. Four of us, there was a man who was also one of my sponsors who ended up taking me through the steps, Dwight, and I, he had five years. There was Bill G. and he had nineteen years of sobriety. One year versus all of this was just like “Wow.” I couldn’t really assimilate it. I remember going back to Taber that night with Harry, and telling him what I’d heard, the betting on me, and I wanted to go out and get drunk. I laughed all the way back to Taber at how stupid it was that, you know. That’s for me, when the real work actually started. when I really sat down and said “Ok, I’ve got sobriety, now what? Now, your clichés and that are wonderful, but I really need something tangible to work with.” I started actually working on the program. Within a year I got fired from my job. I was two years sober when that happened. And other things started happening and I went back to school. But I’m still thinking I need something else. I was going to church. I got married in the Anglican Church there in Taber and part of it was to keep going to services. I would go and I would listen, and listen to sermons and all that and talk to reverend there at the time, and think that this is just phony, because after the wonderful sermon in services there was all this little petty bickering and the back stabbing and hypocrisy. I’d always seen it in churches, and now it’s because I was looking for it, looking for an out. I started thinking I think I’d rather go talk to Ralph on Sunday mornings than come to a church. I guess that’s where I actually started developing my God consciousness, and realizing that there was something bigger than I was. At first I remember saying to him “Well what is it? What is this thing?” And he says “Well, you know we’ve got this big rock out in the back yard. You can help me move it.” I said “Yeah?” He said “I can’t move it by myself, and you can.” He said
“This program, the spirituality is based on we, not me.” So I started, for me my higher power became the group, Alcoholics Anonymous, because these guys were staying sober, and they could help me stay sober. And I could help them, but I couldn’t do it alone. Seeing that, and understanding that, it took me away from me. I also remember I was about a year and a half sober and I was just like “I hate my job. I hate my job, and I hate my life.” And I got off work and I walked over to my buddy Harry’s place and he was just going through the process of getting into school. He hadn’t been able to hold a job because of the cirrhosis and not being able to move. He listened to me whine and he said “Geez, I’d love to have your job.” I looked at him and I looked at his life and what he had, and went “God, it can always be worse.” And it took me out of myself. We went to meeting that night and he said “I was sitting at home this morning feeling really sorry for myself, and Bob showed up, and I didn’t feel sorry for myself any more.” And I looked at him, and I went “Yeah, this is the answer, helping other people, getting out of me.” And there was people at that time that I absolutely hated in this program. I did not want anything to do with these people. And I’d go talk to Ralph after the meeting and they went on. and on. and on. and on. and on. and on. and on. and on. and they didn’t say anything Ralph. He says “Go have coffee with them.” and I would. I’d go to the coffee shops, but then I realized that coffee shops. they’re phony. That’s socialization. People aren’t real in a coffee shop. So I started going to these people’s houses.

And I started to see how they lived and I began to realize that, man, they got it bad. And I began to learn compassion. The old concept of put yourself in their shoes really started applying to my life. And that’s when I really started getting involved in Alcoholics Anonymous, getting involved with the people, not the program. The program is wonderful. don’t get me wrong. It is wonderful, but for me the people are it, because they were my gauge
on where I was. And they still are. That has not changed in twenty-one years. The people of Alcoholics Anonymous are my gauge, and the people around me, not even AA anymore. If I’m at work and I’m having a bad day, everybody around me is having a bad day. Clancy says “If I’m surrounded by shit heads, that’s because I am one.” When I first heard that concept, I went “I don’t know that, I can’t. I really can’t.” But I do. I really got involved and I started looking at other people, but again, it’s deflection. I can look at other people, but I am not looking at myself. And other people are telling me “You’re not doing anything. You’re trying to help people, but you’re not doing anything for Bob, and you have to do for him, because if you don’t do for yourself, you can’t do anything for anybody.” I remember saying to one of the guys, like you know. And he said, “Yeah, you’re going to get drunk. You’re going to go out and you’re going to get drunk.” I said, “I can’t afford to get drunk.” He gave me fifty bucks. Go out—do it—get it over with. And I thought, “you heartless bastard.” How dare you. Don’t you see what I’m doing? I’m going to all these meetings. I’m helping people and I am somebody. I was nobody. The pretense was still there. I always say it saved my life, because then I actually started looking more in here, and I started doing the fourth and fifth steps. And that took me nine months, and that was intense pain. It was because it took me nine months that it was intense pain, because I wasn’t dealing with anything. I was wallowing in the guilt.

My sponsor at that time. that’s when I got George as a sponsor. he says “Look.” We went through the first three steps, and we got to the fourth step. He says “Have you done this yet?” I say “I’m working on it.” He says “How long have you been working on it?” I told him and he says “You’ve got till the end of next week to have it done. Then we’ll go over it.” “What, a week. I’ve been dealing with this for eight months, man.” He says “No, you’ve got
a week. That’s too long to deal with it.” He said “That will drive you crazy.” “Oh. ok. So I went in and I had it done. Then I went and talked to old Ralph for my fifth step. There was a lot of things that I remember thinking to myself, I will never tell anybody. I have secrets. If you guys know my secrets you won’t like me any more; you will not want me around. I remember going over to Ralph’s house and sitting down, and he told everybody that I was going to be there that day doing my Fifth Step, not to come over. He cleared his afternoon. I remember sitting in that kitchen, and God, it was like the first day I walked in there. It was hotter than Hell. And I was scared. I was really, really scared, because I’m going to do something I’ve never done with anybody. I’m going to share my secrets. I did. There was stuff that “I’m never going to say.” I told him. All of it came out. I remember thinking, you know. He was bored. He said to me before this, he said, “You might say some things that are going to surprise me, but you’re not going to say anything that’s going to scare me.” You know, he says, “I’ve pretty well heard it all before.” After doing this with him he says, “You know what, you’re not that bad.” And I said “Well, hey, what about this?” He says, “It happens. All this stuff happens to people. You’re not unique.” And I thought, “Well, ok. I’m not unique. I’m no different than other people.” But yet, I still wanted to be. I wanted that “Well, ok. I’m better than you.” During that period, shortly after that, that’s when I went through my pure stage, where you know, you cannot swear at meetings of Alcoholics Anonymous. You can’t talk about drugs at a meeting of Alcoholics Anonymous. You can’t do this. And I call it my stupid phase. I went stupid. I remember going over and talking to Ralph about this. He says, “What is alcohol?” I said “Well, alcohol is alcohol.” He says “Yeah, but what is it?” “It’s a drink.” He says “It’s a drug. You are a drug addict. Whether you like it or not, you’re a drug addict. So, learn to deal with that.” So hearing people talk
about smoking pot and doing coke and all that was just like, “Ok, I’m a drug addict, too. I’m just like them.” And I remember thinking at that time this isn’t so bad.

During that period I started school. I was just getting comfortable within that framework. My mother was very ill. She was having heart problems. I was taking her to the doctor in the morning and driving to Lethbridge to school. I was doing whatever I could to help her, not yet fully knowing how bad the situation was. She ended up needing by-pass surgery, and dying. I’d just lost a good job. I lost my house because of that job going, and going back to school, not making enough money to make the payments. Then my mother passed away. I was actually going through the process at the time of being confirmed in the Anglican Church. So I had all this stuff going on. And it was just huge. I couldn’t do it. I couldn’t do it. I thought I’d get drunk. I didn’t. I talked about it at a meeting. One of the old timers in Taber had just lost his mother. And he says “You know you can get through this. My mom just passed away too.” My thought was “But you’re old. You know, you’re an old man. I’m a young guy. I’m twenty-six years old. I don’t want my mother to go yet. I want my mom to see her grandchildren.” Dealing with a lot of self-pity. Shortly after that, before the funeral, we also found out that she had an aneurism in the back of her neck that was going to let go at any time and that if she would have been lucky it would have killed her. If not she would have probably been in a vegetative state. So looking back at that, I can see that there was some good in her death. at that time.

Raising nine children almost by herself, a few of us turning out to be alcoholics, was probably very stressful. I took a lot of my anger, and just thought about, and my pain, I thought about “What has she accomplished?” My mom was a decent person. She was no saint. She would have slapped you for saying that, but she was a decent person. She sort of
became my role model. I wanted to be a decent person like she was. And I also wanted to
become a good AAer, like Ralph was and be a part of this program, and be somebody that
people would go to. During that time I was going to school and just finished up the first year
and took a small summer job, and was just trying to keep it all together. And what I done was
just take my mother’s death and put it over here. I’ll deal with it when I have to. I didn’t have
time and I made sure I didn’t have time for a while. I was ten years sober before I actually
dealt with that, seven years later.

During that period too, my wife and I began having problems because I began to
realize that our marriage was based on a lie, there was no actual love there, a lot of lust, but
no love. No matter how I tried I couldn’t turn it into love. We ended up separating about a
year later. All this time I’m going to meetings and I’m a good AAer, and I’m not talking
about my problems, and I’m going crazy, absolutely going nuts, but nobody sees it, because I
won’t talk about it. I’ll talk about the steps all you want, but I will not talk about myself.
Traditions meetings were my favorite things, because you could get off into the traditions,
and not have to talk about yourself. Those were awesome. But it wasn’t real. None of it was
real to me at that time. I asked my wife for a divorce in September of 88. I remember it was.
we were watching the opening ceremonies of the Olympics, summer Olympics, and I just,
“Well, I can’t do this.” I went away for the weekend, went to Lethbridge and stayed with a
friend. During that period I also had an affair. Not a very good thing to do, but I did. And
then went back home and proceeded to go through the breakup.

She moved out to Vancouver Island, and I stayed in Taber, and was just horribly
lonely. Part of the problem with being lonely is that I didn’t realize things, because I wasn’t
still, wasn’t comfortable, within myself. I would call friends and talk to friends all the time. I
would have music or something on in the background so I wouldn’t be alone, and I wouldn’t have to think. Yeah, maybe looking at getting into other relationships, and I realized that at that time I couldn’t. I just couldn’t because I just didn’t have anything to give. I came up to Lethbridge a lot to visit my friend Robbi. Her and I were buddies. I wanted more but there was just nothing to do for more. She was non-program. All this time, I’d look at the ladies in Alcoholics Anonymous. They were all my buddies, but none of them were romantic interests at all to me. I was always told “Stay away from the women in the program.” At first, because I was married, that was no big deal. When I became single, I’d been around long enough to see how sick some of them were. So it wasn’t a big deal for me. It was not an issue. I could see where it would be disastrous, maybe not for me, but for them. I’m sure grateful that happened. I really am. I look at it and there’s a lot of people could have got hurt. And I’d seen that happen.

Terrie and I were still talking on the phone and I made the arrangements to go out there for Christmas. We decided to get back together and try it, so I moved out to Vancouver Island. She had thought the problem was Taber and area. And Taber and area is not the problem. I went out there and things went good for a little while. I got involved in AA out there, but not to the extent that I did here. I was just going to meetings, and helping out, talking. The meeting I started with was a noon meeting at the Alano Club in Nanaimo. It’s a level meeting, I mean, it was always Step One. And Step One meetings are awesome. They’re absolutely good because you don’t have to deal with anything. You don’t deal with nothing. You just talk about not drinking. After that I went to Ladysmith, and joined that group, and they were very cliquish. I didn’t like it there because nothing was changing. I could see it in that group that for twenty years they had done everything the same way, and they only had
five members. They couldn’t understand why. Why is because nothing changes. And then I realized that that’s me. Nothing’s changing, for me, either. I’m ten years sober and nothing in my life has changed. I’m not drinking, yeah, and I do have some spirituality, a little bit, but I’m still not dealing with any issues. I left that group and I went to Chamainus group and they were a very friendly and warm group, and everything started changing. I guess the old saying is when the student is ready the teacher will appear. They were my teacher. and I began to learn from them. I began to learn that—one off, I was still suicidal in sobriety. I was still driving down the road looking at the rear end of the truck coming at me, thinking “This wouldn’t hurt,” realizing that that’s not seen as normal. For me, this is 92, 93. Eight, nine years sober, this is not normal.

I realized at that period that I had not dealt with my mother’s death. I hadn’t dealt with the grief of the first relationship, when Terrie and I split up the first time. We just patched it up. I was going through all this, and one more time looking at the relationship, going “This is not going to work.” And she got pregnant at the time, and I thought “Well, I have to make it work.” I remember thinking I have to make it work. and I realized that I can’t make anything work. I was praying a lot and saying “What do you want me to do?” And I wasn’t getting any answers. no answers at all. Then I realized that it’s up to me to do, and make it, and deal with the consequences. We got divorced. I move out to this dinky little place, and it was just horrible. But it suited me. It was colder than Hell in the wintertime and I thought, you know, “This will work for now.” And I realized a week after I moved in there—I had no TV. I had a portable little radio that sometimes worked. But I realized that I was comfortable sitting in my living room with nothing on, no music, no TV, nothing. that for the first time ever. I was comfortable. That was a real enlightenment for me because it was just
like—and I could pray, and I wasn’t getting any answers, but I was feeling good because I was asking the questions. I was talking more at meetings, opening up more and talking about what it was like, without any embellishment. And what happened, and what it’s like now and saying “Yeah, it’s still horrible. And people going “Well it shouldn’t be horrible.” “Well, it is, because I didn’t do anything.” I started really doing. My focus during all that had actually changed. My focus stopped being other people. It started becoming “Ok, what’s wrong within?” I could look at other people and say “Ok, you’re screwed up.” Then I could apply why they were screwed up to myself. I’d always actually done that because you can’t recognize a defect of character in somebody else unless you have it. I always believed that. But at that time I just didn’t understand it. And I began to see other people’s defects as mine, more and more. I began working more and more, and getting more and more comfortable with it.

During that time my buddy Robbi moved out to the Island and we started having a relationship together. I’d been separated for a year at that time. My life started taking shape. I began to understand a lot more. I began to understand more about love and more about feelings. I used to drink to suppress my feelings. In sobriety I just wouldn’t feel. I would deny that I had these emotions. This isn’t happening to me. Scientology—if you don’t think it’s happening, it’s not happening. Well, God, it’s happening. My life, I’m still crazy. I’m still in that squirrel cage. But it’s ok. No, it’s not. And it stopped being ok. You know, everything stopped being fine with me. And I actually had to work. And I really had to work. And I started working and tried to deal with Terrie, and Robbi. I made the decision to go back to Lethbridge. During that period a couple of things happened. Robbi was working at a Husky station and she got robbed at knifepoint. A couple of weeks later I got robbed at knifepoint. I
don’t want to live here any more. I don’t want—I love going out to Chanaimus for my meetings, because man that’s home. That’s absolute home. It’s a real comfort zone. But I’ve got to leave. I had the same feelings about Taber as I did about Chamainus. It’s a comfortable place for me, but comfortable isn’t always good, not for me anyway—the complacency thing.

So I moved back here and I moved to Lethbridge instead of Taber. And I’m still trying to deal with my issues, during that period, going back out to Taber and getting reacquainted with some of my friends and realizing that a lot of them had changed. Some of them that I think was for the better, and some that I’m not sure. I’m not anyone to judge. My sponsor, Harry, who I adored, had quit going to meetings and just was, “I’ve paid back my debt. I don’t need to go anymore.” Ralph was getting harder of hearing and was getting closer to death. He died a couple of years after I moved back. But I had that time to be with him when I could. That was a real blow. And I think that—at that time I thought I’d dealt with my mother’s death, but when Ralph died I realized I hadn’t. And all of it got dealt with at that one horrible time. It was about a week process. And there was a lot of anger, and there was a lot of crying. I actually started healing. I could look back on what I had learned from him, and what I’d learned from my mom.

Realizing the amount of spirituality that’s involved in that and with those people made me accept more. I’m still not comfortable in churches. Even to this day. I like going occasionally, but I just. I can’t hang out there. And honestly, I don’t feel that I belong in churches. If I could belong to a church that had their meetings in a field, I’d probably be more comfortable. I don’t know if it’s the buildings or the whole—I think it’s all the rituals that are involved. I guess, for myself, I don’t like rituals. Not in that aspect, and not even in the aspect of AA, where we have to read all the stuff before the meetings. To me that wastes time. I
want to get down to the meat and potatoes, you know. Let’s have the meeting and we have more time for sharing. I’ve left groups because of that. When I moved back here I joined the Green Acres Group, and I quit them because they had chairmen who would take a half an hour to get the meeting going. And to me that’s like—ok, if you like to hear your voice that’s fine. Go talk to yourself in the corner, but let other people share. I still have issues with that type of thinking—that it has to be formulated. I know that we’re based on religion. I know that. And all of us have to have our little time to get comfortable in a meeting before we actually start sharing. I think that’s part of the problem. Some of us get so comfortable that we share bullshit. We get a chance to perfect our story before the meeting goes. I always hated being the first picked for a meeting. You know sitting in a meeting, and “Ok, you’re turn to share.” Your being the first person and thinking, “Oh, what am I going to say? What am I going to base it on, because I haven’t heard him share, or that person share?” I remember I went through a period where it was just like, don’t think of anything, just share. When I started doing that I began hearing things about myself that I’d never heard before. I began realizing that I was being honest, that I didn’t have a chance anymore to listen to what Joe said, and pick off of what Fred said over there, and incorporate it into my little spiel, that I was actually sharing honestly. I still hate being picked last. I really don’t like that. But it’s ok because I can—before it was “Ok, what am I going to say, and I can talk about this and I can talk about that.” Now it’s just like I can sit and enjoy the meeting. And it’s ok. I don’t have to be first and I don’t have to be last. And I don’t have to have the best spiel. I can be honest today. And that for me is very, very, very important. As you know, I have kids.

In AA we like to talk about the drinking aspect. I don’t like drinking. I don’t like talking about that any more because it doesn’t hold anything for me. It’s not “Oh, my God,
I’m sober,” it’s “Ok, I quit drinking. I have a life now.” I really disagree with people who think they still have to hit ten meetings a week now, and then still, like they’re always on the go to AA. I have a family, and my family is very important to me. I remember looking at my dad. My dad, being a truck driver, wasn’t home very much, and when he was home it was just “Shut up and leave Dad alone.” I don’t want that for my children. I want to be a part of their lives. That’s all part of it. I talk a lot about this at meetings. And some people just like “Well, it’s not AA’” Well, of course it’s not. I’m in recovery. To me AA is about recovery and once we start just talking about our drinking days we’re still back in the disease, we’re not in recovery. So my aspects of recovery are my family, my job, you know. My spiritual state of being at this particular moment, whether it be good, bad or indifferent—today is what AA is about for me, not twenty years ago, because what happened twenty years ago nobody really cares about, unless they want to look at it too, where they went wrong. For me it’s now; it’s important now. And I guess that’s where this concept of being one day at a time is an issue. It’s very important to me to be here today, not living twenty years ago. I go talk to my dad, and my dad’s in his seventies now. He’s seventy-seven years old. And he remembers fifty years ago. When I ask him what happened this morning, he’s talking about all his buddies and friends that he used to have and he’s living in the moment, but not in this moment. And that’s ok for him, and I understand where he’s coming from, because he still has a lot of issues that he hasn’t dealt with. My dad was a—it’s funny, when I moved back to Lethbridge, it was 1995, twelve years sober and talking to my dad, it was during that period that my father realized that I was an alcoholic. And he accepted that for himself. It was really strange, because here I am thirteen years sober and my father’s just finally accepted the fact that his youngest kid is a
drunk. And that’s where, for him, he stopped—he was always worried about what he would say around me and he was always concerned about having alcohol in the house when I was there, and that’s like, “I don’t care. You can do that. That’s you; that’s not me. I don’t want to drink any more.” For me that was, I guess the final acceptance.

Actually a lot of my family still denies the fact that I’m an alcoholic. They think the problem was my first wife, that she made too much of it. I don’t allow myself to think that way, because if I think that way I’m liable to go back out and try it again. And I don’t need to do that today. I think for myself, I have too much going. Other people looking at my life might not think that, but I do. And that for me is important, what I think about myself today. I really work hard on that, not living my life to suit other people. I care what other people think about me, that’s true, but I can’t live my life according to that. I remember once when I was a kid, I had some friends and I had other people that I wanted to impress and doing whatever I could to make those people my friends. I then made those people my friends, but my original friends didn’t want anything to do with me any more, because they didn’t know who the Hell I was. And I thought “Well, you know what? That’s true.” Today it’s very, very important for me to be me. Whether I’m having a shitty day or a great day, it’s important. I need my children to understand who I am. They come to meetings with me. They come to open meetings, the birthday meetings, where they’re allowed to. They love it. They think it’s great. They don’t understand a lot of it yet. The oldest is six. My son on the Island, he wants to go to meetings with me when I’m out there, but because of his autism it’s difficult. That was a very hard thing to accept, too. His autism and dealing with that. Because of that his mother and I, my first wife, have become friends. We’re actually truly friends. We can sit down and we can talk, and we can look at our past, without a lot of hatred. There are some occasions.
There is. There always will be. But at least we’re past that and we can deal constructively with him and what he needs. That’s awesome. I say that’s pretty neat. Some people say that I owe everything to AA, and I don’t. I owe it to me actually doing the work. The program is great, but if I don’t do anything with it, it’s just a program. It’s like saying “Well, God will provide.” I didn’t see God putting food on my table. I went out and got a job. I tend to take issue with stuff like that. I don’t know if it’s trying to make myself great or not, but for me I have to do what I have to do and whatever happens will happen. And maybe that’s God’s design, but I still have to do it.

Tom: It certainly sounds like you’ve, in a way, come of age.

Bob: Yeah, I think so. And I think it’s more in the last five years, I think. I honestly believe that per year of sobriety is how I grow. Like a real person would grow. As you get older, you get more wisdom. And I think that as I’ve got older in the program—like I’ve gone through the rebellious side of AA, and I’ve gone through this side and that side, and I guess I’ve matured in the program as I’ve gotten older. I think that’s the way it’s supposed to be. And I really feel sad for the people who don’t stick around and wait for it. But I’m also a very “I want everything now,” type of person too. So that back at the beginning when Ralph said “Are you ready to be twenty-four years older?” “No.” I can relate to that in other people. I can see that in other people, and it just is “Well, no.” Because of dealing with people like him and other old timers. I began to realize that I had a lot of the stuff, a lot of the thoughts and feelings that they had at an older age. I had at a younger age in this program, from sticking around them and learning. So it’s not all that bad. It doesn’t take that long, if you’re willing to be honest, and actually work it.
That for me is the key phrase. It's always been like, work. At the end of the promises, “All this will materialize if you work for it.” I believe that. I've never been able to come into a meeting and get sober. You can't come in here and sit down and get anything. You have to work. I said the other night. “You can't work your program in here at the meeting, but you have to work it in real life.” And that for me is the issue. It's always been what I do outside this room that's important. Because whether you guys like me or anything in here doesn't matter, you still have to accept me because I'm here. But out there in the real world, that's where I need to live. And that's where I need the acceptance, and that's where I need to work this program in order to deal with other people and to see their side of the story, not just mine. That has been called into issue lately, because I became a shop steward for the union. I'm having some real issues, because I'm not allowed to say what I think. I have to stick with party line. I realize that I will never be a politician. I do not like sticking with party line. I like saying what I feel. If I feel somebody's lying to me I'm going to say “You're a lying son of a bitch,” not say, “Well, the union says you're right.” It's funny, because I talk to my dad and I call my dad. He was a shop steward for teamsters for eight years. He says, “You know, I loved it. I'll never do it again.”

And I think, you know, you're right. I like this. I like learning, but I'm not a party line person. Even in AA. I am not a party line AA person. I think that there's a lot of challenges and issues in every group that have to be dealt with, and a lot of us don't. A lot of us, when we go, we see it but we don't say anything about it, because well, it's their group and they won't like me if I say anything. That's the big lie for a lot of us. For a lot of us it's a big issue. I've always thought if I don't say anything, then I'm part of the problem, not the solution. Solutions are important to me. I still go to other groups and they “watch this guy.” “Guys,
what are you doing? You can’t tell a guy to leave the meeting because he’s talking about his drugs. He’s an alcoholic too.” “Well geez, if you smoke dope, go to NA.” “He wants to come in here because there’s long term sobriety in here, there’s none in NA.” I have issues with that. I know a lot of people think that AA is the end all and be all. I do not. I think it’s a good program. For me it’s a really great program. It might not be for you or other people, but for me it is. And that’s the framework that I have to stick with. I’m sticking with what works. If I could find some other program that would work just as well, or better, I’d go for it. I’m honest enough to know that. That’s why I love this group that we belong to because it’s open. We talk about recovery here, not the disease. And we’re not specific, like you can’t talk about drugs or that. We talk about recovery, the whole issue of recovery. That’s for me, what I need. It doesn’t matter what I used. I got screwed up and I have to recover. That’s the way I have to look at it today. And it is the way I look at it today. Recovery is the issue, not the disease.

Bob approached me shortly after the interview, to say that he had left something out. Apparently he went to a Beyond Sobriety group at Lander Treatment Centre after five years of sobriety. This was a two week inpatient experience for people with long-term sobriety. While he feels it was useful and helped to move his recovery along, it did not seem to be a major factor in his personal recovery which remains, substantially, one based on AA alone. We discussed it a bit and concluded that it would be rare, if not impossible to find an individual who has not been influenced by the treatment system, even if only indirectly. Indeed, we often hear words and phrases which are clearly out of the treatment milieu being spoken in AA meetings, seemingly incorporated as part of the AA program as practiced by specific groups at specific times.
Comments on Bob's Story

Bob’s story provides an incredibly rich text for exploration of the phenomenon of gaining sobriety through AA membership. Bob’s is also the purest of the three, as his sobriety was gained almost without the aid of treatment resources. He mentions using counselling services on two separate occasions, but also states that these influences were minimal, done more at the suggestion of other people, and in compliance with outside requests. Of course, we cannot and should not forget that the influence of the treatment system is pervasive throughout AA as members tell their own stories, often and regularly interspersed with sayings and ideas derived from their own treatment experiences and from the treatment experiences of others heard regularly at meetings and in after meeting discussions. There is an inevitable dilemma in trying to parse out the influence of AA ideas in the sobering up process.

It is interesting to note also that Bob’s membership in one of the more liberal groups in Lethbridge is both a cause and a result of the acceptance of treatment system influences on his personal story of sobriety. Despite these inevitable influences, Bob’s story is a classic example of the use of AA for gaining and maintaining sobriety.

Bob’s drinking started, as it does with most individuals, as an opportunity to feel better than normal. Alcohol was like a medicine used to relieve symptoms of croup. At the age of ten it took him out of himself, relieved shyness, and allowed him to assume a role. Of his early days, he says “...I sure seem to remember more about alcohol than anything else.”

As a teenager his drinking progressed to a party atmosphere. He recognized a personal uniqueness. When his friends were sick and ready to quit he was ready to carry on. “…what good times I did have were all centered around alcohol.” This was brought home at
the age of nineteen or twenty when he had a roommate who drank only a couple of drinks on any occasion. Bob slowed down for a time while he lived with this friend, but soon returned to a pattern of overindulgence.

It is illustrative to note here that all three participants met, or at least recognized their first social drinker only after a clear problem with alcohol had been developed. We all drank according to the patterns demonstrated by our parents. Bill imitated his father; I saw alcohol as relief similar to my mother; Bob had similar patterns to follow. It is not clear in Bill’s story as told, that he actually recognized social drinking as a phenomenon, but in daily conversation he acknowledges that most people are able to handle alcohol. I first recognized social drinking in Beth; in Bob’s case it was a roommate when he was twenty years old.

Like many neophytes, Bob went through a period in which he exaggerated his use of alcohol in order to fit in with his AA group. Coming from a past of feeling unique, shy, and alone, he needed to fit in with sober comrades. In teen drinking he felt unique, “But even so, you know, there was, there was always an edge to my partying.”

Bob had attended church as a youth. was turned off by organized religion. He says, “When I was younger... we went to whatever church was handy.” He avoided his first sponsor, who appeared to be very spiritual. Later on in the narrative he refers to the amount of spirituality that exists with AA members, and follows up by saying that he is not comfortable in churches, that he does not belong in churches. For him, as for me, AA is a religion.

Throughout the narrative Bob refers to contact with other AA members. He talks about traveling to meetings as a group, about hours spent around the table at Ralph’s house, talking about sobriety, and about the problems of daily living.
After an initial short period of sobriety, Bob drank again and discovered to his consternation that he desperately wanted more. That has become his personal definition of an alcoholic—a person who needs to drink more once he has started. There is a saying in AA. “AA may not sober you up, but it certainly spoils your drinking.” I know it did mine. I could no longer drink with abandon. When I returned to drinking I thought about it carefully, planned it and recognized the negative consequences of it. So it was with Bob. He decided, as I did, to try one year of sobriety, to see if he liked it. On his first birthday he had been planning to drink, but did not go through with it. That was the point at which he decided to take the program seriously, to strive for the indefinable something that other members seemed to have.

For Bob, the need to be helpful to others came with the realization that helping others is an important component of the AA program—that it is through helping others that we help ourselves.

He talks about changing groups shortly after his tenth birthday. He needed a group that would discuss issues important to his life, that would help him deal with issues as they arose, and that would help him sort through some of the issues of his past. It was during that growth spurt that he realized with certainty that his marriage had been based on a lie, and he separated from his wife. “But I realized that I was comfortable sitting in my living room with nothing on, no music, no TV. nothing, that for the first time ever, I was comfortable.”

Bob’s present AA attendance is regular, but not excessive, as appears with some long-term members. He prefers to frequent meetings where the topic of discussion is not drinking, but recovery, the day-to-day issues that arise for all people, both “alkies” and “earth people.” His sobriety is important, because without it he would not have a life worth living, but the
fact is that he does have a life, and a young family, and it is important to him to be a good father, to be there for his children, not absent, drunk, or tired, like he remembers his father. Bob is just over twenty years sober, and he takes the common AA belief seriously that a person’s years of continued sobriety define his emotional age. He feels he has just come of age. The book, *Alcoholics Anonymous Comes of Age* (1957) is about the twentieth anniversary AA convention. The title, also the theme of the convention was carefully chosen to illustrate the concept that AA as an organization had matured, and was ready to take over self-governance from its co-founders, Bill W, and Dr. Bob.
Conclusions

General Discussion of the Stories

This small sample identifies some common ideas amongst a small, somewhat diverse group of AA members. The choice of participants who are all members of the same AA group may be influential on the results, given that each AA group develops its own unique culture. It is inevitable that all three participants will share some common characteristics which cannot be attributed to the majority of successful AA members. Despite that initial drawback to the study, it is instructive to outline the themes common to this group as a starting point in identifying what it means to gain and maintain sobriety through AA membership. Kurtz quotes Mark Keller who wrote in 1972 that “the investigation of any trait in alcoholics will show that they have either more or less of it.” Kurtz comments that this “seems even truer of those alcoholics who are members of Alcoholics Anonymous” (McCrady & Miller, 1993, page 13).

Life centered on alcohol

All three participants talk of a life centered on alcohol right from the start. Bill and Bob talk of the drinking patterns of their fathers. The classic AA philosophy that only the individual himself can diagnose alcoholism causes reticence in Bill and Bob to label their fathers as alcoholic, although the symptoms certainly seem to be there. Many members deny familial alcoholism at first, only acknowledging it as understanding of the phenomenon progresses. Schooled in the treatment model, with its numerous attempts at diagnosis, I do not hesitate to state unequivocally that my mother was an alcoholic, and in the latter part of her life, a prescribed sedative-hypnotic addict, even in the face of my father’s refusal to accept
this label for her. Clearly, the model of drinking behaviour in the family was not normal for all three of us.

*Awareness of different drinking patterns*

The awareness of social drinkers came at a later date for all three. Bob describes this clearly in his story about the roommate who enjoyed his cognac, two or three drinks at a time. Bill does not speak to it, but in regular contact with him it is apparent that he has become aware of a different pattern of drinking since his initial contact with AA. For me, as an aside to my story, the first real consciousness was in the time, after two years of sobriety, when I was dating my present wife, Beth. When we would go out for a formal supper she would have a drink, maybe two, on any occasion, and it still surprises me when I observe my sons taking two hours to drink one bottle of beer.

*Feelings of uniqueness and aloneness*

All three of us refer to a feeling of uniqueness and aloneness. Living in alcoholic families, the inconsistency of parental support is apparent. I recall feeling isolated from my earliest memories. Even my relationship with “the drunks” was one of symbiosis, not friendship. It was easy for me to give up the “friends” of the past and concentrate on building new friendships in sobriety. I mention two instances when I returned to visit with old friends which involved drinking and marijuana use, but the sense of isolation from these friends was more significant. I discovered that I felt closer to my AA friends after only a few months of sobriety than I had felt after years of friendship with the drunks. Bill is perhaps less verbal about this issue, but it is still apparent that he felt alone and not part of any group much of the time. Bill’s earliest memories are of his father’s anger. He found he was unable to talk to either of his parents, instead waiting for the weekend relief of drinking. Bill says his thoughts
prior to AA were “I’m no good; I’m a failure; I’m a bum.” He states it in religious terms citing readings like *Sermon on the Mount* by Fox, and finds the solution in a combination of AA friends and religious activity. Bob describes himself as a shy, quiet person, avoiding social contact unless there was alcohol available. He talks about the uniqueness of having a limp, and the isolation of being in the hospital, facts of his life which set him apart from his friends. Even the friendships he had were characterized by alcohol. The friends were always there when his father bought liquor for them. He could count on his father to bring alcohol to his wedding.

*Loss of control*

Loss of control is significant. All three have experienced a time when control of drinking was not possible. For Bill this appears to have been throughout his drinking. For Bob and me the awareness of this aspect occurred in the period between initial contact with AA and the attainment of permanent sobriety. The alcoholism literature refers to locus of control as a concept describing a person’s orientation to the world—is it that the individual has control over his destiny or that his destiny has control over him? At some point the alcoholic, in order to maintain sobriety, must come to the point of feeling a sense of control over his own life. In AA this is accomplished initially through acceptance of a higher power—a power whose job it is to give “Good Orderly Direction.” I regained control over my drinking in my experimentation after initial AA contact, but I could not gain control over my life until I made the conscious decision, after my first year of sobriety, that a manageable life required abstinence from alcohol.
Fitting into the abusive drinking history expected of AA members

There is a certain level of drinking tacitly implied in AA membership. Society’s definitions of alcoholism tend to set an abusive level of drinking as the criteria. Treatment practitioners will often suggest that the definition of alcoholism depends on the drinking pattern of the person making the definition—one step more serious than the definer is presently experiencing. Some members of AA join with a clear awareness of the abusive pattern of their own drinking—a pattern clearly in line with the AA definition of loss of control. So it was with Bill. Bob and I felt it was necessary to exaggerate our drinking episodes in an effort to belong and to feel accepted in AA. A phrase used by old-timers in the program, but not nearly as common now, is “I spilled more on my tie than you drank.” Since that time, fewer members have found the need to drink themselves into that serious a problem before accepting AA’s help, but we still hear neophytes telling clearly exaggerated stories of their drinking.

Organized religion

All three of us had a significant grounding in organized religion prior to contact with AA. Since AA grew out of a fundamentalist religious movement, and still retains significant characteristics of fundamentalist religion, this background has certainly made the acceptance of the AA program easier. A significant theme in the book edited by McCrady and Miller (1993) has to do with the spirituality of AA. The authors refer to research into AA as being originally on sociological and psychological perspectives, and only recently exploring the spiritual; they discuss spirituality as if it is the cornerstone of the program. For the participants in this study, it does not seem to matter whether or not we rejected organized religion; it is the knowledge of organized religion which we had in common. Bill still
considers organized religion as an important part of his life. Bob and I have rejected it in favor of a spiritual experience gained through attendance at AA meetings. Bob speaks of having tried all types of religion, from the “stricto catholic to the holy rollers,” but makes no mention of faiths other than the varieties of Christian faith. Bob is like me in accepting Christian terminology in AA in a metaphorical way.

Friendship experience

The experience of friendship and support in the initial stages of sobriety is important. In AA this is facilitated by the formal process of sponsorship. Bill had a conversion experience of sorts in that he asked God to take away the obsession and the obsession was gone. Bill spent a good deal of his spare time talking to others in sobriety, or who understood sobriety. In reference to the bartender in Waterton, whose brother was in AA, Bill says “I go in the lounge there and sit and have a coke, and I talked to him for hours.” Support for Bill came from three sources, AA affiliates, a sponsor, church affiliates, and specific people at work. Bob called his oldest brother who was in AA and arranged to meet Ralph. Ralph’s house was a regular meeting place for the members of the Taber group, and Bob became a regular there, spending all of his spare time either at Ralph’s, at meetings, or traveling to and from meetings. Ralph was an unofficial sponsor for Bob, but he always had an official sponsor as well. There is more than that. The support of other people significant to a person’s life seems to be essential to the attainment and maintenance of sobriety. AA for all of us becomes a means to receive this support, when significant others are not available. I did not have a sponsor, but the influence of positive friends such as Evelyn, Nic, Theresa, Beth, and many others in the treatment system and in AA has been significant. I can remember a time when my life consisted of a daily search for someone with whom to discuss new ideas and
insights. The sheer volume of support, the time needed, and the wisdom required make it impossible for the treatment system alone to supply the resources.

*Helping Others*

Finally, and I think most significantly, is the theme of helping others. AA material refers to the concept that helping others is a way of getting out of ourselves to allow healing to happen. All three participants in this study have been and continue to be active in helping others. I made a career of it. Although not in any formal way, Bill is presently making a career of it in retirement through his active participation in AA. He did work for a period, part time in a halfway house. Bob, too, is active in helping others; although, he says that his priority is his own family life. One can imagine that he is a positive support not only for his family, but for their friends and all who cross his path. His realization that helping others is the way to get on with his life, achieved sometime after his first birthday was a significant milestone in his sobriety.

*Towards a New Paradigm of AA Research*

We are at the beginning of the theory development stage in the process of research into AA. A number of theories have been postulated, little is agreed upon, and less is definitive. The development of a theory will require extensive qualitative work, whether using ethnographic, phenomenological, or hermeneutic methods. For any theory to be useful, it must be grounded in a thorough knowledge of the phenomenon itself through participation, observation, and interpretation. Saturation is essential. Given the heterogeneity of AA membership, the variety of AA related experiences available to alcoholics, and the divergent group cultures existent in any given area from the small town perspective to the global perspective, one cannot define AA in any meaningful sense. We can only define AA in terms
of small, local units, and then only with caution. Makela et al (1996) have begun the process of comparative global study of AA and have expanded our view of what AA is. Perhaps the only truism is to say that a unique toolkit of AA related resources is needed in any given location, and for each individual member to succeed. Just what this toolkit contains will always be influenced by the variety of treatment resources available in any given area and the dominant culture of the population of the area.

**Spirituality**

The exploration of spirituality has been dominated by the Judeo-Christian point of view. The fact that AA members with other faith orientations, including the atheistic, exist in isolation in North American culture, and more profoundly, that AA has been successfully adopted throughout the world, speaks to the conclusion that we can no longer afford to consider AA spirituality in strictly Western terms. There are two levels of faith in play. Initial faith can be equated with hope, the faint glimmer of hope which often comes from the first attendance at a meeting or the first contact with a contented AA member experienced by the suffering alcoholic. Eventually a faith develops that embodies a lifestyle of serenity, and thus serenity can be equated with spirituality. For most, AA spirituality is serenity, and it is not dependent on religious dogma. To accurately explore and understand AA spirituality, the researcher must be aware of and suspend his personal religious and spiritual beliefs. Sorely needed is a universal definition of faith and spirituality which is not dependent on the biased vocabulary often used in classic discussions of religious affiliation. AA members appear to have some things in common, such as a change in Life Perspective, as in the conversion experience, whether experienced through a gradual awakening or a sudden epiphany, religious or otherwise. Another is the gaining of a concept of a Higher Power, whether the
Judeo-Christian God, or some concept of humankind’s ability to improve his lot. A third is the experience of initial faith, or Hope. With these three concepts as a starting point, more theory development is needed, perhaps through the saturation process of grounded theory to derive measurable concepts that can be applied universally to AA membership.

**Attendance and acculturation**

Traditional AA research and theory development has identified three stages of acculturation into AA. First is the stage of attendance. Whether it is through correspondence and heavy reliance on AA literature as is the case with many loners, or through the reluctant and usually forced attendance at a local AA meeting, one has to make contact to begin to be acculturated to AA. Second is the stage of identification, reinforced by the classic statement “My name is ___ and I am an alcoholic.” Story-telling is the crux of identification. The more different stories a neophyte hears at a meeting or while being “12-stepped”, the better the chance of identification. Just what the basic elements are to make this happen have never been defined in theory, let alone tested through empirical or qualitative research and peer-reviewed literature. Thirdly, affiliation has been identified and attempts to measure degree of affiliation have been made. To this point, the traditional definitions of affiliation have been less than satisfactory. I noted above that I went through a period of about five years when I did not attend an AA meeting, even though plenty of opportunities presented themselves. It was a period of exploration of other resources for me. Not once during this period did I not consider myself an AA member, but I did not at that time meet any of the research defined criteria for affiliation. It is said that AA is a selfish program, and it is true that members use a variety of AA related tools in different ways at different times to meet their personal needs. We need a definition of affiliation that takes account of the personal sense of belonging that
accompanies the absent AA member, as opposed to common measures such as number of meetings attended, or degree of acceptance of the basic principles of AA. Affiliation needs to be considered by the usefulness of AA to the individual. All three of the participants in this study demonstrate greater or lesser attendance at AA-related activities at different times, depending on different factors in their personal lives. There are two primary aspects to affiliation; attendance at AA-related activities (not just meetings) is one; serenity, defined as peace of mind and confidence in the future, is the other. Given the inconvenience of attendance at AA-related activities at certain times in some people's lives, the reading of related material or simple repetition of the serenity prayer should be included.

The program and treatment

In North America AA and the treatment system enjoy a symbiotic relationship. Referral back and forth is common, although viewed negatively in some circles. The dominant culture in some parts of the world make the relationship antagonistic, at best (Makela et al. 1996). AA is generally considered as a mutual-help society, and the program as outlined in *Twelve Steps and Twelve Traditions* (1953) gives a comprehensive plan for daily living that meets all the treatment needs for many AA members—despite the fact that treatment terminology and ideas are intermingled with AA terminology and ideas in the majority of AA discussion in North America. Whether an individual member gains his insight from AA tenets or from treatment language is irrelevant. The fact remains: AA by itself would meet the majority of needs for the majority of members. Just as there are Christian denominations and individual Christians who take the Bible as the literal word of God, and there are those who view the Bible as being entirely allegorical, so too there are those AA members who practice a literal interpretation of the Twelve Steps and there are those who
have never taken the Steps in any meaningful way, and live by a metaphorical interpretation of the program. Some researchers discuss the Steps only from the literal interpretation and ignore those members for whom the program is an allegory, a guideline to good living. To truly understand AA a researcher must understand it from the perspective of all members.

Cultural universals

The best that empirical research can do is to define AA as it exists in the location where the data are collected. The variety of cultures existing in world wide AA makes generalization beyond the data gathering area problematic. Researchers have made a lot of progress in defining AA as practiced in specific areas, and particularly in North America. While I lack the background necessary to evaluate it, I understand that the fields of anthropology and religious studies have made major steps toward defining cultural universals in humankind. Makela et al (1996) have suggested that cultural universals do exist in AA. This is an important area for theory development. As we get closer to understanding the phenomenon we may get closer to identifying universal elements of that phenomenon, but at this point in time the best we can do is repeat the statement often referred to as Keller's Law, as quoted by Kurtz in Research in Alcoholics Anonymous “the investigation of any trait in alcoholics will show that they have either more or less of it,” and Kurtz’ comment that this “seems even truer of those alcoholics who are members of Alcoholics Anonymous” (McCrady & Miller, 1993, page 13).

Relating this Study to the Literature

The literature remains ambiguous as it relates to the findings of my research. One of the predictors of successful affiliation is high dependence on the use of alcohol (Babor & Del Boca, 2003). This does not necessarily mean heavy drinking, but rather the dependence on
the drinking that does occur. I can relate to Bill’s statement that he waited until the weekend so he could get drunk—the anticipation of that relief could sustain him until then. Three predictors of success have been identified by Cloud, Ziegler, and Blondell (2004). These are identification, working the steps, and the number of meetings attended. We all identified as alcoholics early in our attempts at sobriety; we all worked a program although mine was less step-related; we all attended many meetings and related activities during the initial stages of sobriety, although I would put more emphasis on the importance of related activities, not just meetings.

In general the literature supports the notion that there are three aspects to AA involvement—fellowship, program and spirituality. It seems the friendship of AA members and significant others is evident throughout the “after sobriety” stories of all participants. While this aspect may relate to a high score on the affiliation scale, the literature does not indicate this. High affiliation is a predictor of success, but there is no clear consensus as to its relationship, if any, to a need for companionship. We each put a considerable amount of effort into self-improvement, sometimes through the Steps, sometimes through religious affiliation, and sometimes through treatment resources. Spirituality, whether through formal religious activity or AA principles, is a major factor in all three stories. This has been made easier by previous Christian experience, whether positive or not. The feelings of uniqueness and isolation common to the three participants in this study do not appear to be supported in the literature.

*The Phenomenon of Gaining Sobriety through Alcoholics Anonymous*

On a very personal note, the process of inquiry has brought me a lot closer to an understanding of the phenomenon of gaining sobriety through membership in Alcoholics
Anonymous, but I am aware that so far I have only taken one step in a very long journey. This phenomenon is a unique and personal entity for each individual involved, from the sometime member who chooses to leave AA for other supports to the member committed for life. The starting point is a high dependence on alcohol, often with an awareness only developed through affiliation and identification. Three approaches to etiology have been suggested. The disease concept is clearly evident in the AA phenomenon, although it is likely unique to only a small number of sober alcoholics—those who use AA, while behavioral and social learning models appear more prominent for the majority of reformed alcoholics. I am reminded of my brother, George whose sobriety was gained through years of psychotherapy, involving a combined behavioural and social learning approach. Whatever else happens, the alcoholic must develop a program of recovery tailored to his own needs. This involves a very personal interpretation of the Twelve Steps. Spirituality defined as the development of serenity or contented sobriety is an essential factor, although there is evidence that some individuals may stay sober for years without it—referred to as “white knuckling” or the “dry drunk syndrome.” Immersion in the program and attendance at many related activities seems to be a must for the initiate who would use the AA program to his best benefit. Acculturation to the terminology and the unique perspective on life expressed in the Twelve Steps and other literature is important for most alcoholics who choose AA as their program. The order of the Steps and the importance stressed by many members of doing them in order indicate a progression from identification, through development of a concept of a Higher Power, doing a personal inventory and continuing self-improvement to restitution and finally, helping others. Perhaps the best definition of the phenomenon is in the definition of AA itself in the Preamble—“Alcoholics Anonymous is a fellowship of men and women who share their
experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.”
References


