

INTERPERSONAL FACTORS IN THE GENESIS AND TREATMENT  
OF ALCOHOL ADDICTION

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Alcohol addiction, said by Bowman and Jellinek (1) to be the central problem of alcohol, has been receiving the increased attention of scientific workers during recent years - and deserves the research interests of more sociologists.

The etiology of alcohol addiction remains an unsolved problem. Nevertheless, a review of the literature reveals a growing consensus that "the problem drinker suffers from a chronic and deeply ingrained disorder of personality." (2) In the writings of many psychiatrists, e.g., Nolan D.C. Lewis (3), Edward A. Strecker (4), Robert V. Seliger (5), Harry M. Tiebout (6), George N. Thompson (7), R.S. Banay (8), Paul Schilder (9), Edward B. Allen (10), and Oskar Eiethelm (11), there are sketched only slightly varying versions of this increasingly held assumption that neurotic factors are prominently involved in the development of alcohol addiction.

Of course the problem of the etiology of neuroses is itself unsolved, with theories running a wide range from those of the biologically-oriented early Freudian to the more socially-oriented early Freudian to the more socially-oriented interpretations of Harry Stack Sullivan, Erich Fromm, Karen Horney and others. If a trend toward the assumption of a neurotic base for alcoholism is to be noted, there may also be noted an increasing number of psychoanalysts (12) who explain the genesis and development of neurotic patterns in terms of interpersonal relations - as "symptomatic of a disturbance of social relationships mentally

'interjected' (13). According to this view, neurotic trends or patterns have their genesis in the defensive, security seeking processes improvised by the growing child to offset, defend against or compensate for, the basic anxiety which stems from the frustrations, deprivations, hurts, lack of emotional security, and other negative experiences of childhood.

It is made clear by Sullivan (14) and Horney (15), for example, that the effect of these learned, neurotic responses is to restrict the person's primary emotions and to isolate him from objective and satisfying relations with other persons. That is, the secondary needs for protection and reassurance, developed in the earliest interpersonal situations interfere with achieving satisfying interaction with the environment, particularly with other persons. The result is a certain "emotional encapsulation (16), or functional "barrier" (17).

According to this view, alcohol addiction would logically be the developmental consequence of using alcohol to reduce the inhibiting, blocking, encapsulating effect of the neurotic, reaction patterns, i.e., to relax the functional barrier. The use of alcohol as an aid to living becomes "fixed" (18) and, in time, leads to dependence upon it as an indispensable agent for the relaxing of the increasingly constrictive barrier. This barrier-relaxing function of alcohol is well described by one of the Alcoholics Anonymous subjects to be referred to below:

"A few drinks and he feels fine. His shyness and timidity and feelings of inferiority and inadequacy disappear. His inhibitions and inner conflicts vanish and his ego expands. He feels at peace with himself - complete, unified, "well-oiled" as it were, and able to face his realities and problems...."

"Of course it is a false adjustment...but in the beginning it seems to serve a useful and apparently helpful purpose in enabling him to make a satisfactory adjustment to his environment."

According to this view, also, the only therapy which would give the alcohol addict release from his addiction would be a therapy which increases his capacity to interact with his

environment in a less neurotic manner. This implies a deep, emotional relaxation of the defensive and reassurance-seeking needs and the concomitantly increased emotional capacity to interact more objectively and satisfyingly with the environment, particularly with other persons. Using the barrier figure, this means a valid, lasting relaxation of the barrier and not just a pseudo, temporary one (19).

Since the Alcoholics Anonymous program has been so successful in the treatment of alcohol addiction, the writer reasoned that an analysis of the personality changes brought about by the Alcoholics Anonymous would supply evidence against or in support of the above interpretation of alcoholism. The findings to be presented were gathered as a part of a larger social-psychological analysis of the A.A. program (20). Particularly significant were the replies to the following open-end question: "In turning over your will and life to the Higher Power (and/or in accepting the A.A. program), what attitudes, desires, fears, etc., did you give up? In turn, what new values did you get?"

Many social scientists have difficulty interpreting the A.A. requirement that its members turn over their wills and lives to God. Some would make it the substitution of one dependency pattern for another. But the writer interprets this turning over of the will to a Greater Power naturalistically as the emotional abandonment of the old organization of life in favor of a new orientation to other persons and the significant environment - with the concept of God symbolizing and resources and satisfactions inherent in a mature, objective and satisfying orientation to the environment.

But, no matter how the Greater Power concept is interpreted, the replies to this question do reveal the personality changes experienced by this group of A.A. members. The following replies are representative:

"I gave up intolerance, jealousy, self-pity, anger as much as possible, desire for power and a lot of money, being critical."

"Self-pride, conceit, headstrong attitude, fears of others and their opinion of me, fear of my thoughts, fear of inadequacy and fear of insecurity."

"The attitudes of egotism, vanity, selfishness, etc., and the desire of wanting to be a big shot - the big I (without of course trying to even deserve such a title).

"Gave up the fear of loving anyone wholeheartedly, even my child; fear of life for myself and others; thinking it smart to be caustic and overbearing."

"Am relinquishing the attitude of self-importance and the feeling of the need to emphasize my qualifications compared to those of others..."

"Have tried to give up selfishness, "Big I" attitude, running others my way, desire for money as such, false social position, procrastination, fear of what people might say."

"Gave up formless fears, fear of failure, sense of inadequacy, fear of people or love,...and pretense being other than one of the "little people" who are bound by the limitations of their own undeveloped potentialities."

A careful analysis of all the replies shows that fears led the list of personality components given up. For the most part, these are fears in relation to other people:

Fear of inferiority

Fear of inadequacy and failure

Fear of ridicule

Fear of what others might say

Fear of people

Fear of loving anyone wholeheartedly

Fear of responsibility and problems

Fear of the future

Fear of insecurity

Formless fears and generalized fears of life itself

Egotism

The above are both the early fears which, according to Sullivan and Horney, are involved in the development of the neurotic trends, and the later fears deriving from their inherent frustrations.

Also near the top of the list of personality characteristics given up is ego-inflation. This is also held to be a compensating product of the security and reassurance-seeking processes. It is expressed by the subjects as:

Desire to be a "big shot" - the "Big I"

Pride, self-pride, vanity, conceit

Self-aggrandizement

The ambition to excel

The desire for distinction

The desire for power

The drive to be perfect

Arrogance

Contempt for the opinions of others

Phony self-concepts of one's nature, being and capabilities

Hostility and intolerance share third place in the listing of personality qualities given up. Hostility is expressed in aggression, belligerency, quarrelsomeness, anger, temper, hate, bitterness, distrust, unkindness, being critical and sarcastic. As for intolerance, the world itself is usually listed.

Given up also, in the order of the number of times listed, are the following:

Resentments

Dishonesty

Self-pity

Jealousy and envy

Drive for success in terms of money

Excessive sexuality

Running away from problems

Self-sufficiency (the illusory, neurotic need)  
Sense of not belonging  
Living in the past  
Irrational thinking  
Lack of purpose

This list of personality components given up by the A.A. respondents is made up almost exclusively of the very ones which, according to the interpersonal theory of neurosis, are to be found in the dynamic, security and self reassurance-seeking patterns-plus their causative and derivative fears.

It should be made clear that this turning over of the will is, in the majority of cases, not a single act or event. Most often, it is a step-by-step process. As in psychoanalysis, it is a progressive relaxation of the secondary needs—a progressive relinquishing of the defensive, compensating behavior patterns. In all cases, this relaxation and relinquishing are a matter of degree, never complete.

Turning to the replies to the second part of the question—the values gained—the leading gain is an increased ability to interact more satisfyingly with other persons. This is expressed as some improvement in relationship to others; the **gaining or regaining of friendship, love and respect**; and, conspicuously, an increase in tolerance. All these follow logically from the relaxation of the secondary needs to be important, to be in control, to be right or perfect, or some other form of the neurotic need to be reassured or safe. Illustrating the improved relationship to other persons are the following replies:

"People! Getting on with them, helping them...less selfish, critical, prejudiced, more loving, considerate and kind."

"I have become a more social being."

"I have more confidence, tolerance and patience with other people."

"Able to face people again and smile which I hadn't done since I was a kid in school."

"Fellowship."

"Unselfishness, thoughtfulness of others, kindness...respect of family and respected citizenship in the community."

The return of my loved ones and the improved respect of my fellow workers."

One aspect of the improved relationship to people is the greater capacity for the enjoyment and appreciation of other persons."

"Able to enjoy other people more."

"I now get pleasure out of talking to people."

"I now enjoy talking and listening to people."

"Much better appreciation of everyone and everything."

Another consequence of the relaxation of the neurotic needs is the increased enjoyment and appreciation of other aspects of life."

"(There is now) more interest and enjoyment of ordinary life."

"I can now enjoy my work."

"Joy and satisfaction in just simple things - a beautiful sunset, a verse on a Mother's Day card, etc."

"Found new meaning in several forms of amusement and relaxation that I did not like before."

"I get more pleasure from life with fewer requirements for happiness."

"Solid, simple, wholesome things have become the things that count. I'm again living and liking it."

A gain frequently listed is the ability to face and accept reality. A prominent component of this ability, often mentioned, is honesty - with others and with oneself. Other aspects are given in the following replies.

"I gained the ability to face realities; to live life as it is, not as I would like it to be."

"I accept things that don't always please me without blowing my top."

"If there is something unpleasant I can face it; usually it is not so bad as it could have been."

"Have...the courage to handle situations as they arise with no thought of using liquor to aid me in making decisions."

"I quit looking into the past and wishing things were different. Try to accept the situation as it is today and to make the best of today."

Glad to meet the world face to face. Willing to face difficulties."

The above replies reflect a gain in objectivity with regard to the environment. Recorded also is a gain in objectivity with regard to self. With the neurotic needs reduced, the person not only begins to see other persons and external realities as they are, but also begins to see himself as he is. One evidence is the ability to cease projecting blame on others:

"Realized finally that it was myself rather than everyone else who was usually at fault."

"I thought everyone else was crazy but after checking up on myself I decided I was."

There is further evidence of a greater objectivity about self in the reported return or growth of a sense of humor and a sense of proportion. Most striking, however, are the many listings of humility. The word, humility, has neurotic connotations in the minds of many, but as used by the A.A. members it represents a more objective perspective on self:

"I realize that I am only a very small individual in a very large world."

"I lost all ego, became humble, and realized that all men are born equal."

"A.A. reduced me to my natural size, so I feel I owe myself to be a useful servant to my loved ones and mankind."

Striking is the frequency with which there is reported the generalized extension of improved interpersonal relationships to include all mankind:

"This whold world of humans are some of my concern now even if it is only in a minute way."

"Now have love or admiration for mankind."

"I am now a good friend to all."

"Gained love for my fellowmen, a true compassion for human suffering."

Karen Horney speaks of the neurotic as having his "center of gravity" in others (i.e., the motivation force in neurosis is fear of being threatened by others), and that the goal of therapy is to return the patient's center of gravity to himself. Three subjects specifically expressed this feeling of having "become themselves" as a result of having relaxed their neurotic needs. Two of these expressions follow. One woman wrote:

"I had the feeling I was always pretending, hence a feeling of guilt was always with me. In talking with people, I always blushed, stammered, etc....I know now after a year and a half in A.A. that I have always been a neurotic, but wouldn't face it before...I have lost the feeling of not being important to the people I like; I have gained the feeling that I do count and am sincerely loved because I'm me..."

One subject diagnosed the basic personality difficulties that underlay his alcohol addiction as: "An inferiority complex, cloaked with a false superiority attitude. Very self-centered. Constant fear that my make-believe personality would be discovered. The pretender." He phrased his gains as follows:

"Everything worthwhile, peace of mind, happiness, a feeling of security, and the respect of my fellow man. For the first time I feel that I am living my life, and not a life of make believe."

Additional products of the relaxation of the neurotic needs listed as gains by the respondents are:

Security

A sense of adequacy

A growing integration

Accomplishment

Physical and emotional relaxation

Clearer (more objective) thinking

Increased self-confidence

Self-respect, or a feeling of self-worth

Peace of mind

Of the above, peace of mind is listed most often, but it like most of the other values in this list is a by-product of the more fundamental sense of security and adequacy found in the relaxation of the anxiety-driven neurotic needs. The following two detailed replies serve well as generalizations of the personality changes reported by the A.A. members in this study.

"(I gave up) the basic attitude of selfishness or selfcenteredness, the desire to do things my way - to pull myself up by the bootstraps, the fear of failure and ridicule; the feeling of inferiority, timidity and inadequacy; a deep and crippling sense of guilt, shame and degradation which led to bad emotional attitudes of despondency, remorse and self-pity; the need for an artificial stimulus (such as alcoholic indulgence) to enable me to make some semblance of adjustment to life or to escape completely from situations too painful to bear.

With the surrender of my own selfishness and willfulness to God's will and His constructive plan of creative living and doing for others, there came to me a peace that passeth all understanding, a sense of meaning, purpose and direction to my life coupled with a feeling of adequacy, importance and accomplishment similar to that which I was searching for but never quite achieving in alcoholic indulgence.

The second reply is equally specific:

I gave up (as well as I could):

Selfishness on a thousand planes

Lying on a thousand planes

Ambition to excel superficially - display, talk, etc.

Fear of the future

Desire for other women than my wife

Desire for money as the only symbol of success

I received:

A feeling of adequacy

Confidence

Pleasure in sharing

Accomplishment

Peace of mind

Interest in people unselfishly

Independence of money and popularity to a considerable and unbelievable degree. Popularity, money, etc., became a result of good living, not a goal in themselves.

I became myself according to the dictates of my conscience.

I became spiritually independent yet humble to my supreme being. It used to be the opposite.

Several comments may be made on this case. (1) The secondary need for money and popularity as reassurance of self-worth, mentioned three times, are the chief components of the neurotic barrier that are given up. (2) The shift to a more objective and satisfying interaction with other persons is clearly stated, as is also (3) the more adequate expression of energies in accomplishment. (4) There is expressed the amazement, so typical of neurotics who undergo successful therapy, that it is possible to operate without the formerly indispensable defensive and reassurance patterns - and that living is not only safe but actually more satisfactory without the neurotic barrier. (5) In line with Horney's observation that when objective interaction with others is achieved, the center of gravity returns to

oneself, there is to be noted this subject's feeling that he became himself - became emotionally dependent.

Such are the personality changes which this group of 150 A.A. members reported. These findings lend support to the theory that interpersonally-derived neurotic factors are prominently involved in the development of alcohol addiction. But, whether or not the genesis of neurotic patterns is accounted for within the interpersonal frame of reference, these findings support the theory that alcohol addiction is the developmental consequence of using alcohol to relax the inhibiting, blocking, encapsulating effect of the neurotic needs.

These findings also show that the personality changes are in the direction of a more objective orientation to the environment - particularly to other persons.

A question which presents itself at this point is this: Are such personality changes required in any successful therapy of alcohol addiction?

A definitive answer to this question is not yet possible. Some advocates of the conditioned-reflex treatment or of the newest drug, antabuse - or some of the bio-chemically inclined theorists-would probably respond in the negative. But, up to the present, there is no evidence that any physical treatment has been successful in resolving the problem of alcohol addiction. Physical treatment has its helpful place but present knowledge indicates that such an approach must be accompanied by changes in personality if there is to be more than a temporary release from the addiction.

Furthermore, it may be noted that, historically, the movements which have been successful in the large-scale rehabilitation of alcoholics have all included a program designed to bring about such personality changes(21). Solidly based on this premise, also, is the contemporary Alcoholics Anonymous program.

It is also to be noted that the most scientifically-oriented therapeutic approach - that of the Yale Plan Clinics - makes the same assumption:

.....that alcoholism is the result of severe personality dysfunction. (This does not exclude the possibility of some physiological deviation, e.g., endocrine dysfunction or metabolic idiosyncrasy, as a contributory factor.) Total and permanent abstinence is the objective set for every alcoholic, but unless there is a significant change in the individual's feeling about himself and his environment, he will not remain sober for long. ....The alcoholic must experience a redistribution of emotional forces within his personality.....

.....here is no drug known to medicine that will "cure" the alcoholic.....The real problem lies in achieving insight and acceptance of oneself with resulting personal growth (22).

### **SUMMARY**

This paper has presented the personality changes recorded by 150 Alcoholics Anonymous members. The personality components given up, in varying degrees, are fears, ego-inflation, aggression, hostility, intolerance, and other attitudes and behavior patterns which, according to the interpersonal theory of the genesis of neuroses (e.g., as per Sullivan and Horney), are to be found in the security and reassurance-seeking, neurotic patterns. The positive change most frequently listed by the subjects is the increased ability to interact more satisfyingly with other persons. Increased enjoyment and appreciation of other aspects of life, an increased ability to face and accept reality, an increased objectivity with regard to self and others, an increased sense of security, self-confidence, adequacy and self-worth, clearer thinking, a growing integration and peace of mind - these are other evidences that these respondents, as the results of the Alcoholics Anonymous program, had gained the emotional capacity to interact with the environment in a less neurotic manner, i.e., to interact more objectively and satisfyingly with the environment - particularly, other persons.

These findings are held to support the growing consensus that alcohol addiction is a sociogenic personality disorder, and

that a permanent "arresting" of alcohol addiction requires personality changes which enable a more objective and satisfying interaction with other persons and other aspects of the environment.

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(18) Robert F. Bales, *The Fixation Factor in Alcohol Addiction: An Hypothesis Derived from a Comparative Study of Irish and Jewish Social Norms*. Unpublished Doctoral Dissertation, Harvard University, 1944.

(19) This interpretation of alcohol addiction has been elaborated by the writer in a paper, "Alcohol Addiction as a Sociogenic Personality Disorder," published in the *Proceedings of the Pacific Sociological Society*, 1950, Vol. XVIII, No. 3, *Research Studies of the State College of Washington*, Pullman, Washington.

(20) Milton A. Maxwell, *Social Factors in the Alcoholics Anonymous Program*. Unpublished Doctoral Dissertation, University of Texas, 1949. The experience of 150 A.A. members was obtained by means of a questionnaire distributed personally by A.A. friends of the writer. These respondents were located in 47 communities, in seven States and four Canadian Provinces.

(21) There have been four movements in the last century on which information is available. Two of them originated in Ireland: Father Mathew's Movement, in 1838, and the Catch-my-Pal Movement, in 1909. The other two began in the United States: The Washingtonian Movement, in the 1840's and the Reform Club Movement, in the 1870's and 1880's.

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