

SOCIOLOGICAL FACTORS IN ASSOCIATION WITH A.A.

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The basic need in the behavioral sciences today is for integration. Especially this is true concerning explanations of deviant behaviour. Unless we consider the fusion of sociological and individualistic theories, we run the risk of excessive specialization. The following data is an effort to combine relatively unique individual experiences with broad principles of group dynamics.

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Two conflicting explanations of deviant behaviour are currently challenging each other. One can be termed sociological. Deviation is a result of learning and acculturation. The deviant person, according to this view, is a product of a behaviour system that condones acts regarded as undesirable by the larger society. In short, deviation is the result of socialization in a deviant subculture. Despite the large accumulation of research data which demonstrates this position that deviation is learned behaviour, one cogent question has been left unanswered: why did the deviant individual select and accept affiliation in the first place with groups that possessed deviant norms? Why do large numbers of nondelinquents exist in very high delinquency areas? Or, reversed, why was a young person who resided in a low delinquency area attracted to delinquent associates?

The second explanation of deviant behaviour could be described as individualistic. It explains deviation in terms of individual emotional needs, early childhood experiences, and excessive aggression. To a marked degree this view dismisses the learning process as of little significance, and it insists that the major explanation of deviant behaviour lies in unique individual differences.

The vigorous criticism of the sociological approach made by the individualistic school has served to accentuate the defect already observed. The sociological school has no systematic explanation as to why certain individuals select and accept affiliation with deviant group norms, while others do not. It would seem plausible to assume that certain more individualistic variables might account for attraction to a group. The presence of these individual variables might well further attraction to the group, while the absence of them would act as a barrier to affiliation. In essence, then, the crux question that is of great

significance to the sociological school is why one person is attracted to a group, affiliates with it, and comes to follow the norms of that group, while another person, equally exposed, does not align himself with the group and remains uninfluenced by its norms.

It is possible to select two aspects of individual experience that vary markedly from person to person as factors explanatory of attraction to, or repulsion from, specific groupings. One of these has been labelled self-conceptions. Although everyone perceives himself according to frames of reference common to other persons, these self-images are nonetheless relatively unique. The sequence of interhuman experiences, native capacities, early roles contacted, all of these are variables that can vary from person to person in such a manner that self-perceptions also vary. There is enough variability in self-conceptions to think of them as more individualistic than sociological. It seems logical to assume that self-conceptions would play a meaningful part in attraction to a specific group, his attraction to that group would probably be enhanced.

A second aspect of individual experience that seems likely to further attraction of a particular person to a certain group consists of variations in associational experiences. Relative to a specific group, one person may encounter an excess of favourable definitions concerning that group, while another person may be exposed to alternatives to affiliation that act as obstacles. Thus, individuals vary in the amount of association they have had with favourable definitions that would tend to promote affiliation with a particular group; they also vary in the amount of contact they have had with esteemed persons who exemplify an alternative to affiliation with that group.

From these two variables in individual experiences it is possible to form the following hypotheses to explain attraction to a specific group. Those persons who affiliate with a group, in contrast to those who do not affiliate, have self-perceptions that are consistent with the norms of the group to which they are attracted. Accompanying these self-conceptions, attracted persons, in contrast to unattracted ones, will have been exposed to a excess of favourable descriptions about the group to which they were attracted.

An opportunity to test these "hunches" was presented to the author in a recent research study that compared alcoholics who had affiliated with Alcoholics Anonymous, with other alcoholics who had not affiliated with A.A., even though exposed to it. In exploratory interviews with both of these groups, specific statements were collected that represented the explanation of these subjects as to why they had, or had not, affiliated with A.A. Thirty hospitalized non-affiliates, selected at random, constituted one source of these statements. Sixteen volunteer, active A.A. members constituted the other source. Each of these statements, in various forms, was mentioned by numerous alcoholics in these non-directive interviews.

These statements were collected in such a form that a "true-false" response to them could be elicited from a new sample of alcoholics. Two-hundred and fifty-two new subjects with a severe drinking problem responded to these statements. These subjects were

contacted through Mendota State Hospital in Madison, and Janesville, Wisconsin. By counting how often these cases went to meetings during the past year, a separation was made between affiliates and non-affiliates. A.A. attendance at least twice a month during the past year became the minimum definition of affiliation. On the basis of this, the 252 subjects were divided into 119 affiliates and 133 non-affiliates. These two groups were compared concerning their responses, true or false, to the statements developed during exploratory interviews. The statements were divided into clusters of three each so that Chi-square tests and measures of correlation with affiliation could be run. The multiple correlation of all three of the statements with affiliation was determined as well as the partial correlation of each single statement with affiliation. A method termed "Kappa prime" by its originator, the late Professor T.C. McCormick, was used (1). If a cluster showed no significant differences between affiliates and non-affiliates on the Chi-square test (5 percent level of significance) no correlations were run.

Self-Conceptions

Those statements that were classified as "self-conception" statements are shown below. The multiple and partial measures of association with affiliation are listed with them.

Before I went to any A.A. meetings at all I often shared my troubles with others (partial correlation with affiliation is .392).
Before I went to any A.A. meetings at all I had decide my drinking had licked me. (Partial correlation with affiliation is .290).
Before I went to any A.A. meetings at all I had decided that I was an alcoholic. (partial correlation with affiliation is .117).

Differences between affiliates and non-affiliates on the statements is significant at the 1 percent level. Multiple correlation with affiliation is .594.

These facets of self-conception discriminate significantly between those alcoholics attracted to A.A. as a group and those that were not attracted. They showed a multiple relationship of .594 with affiliation that was statistically significant. Among those alcoholics who had, before going to any meetings at all, shared their troubles with others, defined themselves as defeated, and labelled themselves as alcoholics, .784 were affiliates. Among these alcoholics for whom all three of the statements were false, .190 were affiliates. The difference is .594. The single self-conception of being a person who often shared emotional problems with others produced a sizable partial association with affiliation (.392) that was statistically significant. This figure was reached by allowing the single factor of emotion-sharing to relate itself to affiliation without the two influences of self-definition of defeat and being an alcoholic entering into the computation.

It seems reasonable to conclude that the affiliates were exposed to group definitions of themselves relative to drinking and the sharing of emotional problems that were not present in the experience of the non-affiliates. Since the standard in terms of which individual perceptions are made are provided by group experience (2), the following conclusions seems possible. The

affiliates had been part of reference groups in which a norm for individual behaviour was to verbalize and express to other members of the group their emotional and other problems. The non-affiliates, on the other hand, were probably influenced by reference groups whose norms defined trouble-sharing as taboo.

When the exploratory interviews were consulted on these points, three levels of emotional-sharing were noted among the affiliates. First, the affiliates tended to regard themselves as persons who liked to "be out among them," while the non-affiliates tended to be "persons who kept to themselves." Second, the affiliates came to share many intimate troubles and difficulties with the researcher, while the non-affiliates tended to say "I don't want to burden anyone else with my troubles; I'll keep to myself." Third, the affiliates tended to verbalize about their intimate problems while the non-affiliates tended to say, when pressed for an explanation about not sharing their difficulties, that they "did not know what to say to someone else when they were talking about personal problems."

The affiliates seemed to be behaving toward themselves on the basis of reference points that defined problem sharing as a desirable practice. In turn, these reference points meshed harmoniously with the group reference points of A.A. One of the prominent norms of the group is intimate sponsorship, "telling one's story," and "getting it off your chest." A large part of A.A. therapy lies in the emotion-sharing group discussions that precede and follow more formal meetings. Since the non-affiliates were not characterized by self-conceptions that dovetailed with these group norms, it seems logical to conclude that the absence of these conceptions constituted a barrier to affiliation. Those having self-perceptions similar to A.A. norms, however, affiliated.

The non-affiliates represent reference points that emphasized remaining silent about personal problems rather than talking about them with others. They brought to their first contact with A.A. an incompatible set of criteria for behaviour relative to problem-sharing. The result of such a situation could only be a desultory attendance and a low level of attraction to the A.A. group.

It is interesting to note that these findings coincide with the conclusions of Cressey concerning the non-shareable problem in the criminal violation of financial trust (3). In all cases of this type considered by him, a non-sharable problem preceded the violation of trust. The subjects defined the situation in which they found themselves as being non-shareable with anyone else. Apparently non-shareable problems preclude behaviour in a more socially acceptable direction. The absence of such problems allows for more socially acceptable conduct. In both cases of the non-affiliates with A.A. and of the embezzlers the presence of non-shareable personal difficulties acted as an effective causal factor in explaining behaviour.

The second self-conception item in the author's A.A. study concerned the definition of one's self as defeated by drinking. The partial correlation of this item with affiliation was .290. When the two items of trouble-sharing and self-definition as an alcoholic are held constant, this factor shows a noticeable relationship with affiliation. When it is considered more closely

it seems logical to assume that the affiliates had experienced a shift in reference points concerning "giving up," while the non-affiliates had not. It seems probable that this shift toward admitting defeat grew from a rejection by their reference groups as their drinking became more pathological and an acceptance of new reference groups as the compulsion to drink became more fixed. The growing awareness of being addicted to alcohol probably produced contacts with doctors, social workers, and other persons who referred to them as "sick people," as needing treatment, as being unable to handle their problems alone. It seems clear that they had experienced situations that detached them from reference points by means of which they had defined themselves as being able to "handle their liquor" and forced them in the direction of accepting defeat.

On the other hand, the non-affiliates had not yet experienced this shift to new reference points. Apparently, they had not been rejected by their drinking associates because of their drinking. This implies that they were immersed in a milieu that tolerated many of the symptoms of alcoholism. Such toleration precluded their contacting reference points that would begin to alter their conception of "being able to handle it." In connection with this tolerance there is probably a slower development of alcoholic symptoms so that they were less concerned about the compulsive nature of addiction. Thus, the non-affiliates were not pushed into a new reference point field, but remained lodged in a situation favourable to their retention of the idea of self control.

The shift to new reference points concerning surrender presented the possibility of new types of action for the affiliates. They could consider a therapy that rested, not on self control, but on reliance upon others who had the same problem they had. They could, with such a shift of reference points, understand A.A.'s admonition to "give up." Thus, when they first went to meetings they possessed a set of reference points that meshed with those of A.A., resulting in affiliation.

The non-affiliates had experienced no such shift that would open the door toward new action. They were still in a milieu that accepted them as they were and that did not define their behaviour as necessitating an admission of defeat. Upon going to A.A. for the first time the non-affiliates thus concluded that the program was unnecessary for them because the group emphasized admitting defeat and their reference points were not oriented in this direction.

The least association with affiliation stems from the third statement concerning the self-definition of being an alcoholic. This low relationship implies that many non-affiliates, as well as affiliates, had often attached this label to themselves. For them, in contrast to the affiliates, it had been a more acceptable self-perception. Possessing such a self-label did not motivate toward affiliation as much as did the other two self-perceptions. Again it seems probable that non-affiliates were supported by a reference point field in which such a self-definition was not stigmatizing and perhaps actually rewarding. However, it should be emphasized that a low, but significant relationship is of some limited value in promoting affiliation.

These aspects of self-conception as they relate to affiliation with A.A. shed some light on the general problem of why people are

attracted to any specific grouping. There appears to be an attraction to a group when the conceptions of self held by the individual coincide with the norms of that group. When these two do not coincide, it seems likely that attraction will be lowered. Every group structure provides definitions of action for its members, through its role-expectations. Each individual personality develops a conception of himself that is, in part, a reflection of the role-expectations assigned in many groupings. If there is a consistency between the self-conceptions that a person brings to a group and the role expectations of that specific group, attraction is promoted. This is demonstrated by the high rate of affiliation among those alcoholics who had a conception of themselves that dovetailed with the expectations of A.A. membership, and the low rate among those who did not.

It seems justified to conclude that attraction to other groups might operate in a similar way. Perhaps the problem why one youth associates with a criminal gang, while another, living under the same surface conditions, does not associate with a criminal gang, can be explained by this principle. A study of the content of the self-conceptions of the youth attracted to the delinquent gang might well reveal a substantial difference from the one not so attracted, and, at the same time, an integration of self-definitions with the role-expectations of the criminal group.

Differential Association

In the exploratory interviews described in this article two types of associational experiences concerning affiliation with A.A. emerged: Favourable experiences that acted to promote affiliation and unfavourable experiences that raised barriers to affiliation. Experiences that encouraged affiliation were positive in their influence in that they were suggestive of joining A.A.; those that raised barriers to affiliation offered an alternative to A.A., I.E., "individual will power," along with drinking supports for an alternative to affiliation. The latter type of experience make up the first cluster of statements that follows; the former type of experience make up the second cluster.

1. Before going to any A.A. meetings at all, I did not have at least two close friends who had quit drinking by their own will power (partial correlation with affiliation is .483).

2. Before going to any A.A. meetings at all, I did not have at least one relative who I liked and who quit drinking by his own power (partial correlation with affiliation is .430).

3. Before going to any A.A. meetings at all, I had lost my drinking friends (partial correlation with affiliation is .427).

Differences between affiliates and nonaffiliates on these statements is significant at 1 percent level. Multiple correlation with affiliation is .633.

1. Before going to any meetings at all, I knew and liked at least two persons who had quit drinking because of A.A.
2. Before going to any A.A. meetings at all, I had at least one relative who I liked and who had quit drinking through A.A.
3. Before going to any A.A. meetings at all, I had at least two good friends who would have admired me for joining.

Differences between affiliates and nonaffiliates on these statements is not statistically significant. No correlations are justified.

The most meaningful factor for affiliation present in these two clusters is the absence of association with a model of "will power." As can be observed in the first cluster, when the loss of drinking friends is combined with the absence of esteemed friends and relatives who had, in the eyes of the subject, quit drinking "by their own will power," there is a high and significant multiple correlation with affiliation (.633). Furthermore, what were expected to be favourable associational factors that would act to promote affiliation were found to be of no value in discriminating between affiliates and non-affiliates. This can be seen by observing the absence of any significant difference between affiliates and non-affiliates on the true-false responses to the statements in the second cluster. Thus, for example, knowing and liking at least two persons who quit through A.A. appeared to have no significant relationship with A.A. affiliation. In short, the positive "pushers" in differential contact had only scant meaning for affiliation, while the absence of differential association with models of will power that provided alternatives to A.A. appeared to be meaningful for affiliation.

The important finding here is that affiliation took place when an alcoholic was removed from drinking group supports, on one hand, and when there was an absence of "will power" models, on the other hand. The discriminatory powers of these factors are high and statistically significant.

As in the case of self-conceptions, these differences indicate that the affiliates and non-affiliates came from different networks of reference groups. It further appears likely that the reference groups operating in the background of the non-affiliates were more closely integrated into the dominant values of American society than those operating in the background of the affiliates. American society in general has tended to set a high value on the development of individual decision making. It has tended to frown upon invasions of individual integrity. This social value has, in greater or lesser degree, permeated the norms of most groups. It appears from the data that the affiliates had been less strongly oriented in this direction than the non-affiliates. Both friends and relatives of the affiliates exhibited significantly less "will power" behaviour towards drinking intoxicating beverages than did the non-affiliates. The latter had been consistently exposed to a form of behaviour that was strongly supported by the general culture, namely "will power" behaviour. They were given a potent rationalization, thereby, to explain their disinterest in A.A. To

admit that one is not capable of using individual volition, that one cannot, by dint of private initiative, solve one's difficulties, is to admit one's unfitness according to the broad social norms. These norms are pinpointed when a flesh-and-blood relative or close acquaintance who is liked voices them about drinking liquor. When an effort is made to understand the non-affiliate it becomes evident that he tended to be put into a position of choice between A.A. and "will power" behaviour. Further consideration reveals that it is far easier to follow that which is known and sanctioned, namely behaviour like the model of "will power," than it is to choose the path of the unknown, i.e., A.A. affiliation.

On the other hand, the affiliates appeared to represent reference points that are lacking in emphasis upon individual volition as a way to meet drinking problems. The flesh-and-blood embodiment of "will power" in the form of an esteemed friend or relative was not present in their experiences before they tried A.A. There was thus no choice between A.A. and self-reliance. Once a conception of self had formed that dovetailed with the norms of A.A., the affiliates were freed from the confusion of making this choice. They had encountered in A.A. a group that provided a self-conception similar to the one they had received from other groups in the past. No model of "will power" stood in the way of their affiliation.

Thus the concept of differential association as an explanation of conduct has not proven, in its usual form, to be fruitful in this research. It was assumed that an excess of definition favourable to affiliation over definitions unfavourable to affiliation would characterize the affiliates, compared with the non-affiliates. However, the non-affiliates had almost as much association with definitions favourable to affiliation as did the affiliates. They reported that they knew at least two persons whom they liked and who were active A.A. members at roughly the same rate as did the affiliates. The same is true concerning relatives who quit drinking through A.A., and concerning friends who would admire them for joining A.A. In other words, these favourable influences were present among the non-affiliates in about the same proportions as among the affiliates.

The big difference between affiliates and non-affiliates relative to differential association lies in the excess of unfavourable definitions by the non-affiliates, but were not present in the associational pattern of the affiliates. In other words, they were approximately equal concerning favourable definitions for affiliation, but were significantly unequal relative to unfavourable definitions. It was a matter of an excess of definitions unfavourable to affiliation. This leads to the conclusion that there may be an abundance of contact with definitions favourable to affiliation, but these favourable definitions do not necessarily mean affiliation. In this instance they did not. An excess of favourable definitions did not act to promote affiliation, but an excess of unfavourable definitions acted to explain non-affiliation. This is negative differential association in which the emphasis is upon an absence of definitions rather than upon their presence.

Most applications of the concept have relied on the positive aspects, assuming that the presence of positive definitions were influential in determining behaviour. The present research indicates that favourable conceptions may be present, but relatively ineffective. What is equally important is the absence of negative judgments. This indicates that a modification of the concept of differential association is necessary, so that it will consider negative as well as positive aspects.

Further consideration of the hypothesis of differential association are possible when the situation of the non-affiliates is examined. They possessed both favourable and unfavourable influences relative to A.A. Thus they were in a situation necessitating choice, while the affiliates were not. In the competition between these alternatives, which was chosen? They chose the alternative that was in closer conformity with the overall system of values, namely, that individual "will power" is the way to handle drinking problems. Thus it seems that often there are numerous definitions of behaviour available concerning any general conduct, but the one chosen is the one with an excess of contacts and most firmly embedded in the culture. This was the choice of the non-affiliates. The choice was not presented to the affiliates.

The emphasis upon the negative aspects of differential association seems to be valuable in other explanatory efforts crime, for example. Rather than the presence of an excess of definitions favourable to violation of law, perhaps there was an absence of choices between numerous possible alternatives of action. For the non-criminal, one of these alternatives may well be criminal conduct; conduct may have been abundant with such behaviour, but so has contact with alternative ways of behaviour that are more closely aligned with dominant values. The non-criminal makes his choice on the basis of the dominant value and its alternative, while the criminal, lacking any such choice, acts on the course available to him. This is not the presence of an excess of definition for criminal actions, but the absence of alternatives to such actions that tie into the norms of the larger society.

Significance of the Findings

Referral to Alcoholics Anonymous looms large in the treatment process for alcoholism. As a therapeutic group, it has been eulogized and applauded, and justly so. Most of the industrial programs for attacking the problem within industry lean heavily upon it. It occupies a prominent place in treatment centres, hospitals and information centres. However, in the flush of this widespread acceptance, the "negative instances" that arise have escaped close scrutiny. There are literally thousands of compulsive drinkers who are exposed to affiliation, but fail to affiliate. True it is, as active A.A. members point out, that these alcoholics are "not ready." The crucial treatment question, however, is this: what lies in and behind being "ready"? The data and interpretations reported herein pose a particular answer to this question.

It is significant that specific facets of self-conception that correlate with affiliation can be isolated. It suggests the

possibility of treatment activity aimed at producing these self-images and attacking those that argue against affiliation. It is of further significance to discover that there are those associational experiences that raise potent barriers to affiliation. It seems feasible to think of treatment aimed at reducing these associational barriers if they exist for a particular case. Of less significance is the finding that a predominance of contacts with definitions favourable to affiliation is of little value in stimulating affiliation. This finding indicates that treatment needs to be aimed at reducing barriers arising from associations unfavourable to affiliation, rather than aiming it at producing associations favourable to affiliation.

In short, what is suggested is a treatment procedure in clinics and hospitals designed to develop those self-conceptions that further affiliation, on the one hand, and, on the other, to lower those associational barriers that get in the way of affiliation.

If a case has not developed those self-conceptions that mesh with A.A. norms, a clinical effort could be made to develop them. If models of will power behaviour are prominent in the background of a case, these barriers to affiliation could be handled as part both of individual and of group therapy. If drinking group supports remain, efforts can be directed toward isolating the alcoholic from these reference points.

Finally, it seems that these findings could be the base for the study of other patterns of group attraction. It is quite conceivable that juvenile delinquency could be more effectively explained as a combination of individual experiences motivating affiliation with group patterns. In turn, treatment of delinquency might be facilitated by a matching of self-conceptions and the norms of the treatment groups.

Conclusions

Certain generalized speculations are possible from the data concerning the phenomenon of group attraction. Individuals seem to be attracted to a group when their self-images coincide with the norms of that group and, further, when they are not forced to choose between the group and some alternative behaviour that has a stronger social sanction behind it. It seems quite possible to take this hypothesis and test it by studying the process of affiliation with well-defined criminal gangs, fraternal organizations, work groups in an industrial plant, and a wide variety of other group-attraction situations. In this manner the nature of the relationship between relatively unique personality features and group structures might be more completely explained. Certainly, by such a research effort, the crux problem concerning deviant behaviour would be attacked, namely, how is it that one person affiliates and submits to the standards and norms of a deviant group, while another, equally exposed, does not?

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