SOCIAL THERAPY FOR A SOCIAL DISORDER—
COMPULSIVE DRINKING

By Robert Freed Bales

Most compulsive drinkers do not like the idea of re-education as an expression of what they are supposed to need. It implies that they are mis-educated or uneducated, and that some academic authority now proposes to enlighten them about the disadvantages of their drinking behavior. This they resent. With few exceptions, alcoholics are perfectly aware of the unhappiness and pain which drinking brings to them and their families. Their dilemma consists precisely in the fact that no amount of such knowledge seems to help. Somehow the craving always wins out. Knowledge of consequences does not stop the craving.

Nevertheless, re-education in the broadest sense must take place if the addict is to lose his compulsion. Of course, it is always necessary to deal with the physical complications brought about by the excessive intake of alcohol, but this is not enough. Getting the drinker "dried out," restoring his intake of food and vitamins and the like are only first steps. They do not touch the compulsive motivation, and unless this is eliminated, relapse is inevitable.

From the point of view of the drinker himself, relapse seems to take one of two principle forms. In the first form he is seized, usually at the time of an emotional upset, with an overpowering craving for a drink. Drinkers have been known to spend whole nights walking and struggling against the craving, making the most heroic efforts to resist, finally to capitulate the moment the first bar opened in the morning. The second form is called a "slip." A drinker who has sworn off and has carefully avoided situations where he
might be tempted to drink is offered a drink by a friend, or "absent-mindedly" turns in at a bar, and suddenly, with apparently no conscious resistance whatever, "finds himself with an empty glass in his hand." At this point realization of the consequences returns with a rush, but the damage has already been done, and the drinker feels powerless to stop.

The Craving as a Product of Learning

It is the craving itself which must be eliminated if the drinker is to be able to stop. And it is here that re-education must play a part, since both the craving and the tendency to slip point directly to a complex of psychic elements which could only have come into being in the first place through a process of learning. The addict experiences the craving essentially as a given "entity," but analysis shows the craving to be a result of at least two types of underlying elements: (1) some need or complex of needs for adjustment, and (2) an orienting structure of habitual thought patterns and associated emotional justifications which suggest to the addict that drinking will give him relief. Both of these elements may exist and operate below the level of consciousness. Thus the individual sometimes slips before conscious inhibitions are called into play. By the time these underlying elements are manifested in consciousness, they are experienced as an obsessive craving which cannot be broken by direct voluntary effort.

The needs for adjustment are usually not much different in kind from those found in the non-alcoholic, both normal and neurotic. The drinking pattern of the addict is bound up with many, if not most, of the same goals and values which are important to the non-alcoholic. The difference lies in the way the individual has learned to satisfy these needs. The compulsive drinker, for one reason or another, has been unable to utilize the socially approved pathways to the goals of the larger society and has learned to take a short-cut method.

The alcoholic wants friendship, the love and response of his fellow beings, but since for some reason he is unable to get it in
socially approved ways, he obtains a spurious sort of companionship in fellow drinkers, who, he insists, in his intoxicated condition, are his "best friends." He wants recognition and prestige, a feeling of being a person of some consequence, but being unable to obtain legitimate recognition, he deadens his sensitivity to the judgment of himself and others, and by his deviant behavior forces them at least to pay attention to him. He wants to be able to do his job in the world and discharge the functions of his various roles in an acceptable way, but finding himself inadequate, he resorts to alcohol to give him "Dutch courage," and dreams of remarkable exploits in which he astounds the gaping multitudes. He wants to have power and authority over others, but since he finds himself constantly humiliated and coerced, he "takes his spite out" against those who have power over him by forcing them to take care of him and get him out of "jams." He wants to do "the right thing," but he has committed so many "sins" in his desperate efforts to maintain his supply of alcohol, and fears he has committed so many more during his "blackouts," that he feels that he is just "no good," and the only thing left for him is to "take another drink and forget it." Like any other individual, probably more than most, he desires satisfactions and gratifications from life, and when his exaggerated expectations are frustrated, he tries desperately to console and indulge himself by drinking, or, by threatening to drink, to force others to pamper and "give in" to him.

It is precisely the knowledge of these and endless other ways drinking can be used, and the rebellious feelings justifying these uses, which differentiate the alcoholic from the non-alcoholic and form the crux of the addiction. In spite of himself, the confirmed alcoholic finds his thought and feeling running in these habitual grooves. Every unsuccessful contact with the social world drives him back into these thought grooves and suggests to him that "another drink will fix everything up." The alcoholic "loses his perspective," as some of them put it, and finds himself "bucking the whole world." He becomes an expert in self-justification and passive aggression, even though he also condemns himself, for only in this
way can he retain sufficient ego strength for any sort of action against what he feels to be a hostile, threatening world.

The Social Isolation of the Alcoholic

The alcoholic is a man divided against himself. No matter how genuinely he may agree with those who condemn him, there is another part of him which fights back. Since his drinking is condemned, his feelings of rebellion are logically expressed through further drinking. The drinking now serves both as a means of passive aggression and as a self punishment for transgressions. The drinker becomes more and more isolated, "desperately alone," "misunderstood," more and more bound up with his own circular reasoning and self-destructive tendencies. He becomes inaccessible to all the usual social approaches, and puts his own distorted construction on everything that happens to him. The social world has lost its power to influence his motivation in any way which does not lead him deeper into his dilemma.

How can "a medicine of some kind," as relatives sometimes fondly hope, or a period of "drying out," be expected to untangle a disorder of this sort? How can reasoning, or persuasion, or punishment be effective when it comes from a world with which the alcoholic in his innermost core of thought and feeling is basically at war, and against which he is well provided with ammunition? Re-education for the compulsive drinker must thus strike below the level of the influences brought to bear upon him by his family, friends, and associates, the courts, jails, and hospitals. Effective re-education in this case must reach down into the deepest levels of personality, down to those automatic or habitual associations and emotional responses which are below voluntary control and form the immediate orientation for the constantly emerging needs.

Indeed, it must strike at these needs themselves, reducing them and providing other outlets - this is almost a psychiatric commonplace - but the reduction of the psychic needs for adjustment, like the reduction of physical disturbances, is still not enough. Experience seems to show that even the ordinary wear and tear of
life is enough to provide the energy for compulsive drinking if the thought patterns and emotional supports which lead specifically toward drinking are left intact and under cover. Once established, these patterns of reaction apparently can never be entirely destroyed. Like political opportunists who cannot be removed from office, they remain, ready to sell out the larger interests of the whole for the benefit of their old friends, unless they are constantly watched and forced to render an account of their activities. Since they cannot be destroyed, they must be explicitly discovered and recognized by the addict himself, dissociated from the needs they have heretofore served, and put into responsive contact with outer social controls. Unless this is accomplished, and the new balance of power is maintained through a reinforcement process of some kind, the craving and the tendency to slip remain.

What is needed is a reintegration of the individual with a social group of which he feels truly and basically a part, a group which understands him thoroughly and sympathetically, which will agree with him and support him, and yet begin to correct his perspective and give him an acceptable view of himself from the outside, a group which provides the necessary matrix for the achievement of his basic goals, all of which is impossible except in the setting of a solidary, organized group. It must be a group so wise in "seeing through him," so skilful in pricking his bubbles of alcoholic fantasy, that his old short-cut method of achieving those goals through drinking simply will not work. Finally, it must be a group specifically set up and prepared to give these rewards for activity which is within the immediate power of the individual to perform and which leads him away from his alcohol-directed habits of thought and feeling.

Social Reintegration Through Group Therapy

There have been a number of popular movements in the history of therapy for alcohol addiction which have hit upon this basic principal and have utilized it with what was regarded in their time
as spectacular success. Father Mathew's movement in Ireland, Mr. Bosshardt's group in Switzerland, the Washingtonian movement in the United States, the "Catch-My-Pal" movement in Ireland and England are a few examples from the last century and a half which would repay careful study. The most convincing present evidence that a group approach to the re-education of the compulsive drinker works on a large scale with an effectiveness and efficiency hardly approached by any other means of therapy is provided by Alcoholics Anonymous. This movement started with two compulsive drinkers searching for a way to keep sober, in Akron, Ohio, in 1935, and now has something over fourteen thousand members, all ex-alcoholics, with groups in practically all the large cities of the United States. This organization can certainly be said to have had spectacular success, even though various complications may make any exact evaluation of their success in comparison with other methods quite difficult.

The new candidate for Alcoholics Anonymous finds that the group is made up exclusively of others who have been exactly in his own situation. He finds that they have schemed and planned and struggled and stolen to keep their supply of alcohol, just as he has. They have felt the same self-justification, inarticulate rage, and aggression. They have drunk their way into and out of every possible jam and, as a group, know every in and out of the life of the compulsive drinker.

That the members do know and understand the compulsive drinker comes out in the group meetings, which are given over chiefly to short narratives by the members of their drinking experiences, humorous and tragic, of their final realization that their attempt to adjust through drinking was hopeless, and of the way in which they were able to stop. It is customary for a new member to "qualify himself as a genuine alcoholic" by relating events from his drinking experience which undeniably identify him with the other members who know and recognize all the signs. The new candidate in such a group intuitively recognizes that he is among friends, and that when they speak of their experiences they speak of their own. They "talk the
same language." They feel as he feels. They do not condemn him. There is nothing to fight against.

The usual situation is here completely reversed; the alcoholic obtains recognition and response through the admission of thoughts and activities which, before, he had been desperately trying to hide, even from himself. In the course of time he opens out, and his experiences become a part of the group experience. What he had though were personal drinking secrets, monstrously invented and indulged in by himself alone, become trade secrets, and humorously or dramatically told, add to his effectiveness and sense of belonging. He becomes aware of his habits of thought and feeling in himself which heretofore had been repressed and compulsively active. He undergoes a personal emotional catharsis, partly through the group meetings, partly through particular confidants he discovers in the group, and partly through his attempts to make amends to friends and associates for wrongs he feels he has done them in the course of his drinking career. The "Twelve Steps" which comprise a condensed statement of the therapeutic program and give it a religious rationale take care of these various aspects in a systematic way. Although the program is admirably set forth in these Twelve Steps and individuals have been known to achieve sobriety through "The Book" alone without benefit of group contact, there is little reason to doubt that getting across the basic ideas in the personal and group setting is vastly more effective for the majority.

It seems reasonable to assume that ideas which come to the individual as convictions held by an organized group of which he feels irrevocably a part come to him with a greater clarity and intensity than information which comes to him in printed form, or as advice from a doctor or professional worker. A great many alcoholics, in fact, have a standing grudge against all professional workers, whom they tend to distrust and suspect of a lack of real sympathetic understanding at best, or of outright commercialism at the worst. It is a striking fact that an alcoholic will return to the doctor or social worker after a few meetings of Alcoholics Anonymous and will repeat to him with enthusiasm and
conviction ideas of distinct therapeutic value which the professional worker had been unable to get over in a considerably longer time.

Many compulsive drinkers with long drinking careers and innumerable contacts with doctors come to recognize and emotionally accept for the first time as members of Alcoholics Anonymous that they are "alcoholics," that they cannot take even one drink without continuing on a spree, and that their only hope is absolute and complete abstinence. They learn that it is the first drink they must avoid. They learn to detect and recognize their "screwey alcoholic thinking" for what it is, the first stirring fantasy which leads to the full-fledged craving and the fatal first drink. They learn that they must live in a world in which there is constant opportunity and encouragement to drink, and yet be sufficiently armed within themselves to say "no" without feeling resentment that others can drink and get away with it. These ideas and many others are constantly reiterated, infinitely varied in form and detail, in the context of impressive personal experience.

**Disappearance of the Craving**

It is a fact which continues to provoke a sort of wonder and awe among the members and others who have seen the process actually at work that in the course of participation in Alcoholics Anonymous the craving disappears. "I did not leave alcohol - alcohol left me," is one phrase which the members use to express this phenomenal fact. The impressiveness of this fact is one of the concrete bases for the belief of the members in "a Power greater than the self." Belief in such a Power, stated in these very general terms, is gradually suggested to the candidate and gives the group a basically religious character.

The enthusiasm of the members is convincing evidence that the association gives them satisfactions and gratifications which they had previously been unable to attain. Membership and acceptance in the group alone provides a number of these satisfactions, but the
action program gives still further opportunities for moulding and confirming new, non-alcoholic modes of satisfaction to common human goals. The member is urged to work with other alcoholics and give them the opportunity to try the program for themselves. He has, in his own experience, the most effective possible "kit of tools" for this activity. No matter how ineffective he has been in other respects in the past, he has a good chance to succeed at this, since the number of alcoholics is very great, and some of those to whom he talks are bound to be receptive to the proper approach, as he was. He knows his job, where to put the entering wedge, what language to use, how far to go, what reaction to expect, and how to deal with it, for in their experience, and in their patterns of thought and feeling regarding drinking, alcoholics are very much alike.

In working to put over the new ideas which have enabled him to become sober, the member identifies himself still more strongly with the group. He confirms by repetition the effects it has had upon him. And in so doing, he feels a new sense of power, adequacy, and authority. His former position is reversed; whereas before he was the "child," the inferior and defensive "bad boy," or "the patient," he now is the wise and benevolent "father" or "mother," mature adult who has made good in the face of handicaps. He is "the doctor." he is consulted and depended upon by others in the group. His opinions and explanations are respected. Now he is the teacher instead of the pupil, and he can accept the idea of re-education with more equanimity, although actually the term is not much used in the group.

The leaders of the group become the principal links with the larger community, and are active in it both in a general way and in ways which draw upon community resources for the benefit of alcoholics. The bridge back to the parent social body, with the various aids it can offer, is completed. A series of intermediate roles is thus established, bridging the gap between the position of the isolated and rebellious compulsive drinker, and the position of a full-fledged responsible member of the larger community. The alcoholic, even when not an explicit leader of the group, can pass
from one to the other of these intermediate roles with relative ease. Although the ex-alcoholic will probably always want and need to retain his membership and activity in the group; since the old thought and feeling patterns lie constantly in wait within him, he is no longer an outcast, but a full-fledged member of the larger community, participating in a way he would never have thought possible in his drinking days.

The Social Matrix of the Re-education Process

Perhaps it might be said that re-education in the larger sense always involves a reintegration of the individual with the parent social body and its common life, its institutions, its ways of thinking, its valued symbols, its particular and exclusive practices. Permanent belongingness in an organized, locally rooted, solidary social system is the only concrete matrix capable of grasping and involving the whole motivation of the man, his whole emotional and active life, as well as his intellectual processes. Consequently, this sort of matrix is ultimately the most effective setting for the re-education process. All other settings are partial and less effective. The most effective educative agencies - those in which the primary formative socialization takes place - (the family of orientation, friendship groups, the religious body) - all tend precisely toward this pattern, with a tendency to maximize solidarity, permanency, local and territorial segregation, common life and common rituals, and unlimited obligations of members to one another. Particular agencies are effective in the educative process pretty closely to the degree that they realize and embody this all-inclusive grasp on the individual.

Alcoholics Anonymous does not incorporate all of the elements mentioned, but it distinctly tends toward this pattern. It probably goes about as far in this direction as is easily compatible with our larger institutional system, certainly far enough to be remarkably effective in a task of re-education which has proved notably refractory to other, more superficial approaches. It is for this reason that it may provide concrete suggestions for other
re-educative programs (e.g., racial prejudice, autocratic behavior) which are meant to modify individuals extensively, but must still fit into the context of the larger social system and complement its activities.

To summarize, the success of Alcoholics Anonymous brings out the effectiveness of the group context in the presentation of new ideas and behavior patterns to the individual. It emphasizes the importance of starting where the individual is in his thinking and feeling, by utilizing as teachers individuals who are, or only recently were, in the same position. As a member of a solidary group in which the desired ideas are held as group convictions, they come home to the individual with a personalized, tailored-to-fit quality, and with an emotional intensity and repetition impossible to duplicate in any other way. In the matrix of a concrete group with which the individual is closely identified, and in which he has a particular role, the ideas and desired behavior patterns can be thoroughly integrated with his social goals, tied up immediately and directly with those emotions and needs which can only be activated and satisfied in a social context. Finally, learning in such a context is learning actively pursued, because the knowledge has an immediate relevance to the most pressing practical problems of the individual. The stability of such learning is insured through constant reaffirmation in overt action with group sanction and approval. It draws upon the principle of self-help through the helping of others, and so facilitates the final degree of identification with the new patterns.

Problem fields active at present in which similar patterns are being employed, and in which benefit might be derived from explicit comparison and cross fertilization of principles, would certainly include, to mention only two, work with race relation committees, and veterans' rehabilitation and reorientation. There is nothing new about the basic idea. It is a generic method of social control. The point is that it might be more systematically and extensively applied, and probably to problems in which a similar approach has been tried and abandoned, because in some obscure particulars it
fell short of a pattern of treatment which could now be attained. The program of Alcoholics Anonymous is not basically new, but it is sufficiently different in certain crucial particulars from former attempts to promise a lasting, instead of a temporary success.