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**CONVENIENT LIES AND USEFUL FICTIONS:
ALCOHOLICS ANONYMOUS FROM THE
'INSIDE-OUT'**

By

HEATHER A. KITCHIN

A thesis submitted to the
Faculty of Graduate Studies and Research
in partial fulfillment of the
requirements for the degree of

DOCTOR OF PHILOSOPHY

Carleton University
Ottawa, Ontario

June, 2001

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the Faculty of Graduate Studies and Research
acceptance of the thesis

**Convenient Lies and Useful Fictions: Alcoholics
Anonymous From the "Inside-Out"**

submitted by Heather Anne Kitchin, B.A., M.A.

in partial fulfilment of the requirements for
the degree of Doctor of Philosophy

Chair, Department of Sociology and Anthropology

Thesis Supervisor

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June 4, 2001

ABSTRACT

Alcoholics Anonymous offers hope to suffering alcoholics in Canada, the U.S., and many other parts of the world. As a powerful discourse, AA serves as a regulatory agent. Accordingly, issues of power are closely investigated in this research. Moving beyond “outside-in” representations and theoretical analyses of Alcoholics Anonymous, this study illuminates the strengths and vulnerabilities within AA text and discourse from the “inside-out”, and traces its technologies of power through interpretive interactionism, ethnography, deconstruction, conversation and discourse analyses, textual analyses, and postmodern sociology. Sources of data include Usenet newsgroup discussions, autobiographical narratives, authorized AA literature and published literature independent of AA. It is found that AA members reproduce AA text and larger discourse in a circular manner. This research discloses the regime of knowledge and the relations of power that form the individual, social, and political landscape of AA text and practice. Assumptions and contradictions within AA discourse, the intersection of pastoral power and disciplinary power, and docility of bodies are examined as components of the larger complex AA whole. It is concluded that the AA treatment program and its underlying truth are founded upon a variety of fictions, and AA as a whole has evolved little since its inception in 1935. This research demonstrates that members’ recovery experiences within AA are discursively informed and organized. Thus, the AA self becomes constituted through AA discourse. Further, the accomplishment of AA is paradoxical in that it offers its members freedom only through sameness and normalization.

RÉSUMÉ

L'organisation Alcooliques Anonymes offre de l'espoir aux alcooliques qui habitent au Canada, aux États-Unis, ainsi que dans bien d'autres régions du monde. Sur la base d'un discours extrêmement prédicateur, le mouvement AA se présente comme agent de normalisation. Par conséquent, ce jeu de puissance exige une étude toute particulière. Allant au-delà de la présentation de notions vues "de l'extérieur" et d'analyses théoriques sur le mouvement AA, la présente thèse explore "de l'intérieur" les forces et les faiblesses des propos et de la prédication du mouvement AA afin d'élucider les mécanismes de cette puissance au moyen d'interaction interprétative, d'ethnographie, de déconstruction, de conversations analysées, d'analyses de textes et de sociologie postmoderne. Parmi les sources de données, on peut compter des discussions du groupe Usenet, des récits régionaux, les publications autorisées par le mouvement AA et des études sur celui-ci publiées par des universitaires. On constate que les membres du mouvement AA ne font que répéter tout simplement les propos et les textes du mouvement. Cette recherche permet également de faire le tour de l'ensemble des connaissances et des rapports de pouvoir qui constituent le monde individuel, collectif et politique des publications et du comportement du mouvement AA. On examine les postulats et les contradictions qui existent, le jeu des pouvoirs pastoral et disciplinaires, et la passivité de ses membres comme éléments du plus vaste réseau que constitue le mouvement AA. On en arrive à conclure que le programme de traitement de ce mouvement et les vérités qui le soutiennent sont fondés sur des notions fictives qui n'ont guère évolué depuis ses débuts en 1935. Cette recherche démontre que la documentation traitant de la réadaptation de personnes au sein du mouvement est organisée et présentée discursivement, l'organisme se justifiant lui-même dans un discours tautologique. De plus, ce que le mouvement accomplit demeure paradoxal en ce qu'il offre à ses membres la liberté, mais une liberté axée sur l'uniformité et la normalisation.

In loving memory of my maternal grandfather

J. Harry Smith

1896-1963

One of Canada's Home Children

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The primary title of this work is adapted from statements made by Herbert Fingarette in his book *Heavy Drinking* (1988). He (1988:28) argues that the classic *disease* concept of alcoholism is nothing more than a "convenient fiction", that serves merely as a "useful lie" upon which social responses to alcohol abuse are misrepresented and artificially constructed. This research borrows from Fingarette the notion that while powerful, Alcoholics Anonymous and its aligned disease concept of *alcoholism*, have been constructed upon a variety of fictions. These fictions serve conveniently to underscore the member's reality and truth of AA recovery. Such truth is problematized throughout this research.

It is impossible to develop a doctoral dissertation without the assistance of very instrumental others. Thus, I am indebted to numerous persons who have contributed to the evolution of this research. Without their participation, this study would have been impossible to execute. Responsibility for the final product is, of course, my own.

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PREFACE

“Hello, my name is Heather, and I am an alcoholic.”¹ I have repeated these words countless times over the past thirteen years. Through recitation, and acceptance, of these words and the implications of progression and fatality, I have embraced a powerful belief system, committing myself to the meta-discourse of Alcoholics Anonymous.² My own “recovery” from alcoholism³ thus assimilates and is complicit in reproducing the AA Gaze.

Recently, however, I have become interested in understanding the social forces, the relations of power, and the devices by which I, and countless others, come to perceive an urgency around personal practices regarding alcohol consumption, an urgency perhaps, around our very human regulation. Not unlike many persons who venture into AA, I attended my first meeting to determine conclusively that I was not an alcoholic. (See also Merryman,

1. AA holds that members are not to break their own anonymity at the level of press, radio or film. Therefore, a discussion around the breaking of my anonymity is provided in Chapter One—Process of Discovery.

2. Throughout this document I will also refer to Alcoholics Anonymous as AA. When Alcoholics Anonymous is abbreviated as A.A. (using periods) in the original text, I adopt the original abbreviation. There is no implied distinction in the use of the abbreviation of AA.

3. I emphasize the “ism” of alcoholism to denote the cultural construction of alcoholism. Far from being an intrinsic and naturally occurring state of being, alcoholism stands as a creation of the surrounding culture.

1984:63.)⁴ The naive, however, who sit in their first meeting yearning to be excluded from the alcoholic ranks, are met with a powerful and seductive discourse.

While latent, the interplay of pastoral power, disciplinary power, and moral regulation are merged the moment a “newcomer” walks through the door of his or her first AA meeting. Social regulation serves also as a precursor to one’s first meeting; the complicated dynamics of drawing in the newcomer depends itself on both social regulators and disciplinary practices of the Alcoholics Anonymous narrative. As Trice (1957:53) observes, the affiliative process into AA tends to be more successful for those who have “been raised in a system of values that recognize the signs of having a drinking problem.” AA folklore and advertising serve greatly to promote the idea through self-promotion that *alcoholism* can be both identified and arrested.

This research examines larger AA doctrine, including assumptions, contradictions, the intersection of pastoral power and disciplinary power, and demonstrates that Alcoholics Anonymous may be understood as intersecting sites of power, which over time has promoted regulation and docility of

4. While my initial intention of going to an AA meeting appears ironic, or strangely contradictory, many practicing alcoholics enter the program as I did, to conclude, finally, that they are not alcoholic. Rudy (1986:29) notes too that newcomers come into AA for a variety of reasons, often with a tendency to be “scared and confused.”

members. As a meta-discourse, AA's "recovery" program largely informs social responses to **treatment***⁵ for *alcoholism*.

My interest is not so much in the fact that some persons may want to cease drinking alcohol altogether, but rather with the power that the AA regime of "truth" enjoys. While accumulating "next to no empirical support" (Peele 1985:45), the disease model greatly dominates more moderate approaches to treatment. I use the term "moderate" generically to include controlled drinking and harm reduction responses that provide options to the drinker other than the disease tenet of absolute abstinence. While the earlier "controlled drinking" approach was tailored, in part, to assist early stage problem drinkers to learn to consume alcohol in a more controlled manner, the term can still be found in addictions literature (Donovan and Heather, 1997).⁶

The more recent "harm reduction" approach "focuses on the reduction of *harm* as its *primary goal* rather than reduction of use *per se* (Lenton and Single, 1998:213, italics in original text). This approach seeks to reduce drug-related harm for those who continue to use substances. According to Single (1996:239), "[e]valuation studies show that harm-reduction programs have been successful" in terms of "reducing the spread of AIDS and other diseases without raising the

5. A Glossary is provided at the back of the dissertation, from pages 289-298. Glossary terms are denoted throughout the document by bold text followed by an asterisk (*).

6. The remains debate around the merits of "controlled drinking" (see, for example Glatt, 1995).

levels of drug use among the general population.” Harm reduction programs are, however, much less common in North America than they are in the United Kingdom, The Netherlands, other parts of Europe, and Australia (Single, 1996:239). North America continues to favor the disease model of addiction.

The power held by AA and its aligned disease model of *alcoholism* provides a valuable site of analysis as a stronghold in contemporary North American attitudes about drinking. This research seeks, however, to discern the vulnerabilities contained by the AA twelve step model of *alcoholism* treatment, and to understand technologies of power within the social and discursive world of Alcoholics Anonymous.⁷ As a critical exercise, this study examines relations of power embedded within AA text, practice, and larger discourse, in part, through deconstruction, discourse analysis, and textual analysis.

The study draws from the interactionist/ethnomethodological genre and more recently developed postmodern discourse(s). I take for granted my own perceptual truth and the relevance of this particular interpretive project. This study adopts the view that human freedom is more likely to follow from understanding surrounding dynamics of power (Foucault, 1983:383). This research, therefore, discloses the regime of knowledge and the technologies of power that form the individual, social, and political landscape of AA text and practice, that which I call the meta-discourse of Alcoholics Anonymous. The

7. The twelve steps are listed in APPENDIX IN-A.

human being is constituted and regulated through a multiplicity of discourses, some overtly and seemingly innocuous, others subtle and possibly insidious, and others, if examined closely, appear necessarily beneficial and benevolent; AA may well be considered a largely irreproachable discourse.

This study illuminates regulatory mechanisms within a specific site of institutionalized power, one that has greatly shaped the landscape of the contemporary self-help movement. As I demonstrate in the following pages, over the years many researchers have paid attention to Alcoholics Anonymous (for example, see the McCrady and Miller collection [1993]). Some of this attention has been critical. To such breadth of knowledge I offer an analysis informed and underscored by experience. From the privileged position of an insider, I look at Alcoholics Anonymous from the “inside-out” (Khantzian and Mack, 1994). As Denzin (1997:201) poses,

the new social science writers divide into two groups—the ethnographic realists and the cultural phenomenologists. The realists see stories in society, waiting to be written, and the phenomenologists write from the inside out, their own stories become cultural texts.

Through the following chapters my own stories unfold as cultural texts as I trace and engage particular power relations intrinsic to the meta-discourse of Alcoholics Anonymous.

INTRODUCTION

“‘Truth’ is to be understood as a system of ordered procedures for the production, regulation, distribution, circulation and operation of statements... ‘Truth’ is linked in a circular relation with systems of power which produce and sustain it, and to effects of power which it induces and which extend it. A ‘regime’ of truth” (Foucault, 1977:133).

The topic of “alcoholism” has over the years attracted considerable attention, through both scholarly and theoretical work, and through the unprecedented inroads of Alcoholics Anonymous. As Mäkelä (1996) observes, “Alcoholics Anonymous...is one of the great success stories of our century.” As such, “important segments of the general public in North America are deeply affected by [AA’s] 12-Step program.” More generally, it has yet to be determined whether alcohol addiction/dependence is a sin or an illness (Blackwell, 1988; Valverde, 1998:23), yet addiction literature independent of AA texts frequently commends the AA movement.¹ Though this trend appears to be shifting somewhat, due most notably to work by such writers as Sobell and Sobell (1978, 1982), Fingarette (1988, 1991), and Peele (1985, 1991, 1995,

1. See, for example, Norman Denzin’s *The Recovering Alcoholic* (1987b), Robin Room’s “Alcoholics Anonymous as a Social Movement” (1993); Room and Greenfield’s “Alcoholics Anonymous, Other 12-Step Movements and Psychotherapy in the US Population, 1990” (1993); and Nan Robertson’s *Getting Better: Inside Alcoholics Anonymous* (1988) which is a full book valorization of AA.

1998), scholarly work often still exalts AA as both a treatment modality² and for the recovery model proffered by its twelve steps.³ While there has been critique around framing alcoholism as a pathology,⁴ there has been less dispute around the AA twelve step model.

As a site of *recovery* Alcoholics Anonymous boasts its availability worldwide.⁵ Occasionally, members share stories of attending AA meetings in

2. That Alcoholics Anonymous constitutes a treatment modality, may be contested on the grounds that it is better categorized as a mutual aid or self-help group, or movement. However, based upon definitions of "treatment" (see, for example van Wormer, 1995), common sense notions, and scholarly discussions around treatment (see, for example Fuller, 1993; Lindeman, 1993; Galaif and Sussman, 1995; Peele, 1995; Valverde, 1998), AA is widely recognized as a form of "treatment" (Robertson, 1979; Madson, 1980; Rudy, 1986; Denzin, 1987a and 1987b, Glanter 1990; Brown, 1993), through mutual aid (Mäkelä, 1996). For a closer look at a detailed definition of "treatment" and a discussion of AA as a treatment modality, see Katherine van Wormer's *Alcoholism Treatment: A Social Work Perspective* (1995). See also Riordan and Beggs (1988) for a discussion around the differences between self-help and therapy groups.

3. See, for example, Bean-Bayog, 1993; Denzin, 1987a, 1987b; DiClemente, 1993; Kurtz, 1993; and Smith, 1993.

4. Notable examples are Fingarette's *Heavy Drinking: The Myth of Alcoholism as a Disease* (1988) and Peele's *Diseasing of America: Addiction Treatment out of Control* (1989), which, as Peele notes, was declined publication by several publishers given its content and anti-AA message (Peele, 1995:xi). Carolyn Wiener's *The Politics of Alcoholism: Building an Arena Around a Social Problem* (1981) is also critical of AA's North American dominance of alcohol treatment.

5. AA claims that it has now permeated the globe. The authorized AA website, <<http://www.alcoholics-anonymous.org/>> boasts program adoption and/or meetings in a multiplicity of African countries, including Ethiopia, Kenya, and Swaziland, Asian countries, including Cambodia and People's Republic of China, Antarctica, and other locations too numerous to mention. For further information refer to the attached Appendix IN-B. See also Mäkelä (1996:30-31), who lists AA program adoption in forty countries around the globe and notes the thirty languages into which the AA *Big Book* has been translated, and Miller and McCrady (1993:3) who note the global prevalence of AA.

foreign countries without being able to speak the meeting's indigenous language. As the stories go, the "spirit" of Alcoholics Anonymous, as one drunk helping another, invariably transcends one's inability to share a language. At this point in time the AA twelve step program is embraced by many areas of the globe. Notes Valverde (1998:28-29):

Among the technologies of alcoholism treatment and recovery, pride of place undoubtedly goes to the 'twelve steps' developed in the 1930s by Alcoholics Anonymous and now used as the main or even the exclusive tool, not just among the two million or so members of AA worldwide but in most North American treatment programmes whether run by physicians, by social workers, or by religious staff.

Alcoholics Anonymous thus dominates the addiction field as a formal response to perceived problematic drinking (Miller and McCrady, 1993; Peele 2000).

Over the past thirty-five years AA has responded to questionable patterns of alcohol consumption. Challenging its philosophical tenets may appear curious to those who valorize and promote the apparent efficacy of Alcoholics Anonymous. However, while many writers and lay persons tend to believe that AA is successful in what it does, the evidence which attests to that success is merely anecdotal. As Peele (1995:74) observes: "The universal praise for AA focuses on its successes and disregards its failures, while we hear little about the successful recovery of those who don't attend AA." Indeed, Read (1989:106) serves as a good example of misrepresenting the success of the **disease model of**

alcoholism* when he states: "Involvement in Alcoholics Anonymous...shows tremendous results."

In any event, the manners in which Alcoholics Anonymous is changing in the postmodern has yet to be investigated;⁶ though in recent years the character of members' practices and philosophies within AA appears to have shifted somewhat, assumably as a reflection of, or in response to, the contemporary world. While Bill Wilson, one of AA's co-founders, projected that AA should always remain dynamic and change with the times (Alcoholics Anonymous, 1976a, aka *The Big Book*), one might wonder what he would think of the program's postmodern influences. As this research demonstrates, throughout the past two decades AA has been developing a shifting postmodern face, manifested through subtle transformations in members' practice. Miller and McCrady (1993:3) observe too that "Since its inception in 1935, Alcoholics Anonymous...and the 12-step fellowships in general have undergone remarkable growth and change."

This study draws out a variety of these recent shifts, and positions AA well within postmodern **discourse***. Further, AA doctrine tends to be reproduced tautologically by members committed to the AA model of

6. I use the term postmodern as the time period immediately following the modern age, identified by Denzin (1997:xi) as the time frame between World War II (1930s) and the mid-1970s. The postmodern has been categorized as "the fifth moment" (Denzin, 1997:xi). Foucault situates the modern era as the time frame from 1790-1810 to 1950 (Sheridan, 1980:196), which locates the postmodern as post 1950.

“alcoholism”, and as such serves largely as a normalizing gaze of recovery. Its focus on reproduction is evidenced through AA's claim that only an alcoholic—necessarily precluding non-alcoholic experts—can diagnose and treat alcoholism (Alcoholics Anonymous, 1976a:xvi; Valverde and White-Mair, 1999:397). Indeed, a newcomer is considered by AA to be a “protégé” (1976a:92).

Drawing upon Foucault, the following analysis examines discursive practices and relations of power that underlie the treatment modality and social movement of Alcoholics Anonymous. Though, as a program of recovery, AA maintains an apolitical stance, this study illuminates several inherent politics contained by this ostensibly apolitical program. Further, as a “social movement” (Blumberg, 1977; Denzin, 1987b; Emrick et al, 1993; Mäkelä, 1993), AA serves as a powerful moral regulator and through its normalizing gaze of recovery its doctrine facilitates a configuration of human regulation.⁷

This research also examines the discursive reach of AA as a formal response to questionable patterns of alcohol consumption. Over the years, both prior to and following the inception of Alcoholics Anonymous, drunkenness, inebriety, and alcoholism have been theoretically framed and socially managed in a variety of fashions. Virtually all measures, however, have sought to

7. There remains a debate around whether the self has agency. Though interesting, the debate rests outside the scope of this research. I adopt the position of Foucault that the self becomes constituted largely through discourse, and from within the knowledge/power relationship.

control/regulate, in one way or another, the drinker. From the Middle-Ages to the 20th century, responses included confining the drinker physically, whether in insane asylums, in special sanitariums for inebriates, or in detoxification centres. As Valverde (1998:70) notes, in 1864 the first U.S. medicalized asylum for inebriates, “confined patients for a minimum of one year, locked them up at night, and used the strictest of methods.” Later, well into the 1980s, aversion therapies, including drug induced vomiting, infliction of pain, and electric shocks, were used with the goal of punishing the distasteful behavior of heavy alcohol consumption (van Wormer, 1995:65-70). The drug Antabuse, still prescribed in the year 2001, with questionable levels of success, to discourage alcohol consumption, induces vomiting and causes heart palpitations upon the ingestion of alcohol, and when activated is itself nothing more than a form of aversion therapy.⁸ Though producing a “violently unpleasant reaction”, thus far research has “failed to show benefits to its use” (Eliany and Rush, 1992:49). Keeler (1980) points out, moreover, that both antidepressants and lithium are now used in an attempt to treat *alcoholism*.

8. Valverde (1998:223) notes that Antabuse was invented in Denmark in the mid-1950s, and its adoption quickly spread to Europe and North America. Persuading a patient to take Antabuse every day is, however, just as problematic as convincing him/her to stop drinking alcohol in the first place (Valverde, 1998:223). Its half-life, moreover, can be up to two weeks. Thus a drinker can experience aversive results from the drug for as much as two weeks afterwards, despite ceasing ingestion. Further indications of Antabuse, when combined with alcohol include: extreme flushing of the face, dyspnea, headache, increased pulse rate, hyperventilation, and occasionally collapse (CPS, 1986:45).

Indeed, throughout history numerous approaches have been employed in attempt to regulate the heavy drinker. The regulation of alcoholism has come to extend beyond the physical asylum or sanitarium into the realm of the soul. As Valverde (1998:121) observes, “[i]t is the soul of the member that is the main object of AA's innovative approach to ethical governance...”. Recovery in AA requires one to regulate oneself and others, and measures of success greatly hinge on one's ability to assimilate and overtly represent the recovery dogma.

Recovery success is then contingent upon one's ability to remain undivided from self, from others, and from AA doctrine. Though the implicit and largely unknown goal for the AA member is to survive undivided, divisions nevertheless occur within and among membership. Certainly, such **dividing practices*** are subtle and invidious, but as I demonstrate later, ultimately within AA they are a reflection of, and a reinforcement, of underlying technologies of power. As such, these technologies of power may give way to **docile bodies***.⁹ It appears, however, that there are members who are minimally committed to Alcoholics Anonymous and subversion can be traced within AA membership. Sites of resistance are further assessed in this research.

9. I am not asking whether AA discourse produces dividing practices. Rather, as an AA member who has attended meetings and practiced the twelve steps and twelve traditions for thirteen years, and as a researcher drawing upon the work of Foucault, I am asserting the existence of dividing practices within AA practice and talk. Personal experience and previously established knowledges have established the truth of dividing practices. This research seeks not to ask whether they exist, but rather, in what forms they surface.

Importantly, Alcoholics Anonymous does not avail itself easily to rigorous empirical investigations (Brown, 1993; Cahalan, 1993; Emrick et al, 1993; Laundrergan, 1993; Morgenstern and McCrady, 1993). As observed by Ogborne (1993:339), in being "a community-based fellowship...AA presents many challenges to its evaluation as a therapeutic resource." Marlatt (1983:1107) notes, moreover, that "Alcoholics Anonymous has traditionally discouraged research on its activities by outside investigators." In fact, aside from the questionable data released by AA, there are no independent statistics on its member base, and no accurate information regarding membership in terms of age, gender, race, social class, sexual orientation, history of drinking behaviors, or length of members' affiliation with AA (McCrady and Miller, 1993). Nor does AA provide a definition of what constitutes recovery "success" within its treatment program.¹⁰ Empirical studies on AA are, moreover,

10. In 1996, AA World Services published its "Membership Survey," in which it state that 86% of AA members are "White," 5% are "Black," 4% are "Hispanic," " 4% are "Native American," and 1% are "Asian". The report also states that the "average sobriety of members is more than six years." While the report stresses that the results were gathered through a "random sample," it is highly doubtful that the findings would survive a critique of its methodology. Certainly, the proposed figure that "45%" of AA members have been sober (assumably continuously) for more than five years, is problematic given the high dropout and slip rate of members. In this pamphlet, AA World Services omits information in terms of operationalization and methodological weaknesses more generally. Thus, AA "statistics" must be viewed with suspicion. See also Galaif and Sussman (1995) who examine the efficacy of a variety of treatment modalities, including AA. As the authors note, studies around AA's success rate have proven contradictory and inconclusive. One study (Polich et al, 1981) concluded that there is no significant difference in rates of relapse between those who attend AA and those who receive no treatment at all.

difficult to design and execute (Miller and McCrady, 1993). Furthermore, there is little—or no—evidence that the perceived levels of success of the Alcoholics Anonymous program are factual (see also Fingarette, 1989; Peele, 1985; 1987).

RELEVANCE AND IMPORTANCE OF RESEARCH

One goal of this research is to consider two separate and somewhat distinct discourses which seek to inform the management, or treatment of problematic drinking, otherwise known as *alcoholism*. As Alasuutari (1992:2-3) notes, *alcoholism* is a cultural construction which “distinguishe[s] between normal and abnormal drinking, and then develops further interpretations of abnormal drinking—of ‘alcoholism’.”

A further goal of this research is to examine theoretically the alignment of human regulation with the *alcoholism* “recovery” practices of the supposed apolitical treatment model of Alcoholics Anonymous. The study draws upon the work of Michel Foucault, interpretive sociology, conversation and discourse data, public/authorized AA texts, and postmodern discourse.

Within this theoretical context, this study: (1) Closely examines text and discourse of the AA treatment model; (2) Illustrates political enterprises within an alleged apolitical organization; (3) Socially and politically contextualizes and deconstructs official (authorized) AA texts; (4) Explicates codes of behavior within Alcoholics Anonymous; (5) Considers binary discourses of more moderate approaches and the abstinence model of treatment as a political mechanism of

Alcoholics Anonymous; (6) Draws upon **ethnomethodology*** and **postmodern discourse*** to examine discursively constituted reality; (7) Locates alcoholic healing and **recovery*** within **disciplinary practices*** and power; and (8) Traces systems of power within AA discourse.

THEORETICAL FRAMEWORK

The theoretical framing of this project draws upon the vast body of scholarly literature generated by interactionist sociology, sociology of alcoholism literature, Alcoholics Anonymous authorized literature, postmodern sociology, conversation and discourse analyses, selected concepts from the French historical philosopher Michel Foucault, and Harold Garfinkel's interactionist ethnomethodological approach. Below I provide a brief introductory overview of these theoretical backdrops.

INTRODUCTION TO ALCOHOLICS ANONYMOUS

As a form of **treatment*** for alcoholism, Alcoholics Anonymous offers specific goals, program objectives, and recovery "promises" to its members.¹¹

11. Official AA discourse teaches its adherents that abiding by the twelve steps, going to meetings, getting a sponsor, and seeking "spiritual progress", brings members eleven specific life promises. As the *Big Book* (1976a:83-84) reads: "if we are painstaking about...our development we will be amazed before we are half way through. [1] We are going to know a new freedom and a new happiness. [2] We will not regret the past nor wish to shut the door on it. [3] We will comprehend the word serenity and we will know peace. [4] No matter how far down the scale we have gone, we will see how our experience can benefit others. [5] That feeling of uselessness and self-pity will disappear. [6] We will

Through its personal recovery program, members are taught to guard against resentment, and to seek personal growth and “spiritual progress” (Alcoholics Anonymous, 1976a:60,100; Spalding and Metz, 1997). The larger, overarching ‘non-profit’ organization, now incorporated and physically based in New York city, and the twelve traditions¹² of AA were developed several decades ago to ensure the perpetuity of Alcoholics Anonymous and to protect both the organization and members from outside social influences. Thus, from the traditions a common misconception holds that Alcoholics Anonymous is a non-political organization, and as such, members too are absolved of outside politics.

C. Wright Mills and theoretical radical feminism have, however, illuminated the dynamic alignment and interaction of the personal and the political. One of the tasks of this research is to elucidate particular political elements of both the program and the organizational superstructure of AA. Literature and other material produced and disseminated by AA are analyzed for meaning. The peculiarity of AA as an apolitical entity poses a suspect

lose interest in selfish things and gain interest in our fellows. [7] & if-seeking will slip away. [8] Our whole attitude and outlook upon life will change. [9] Fear of people and economic insecurity will leave us. [10] We will intuitively know how to handle situations which used to baffle us. We will suddenly realize that God is doing for us what we could not do for ourselves. Are these extravagant promises? We think not. They are being fulfilled among us—sometimes quickly, sometimes slowly. They will always materialize if we work for them.”

12. The twelve traditions are listed in APPENDIX IN-C.

paradox because as an ideological enterprise AA has permeated thinking in many parts of the world.

The discourse of Alcoholics Anonymous, as a grand narrative, is evidenced through its global assimilation, and its adoption and promotion by North American treatment centres (Peele and Brodsky, 1991). As Mäkelä's (1996) research demonstrates, AA's twelve-step model has informed *alcoholism* treatment in the United States, Austria, Finland, Iceland, Mexico, Sweden, and Switzerland. The AA "disease" model holds that only uninterrupted sobriety can remiss the illness of *alcoholism*. While treatment facilities may dispute *alcoholism* as a primary disease, abstinence is often expected.¹³ More moderate approaches to treatment have thus far received less support in Canada and the United States than have abstinence models.

13. A quick review of treatment philosophy in various centres across Nova Scotia and Ontario reveals that abstinence continues to be a goal in many treatment facilities. Alcoholics Anonymous (or Narcotics Anonymous), moreover, is often noted as recommended. Listed as abstinent or "no substances allowed" are: Crosby House Addiction Services, Kentville, Nova Scotia; Salvation Army Correctional and Justice Services Addiction Education Program, London, Ontario; Nipissing Detox and Substance Abuse Programs of North Bay General Hospital, North Bay, Ontario; Amethyst Women's Addiction Centre, Ottawa, Ontario; Royal Ottawa Hospital Addiction Program, Ottawa, Ontario; Community Counselling and Addiction Services, Red Lake, Ontario; and Salvation Army Addiction and Rehabilitation Centre, Sudbury, Ontario. Moreover, in the U.S. the Betty Ford Clinic and the Hazelden program are founded upon the disease/abstinence model.

INTRODUCTION TO MICHEL FOUCAULT

Michel Foucault's educational background rested in philosophy, history (one of his career titles classified him as "Professor of the History of Systems of Thought" [Sheridan, 1980:2]), and psychology. Throughout his life he wrote and published prolifically. Ball (1990:1) has observed that Foucault committed himself to deciphering the history of scientific thought. Throughout this research, a diversity of Foucault's ideas are engaged to aid analyses of various power dynamics within the larger organizational and regulatory structures of Alcoholics Anonymous. While Foucault is well known for his archeology of knowledge and his genealogies of power, this study draws upon the richness of his work as an architect of the analytic. I thus draw specific theoretical concepts from Foucault to aid in unravelling and explicating a form of human regulation intrinsic to Alcoholics Anonymous.

Foucault provides an understanding of the present through an understanding of our past. How we understand and "treat" the "alcoholic" within the postmodern can, therefore, be understood through our regulation and responses to the "drunkards" of the classical and modern age. In much the same way that the Ship of Fools became a hospital in sixteenth century Europe (Foucault, 1965:35), the regulation of drunkards became effected through the AA meeting in the twentieth century. Freed now from the physical dungeons and chains, within the contemporary world the drunkard/inebriate/alcoholic

remains more proficiently regulated through the soul. In church halls and basements around the world, alcoholic men and women, *confess* to one another “convinced of the need for moral inventory,” through unravelling “personality defects” (Alcoholics Anonymous, 1976a:xvi) in their search, perhaps somewhat ironically, for human freedom. “Delivered from his chains, he is now chained by silence, to transgression and to shame” (Foucault, 1965:261).

INTRODUCTION TO POSTMODERN SOCIOLOGY

In recent decades postmodern sociology has challenged the epistemological privilege of positivist and post-positivist social science, and science more generally. Denzin and Lincoln (1994a:15) observe that qualitative researchers are increasingly coming to recognize that “[t]here is no single interpretive truth.” The theoretical framework of this research is, in part, situated within a postmodern milieu, insofar as the intellectual thinking of Michel Foucault can be classified as such.¹⁴

14. While it has become somewhat of a task to categorize the work of Michel Foucault, this research situates him within a postmodern genre. The most prevalent distinction made between postmodernism and poststructuralism falls to their geographical origin, whereby the former was first a product of Europe and the latter of North America. Otherwise, the two frameworks are seen largely as synonymous (Luke and Gore, 1992). Both consider power/knowledge relationships, the fallout of master-narratives, and institutional structures (Luke and Gore, 1992:ix). While Foucault has been labelled an anarchist, a leftist, a nihilist, a Marxist, an anti-Marxist, a new liberal (in Rabinow, 1984:383), and a structuralist (Sheridan, 1980:37-38, 89-91; Marshall, 1990:11), he rejected all designations. Rosenau (1992:3) observes too that postmodernism and poststructuralism “overlap considerably and are sometimes considered

In Rosenau's (1992:3-4) view, post-modernism "haunts" contemporary social science with its complexity, its revolutionary possibilities, and its dispute with "the underlying assumptions of mainstream social science...". Interestingly, Rosenau (1992:4-5) observes that postmodern social science positions itself outside the modern paradigm in order to criticize and deconstruct modernist science and social science. Postmodernists reveal that modernity no longer holds the promise of liberation, but instead serves as a source of subjugation, oppression, and repression (Touraine, 1990, in Rosenau, 1992:6). And as Annells (1996:391) points out, "[p]ostmodern researchers are not [so much] concerned about the 'truth' of their research product but rather the pragmatic applicability of the results." Social science within the postmodern era is best served through questioning and deconstructing products of modernity.

synonymous." Postmodernists, she notes, are oriented toward cultural critique, whereas poststructuralists tend to emphasize method and epistemological matters. To this disjuncture, Smart (1995:231) asserts, as an admittedly crude distinction, that postmodernists are concerned with critiques of philosophy and epistemology, while poststructuralists are more concerned with analyses of "things" (subjects, documents, accounts, discourses). Given his overwhelming identification by others as a poststructuralist (Luke and Gore, 1992), though, and given that the political consequences of Foucault's work "include questioning the ideological, discursive and political positions of 'oppositional discourses'" (Gore, 1992:60), and given poststructuralism's and postmodernism's similarities in terms of power/knowledge, and given his criticism of meta-narratives, I locate Foucault within the postmodern genre. (See Rosenau [1992:3] for a more exhaustive outline of writers commonly associated with the postmodernist-poststructuralism distinction.) As the writings and teachings of Foucault have surfaced within a particular time period, from the late 1950s to the mid 1980s, Foucault's work is located subsequent to the classification of his own modern time frame, post 1790/1810 to 1950.

Alcoholics Anonymous stands as a legacy of late modernity and early postmodernity, insofar as AA represents a meta/unified narrative/proposition of Truth around the regulation of human alcohol consumption.¹⁵ AA doctrine holds that alcoholic, heavy, or even less problematic patterns of alcohol consumption are best/only arrested through complete and total abstinence. According to Alcoholics Anonymous, attempting to control one's alcohol consumption is indicative of denial. There is thus negligible room in the AA narrative for individualized, or local, responses to alcohol consumption for those persons deemed to have a 'problem with alcohol'.

RESEARCH QUESTIONS

This project examines: (a) the ways by which addicted persons within AA are integrated into a larger system of power and control; (b) the discursive practices that serve to define and regulate alcoholics as docile bodies; (c) disciplinary and dividing practices within AA local sites of recovery; (d) the text, language, and discourse of the AA narrative; and (e) the ways by which AA serves as an institution that essentially serves human regulation.

15. Denzin's category of modernity includes the time of the original inception of Alcoholics Anonymous, while Foucault's definition situates AA as surfacing within the early postmodern. This research sees AA as a legacy of later modernity, but with shifting politics and philosophies arising within the postmodern. As a grand narrative of truth, and as a unified and inflexible response to alcoholism treatment, I categorize early AA as a product of modernity.

I enter this research asking the following questions: (1) What are the strengths and vulnerabilities of the AA treatment modality? (2) In what manners do dividing practices manifest themselves within AA practice? (3) Do the authorized AA texts contain implicit and/or explicit meanings that act as discursive regulators for AA members? (4) What is/are the relationship(s) between normalization and Alcoholics Anonymous?

This study explores the ways by which discursive practices, pastoral power, and **disciplinary power*** become manifest through AA text, conversation and textual discourse, and thus subsequently constituted as members' talk and ideally as members' practice. As a meta-discourse, AA's philosophy has influenced and germinated a multiplicity of other support groups intent on addressing and/or correcting seemingly suspect human behaviors. As White and Madara (1992) document, AA philosophy has spawned subsequent twelve-step groups such as Al-Anon, Narcotics Anonymous, Alateen, Gambler's Anonymous, Overeaters Anonymous, Emotions Anonymous, Adult Children of Alcoholics [ACOA], Debtors Anonymous, Sex and Love Addicts Anonymous, Survivors of Incest Anonymous, Cocaine Anonymous, Nicotine Anonymous, and Co-Dependents Anonymous (in Mäkelä 1996:217). Certainly the power of AA discourse is reflected through this abundance of imitative models of support/treatment. Serving as the archetype, AA has come to inform, in large part, societal responses to peculiar human frailties (Room, 1992). Though my

analysis is confined to Alcoholics Anonymous, as a meta-discourse I recognize AA's wider influence.

The succeeding document unfolds in the following manner. Chapter One provides a discussion of the study's methodology. Chapter Two outlines the study's theoretical framework. Chapter Three examines the ways by which Alcoholics Anonymous serves as a normalizing gaze to alcoholism and recovery processes. This chapter also presents an overview of more moderate approaches as less powerful, but still competing, discourses that respond to curious patterns of drinking. Chapter Four provides a textual analysis of authorized AA literature, identifying various repetitions, ordinances, inconsistencies and contradictions existing within AA text. Chapter Five examines a multiplicity of politics that underlie AA's ostensible apolitical treatment process. In this chapter I introduce three autobiographical vignettes as narrative backdrops highlighting those politics. Chapter Six examines sites of resistance in AA through naturally occurring data. Chapter Seven, again through naturally occurring data, examines through ethnomethodology, the "How" and the "What" of AA members' practices of interaction. Through conversation analysis and discourse analysis, this chapter teases out patterns of institutional talk and the ways by which AA discourse becomes reconstituted as members' reality. Chapter Eight provides a discussion of the central issues presented by the research, and summarizes the previous seven chapters. The concluding chapter presents possibilities for future research and a final word on the full project.

CHAPTER ONE

PROCESS OF DISCOVERY

“Our civilization has developed the most complex system of knowledge, the most sophisticated structures of power: what has this kind of knowledge, this type of power made of us? In what way are those fundamental experiences of madness, suffering, death, crime, desire, individuality connected, even if we are not aware of it, with knowledge and power? I am sure I'll never get the answer; but that does not mean that we don't have to ask the question” (Foucault, 1988:71).

In this chapter, I describe the study's methodological frameworks. This chapter also introduces a variety of debates that have surfaced in response to some of the methodological aspects of this study. As evidenced below, this research is strengthened through triangulation.

This question posed by Foucault is one that is engaged by this research. What properties, indeed, constitute the complex system of knowledge within the meta-discourse of Alcoholics Anonymous? In what ways are experiences of alcoholism, “treatment”, and “recovery” connected to larger regimes of knowledge and power? And how does such knowledge and power become discursively constituted through members' experience and practice within AA? This chapter provides an overview of the research methods utilized for this project as well as a methodological backdrop to these questions.

INCEPTION OF STUDY

Originally, this research was to be entitled “Pedagogies of the Angels,” with Alcoholics Anonymous and its members being the “Angels”. I was interested in deciphering the dynamics of teaching and learning within addiction treatment processes in general and Alcoholics Anonymous in particular. The project was safe, and perhaps more politically correct than the one I present here. I had no intentions of criticizing a system of thought that served my personal goals. Nor had I any intention of challenging the discourse which facilitated my transition from heavy alcohol use to absolute abstinence. This original vision reinforced, reconfirmed, resubstantiated, and reproduced the disciplinary power of my own “recovery.” In a grounded fashion, it was through the research process that my critical posture emerged.

To understand the dynamics of power and authority within such processes, I revisited Max Weber's *Society and Economy* (1968) and various pieces by Michel Foucault. As I came to engage several of Foucault's ideas, I began to consider the possibilities of framing the larger organization of Alcoholics Anonymous through the moral and human regulations that necessarily accompany AA participation. I could see that Foucault's own genealogy of power and regulation of the human body through discourse lent itself quite cogently to framing possibilities of AA as a whole. Thus, my original vision has shifted greatly, yet I maintain a focus on Alcoholics Anonymous. Given that the new

focus poses a more critical view of Alcoholics Anonymous, I struggle to strike a balance between this reading and my own recovery process.

The following project offers a critical analysis of knowledge deconstruction; one which has nonetheless promoted a sense of personal satisfaction and “sanity”¹ Without the knowledge, belief system, and promotion of “human regulation” contained and popularized by the Alcoholics Anonymous recovery program, I highly doubt that I would be conducting this research.

METHODOLOGY

This research is designed and motivated through an ethnomethodological framework, including conversation analysis, and a postmodern “sensitivity” (Denzin and Lincoln, 1994a:5), including application of selected Foucauldian categories. According to Miller (1997:25), “Ethnomethodology, conversation analysis and Foucauldian discourse studies are...three of the most important developments in the sociology of the latter half of the twentieth century.” This research appreciates the compatibility of these three methodological models.

The analysis is ethnomethodological in that the production of social reality is examined, the interpretive formations of social reality are traced, and what is normatively experienced as the familiar within AA becomes strange. The examination seeks to expose the taken-for-granted recovery world of

1. AA teaches its followers that sanity begins with the acceptance of the first step: “We admitted that we were powerless over alcohol—that our lives had become unmanageable” (Alcoholics Anonymous, 1976a:59).

Alcoholics Anonymous, as its normative order is locally constituted and reproduced. The research is triangulated through ethnography, ethnomethodology, textual analysis and conversation/discourse analysis. As noted by Miller (1997b:25), “[t]riangulation assumes that looking at an object from more than one standpoint provides researchers and theorists with more comprehensive knowledge about the object.”

PERSONAL LOCATION

As noted, this research interest is informed, in part, by personal experience within addiction treatment structures. Through thirteen years of personal recovery initiatives and five years of studying addictions, I have developed a keen sense of the dynamics of both *alcoholism* and concomitant treatment processes. This study has been germinating over the past several years, as I have been experiencing, but had not yet fully grasped systems of power within Alcoholics Anonymous. As my autobiographical vignettes disclose in Chapter Five, I sometimes left meetings feeling ostracized and overpowered by other members. Personal politics, coupled with individuals' interpretations of AA talk and discourse, generate a process of marginalization and **outgroup*** status because some members do not feel a sense of belonging with the larger group which becomes constituted through adherence to AA philosophy and prescribed practice.

No doubt, some AA members may view this project as stemming from a “resentment” or from “denial”. As all AA adherents know, those persons in recovery must—at all cost—avoid resentment and denial. Importantly, however, while this study analyses implications of power, I often departed meetings feeling very much supported and encouraged by AA program and practice. My experiences were not all negative and I do not believe that I harbor resentments against AA. In fact, I continue to attend meetings sporadically and credit AA with helping me to achieve and maintain my own sobriety.

I believe that examining relations of power within AA is a worthwhile undertaking. It is very possible that over time the latent power dynamics of AA may give way to dissension, thereby threatening the program’s usefulness for recovery. The noted individualism of the postmodern era makes this possibility likely. Thus, by capturing and exposing discursive practices within AA, I offer an analytical point through which to tackle and resolve such issues. For those who are committed to the survival of AA, understanding such dynamics helps to inform shifts and changes over time. The treatment modality and recovery processes within AA will undoubtedly require adaptation and flexibility through the postmodern era. My goal is to illustrate the vulnerabilities within AA and those dynamics that exclude, silence, and marginalize some participants.

ASSUMPTIONS

Alcoholics Anonymous cannot be assumed to be monolithic or uncomplicated in its organization. As Kurtz (1993) cautions, researchers rarely understand the diversity and complexity of the AA recovery program and organizational structure. I do not, therefore, present AA as a unified whole, but rather as a multiplicity of dynamics which get played out through relations of power. I consider arrangements of power at both local and meta levels.

In utilizing an ethnomethodological approach, I endeavor to assume as little as possible. I do not assume that the AA twelve step treatment modality is superior to another. Nor do I assume that uninterrupted abstinence is superior to a less stringent approach. I assume, rather, a variety of possible responses toward seemingly problematic alcohol consumption. I am not, moreover, committed to the belief that perceived *alcoholism* needs necessarily to be arrested. Instead, the organizing power structures that define such behaviour as problematic warrant close examination and the grand narrative around alcohol treatment needs to be deciphered. The medicalization and pathologization of *alcoholism* require unpacking and redefinition. Cultural denotations around alcohol use/abuse, as well as the language itself, invite deconstructing, as does the AA narrative which defines and speaks to issues of treatment and personal recovery. I ask the question of whether it is possible to separate the earlier

temperance and prohibition movements from the regulatory mechanisms of Alcoholics Anonymous.

I am not suggesting that freedom from chronic alcohol consumption, or “recovery”, is not beneficial for persons who seek it, and to whom AA speaks. Rather, my interest is in the institutionalized layers of power which classify and somewhat self-righteously posit absolutist “solutions” to perceived abnormal drinking. In part, my concern rests with the pivotal assumption of the disease model that complete abstinence is the only solution to supposed alcoholic drinking. I also take issue with the inherent sexism of AA textual discourse, and the trickling down of that discourse into discussion talk. While AA discourse holds that it does not engage itself, or members, in “outside issues,” to say that cultural and personal politics can be bifurcated from those supposed non-politics of AA is naive. Yet, frequently members are led to believe that they are not to bring outside or personal politics into AA.

The question is begged as to whether members are able to separate their own personal politics while engaged in AA dialogue and discourse. Certainly, it is impossible to separate the two. Indeed, Alcoholics Anonymous produces particular power arrangements, politics, both personal and cultural, that get expressed through AA interaction. As Denzin (1987b:21) observes, “A.A. and the treatment process locate the alcoholic in an interactional structure that is larger than he is.” I assume, moreover, that ethnomethodology, conversation analysis, and Foucauldian discourse studies offer “distinctive standpoints from

which concrete empirical aspects of social life may be seen and analyzed” (Miller, 1997b:26).

METHOD: MEANS OF DATA COLLECTION

A Usenet newsgroup (NG), the purpose of which is to provide a place/space for AA-related discussion, is utilized as a source of data. Denzin (1995:250) names an analysis of such a site “interpretive interactionism” inasmuch as the examination “...focuses on those narratives and stories people tell one another as they attempt to make sense of the epiphanies, or existential turning-point moments, in their lives.” Stahler and Coghen (2000:6) contend, moreover, that “[e]thnography provides a useful adjunctive and complementary methodology to traditional quantitative substance abuse treatment research approaches.” According to Miller (1997b:27), “Ethnographic research informed by ethnomethodology, conversation analysis and Foucauldian discourse studies...[treat] every instance of reality construction as a distinctive event that warrants its own analysis.”

My original goal was to organize focus groups from which to gather data in response to specific questions concerning program philosophies and social practices within AA. However, a preliminary pre-test of the NG data revealed, much to my delight, that the AA NG discussions often focused on the very questions that I was preparing to ask of focus group participants. Gathering data from the NG would be much more expedient and less troublesome than having

to advertise for research participants, locating a meeting site and agreeing upon times to gather the data. It would also eliminate concern over interviewer effect and potential bias through knowledge of my researcher presence.

Given that my role as researcher was solely to **lurk**,* the content of the data occurs naturally. At one point I had considered participating in a variety of ways, including breaching experiments,² but decided that ultimately the data were more valuable in their natural state. Accordingly, the analysis need not factor in the possibility of a Hawthorne effect³ (Mayo, 1945).

Gubrium and Holstein (1997:113) observe that “[a]n analytic vocabulary composed of terms like ‘setting,’ ‘naturally occurring,’ ‘status,’ and ‘social structure’ takes us to places [of action].” In offering naturally occurring data, the NG data thus take us to a place of activity. Using the NG data is also extremely efficient as the data have been previously manufactured and require minimal time and energy in transposing from their original source. Thus, not

2. Breaching experiments involve breaking normative social rules so that persons’ responses can be observed (Kendall et al, 1997:178). Observations allow researchers to understand the ways by which persons establish their sense of order (Marshall, 1994:204). For example, as a breaching experiment I might have posted to Alt.Recovery.AA initiating a discussion around why alcoholism is not a disease or why sponsorship is unimportant in AA. Such a topic breaks the social rules of Alcoholics Anonymous, and such questions dislodge members from their established sense of AA order.

3. The Hawthorne effect refers to “changes in the subject’s behaviour caused by the researcher’s presence or by the subject’s awareness of being studied” (Kendall, Murray and Linden, 1997:59).

only are the data extremely rich and easily accessible, but capturing them is both economical and time saving.

While the data are represented and exploited as naturally occurring, it should be noted that persons who **post***—those whom Denzin (1995:254) names “speakers-as-writers”—to the AA discussion NG may not be representative of the larger AA population. For example, only members who own, or who have access to, computers with Internet capabilities can be active members of the NG. Having hardware, software, and computer knowledge enabling NG participation may be reflective of higher than average income and formal education levels. In addition, not all members of those who possess computers may post. There are then limitations embedded in the utilized samples.

My preliminary examination of the discussion sites revealed that two days of NG discussion, including follow-up postings, delivered (excluding identification headers) approximately three hundred pages of text. Computer technology, in contrast to traditional methods of audio-taping and transcribing, lends itself to revolutionary means of data collection; as these new methods provide researchers with novel tools through which to conduct empirical analyses without the burdensome task of taping and transcribing.

Given the breadth of the NG data, it was necessary to determine a means by which to analyze the dialogue. Therefore, in attempt to trace “reverse discourse” (Weedon, 1987:110), the NG data are examined for possible sites of

resistance within the larger dynamics of AA talk and practice.⁴ Attempting to trace technologies of power embedded within a particular form of human regulation probes only one dimension of discourse; identifying potential sites of resistance to that regulation moves toward a more satisfying, two-dimensional, analysis.⁵ As reverse discourse, “subversive knowledge” (Smart, 1995:230) holds the promise of exposing dynamics of power that serve to regulate, unless revealed. Teasing out forms of resistance helps to identify intricacies of movement between power and subversive discourse.

1.a. Grounded Discovery/Theory

One of the research strategies adopted for the study is rooted in Glaser and Strauss' (1967) and Strauss and Corbin's (1990) grounded theory, which, as

4. I would like to thank Dr. Wally Clement for his helpful comments and for his suggestion to tackle the NG data in this way.

5. The preliminary examination of the NG data revealed that AA participants within cyberspace are more vocal and more overtly resistant of many of the elements of AA teachings and philosophies. Over years of attending meetings my own resistance to particular elements of AA was met by other members with lectures, condescension, and even at times, hostility and anger. In traditional meeting sites, one learns quickly not to make certain statements or to ask certain questions. However, within cyber AA particular issues and statements normally taboo within closed discussion sites are alive, well, and viable topics of discussion. Because many participants post under their real name (which itself contradicts one of AA's twelve traditions, and the formal rule of nondisclosure of last names), and identify their geographical location, it is problematic to suggest that anonymity provides the basis upon which members voice traditionally unpopular opinions about AA's teachings and philosophies. In any event, one can find clear forms of resistance within AA NG discussions, which normally do not get expressed freely within traditional AA meeting sites.

Annells (1996) notes, is a methodology rooted in symbolic interactionism. Over the years there has been some recent debate around whether Glaser and Strauss' original grounded project has been/is being adulterated by less perspicacious grounded "theorists" (Stern, 1993). As Wilson and Hutchinson (1996:124) note, "[c]orruptions of the [grounded theory] method in recent years place its credibility at risk."⁶ I do not wish to engage this debate here, but rather to elucidate the coding procedure used to "fracture" and "thematize" forms/sites of resistance within AA conversation/discourse. My coding procedure engages the flexibility allowed through grounded theory's "evolution" (Strauss and Corbin, 1994:273; Keddy et al, 1996) of research practice. Such flexibility, according to Strauss and Corbin (1994:273), "enhance the effectiveness" of grounded theory methodology in research, and allows for research "creativity" and more latitude than in the original version.

According to Strauss and Corbin (1990:23-24), "[a] **grounded theory** is one that is inductively derived from the study of the phenomenon it represents," using "a systemic set of procedures" (bold in original text). While this study in

6. This debate, in part, has surfaced through the parting of Glaser and Strauss subsequent to publication of the original *The Discovery of Grounded Theory: Strategies for Qualitative Research* (1967). As noted by Wilson and Hutchinson (1996), over the years teamed with Corbin, Strauss continued to develop and "evolve" the practice of grounded theory, while Glaser stood more resolutely committed to the original method which was/is much more closely aligned and complementary to quantitative analyses. For further contributions to this debate, see Robrecht, 1995; Wuest, 1995; Wells, 1995; Annells, 1996; Keddy, Sims, and Stern, 1996; Locke, 1996.

part, involves “systemic discovery” (Glaser and Strauss, 1967:3), I use the term “grounded discovery”, primarily because I only examine the data for possible avenues of further exploration within a more localized site of analysis. This differs from the original rigorously systemic, and seemingly prodigious analytic version, developed by Glaser and Strauss.

Nevertheless, as a grounded theory technique, data are open coded in order to “conceptualize” properties and categories (Strauss and Corbin, (1990:63)⁷ of possible forms of resistance to the AA discourse. Hundreds of full posts and entire **threads*** are examined closely. Categories and themes are identified as they are representative of resistance to AA philosophy/discourse. Expressly, the taken for granted is extracted from the dialogue/discourse. The analysis begins by adopting “fracturing” coding strategies, but the interpretive process is formulated, in part, upon the work of Foucault. As Miller (1997b:34) observes,

Foucauldian researchers scrutinize their data, looking for related assumptions, categories, logics and claims—the constitutive elements of discourse. They also analyse how different (even competing) discourses are present in social settings, how related social settings may involve different discourses, the political positions of setting members within different discourses, and the discursive practices used by setting members to articulate and apply discourses to concrete issues, persons, and events.

7. Strauss and Corbin (1990:63) assert that conceptualizing data—the breaking down process through which observations, sentences, and/or paragraphs are taken apart and attributed a discrete incident, idea, event, name, or labelled in such a way that it meaningfully represents something else—is the first step in any grounded theory analysis.

The data are examined in such ways as to trace embedded assumptions, and to identify discursively informed reality.

While the coding strategies of grounded theory produce useful directives in terms of themes and categories of resistance, my project, after fracturing the data, pays attention to deconstruction and recontextualization rather than putting the “data back together” (Strauss and Corbin, 1990). The grounded coding techniques foster only a portion of the greater theoretical discussion. Thus, the larger theoretical developments of this research are grounded only somewhat in harvested NG data. A larger organizing grounding component of this study lies in the emergent character of the study itself. That is, the research and analysis themselves emerged as texts were read and ideas were formed.

1.b. Sampling and Coding

The data collected from the NG discussions are at times nonlinear and fragmented. The preliminary test revealed that some threads consist of overt back and forth personal joking or friendly sarcasm between posters. While such exchanges may not be aligned neatly to the structural “hows” and “whats” being traced throughout the discourse, they are incorporated into the data analysis following ethnomethodology investigation techniques because friendly banter may reveal rules of social order and normative expectations of behavior. These friendly exchanges may also illustrate rules of AA talk, and may thus be situated within the larger project. Through threads, or specific topics/dialogue,

I follow specific NG participants as if their communications were gathered through traditional interviews or observation. I examine the text through the use of questions based upon the analytic categories engaged by the study.

1.c. Conversation and Discourse Analysis

Discourse analysis (DA) can involve both micro examinations of the linguistic dynamics of conversation, and more broad examinations of formal texts and documents (Potter and Wetherall, 1987). Similarly, conversation analysis (CA) may be used to identify rules of conduct and to trace the production of meaning within discourse. As Gubrium and Holstein (1997:55) observe, conversation analysis has emerged as a distinct form of ethnomethodological inquiry in that it seeks to “recover the structures that [undergird] interaction... [It's] aim is to document the systemic practices used to achieve social order” (Gubrium and Holstein 1997:55). Discourse analysis can be understood as an inclusive term that envelopes several methodological approaches that seek to examine characteristics of everyday talk (Potter, 1997:145-147).

On one hand, I am interested in drawing out the “hows” of “method talk” (Gubrium and Holstein, 1997) within the dynamics of the discourse and reality construction found within NG discussions—that is, the process by which the everyday and institutional talk are generated. At another level, I am interested in discerning the “whats” within the conversation. That is, what is being

constructed? What is occurring? In order to answer “what” questions, social interaction must be examined as it is mediated through culture (Gubrium and Holstein, 1997:14). Therefore, **indexicality**,* or cultural context need be made an integral component of the analysis. For purposes of this study, culture is largely contextualized through Alcoholics Anonymous.

A related question concerns the changing face of AA. That is, how exactly is Alcoholics Anonymous changing in the postmodern era? For example, a traditional principle of AA is to not pronounce one's date of sobriety, especially if one has been sober for a long time. The AA etiquette is to state rather that one has been around “the rooms” for “a few twenty-four hours.”⁸ Or members will say that whoever got out of bed earlier on a given day, has been sober longest, given the one-day-at-a-time principle/slogan. Yet, a common trend found within the AA NG is the mention of one's dry date in postings.⁹

2. Textual Readings of Authorized AA Literature

A variety of authorized AA texts are also examined for purposes, hidden assumptions and implicit meanings. The primary texts analyzed are *Alcoholics Anonymous* (1976a, aka *The Big Book*) and *Living Sober* (1975), and an assortment

8. “Around the rooms of AA” is a common saying used by members who speak of their recovery experience through AA discourse, or by members who refrain from overtly announcing a long length of sobriety within meeting sites. For example, in order to covertly announce that one has ten years of continuous sobriety the member might instead say during a meeting's discussion: “I have been around the room of AA for a good many 24 hours.”

9. This issue is examined more closely in Chapter Seven.

of promotional literature that is freely available at AA meetings in the form booklets or brochures, and may now also be available on the Internet. Two such pieces of promotion are entitled, “Is AA For You?” and “Do You Think You’re Different?”

Personal authors are never identified on any of the authorized AA literature, as this would be in violation of the eleventh tradition, which states that no member of Alcoholics Anonymous is to be identified by full name at the level of press, radio, TV or films.¹⁰ Not associating names with authorized published text reflects the AA spirit of anonymity. Its authorized text, then, resonates as the voice of AA, rather than as an individual/local voice of an AA member. The voice of an entity commands more authority than does the voice of an unidentified bodied speaker. Publishing AA texts anonymously retains the larger AA sovereignty, and serves to further reify the AA entity.

2. a. Textual Analysis

This research strategy examines discourse, but it is also concerned with the larger political discourse contained throughout authorized AA publications. The term “political” is drawn here from C. Wright Mills and early American radical feminism. For Mills (1959:10-11),

10. Nan Robertson, author of *Getting Better: Inside Alcoholics Anonymous* (1988), explains her own ethical dilemma around the 11th tradition as she remembers her meeting with Lois Wilson, wife of co-founder Bill Wilson. Robertson reports that Lois Wilson was supportive of Robertson’s plan to publish a book about AA, which would clearly identify Robertson by first and last name.

to understand the changes of many personal milieux we are required to look beyond them. And the number and variety of such structural changes increase as the institutions within which we live become more embracing and more intricately connected with one another. To be aware of the idea of social structure and to use it with sensibility is to be capable of tracing such linkages among a great variety of milieux. To be able to do that is to possess the sociological imagination.

For early radical feminists, the “personal is political” asserts that “political power cannot be conceived just as a matter of running for office or even about seizing power. It is about power as it manifests itself in society” (Weisstein and Booth, 1975:4). As a social institution, Alcoholics Anonymous is a product of—and is immersed in—a variety of social arrangements that come to define the everyday reality of its membership. As such, a link must be drawn to connect larger social arrangements of power to manifestations of individual member’s power within the social milieu of AA.

In his book *Interpretative Interactionism*, Norman Denzin (1989:10) insists that his style of interpretive research must only be engaged “when the researcher wants to examine the relationship between personal troubles...and the public policies and public institutions that have been created to address those personal problems.” While my critical emphasis breaks somewhat from the spirit of Denzin’s own project, one interpretive component of this study is the view that *alcoholism*, as a personal trouble, has been responded to both publicly and institutionally by Alcoholics Anonymous.

The AA talk found in the NG discussion is examined through the AA narrative. The analysis of textual discourse engages a deconstructive approach. As noted above, the textual deconstruction involves translating and decoding the texts for hidden assumptions and exposing implicit agenda. As Miller (1997a:77) notes, “texts are inextricably linked to the social contexts in which they are produced.” One important goal of this research is to highlight the political context of AA institutional text. “Demystifying institutional texts” holds the promise of deconstructing the “institutional authority” (Miller, 1997a:101) of Alcoholics Anonymous.

2.b. Analytic Categories

The analytic categories noted above—docile bodies, disciplinary practices, and dividing practices—are used, in part, to frame the discourse analyses. As sites of foci, these Foucauldian categories help to conceptualize and organize the larger examination which seeks to draw out technologies of power from within AA text and practices. In adopting these particular Foucauldian categories, I assume that Foucault's ideas around historically constituted modes of power are useful. That Alcoholics Anonymous, as both an organization and a discourse, holds and exercises power is also assumed.

2.c. Deconstruction

Through deconstruction I investigate the contradictions and assumptions contained by AA texts. The deconstructive project pays attention to what

knowledge is constructed, reinforced, excluded or concealed, and who is targeted, marginalized or excluded by AA textual discourse. A number of authorized AA texts are examined for implicit agendas and overt messages. The deconstruction traces authorized text for its informing and organizing members' practice, and for its larger doctrine and rhetoric.

3. Ethnography

A component of the study is drawn from ethnographical data. Personal on-site narratives are profiled throughout this project. To develop a critical analysis of the Alcoholics Anonymous narrative, ethnography is represented through interpretive interactionism, grounded theory, and autobiographical vignettes.

In recent years, some qualitative researchers have argued that autobiographical material is suited to ethnographic research, insofar as its incorporation meets particular criteria.¹¹ Others have argued for a research approach, characterized as "autoethnography", which is "the cultural study of one's own people" (Van Maanen, 1988), or taken further, turning an ethnographic gaze inward on the self (Ellis, 1996). According to Ellis (1996), ethnographers, while maintaining the ethnographic inward gaze, may look as well at the larger context wherein self-experiences occur. This project borrows

11. According to Norman Denzin (1996:200), these criteria include: (a) that it be well-crafted and engaging enough to draw the respect of respected literary critics and social scientists; and (b) that it should serve as a stimulus for social criticism and social change.

from these views. It is autoethnographic in style and assumes such a gaze. Denzin (1997:201) sees this ethnographic approach as representative of a “new social science.” Gubrium and Holstein (1995:46) see the recognition of subjects as “ethnographers in their own right” as a move toward a “new ethnography.”

3.a. Interpretive Interactionism

Interpretative interactionism tends to dismiss general theories and quantification, examining the ways by which persons produce local, practical, and accountable order, and sees society in terms of the present, the face-to-face, and the mediated interactions which connect one person to another (Denzin, 1992:22-24). As Denzin (1992:24) points out, one goal of interactionism is to study power, “micro-power relations that structure the daily performance of race, ethnicity, gender, and class in interactionist situations.” The personal is seen as being “connected to the structural, through biographical and interactional experiences” (Denzin, 1992:27). Notes Denzin (1992:24), “Interactionists don’t like theories which ignore the biographies and lived experiences of interacting individuals.” Hence, an interactionist expects sociology to recognize and embrace “the stories people tell one another about their life experiences” (Denzin, 1992:24).

At one level, the ethnographic component of this study examines, through interpretation, the ways by which AA members are connected to the larger AA structure, through examination of NG dialogue and AA talk within closed

meeting discussions. As Nowinski (1993:34) notes, the dynamics of a closed meeting site might be expected to differ from open meetings, “and for that reason alone they [are] of interest.” At another level, the ethnography draws upon autobiographical experiences. Thus, the study includes an ethnography grounded in cyberspace, traditional meeting sites, and self.

Denzin (1992:28) explains that a “person's location in the world of experience is organized into a body of localized, interactional practices which reify...relational-structural forms.” Such practices are often brought about in order to affect particular groups of persons, in terms, for example, of moral influences. Thus, Denzin illustrates a relationship between the level of interaction and the level of social structure. Through the use of Foucauldian analytic categories, I examine the system of knowledge and relationships of power within AA processes.

According to Lincoln and Denzin's (1994b) discussion of validity within qualitative research, the project at hand cannot be rendered valid on the basis of its deconstructive nature. The voices of the research “participants” will not have the opportunity to identify whether their subjectivities are accurately represented. Nor are the authors of AA authorized texts and AA talk able to assess whether my reading is incorrect while theirs is correct. Rather, this study recognizes that any given perceived accuracy within all qualitative research is necessarily subjective in its perception; thus accuracy ultimately and necessarily is problematic.

While Lincoln and Denzin (1994b:579-580) suggest that validity within qualitative research can be accomplished through “verisimilitude, or the ability to reproduce (simulate) and map the real,” they fail to determine the rightful/legitimate source of such validity. Thus, while validity is posed as a reconcilable and legitimate problematic of qualitative research, Lincoln and Denzin are unable to answer their own question of who, or to what, do qualitative researchers defer in order to judge the worth or accuracy of any given research description or analysis.

If the task of evaluating and determining validity within qualitative research lies outside of the intellectual or methodological scope of any given researcher, then social scientists will eventually be made superfluous by virtue of their spurious function. Such a discussion of “validity” disservices qualitative enterprises because positivist research criteria and terminology are inappropriately used to reference discussions around an entirely different way of “doing research” (Kirby and McKenna, 1989:32) within the social sciences.

I submit that issues around validity/accuracy within interpretive qualitative methods unnecessarily usurp energy that would be better served elsewhere. Perhaps a more legitimate task for qualitative researchers is to examine, through discourse, relations of power that lend themselves to human regulation. Understanding such power dynamics is analogous to understanding the nature of human interactions, relationships, and regulatory formulations. I am examining power structures of one grand narrative that while easily lending

itself to critique, is well protected. This reading, as a project of deconstruction, holds validity irrespective of its given foundational subjective basis.

Using an interpretative approach for this study is extremely viable because, given their level of indoctrination, AA members are largely unable to problematize the treatment process they view as life saving. Indeed, within AA, newcomers are warned that unless they “get the program” their only other life options are jails, mental institutions, or death.¹² This inability to escape the AA meta-narrative can be illustrated through my own paralytic fear of reading Fingarette's *Heavy Drinking* (1988) several years ago.

In one respect, this research requires me to achieve a state of *Verstehen*, that is the ability to grasp the constitutive meanings located within the site of study. As a participant, and often a proponent of AA, reaching a state of *Verstehen* is for myself, extremely moot and rudimentary. If *Verstehen* is a matter of “grasping intersubjective meanings and symbolizing activities that are constitutive of social life” (Schwandt, 1994:120), then I have already gone beyond the necessary analytic process which reveals such intersubjective meanings and symbols. I am both the describe”ed” and the describe”er”. In both cases I am an interpreter, though, through bracketing, the describe”ed” self situates the describe”er” as primary. James (1958) names this intersection of the

12. See also Kurtz (1982:44) who suggests that AA members, “confronted with the dire choice of abstinence, insanity, or death,” come to understand their human limitations.

researcher being both subject and participant “radical empiricism.” As Steffen (1997:105) proposes, “[o]ur understanding of others can only proceed from within our own experience.” As much as possible, however, my “local knowledge” and “native interpretation” (Denzin, 1989:109) must be suspended to engage the ethnomethodological project.

This study thus speaks to the “interrelationship between private lives and public responses” (Denzin, 1989:10). While I remain interested in locating and providing “thick description” of the “dialogical” AA talk (Denzin, 1989:107), the greater role of my interpretive project is to expose the micro and macro politics of authorized AA texts, AA talk, and the larger AA discourse. Denzin (1989:120) notes that “[i]nterpretation is the clarification of meaning.” Interpretation, moreover, “precedes understanding.” Rather than endeavouring to capture or restate the understandings of those and that which I investigate, I query the “native interpretations” and invert the meta-discourse. This research strategy represents the postmodern, Foucauldian influenced extension of the project. Meanings and symbols are examined and remain interpreted, but re-discerned through the inversion of the AA grand narrative.

In Denzin's subsequent reformulation of interpretative interactionism,¹³ an emphasis is placed on the critical. Cultural criticism, according to Denzin's

13. Denzin (1992:22) situates Foucault as a poststructuralist, while he locates himself as a postmodernist.

later work, can be developed through an “oppositional cultural aesthetic” (1992:15). This later approach is deconstructivist in design, as it:

(a) aims to...subvert the meaning of a text, to show how its dominant and negotiated meanings can be opposed; (b) expose[s] the ideological and political meanings that circulate within the text, particularly those which hide or displace racial, class, ethnic and gender biases and (c) analyze[s] how texts address the problems of presence, lived experiences, the real and its representations, and the issues of subjects, authors, and their intentionalities (Denzin, in Schwandt, 1994:125).

Accordingly, the goal is no longer merely to achieve *Verstehen*, but rather to reexamine and question the text as a site of power. That text contains and emanates dynamics of power is now, as a postmodern sensibility, assumed.

3.b. Autobiographical Narratives

As noted above, a component of this study is centered upon ethnographic data. During the earlier part of my sobriety I attended a multiplicity of meetings ranging from two to four meetings per week.¹⁴ After approximately four years of regular meeting attendance, I dropped to about one meeting every two weeks. Subsequently, my meeting attendance dropped significantly. My current attendance ranges one or two meetings every four to six months. One member snidely commented to me recently that I “go to meetings, whether [I] need them

14. AA adherents advise newcomers to attend ninety meetings in ninety days, as proposed by AA itself. As a member acquires a respectable period of recovery, say after two years or so, it is acceptable for the member to attend at the very least, one meeting per week, usually attended at the member’s home group.

or not.” Such comments serve to shame a member into attending meetings more often and to highlight the sobriety risked by not attending meetings.

I attend meetings today as a matter of program expectation. When visiting outside of Ottawa, I like to drop in to formerly attended meetings to see, if still around, old friends and acquaintances. While I am beginning to question whether meeting attendance is an integral factor to staying sober, I have otherwise learned the AA discourse well. When I do attend meetings, I invariably suggest “the importance of meetings” as a discussion topic, with the hope that someone will say something profound to convince me that I should be attending meetings more frequently.

In any event, a component of this study is grounded in autobiographical vignettes, which illustrate a variety of discursive practices that have placed me at the centre of larger AA discourse and relations of power. These vignettes are used in lieu of drawing upon explicit dialogue from AA closed discussions. In placing myself at the center, I avoid using other AA members to examine socio-politics and AA discourse. In this way, others are situated peripherally. The personal vignettes demonstrate very clearly that at times AA talk and group dynamics can be extremely unpleasant for members who question the AA Gaze. When applied to the study's analytic categories, the vignettes, or local narratives, manifestly reveal dividing practices and disciplinary power within Alcoholics Anonymous. Demonstrating that there are particular methods and

codes of behavior by which reality is constituted and constructed within AA, moreover, represents the ethnomethodological element of this analysis.

ETHICAL CONSIDERATIONS AND QUESTIONS

If, as Alcoholics Anonymous (1979:97) states, the foundation of my personal recovery is in the helping of others, this study, given its critical deconstructive project, may be situated as precariously antithetical to my own AA program of recovery. On the other hand, exposing practices of power must be seen as helpful in achieving a richer, fuller knowledge of AA. Exposing power may also help to understand better why Alcoholics Anonymous does not speak to all persons. Thus, my earliest ethical consideration regarding this study was in response to this possible threat to my own recovery. This ethic required me to work through my indebtedness to AA and to recognize that while helping me, its inherent relations of power serve as viable and important sites of analyses. Ultimately, enjoying sobriety therefore is not antithetical to my tracing technologies of power within AA.

The second ethical question with which I grappled was the eleventh tradition. This tradition requires me, as a member of AA, to be anonymous at the level of press, radio, TV and film. I considered reporting the research without disclosing my personal involvement with AA, but ultimately decided that my own experiences more than shape the “mundane reason” under investigation.

Indeed, they position me at the center of this study; they reveal my interest and motivation for the study and enrich the analysis of the data.

To conceal my own *alcoholism* would be to cloak my own voice and to deny my intimacy with the AA program. Robertson (1988:18), an AA member also writing under her full name, concluded that her work is “much more authentic and believable” in revealing her affiliation with AA. As she resolves: “I think the disclosure of my own affiliation should be a matter between me and my own conscience.” Furthermore, though using our full names both Robertson and I speak only for ourselves; we do not pretend to speak as the “voice” of Alcoholics Anonymous. Traditionally, AA’s notion of anonymity served to circumvent stigma of the alcoholic.¹⁵ The eleventh tradition is also intended to prohibit individual members from speaking as, and through, the authority of Alcoholics Anonymous. That is not my intention here.

While this reading is critical in style, I have learned my program and the AA doctrine well. That I conduct a theoretical analysis does not discount the value and power of AA; rather it draws out the shifting and discursive dynamics of one grand legacy of modernism. The changing face of AA is examined

15. According to Fainzang (1994), alcoholism is still stigmatized. Indeed, she (1994:341-544) asserts that “Alcoholics Anonymous wants to remain anonymous because they are ashamed...The fact that the members of AA remain anonymous and grant the subject the sole identity of ‘alcoholic’ means that the individual remains at the stage of a sick person and that there is no passage.” In contrast, Denzin (1987b:87) sees AA alcoholics as engaging “a reverse stigmatization of self”, wherein they accept their alcoholism, are proud to be in recovery, and take pride in carrying the message to others.

through a postmodern lens. Given that my personal knowledge holds the potential of enriching this discussion, I have chosen to “de-anonymize” myself. To not reveal myself poses a larger ethical quandary.

A third ethical consideration involves my ethnographic site of analysis—the AA discussion groups, some of which are “closed” meeting sites.¹⁶ Through the years I have collected a great deal of “inside” information regarding AA philosophy, group dynamics, and personal recovery processes. That I contribute to group discussion is not so much my concern, but rather that I draw from the larger dynamics of closed discussion. As a member of Alcoholics Anonymous I am legitimately entitled to attend closed discussion groups. I nevertheless struggle with whether the content of closed discussions is sacred, and if so, do I, as a member, or I, as a researcher, have the right to thread some of these discussions through my public work? I address this question/concern by examining autobiographical vignettes through the reading.¹⁷ Thus, rather than

16. AA meetings are either discussion or speaker and defined as open or closed. An open meeting welcomes all persons, irrespective of one’s classification of alcoholic. A closed meeting excludes all persons other than those attending by virtue of the third tradition: having a “desire to stop drinking.” A closed discussion meeting is open only to members who wish to engage recovery practices through discussion, self-reflection, sharing, and authorized AA texts, most notably the *Big Book* and *The Twelve and Twelve*. As an AA member I am privileged to have access to all forms of meeting sites.

17. I had developed a few autobiographical accounts throughout my years in AA, before entering into this research. Later, as the research topic became more defined, I began taking notes after meeting attendance. However, only one of the three vignettes was created subsequent to the development of this research.

restate the literal dialogue/discourse of others in group, I draw upon my own experiences as a source of analysis.

At times I also trace themes and common ideas which surface in discussion, but particular groups or speakers are never identified. The importance of the vignettes becomes contextualized through a larger discussion of socio-politics. They represent only one part of the larger research project. All three vignettes are drawn from different meeting sites. Anonymity is ensured through using the autobiographical narratives.

A fourth ethical consideration arose with my decision to utilize data from the AA NG.¹⁸ While garnering data from such sources is admittedly treading new water in terms of data collection, the **discussion forums*** are publicly accessible by anyone whose computer is Internet capable. As one poster observed himself in 1994, NGs are “public” sites (in Denzin, 1995:254). (Appendix 1-A provides a full discussion around the use of NG data as sources of data, and addresses related issues specific to this research.)

In recent years, moreover, several researchers have adopted public NG discussions as prime sources of data, without identifying individual posters, thereby maintaining anonymity (e.g., Coomber, 1997; Denzin, 1995). Other

18. Admittedly, the use of cyberspace material and capturing forms of data from Usenet discussion groups is treading new research ground. There remains little discussion around the ethics of such data capture, although the practice is becoming increasingly popular. Interestingly, a book published by McKie entitled *Using the Web for Social Research* (1997), pays absolutely no attention to possible ethics surrounding exploitation of NG discussion as a source of data.

researchers are now exploring the possibilities of locating research subjects/respondents, otherwise difficult to secure (e.g., illicit drug dealers), through defined NG FAQs¹⁹ (Coomber, 1997).

A methodological ingredient of this project is discourse/conversation analysis. The ethical impasse of gathering specific conversational data from closed AA discussion meetings required that I locate an alternative data source for the discourse analysis component of the study. Public NG data provide an excellent vehicle through which to harvest dynamics of conversation already public and freely accessible. The AA NG which I discovered (quite accidentally, I might add), provides an extremely rich and efficient database. Given that many NG participants post by their full (first and last) names, coupled with the fact that most NG postings are automatically archived by Deja News,²⁰ the data I draw from the Internet may in some cases be accessed by anyone who diligently seek them out. Thus, the data used for the discourse/conversation

19. FAQ is an acronym for "frequently asked questions", which gives rise to a NG's name and identifying features that differentiate it from others. The FAQ, for example, provides information to potential posters as to what topics may be discussed, the usual forum of discussion, and whether advertising is allowed. For a copy of the Alt.Recovery.AA NG FAQ see APPENDIX 1-B.

20. Deja News is a web **browser*** search engine that offers users 1000s of Usenet discussion groups. Deja News normally archives all contributions to the NG discussions. Once archived a post may only be discarded through Deja News' Nuke feature. Recently Deja News was purchased by Google, which has announced (2001) that it will offer more than 500 million archived messages for users' searching and browsing convenience: "with more than 500 million individual messages and growing fast, Usenet and its thriving community is one of the most active and valuable information sources on the Internet."

analysis component of the study may be available to other Internet users. Given the potential accessibility of these data, I am unable to guarantee absolutely that an interested party will not be able to find specific archived posts and threads; though locating a specific quote by a particular poster would be difficult and highly unlikely. Consequently, I cannot guarantee anonymity.²¹ As much as possible, however, I do not attribute definable characteristics that might identify NG participants. All names and locations are altered in an attempt to avoid easy identification of particular members within the NG community. In a further attempt to protect the identity of posters, I do not disclose specific dates or time frames of data collection.

According to SSHRC (Social Sciences and Humanities Research Council of Canada), researchers must pay close attention to ethical concerns when working with human “subjects” as sources of “raw or unformulated data” (1998). SSHRC cautions, moreover, against “deception” in research. Both of these general caveats serve as ethical parameters for all research conducted within the Humanities and Social Sciences in Canada. These precautions are heeded in this study. In the past there has been unethical research conducted in Alcoholics Anonymous (e.g., Lofland and Lejeune, 1960). For these and other reasons, I

21. Some news readers now allow discussants to “x-archive” their posts. This means that once the post has moved off the active NG board it is automatically nuked from cyberspace. Many Alt.Recovery.AA participants utilize the x-archive function, which when used, prevents interested parties from searching out particular posts. In terms of research ethics, x-archive posts, once removed from the live NG, assures anonymity of a particular poster.

take precautions against drawing upon the anonymity or the sacredness of personal conversations occurring in the natural state of closed AA discussion. Furthermore, a close reading of the “Tri-Council Policy Statement” suggests that as a research enterprise grounded largely in NG data, formal Research Ethics Board (REB) approval is unnecessary.²² At this time, therefore, the Canadian Tri-Council does not define ethical guidelines for research conducted on and with NG data.

In locating a freely accessible and public source of data, I am not violating or infringing upon the sacred nature of closed discussion conversation. Thus, I avoid ethical tensions that might otherwise be a factor in research on Alcoholics Anonymous. As a long time member of AA, I attend meetings and legitimately engage in closed discussions. By threading AA discourse, AA talk, and AA group dynamics through myself, and not through other group members, I make use of data without compromising the confidentiality and trust of other members.

EPISTEMOLOGICAL QUESTIONS

This research draws attention to the question of who, or what, can be a knower, and who, or what, can establish knowledge. As a meta-narrative, the power of Alcoholics Anonymous is observed. I question representations of alcoholism by which the disease model largely overpowers other discourses that

22. See APPENDIX 1-A for a more in-depth discussion of the Tri-Council’s Policy Statement and its failure to address ethical issues involved in the use of IT data.

socially respond to patterns of alcohol consumption. Roizen (1987) too has argued that the power dynamics of the AA disease model has pervaded social thinking around drinking.

This study also differentiates the notion of treatment from that of recovery. The truths contained by, and proposed, through the larger discourse of Alcoholics Anonymous may be very different from the truths assumed within the everyday world by AA members. While the truths/fictions of treatment discourse and AA recovery talk are inextricably intertwined, this study seeks to distinguish the methods by which everyday reality becomes constituted through, and by, AA texts and discourse. The study also problematizes the power of the disease model. There are two somewhat separate discourses at work here: the medical/disease model of *alcoholism*, and the Alcoholics Anonymous influential adoption of that model. That *alcoholism* is, indeed, a primary disease is questioned. Importantly, if the primacy of *alcoholism* as a disease is threatened AA truth stands to be dislodged. More progressive understandings and truth around alcoholism, treatment, and parallel recovery processes may in time be deemed necessary.

CHAPTER TWO

THEORETICAL FRAMEWORK

“One of ethnomethodology’s contributions to understanding of social life is its capacity to produce a deep wonder about what is often regarded as obvious, given or natural. Whether it be the interpretation of documents, the utterances of ‘uh-huh’ or the flow of everyday interaction, ethnomethodology has provided a way of questioning which begins to reveal the richly layered skills, assumptions and practices through which most commonplace (and not so commonplace) activities and experiences are constructed” (Pollner, 1987:ix).

This chapter outlines the study’s theoretical bases, including: (a) an overview of the ethnomethodological project as advanced initially by Garfinkel and then subsequently developed and/or clarified by Pollner, Heritage, and Gubrium and Holstein (among others); (b) an explanation of “postmodern sociology”; (c) an overview of “docile bodies”; and (d) an examination of Foucault’s analytic categories of disciplinary power and pastoral power. As noted previously, one goal of this research is to identify a workable synthesis of ethnomethodology and postmodern sociology.

The parameters of the study are guided largely by the discourse, text, and members’ practice under examination. The study is, in part, situated within an ethnomethodological framework with a postmodern sensitivity, through which a specific reading takes place. The methodological parameters are delineated through the actual techniques of gathering data and the interpretive

nature of the analysis. As well, the following theoretical material informs both the actual research methods and the larger discussion around alcoholism.

While an ethnomethodological approach attempts to unravel the methods by which group members describe and constitute their everyday practices, a postmodern approach may be more inclined to explore and identify the discursive practices and disciplinary power which underscore and inform members' own descriptions. As observed by Diamond and Quinby (1988:xiii), explanation within Foucauldian projects "is necessarily partial, blending with interpretation's capacity to illuminate, clarify, and decipher."

This project extends ethnomethodology into the postmodern, and postmodern discourse. As methodological approaches, the two frameworks are largely compatible and complementary (see also Miller, 1997b). Gubrium and Holstein (1997:113) point out that in attempting to balance analytic attention to the ethnomethodological *hows* and the *whats* under examination, a discursive "space is provided for a kind of postmodern concern for representation, authority, difference, and diversity."

A. ETHNOMETHODOLOGY

As a concept, the term "ethnomethodology" can be defined as "an organizational study of a member's knowledge of his ordinary affairs, of his own organized enterprises, and where that knowledge is treated by us as part of the same setting that it also makes orderable" (Garfinkel 1974:18). Garfinkel

(1974) explains the origin of the concept as coming to him through reviewing and analyzing transcripts evidencing particular analytic methods used throughout a Wichita jury deliberation in 1954. His specific interest was located “in such things as juror’s uses of some kind of knowledge of the way in which the organized affairs of the society operated—knowledge that they drew on easily, that they required of each other” (Garfinkel, 1974:15).

Garfinkel’s (1974:16-17) understanding of “Ethno” refers to “the availability to a member of common-sense knowledge,” while the appended “Methodology” refers to “adequate methods” for dealing with social matters in that “the good sense of somebody’s inquiries is for them observable and notable.” Earlier language used by Garfinkel (1974:17) to embody the ideas contained by “ethnomethodology” included “accounting,” “accountable” or “account” to refer to the “availability to a member of any ordinary arrangement of a set of located practices.” Thus, as a merging of “accounts”, and having available common-sense knowledge, Garfinkel sees ethnomethodology as a way of examining members’ methods for producing social matters and organizations of reality.

Maynard and Clayman (1991) observe the current diversity and heterogeneity of ethnomethodological pursuits.¹ They note that the general

1. Garfinkel stated in 1974 that the term “ethnomethodology may have been a “mistake”, as since its genesis it has turned into a “shibboleth” in that “ethnomethodology” had over time “acquired a kind of life of its own,” often falling short of his original intention of the concept (Garfinkel, 1974:18).

trend has been to characterize ethnomethodology in three primary ways: (1) that it has been seen as being concerned with how persons construct meaning; (2) definitions of situations have been seen as emerging from the ways by which persons announce and impart shared meaning; and (3) that it is understood as having emerged as a critique of traditional social theory and method. While these traditional understandings are fair characterizations of the overall method, ethnomethodology, as rooted in phenomenology, has also furthered understandings of indexicality, conversation analysis, mundane reason, sociology of cognition, and institutional ethnography (Maynard and Clayman, 1991).

As an ethnomethodological approach, this study, in part, rests upon “bracketing” or the suspension of personal experience and knowledge in order to achieve distancing from the life world under examination. In this case, the life world consists of AA authorized text, AA discourse, and members’ practice within Alcoholics Anonymous. Importantly, however, that life world is an inextricably, intimate source of my own reality. Separating my own assumptions of AA, then, may be especially challenging given my personal involvement. What is more, to dissect and critique the AA narrative could potentially threaten the assumed need for abstinence as I position myself outside of the grand discourse which aided in my addressing earlier personal patterns of alcohol consumption. Thus, I must ultimately transcend the reality which I seek to describe, despite the fact that the complexity of that reality is integral to my own

“mundane reason” (Pollner, 1987). Such a complexity represents a “crisis” (Pollner, 1987:53), and underscores a strategy of ethnomethodology designed “to analyze mundane reason in such a way as to understand its organizational contribution to inquiries of every kind, even those involving itself” (Maynard and Clayman, 1991:392). Throughout this research, my mundane reason is integral to, though as much as possible, suspended from the organizational conditions under study.

Maynard and Clayman (1991:338) point out that ethnomethodology investigates the ways by which social actors are embedded within structures of social action. As Gubrium and Holstein (1997:45) note, an objective of ethnomethodology is to describe the ways in which order can be traced and “made visible through members' descriptions and accounts.” Ethnomethodology further focuses on the processes by which members invoke rules to describe, constitute, and align their activities as rational, coherent, and orderly (Zimmerman, 1970). Through situating Alcoholics Anonymous as the site of analysis, an ethnomethodological approach can be used to discern and explicate “recovery talk” as it constitutes and aligns members' order within everyday AA.

In an earlier study, Wieder (1974) captures “an explicit moral order,” or a “set of maxims” through the placement of informal rules and convict codes of conduct in a halfway house. Wieder demonstrates that ethnomethodology, as a qualitative enterprise, is better suited than deductive theory in capturing and

illuminating the subtle nuances otherwise implicit in the research site. As he explains:

The code, and by extension any other normative order, cannot be an adequate explanation of patterns of action under the requirements of a deductive theory, because in its explanatory uses, situations, actions, and rules are not independent elements. The utterances and behaviors upon which [a] normative order is based have no self-evident or self-explanatory sense in isolation from one another (Wieder, 1974b:170).

I similarly reveal a normative “inner structure of social reality” (Wieder, 1974b:159) through identifiable normative rules and codes of conduct promoted by AA through AA members. Such normative expectations will be shown to reflect and institute shared allegiance to the AA meta-discourse.

The value of ethnomethodology here lies, in part, in capturing “indexical expressions”. Heritage (1984:143) points out that Garfinkel uses this term “to note that the sense of ordinary descriptive terms is powerfully influenced by the context in which they are uttered.” As Wieder (1974b:161) suggests:

To say that the pieces [are] indexical expressions is to say that their meaning [is] relative to such contextual matters as (a) who [is] saying it...; (b) to whom it [is] being said...; (c) where it [is] being said...; (d) on what kind of occasion it [is] being said...; [and] (e) the social relationship between teller and hearer.

Earlier, Garfinkel (1967:11) explained that indexical expressions and indexical actions are “ordered properties” that “consist of organizationally demonstratable sense, or facticity, or methodic use, or agreement among ‘cultural colleagues’.” The ordered properties of indexical expressions, moreover, “are ongoing

achievements of the concerted commonplace activities of investigators” (Garfinkel, 1967:11). Thus, as this examination of Alcoholics Anonymous shall reveal, the inherent normative order of the treatment modality is necessarily ordered and codified within a specific ‘cultural’ context. This cultural context is played out through reproduction and reconstitution of AA discourse by members’ talk and practice.

While both the twelve Steps and twelve traditions of AA serve to typify, define and underscore members’ and program normative expectations, the former serve to inform and influence members more particularly at the personal—and moral—level. The twelve steps, twelve traditions, and other authorized AA literature, can be examined for the code(s) of AA by which members’ recovery efficacy is constituted through larger group discursive practices.

In much the same way as Wieder (1974a) demonstrates in his study of a halfway house, social behaviour within AA is rule-governed and closely scrutinized. Within this study, normally overlooked norms and rules of behaviour are closely examined. The twelve steps of AA serve members as a *method* (1974a:175) of regulatory behaviour. The ethnomethodological project calls into question the “ordinary reality” (Smith, 1987:6) of the influential social institution of Alcoholics Anonymous.

B. POSTMODERN SOCIOLOGY

Given that this research, in part, looks through a postmodern lens, and embraces what Denzin names a “postmodern sensitivity”, an explanation of “postmodern sociology” is in order. While some writers distinguish between a sociology of postmodernism and postmodern sociology, the more appropriate organizer for this research rests in postmodern sociology; given that advances in qualitative methodologies have now moved social science into postmodernist analyses and critique. The *Handbook of Qualitative Research* (Denzin and Lincoln, 1994), for example, traces an array of postpositivist and interactionist research methods, methodologies, and questions that have surfaced in the postmodern world. Moreover, the issue of self has now surfaced as an integral question to qualitative research. Poses Richardson (1994:518): “qualitative writers...have plenty to say as situated speakers, subjectivities engaged in knowing/telling about the world as they perceive it.”

Postmodern sociology presupposes a postmodern condition. In Bauman's view (1992:42), “postmodern sociology can best be understood as a mimetic response to this condition.” A postmodern sociology abandons and transcends positivist discourse formations. Developments in modern knowledge and culture have begun to dissipate and give way to the eventuality of postmodern sociology. Methods of inquiry, conceptual practices, discursive theoretical and methodological languages, and principles of strategic organizations and power arrangements become transformed within a postmodern sociology. Through

postmodern sociology, positivist epistemological privilege is demised. As Seidman (1992:59) notes, to claim epistemic privilege is to claim social authority of discourse. To this end, this critical analysis serves to challenge the epistemic privilege and the presumed objectivity of the AA discourse.

Simply put, postmodern sociology can be understood as postmodernity positioned socially. As society and culture change within the postmodern so too do the social sciences transform. As one leads to the other, representations of postmodernity through progressive research strategies lead to postmodern representations. The newly developing configuration of postmodernity becomes itself, both the cultural subject and the sociological inquiry of investigation. In this way, the cultural shifts and changes within postmodernity give rise to new methods of investigation and new foci of analyses within the transformed cultural climate. As society in the postmodern mutates, other social and cultural elements follow, including the methods adopted and the discipline of sociology itself. The state of postmodernity becomes in theory transcendental to traditional methods and analyses previously devoted to universal explanations and belief systems, through which order and normalized social theory as previously understood will vanish. Thus, within postmodern sociology, the positivist meta-discourse no longer holds ultimate authority. In time, therefore, the authority of the AA narrative may fade.

At its least autocratic, or “affirmative postmodernism” (Rosenau, 1992), postmodern sociology seeks to include in research endeavors recognition and

incorporation of personal partiality, biographical, and autobiographical local narratives. Social narratives in the postmodern are “temporally and spatially located,...event-and nation based, and densely contextual” (Richardson, 1991:175). At its most extreme, or “skeptical postmodernism” (Rosenau, 1992), postmodern sociology challenges, or overtly denies, the existence of truth effected outside of the written text. Thus, legitimate knowledge can be found no further than specific texts addressing issues particular to the author's personally mediated and circumscribed understanding of truth. While postmodern sociology transcends previous traditional strategies of sociological knowledge building, paradoxically it also invites all fashions of knowledge creation and provides discursive space for all text insofar as power differentials established on the basis of truth claims no longer exist. Thus, traditional empiricist, positivist sociology becomes diminished while simultaneously maintaining and utilizing methodological developments in qualitative sociology.

Some writers (Bauman, 1992; Calhoun, 1992; Nicholson, 1992; Seidman, 1991, 1992) have observed that prior to the emergence of postmodern sociology positivist methodology stood dominantly resolute against other forms of inquiry. In Laurel Richardson's (1991:173-174) view, persons whose power positions have been supported by positivist truth would resist postmodernism. It follows that social institutions supported by positivist notions of truth, for example, Alcoholics Anonymous, would also resist postmodernism and the analyses that postmodern-influenced research affords.

Seidman (1992:49) argues that postmodernism ought to “change from a discipline-centered social inquiry whose reference point is debates in specialized areas to contextualized local narratives that address public conflicts.” In this way, knowledge, while parochial, continues to be developed having as its goal the implementation of social change. The ultimate hope of postmodernism, according to Seidman (1991:190), is the emergence of “postsociological social discourse.” Thus, grand or meta-narratives necessarily disappear. The emergence of a postmodern sociology stands as a reflection and a reminder of the postmodern era, which positions postmodern sociology tenuously perhaps only in the present.

Recent advances in research methodologies, or this “fifth moment” (Denzin and Lincoln, 1994b:581), may well be a large part of the transitional character/nucleus of the move further into a postmodern sociology. This research study may thus be characterized as falling within the realm of postmodern sociology as it too poses a theoretical and methodological break from modern sociological strategies of knowledge creation.

This research can then be defined as postmodern through its critical examination of the Alcoholics Anonymous meta-narrative and its deconstruction of AA texts. As Lemert (1992) notes, postmodern inquiry frequently looks to critical analyses to reveal problematic conceptual closures that force us to attend to the socially constitutive aspects of discourse. That is, through critique postmodern projects help to edify the implicit social/political processes and

power intrinsic to discourse. This study of Alcoholics Anonymous, being through a postmodern lens, demonstrates how the site of analysis as a discourse, and the analysis itself surface through a postmodern sociology.

In the way that postmodern discourse problematizes grand narratives, this study illuminates and questions the established power base and the normalizing gaze of Alcoholics Anonymous. Personal truths, including interpretive truths, gained and generated through intimate experiences within this narrative are embraced as an authentic autoethnographic gaze. As reflective of “a new social science” (Denzin, 1997:201), this research enterprise interrogates positivist meta claims to truth and furthers a postmodern project. At one level, knowing and “truth” can both be understood as surfacing from, and being situated within, more localized narratives and gazes. At a further level, through this research, the “truth” of one grand narrative becomes less engaged.

MOVING ETHNOMETHODOLOGY INTO THE POSTMODERN

The above discussion of ethnomethodology and postmodern sociology poses that the two theoretical systems are both complementary to one another and challenge the larger meta discourse of positivist social science. As indicated, both ethnomethodology and postmodern sociology serve to dislocate objectivity and situate subjectivity and cultural relativity as central to social arrangements. The deconstructive project of postmodernism also parallels the

ethnomethodological goal of seeking implicit subtleties and actors' social methods at a micro (to macro) level of analysis.

Symbolic interactionist roots also strengthen the study's relationship with postmodern sociology. As Lemert (1992b:ix) points out, "Symbolic interactionism with its decided interest in language, and pragmatism, with its deep structural commitment to view knowledge as always close to the workings of the world, would seem to be the natural kin of any postmodern social theory." The merging of the two frameworks thus serves this analysis of Alcoholics Anonymous as constituting a grand discourse of addiction and recovery.

C. FOUCAULT: DOCILE BODIES

Foucault (1979:136) proposes that "[t]he classical age discovered the body as object and target of power." For Foucault (1979:137) particular methods

made possible the meticulous control of the operations of the body, which assured the constant subjection of its forces and imposed upon them a relation of docility-utility [which] might be called disciplines.

Disciplines, according to Foucault (1979:137) "became general formulas of domination." Foucault (1979:137-138) defines such a mechanics of domination:

The historical moment of the disciplines was the moment when an art of the human body was born, which was directed not only at the growth of its skills, nor at the intensification of its subjection, but at the formation of a relation that in the mechanism itself makes it more obedient as it becomes more useful... What was then being formed was a policy of coercions that act upon the body... The human body was entering a machinery of power that explores it, breaks it down and rearranges it.

Foucault's proposals of power are useful to a discussion around disciplinary regulators inherent in Alcoholics Anonymous, as members become more obedient to the discipline imposed through its discourse and more useful to the power that rearranges them.

Discipline, moreover, produces a "policy of coercions", which, according to Foucault (1979:138), act upon the body in calculated manipulation:

Thus discipline produces subjected and practiced bodies, 'docile' bodies. Discipline increases the forces of the body; on the one hand, it turns it into an 'aptitude', a 'capacity', which it seeks to increase; on the other hand, it reverses the course of the energy, the power that might result from it, and turns it into a relation of strict subjection... [D]isciplinary coercion established in the body the constricting link between an increased aptitude and an increased domination.

Somewhat paradoxically, then, discipline incites on the one hand, restriction, while on the other hand, it increases aptitude or capacity for the object of the discipline. As I discuss later, Alcoholics Anonymous produces its own "policy of coercions" that act upon the bodies of its members and former members. And just as disciplines "[o]n almost every occasion...were adopted in response to particular needs" (Foucault, 1979:138), Alcoholics Anonymous similarly emerged in response to particular needs around political economy both within the workforce and the family. That is, if individuals are not sober they tend not to be provided space within work sites by employers to earn income, nor are they always free to drink alcohol as desired within the familial environment (see also Boyd, 1991:147-148; Room, 1997:57). As docile bodies, such individuals

are restricted in order to promote their capacity to work or function for another or for self. In another way, docility emerges through their integration into new systems of control (Ramazanoglu, 1993:22). As a product of modernism, Alcoholics Anonymous represents and constitutes a contemporary system of control.

D. FOUCAULT: TECHNOLOGIES OF POWER

In large part, the conceptual organizers for this study rest in Foucauldian analytic categories around technologies of power, primarily disciplinary power and pastoral power. According to Foucault, one result of disciplinary power lies in the engendering of docile bodies. In the discussion below I introduce and discuss these three analytic categories through the work of Foucault as a means of framing mechanisms of power inherent in AA's construction of, and solution to, *alcoholism*.

DISCIPLINARY POWER

According to Foucault, disciplinary power is established upon hierarchical observation, normalizing judgement, and examination. Foucault (1979:170) writes that “[d]iscipline ‘makes’ individuals; it is the specific technique of power that regards individuals both as objects and as instruments of its exercise.” Foucault frames his discussion around disciplinary power in part through “the means of correct training” as viewed through educational and pedagogical strategies. A close look, however, at the educational system

operated by Alcoholics Anonymous' twelve step program reveals that his concept of disciplinary power is a useful theoretical tool for elucidating dynamics of power within this organization. As Foucault (1979:170) suggests, successful "disciplinary power derives...from the use of simple instruments; hierarchical observation, normalizing judgment and their combination in a procedure that is specific to it, the examination." Below I outline these elements of disciplinary power as they can later be related to the creation and facilitation of discipline within Alcoholics Anonymous.

Hierarchical observation, says Foucault (1979:170-171), is one mechanism by which discipline is coerced. For Foucault, hierarchical judgments originated through specific architectures that allow/ed efficient observation by those in positions of power over others. Eventually and ultimately, however, hierarchical observation results in regulation of the self in that the soul becomes "the prison of the body" (Foucault, 1979:30). Observation then gives rise to a "machinery of control" because the observers come to serve as "observation machines" (Foucault, 1979:173). As self-regulation accedes, the need for, and the requirement of, specific architecture dissipates.

Disciplinary practices, moreover, become situated in the Gaze; that is, the power of the Gaze is positioned upon and regulated through a hierarchical order. According to Foucault (1979:173), the "perfect disciplinary apparatus [makes] it possible for a single gaze to see everything constantly....: a perfect eye that nothing would escape and a centre towards which all gazes [are]

turned.” The gaze is mapped by “specialized personnel” who are “constantly present and distinct” (Foucault, 1979:174) from those upon whom the gaze is intended.

Normalizing judgment resonates through the rewards and consequences associated with the judgment of discipline. According to Foucault (1979:181), “[d]iscipline rewards simply by the play of awards, thus making it possible to attain higher ranks and places; it punishes by reversing the process.” Says Foucault (1979:184), “the power of normalization imposes homogeneity; but it individualizes by making it possible to measure gaps, to determine levels, to fix specialities and to render the differences useful by fitting them one to another.”

One’s ability to examine another carries with it tacit, yet immense, power.

As Foucault (1979:185) explains:

The superimposition of the power relations and knowledge relations assumes in the examination all its visible brilliance... For in this slender technique are to be found a whole domain of knowledge, a whole type of power.

Foucault (1977:119) observes, moreover, that what makes power hold and “what makes it accepted, is...the fact that it doesn’t only weigh on us as a force that says no, but it traverses and produces things, it induces pleasure, forms of knowledge, produces discourse.”

PASTORAL POWER

Foucault (1988:59) proposes that pastoral power is one technology of power. Unlike disciplinary power which divides and discriminates, the goal of

pastoral power “is to constantly (sic) ensure, sustain, and improve the lives of each and every one” (Foucault, 1988:67). Rooted in Christian tradition, Foucault (1988:69) explains that “Christian pastorship implies a peculiar type of knowledge between the pastor and each of his sheep”:

This knowledge is particular. It individualizes. It isn't enough to know the state of the flock. That of each sheep must also be known... the shepherd must be informed as to the material needs of each member of the flock and provide for them when necessary. He must know what is going on, what each of them does—his public sins. Last and not least, he must know what goes on in the soul of each one, that is, his secret sins, his progress on the road to sainthood” (Foucault, 1988:69).

The theme of pastorship is represented in the Christian west through “the statesman” (Foucault, 1988:66).

Furthermore, notes Foucault (1988:69), Christians are required to deliver themselves from willfulness. Ultimately, one's willfulness is conceded to the larger pastoral power, which requires followers to turn their “will” and their “life” over to the care of God.² As Foucault (1988:69) asserts, “the sheep must permanently submit to their pastors.” One form of submission occurs through confession.

Confession is believed to serve redemption and purification (Foucault, 1978:62) as much as it serves to guide one's conscience. Further, the art of

2. I capitalize “God” only because it is written so in AA's twelve steps and all authorized literature. Though authorized AA text asserts that members' choice of a higher power may be constituted agnostically, capitalization suggests a contradiction.

“confession has spread its effects far and wide” (Foucault, 1978:59). Observes Foucault (1978:58), “[s]ince the Middle-Ages..., Western societies have established the confession as one of the main rituals we rely on for the production of truth.” Confession then

plays a part in justice, medicine, education, family relationships, and love relations, in the most ordinary affairs of everyday life, and in the most solemn rites; one confesses one’s crimes, one’s sins, one’s thoughts and desires, one’s illnesses and troubles, one goes about telling, with the greatest precision, whatever is most difficult to tell (Foucault, 1978:59).

Indeed, says Foucault (1978:59), “Western man has become a confessing animal.” At the heart of truth and confession are merged relations of power.

AA’s confession requisite adheres to the dictum that where there is confession there is truth. The Christian principle of “guidance of conscience” (Foucault, 1988:71) has been, transported into Alcoholics Anonymous through its fourth, fifth, seventh, and tenth steps which require members to do “fearless” “moral” “inventories” of themselves, share these inventories with another or others, and then to make amends to others as required by one’s conscience. Then, on a daily basis, members are required to continue making amends to others as judged personally necessary.

Alcoholics Anonymous, and its discourse, may be perceived as the shepherd while members may be understood as its flock, where the flock follows “the will” and “the law” (Foucault, 1988:68) of the shepherd. To follow implies

obedience, or “personal submission”, which according to Christian philosophy, is a virtue. In AA, too, submission is a virtue and obedience is presupposed.

Foucault (1988:68) proposes that through the technology of pastoral power the shepherd finds his own salvation through saving his sheep, as by saving his sheep the shepherd lays himself open to getting lost. Thus, if he wants to save himself, he must run the risk of losing himself for others (Foucault, 1988:68).³ Pastoral power then is founded upon vulnerability of the shepherd. The sheep, however, in following are rendered dependent and perhaps even more vulnerable to the power of the shepherd.

Where centralized power has to do with the state, pastoral power has to do with the individual (Foucault, 1988:60). As Foucault (1988:67) poses, “[t]he pastoral problem concerns the lives of individuals. The sheep submits to the shepherd.” Thus a relationship of dependency is instituted through pastoral power (Foucault, 1988:68-69).

E. THE POWER OF DISCOURSE

For Foucault, “power’s relation to knowledge is never separable” (Diamond and Quinby, 1988:x). Knowledge and discourse are, moreover, intrinsic to one another, and together inform and normalize particular social and medical processes. As Ball (1990:2) notes,

3. Foucault uses male pronouns, assumably as generic language. As such language characterizes his text, and as AA continues to use sexist language in most of its own authorized text, I, too, use the male pronoun here.

Foucault has identified certain knowledges—human sciences—and certain attendant practices as central to the normalization of social principles and institutions of modern society. Among these are psychological, medical, penitential, and educational knowledges and practices.

Thus, Foucault proves useful in exposing the dynamics of power inherent in the institutionalization of the disease concept of *alcoholism*.

Discourse envelopes and wields the power to define and attribute truth. According to Foucault (1979), “discourses are about what can be said and thought”, as much as they are “about who can speak, when, and with what authority. Discourses embody meaning and social relationships. They constitute both subjectivity and power relations” (in Ball, 1990:2). The “possibilities for meaning and for definition,” are further “preempted through the social and institutional position held by those who use them.” Ultimately, discourse holds power as it “emphasizes the social processes that produce meaning” (Ball, 1990:2-3).

Importantly, moreover, discourse proffers ‘truth’. In the world of AA, and especially through the teachings of Alcoholics Anonymous doctrine, discourse and truth are one. AA discourse poses a “system of ordered procedures” that produce, regulate, distribute, and circulate meanings and truths around *alcoholism* specifically, and addiction more generally. AA ‘truth’ sustains itself through its own tautological reconstitution as members/adherents reproduce AA discourse through language and practice. Given that the self is created by

discourses (Grimshaw, 1993:53), the AA discourse narrates and enjoys power over constitutions of AA selves.

As the following chapter demonstrates, beyond the constitution of the AA self, Alcoholics Anonymous discourse informs social processes around members, whether adherents, newcomers, or transients, and provides meanings to those members in terms of their and others' drinking practices. AA's engineered alignment to the medical model commands authority because science is exercised as a social power. Foucault (1988:106-107) explains that,

Science...is literally a power that forces you to say certain things, if you are not to be disqualified not only as being wrong, but more seriously than that, as being a charlatan. Science has become institutionalized as a power... .

Observes Foucault (1978:100), "It is in discourse that power and knowledge are joined together." AA's knowledge is underscored, however problematically, by science. Therefore, its discourse maintains a force over beliefs around *alcoholism* and *recovery*. Disciplinary and pastoral power mould reality. Working from within the available discursive space, only transgressors escape the regulatory mechanisms of such power. As Foucault (1977:133) proposes,

It's not a matter of emancipating truth from every system of power...but of detaching the power of truth from the forms of hegemony, social, economic and cultural, within which it operates at the present time.

And as Chapter Six illustrates, the "normalizing gaze of AA" is not without its resisters.

In the following chapters I theoretically examine Alcoholics Anonymous through ethnomethodology, conversation and discourse analyses, postmodern sociology, and Foucauldian analytic categories. Through these frameworks I demonstrate that there are, indeed, technologies of power embedded within AA discourse, that AA members' reality becomes constituted through AA text and larger discourse, that members become regulated through AA discourse, and that through cyberspace resistance can be traced.

CHAPTER THREE

THE NORMALIZING GAZE OF AA

“The essentials of the modern or post-Prohibition understanding of alcoholism first emerged in American popular and medical thought at the end of the 18th and beginning of the 19th century. Around that time a new paradigm was created; or, in Foucault’s terms, the ‘gaze’ of the observer shifted then to a new configuration—a new gestalt” (Levine, 1978:143).

This chapter examines the extent to which Alcoholics Anonymous and its disease concept, or “disease ideology” (Blumberg, 1977:2129), of *alcoholism* enjoys a stronghold over public and lay responses to problem drinking. In this chapter I present: (a) a brief historical backdrop to the disease notion of *alcoholism*; (b) contributions made to social science literature on *alcoholism*, including more recent critiques of Alcoholics Anonymous; (c) dynamics of AA’s normalizing gaze; and (d) a brief discussion of the abstinence and more moderate approaches as competing discourses.

Alcoholics Anonymous has popularized and galvanized the disease concept of *alcoholism* (and addiction), though historically the notion itself is rooted in more than 200 years of discourse. Levine (1978:165-166) explains:

The invention of the concept of addiction, or the discovery of the phenomenon of addiction, at the end of the 18th and beginning of the 19th century, can be best understood not as an independent medical or scientific discovery, but as part of a transformation in social thought grounded in fundamental changes in social life—in

the structure of society.... A.A. and Jellinek's and Keller's formulations are only the most recent articulations of much older ideas.

As Levine (1978:162) notes, "The 'rediscovery' of alcoholism as an addiction and a disease in the 1930s and 1940s by A.A. and the Yale Center of Alcohol Studies, was indeed a significant change within the addiction paradigm." Through drawing upon particular knowledge/discourse and meanings around inebriety, AA has cemented itself firmly as a feasible model of addiction and treatment. And though discourse and paradigms have existed historically which situate inebriety as a "disease", in this century Alcoholics Anonymous has promoted very successfully the notion that *alcoholism* is a disease.

Today in Canada and the United States, there are different laws governing the actual purchase of alcohol than there were during the temperance movement and prohibition. For example, all persons over a certain age may now legally purchase alcohol in either privately or state owned establishments. The state also governs some behaviors associated with alcohol consumption, often including where one can drink and whether one's behavior under the influence is deemed to disturb others.¹ While important, these laws are less extreme than the repressive measures effected by prohibition and temperance. Still, however, it is not uncommon to find some persons attempting to control the alcohol consumption of others, what Room, Greenfield, and Weisner (1991:589) name a

1. As Boyd (1991:152) notes, levels of alcohol consumption vary by country and religion.

“new temperance”. Alcoholics Anonymous, moreover, has replaced these earlier forms of control in seeking to establish its own expectations and specifications regarding consumption of alcohol (see also Levine 1992).

In his article “Alcoholics Anonymous as a social movement,” Robin Room (1993) explores Alcoholics Anonymous as both a social world and a social movement. He examines the spread of AA's authority, and the influence of AA “off-shoots” as manifestations of that influence. (See also Mäkelä [1996:252] who asserts that AA will continue to serve as a general organizational model—a model of how mutual-help efforts can be organized on a non-hierarchical, nonprofessional, and flexible basis.) According to Room, Alcoholics Anonymous breaks rules of oligarchy through its organizing principles, inverted triangle of governance, and larger democratic ideology. AA's overriding ideology and twelve traditions, he posits, counter and overcome both *alcoholism* and egoistic individualism, which, according to Room, are leading disorders of modernism. For Room then, AA serves to invert some of the more distasteful and problematic characteristics of modernism. If this were true, however, the idealistic conditions posed by AA would necessarily manifest the human interaction through which AA affiliation transpires. That is, there would be no tensions between ideal, or theoretical AA, that which seeks to overcome egoistic individualism, and real AA, the actual life world of AA membership. This appears not to be the case.²

2. The disjuncture between ideal and real AA is examined more closely in Chapter Six.

We might, therefore, question whether Alcoholics Anonymous actually resolves such individualistic characteristics or whether the inversion of individualism and egoism is merely representative of AA rhetoric. Perhaps AA can be better understood as both a mechanism of human control, coerced self-control, and as an apparent spiritual movement, whose explicit and ultimate mandate is to seek absolute abstinence, an “ultraist” position (Blumberg, 1977:2142), from alcohol consumption.

Rudy (1986:7) points out that AA is rooted in both the Washingtonian Society and the Oxford Groups.³ The Oxford Group is reflective of “an international movement that preached a return to the simple faith of the early Christians” (Robertson 1988:30). The goal of the earlier Washingtonian Society was “to serve as a model of successful renunciation” and in so doing to “sell the...program to others” (Rudy, 1986:7). Indeed, the twelfth step indicates that Alcoholics Anonymous adopted from the Washingtonian Society the requirement to pass on and perpetuate its doctrine. One manner by which AA perpetuates itself is through the requirement of meeting attendance. As Rudy (1986:14) notes, moreover, “[m]ost members believe that not attending enough meetings is one of the main reasons for losing sobriety.”

3. Blumberg (1977:2140-2142) notes, however, that the Washingtonians and AA divided sharply in their political views around temperance and Prohibition. The Washingtonians overtly and vocally advocated temperance and prohibition while AA overtly separated itself from the politics around prohibition.

Historically, heavy or chronic alcohol consumption has been associated with madness. Foucault (1965:8) notes that throughout the Middle Ages “drunkards” were often among the “Fools” who, with their captors, were sailed from port to port on the *Narrenschiff*—a “Ship of Fools”. Later, throughout the seventeenth and eighteenth centuries, “drunkards” were among those “insane” imprisoned in chains in “Hospitals” and “Madhouses” throughout Britain and France. In the 17th century, Mather (1673) “declared that habitual drunkenness was a kind of madness” (in Levine, 1978:150).

The alcoholic/madness nexus is further evidenced through Britain's Mental Deficiency Act of 1913 wherein inebriate women were legislated to permanent detention as heavy alcohol consumption was believed to be representative of feeble-mindedness (Valverde, 1998:58). Peele (1985:134) observes that “[m]edical conceptions of alcoholism and addiction grew in the United States during the nineteenth and twentieth centuries as part of the idea that mental and emotional disorder was an illness.”⁴ Moreover, as Room (1999) explains in his article “Farewell to a Unique Institution”, in Canada the former Addiction Research Foundation (ARF) was merged in 1998 under the auspices

4. Room (1978:198) notes too that in the United States, psychiatrists have “tended to view alcoholism as a symptom of an underlying mental disorder rather than as a disease in its own right...”.

of the Centre for Addiction and Mental Health (CAMH).⁵ Still today, a suspect drinker's first introduction to AA may be through a mental health facility.

The intersection of madness and religion may be understood as serving the philosophical and moral context through which the normalizing gaze of Alcoholics Anonymous, and alcoholism, was first instituted in Akron, Ohio, in May of 1935.⁶ In much the same way that “madmen, patients, or delinquents” became objects of knowledge “through practices such as those in psychiatry, clinical medicine, and penalty” (Faubion, 1998:461), AA affiliates were/are rendered objects of knowledge through practices of *alcoholism* and AA's concomitant requisite twelve step recovery program. AA discourse positions members as sites of its knowledge, organizing and informing the lives of those

5. Robertson (1988:31) notes that as late as the 1930s, many “alcoholics” could be found in “insane asylums”, as no one knew quite what to do with them. Even for years after the introduction of Alcoholics Anonymous, “alcoholics”, notes Robertson (1988:31), could be found in “loony bins”, locked up with “criminal psychopaths, terminal syphilitics, and those afflicted with senile dementia”. Indeed, my own first detox—in 1986—was facilitated through a mental hospital. One might argue that the management of “drunkards” has changed only somewhat since the organization of madness in the Middle Ages documented by Foucault.

6. The disease model of alcoholism was popularized in the 20th century largely by E.M. Jellinek (1946, 1960), whom Lender (1979) notes as having greatly influenced current conceptualizations of alcoholism and its treatment. Though Alcoholics Anonymous has associated itself with the disease concept of *alcoholism*, the disease notion itself can be traced back to Benjamin Rush in the late 18th century (Levine, 1978:145, 151-153; van Wormer, 1995:26) who also advocated complete abstinence to those with an “inability to refrain” from alcohol” (in Levine, 1978:152). In this century, the American Medical Association “declared alcoholism an illness in 1956 and a disease in 1966” (van Wormer, 1995:33). For a more complete history of the evolution of alcoholism as a disease see Levine, 1978.

adherents who adopt practices institutionalized through AA and its related disease notion of *alcoholism*. As Rudy (1986:xv) observes: “Just as A.A. members ‘construct’ their *alcoholism* by attaching meanings, definitions, and interpretations to their experiences, so too do alcoholologists construct *alcoholism*.”

Nonetheless, Alcoholics Anonymous and the disease concept of *alcoholism* do, indeed, enjoy considerable popularity in social and academic responses to seemingly problematic drinking (Goodwin et al, 1969; Pattison et al, 1977; Lender, 1979; Pokorny and Kanas, 1980; Kurtz, 1982; Vaillant, 1983; Khantzian and Mack, 1994). Rudy (1986:10) observes that persons who enter AA tend to view its program as providing both a specific model for arresting *alcoholism* and “a general philosophy of life.” Therefore, believing in the AA doctrine and assimilating the discourse into one’s life necessarily presupposes AA’s success—however questionable the level of that success.

THE GAZE

In many areas of the world, especially within North America, AA’s prototype informs the gaze of *alcoholism* and its treatment. Moreover, as Denzin (1987b:42) observes, “The mutually beneficial relationship between A.A. and the modern treatment centre permits A.A. to broaden its membership base...”. AA’s implicit technologies of power are exercised in part through specific ‘instruments’ of disciplinary power, with “specialized personnel” mapping the

gaze. Within Alcoholics Anonymous, such personnel are the “old-timers” or those who have mastered AA discourse.

The gaze of AA is constituted, in part, through a normative social structure by which AA discourse instructs members to avoid particular behaviors deemed dangerous to sobriety. Rudy (1986:72) outlines these behaviors as including

depression, jealousy, overtiredness, an affair, or an argument with friends,...not paying attention around the program, not practicing the program, criticizing the program, being dishonest, being too concerned with finances or other problems, being too happy or cocky, getting low grades or failing when high grades or success are expected, recalling old drinking memories, failing to avoid questionable persons, places, or things, and not attending enough meetings.

Rudy (1986:73) sees this normative social structure as providing definitions of social boundaries between successful members and those members who **slip***: “A.A. members believe that...norm violations frequently lead to slipping and that once norm violation occurs, slipping can be avoided by seeking reinforcement from the group.” Thus, when a member slips s/he helps to establish the group’s normative boundaries. Reinforcement from the group, moreover, is directly related to a member’s ability to avoid those behaviors noted above as threatening one’s sobriety. AA adherents serve as the examiners of newcomers or other members who continue to struggle with such admonitory behaviors. Normative group boundaries serve to construct divisions between

members and between members and AA discourse. Below I examine the normative social order of AA by tracing its technologies of power.

As noted in the previous chapter, Foucault perceives disciplinary power as being constituted in large part through normalizing judgement, hierarchical observation and the examination. For AA “the means of correct training” is founded upon disciplinary power. In the following discussion I explore some of the ways by which disciplinary power channels members’ reality and establishes regulation in Alcoholics Anonymous.

NORMALIZING JUDGEMENT

For Foucault (1979:178), normalizing judgement involves observing and examining particular human behaviors often exempt from legal observation and judgement. As he explains:

The workshop, the school, the army were subject to a whole micro-penalty of time (lateness, absences, interruptions of tasks), of activity (inattention, negligence, lack of zeal), of behaviour (impoliteness, disobedience), of speech (idle chatter, insolence), of the body (‘incorrect’ attitudes, irregular gestures, lack cleanliness), of sexuality (impurity, indecency).

AA members are also subject to rewards or punishment for behaviors, attitudes, and adherence to, or deviation from, the teachings of AA discourse. Lack of respect, being prevented from serving in specific forms of AA service work, including sponsorship, and being patronized by other members are just a few ways by which punishment surfaces and materializes within the disciplined nature of Alcoholics Anonymous.

Normalizing judgement is thus established upon observation. As Foucault (1979:182-183) observes, disciplinary power

brings five quite distinct operations into play: it refers individual actions to a whole that is at once a field of comparison, a space of differentiation and the principle of a rule to be followed. It differentiates individuals from one another....It measures in quantitative terms and hierarchizes in terms of value the abilities, the level, the 'nature' of individuals. It introduces through this 'value-giving' measure, the constraint of a conformity that must be achieved. Lastly, it traces the limit that will define difference in relation to all other differences, the external frontier of the abnormal....

AA's disciplinary power can be illuminated through a variety of mechanisms that differentiate members from one other, resulting in clear hierarchies.

As disciplinary power normalizes, expectations placed upon members' behavior are rendered homogeneous. Normalizing judgement thus plays a large role in the gaze of AA within both meeting sites and AA authorized text. Not all AA members, however, hold the same power, nor do all members enjoy the same value. As Foucault (1979:183) argues: "The perpetual penalty that traverses all points and supervises every instant in the disciplinary institutions compares, differentiates, hierarchizes, homogenizes, excludes. In short, it *normalizes*" (italics in original text). Thus, AA recovery can be seen as being promoted through mutual representation which, in turn, serves to dominate and regulate through expectations of sameness. Power gets expressed or repressed through processes of judgement within membership.

HIERARCHICAL OBSERVATION

Hierarchical observation is integral to the AA treatment process. While ostensibly a perfect democracy (Alcoholics Anonymous, 1996b), Alcoholics Anonymous can be shown to divide members based on lengths of sobriety, and perceived adherence to AA discourse. Hierarchical observation “ensure[s] that a system which depended on individuals could be integrated into an efficient, functional whole” (Jones, 1990:96). As noted in the previous chapter, Foucault suggests that hierarchical judgement is coercive. Ultimately judgement becomes an intrinsic character of the judged, with the self becoming its own “observation machine” (Foucault, 1979:173).

The process of rewarding some members and punishing others creates a hierarchy. Rank in AA is awarded through lengths of sobriety and an ability to reconstitute AA text. While some writers idealize AA philosophy by assuming that AA is non-hierarchical (e.g., Valverde and White Mair, 1999), I demonstrate otherwise in Chapter Seven. Within AA there are clear divisions and overt hierarchies that separate members based on a variety of criteria. For example, through the implicit process of normalization, AA adherents best survive within AA as undivided from its discourse and as undivided from others. An adherent thus becomes one with the AA discourse.

THE EXAMINATION

Long term sobriety generates a dividing factor implicit to disciplinary power. This factor, conceptualized here as the examination, merges hierarchical observation and normalizing judgement: the examination. In Alcoholics Anonymous the examination of success is located in the ability to achieve continuous abstinence. In Foucault's (1979:184) view, "[t]he examination combines the techniques of an observing hierarchy and those of a normalizing judgement." As AA discourse requires some members, most notably 'old timers', to observe others, one member ultimately determines the level of success of another. Davis (1983:273) observes that through meeting attendance and other forms of contact with AA "members...expose themselves to monitoring, pressures and confrontation." In having power one is enabled to examine others, and through examining others, one's power is further reinforced.

Members' examinations occur both inside and outside of meeting sites. One is examined by AA adherents, especially "old-timers" for their ability to "get" and advance AA discourse. Observes Jones (1990:96) of Foucault (1979), "the examination [may be] the most important instrument of disciplinary power because it combines hierarchical observation with normalizing judgement." As Foucault (1979) proposes: "It is a normalizing gaze, a surveillance that makes it possible to qualify, to classify and to punish" (cited by Jones, 1990:96).

Given that members are subject to observation and examination, their ability or inability to adhere to AA discourse is followed by rewards, as in one's acceptance by others, or by punishments, as in being told of one's denial, of one's dishonesty with oneself, or of one's failure to work the AA program. Such rewards and punishments serve also as methods of social control within AA affiliation. As observed by Davis (1983:266), persons who deny being an alcoholic in the absolutist AA sense, have been accused in treatment group of "being deniers of what was obvious to others and...that denial is, in fact, a typical symptom of full-fledged alcoholism." To deny one's alcoholism within a 12-step setting places one in a no win and alienating situation (Davis, 1983).

Within Alcoholics Anonymous pastorship is evident at a variety of levels, including sponsorship and confession. In interaction with members, especially newcomers, a relationship of obedience, confession, and self-regulation is established through the larger group and more experienced members overseeing, pastoring, newer members at one level, and a sponsor overseeing, pastoring, members at a further level. Through these relationships members are guided to self-examination within sites that can be characterized both as public, as in group discussion, and as private, as in member/member or member/sponsor exchanges.

As noted previously, the notion of "Elder Statesman" is constitutive to pastoral power. Within AA too the Elder Statesman has an important meaning as it refers to long-standing, wise, members with long-term continuous sobriety.

For AA, an Elder Statesman is humble, listens well, and is not run by self-ego (Alcoholics Anonymous, 1981:134-138). In contrast to the Elder Statesman, the Bleeding Deacon is a less evolved member who

is just as surely convinced that the group cannot get along without him (sic), who constantly connives for reelection to office, and who continues to be consumed with self-pity. A few hemorrhage so badly that—drained of all A.A. spirit and principle—they get drunk. At times the A.A. landscape seems to be littered with bleeding forms (Alcoholics Anonymous, 1981:135).

We can see here a clear relationship between Christian pastorship and Alcoholics Anonymous' ideological structure and members' expected program practice. The Elder Statesman is wise and knowledgeable, while the Bleeding Deacon represents self-will run rampant—an “unpastorable” member.

In the same way that the shepherd is expected to lose himself to his sheep, AA members are to offer themselves as vulnerable to others. This vulnerability is institutionalized through AA's twelve steps, but also importantly through its principle that to stay sober one must work with others in giving one's wisdom away. Thus, the AA creed of “in order to keep ‘it’ one must give it away” (Denzin, 1987b:65) is also rooted in Christianity.

Foucault (1988:69) notes, moreover, that Christians are required to deliver themselves from willfulness. This philosophy is manifested in the first step whereby members must admit “powerlessness” over alcohol. Ultimately, one's willfulness is conceded to the larger program discourse, which requires members to turn their “will” and their “life” over to the care of God. Therefore,

AA discourse can be understood as the shepherd while members may be understood as its flock, where the flock follows “the will” and “the law” (Foucault, 1988:68) of the shepherd.

To “follow” implies “personal submission”, which according to Christian philosophy, is a virtue. Similarly, obedience is an expected virtue within AA practice, evidenced through common AA-speak to newcomers: “keep your mouth shut and your ears open.” As the pastor, the Elder Statesman is awarded through Alcoholics Anonymous the right to judge and examine, while the Bleeding Deacon is marginalized through pastoring until such time that s/he has mastered the AA gaze.

CONFESSION

AA discourse ensures through face-to-face confession, sponsorship, and the implicit policy of ‘honesty’ that all can be known of members—that all can be observed. The practice of self-disclosure, or sharing, within closed meeting sites provides the necessary “architecture” which makes close observation possible. As Foucault (1979:177) explains, such “[d]iscipline makes possible the operation of a relational power that sustains itself by its own mechanism and which, for the spectacle of public events, substitutes the uninterrupted play of calculated gazes.” Here a normally private practice of self-disclosure is rendered public through AA’s requirement that members reveal personal experiences and

feelings (often of inadequacy) in group, thus transforming the otherwise private event of confession into a public one.

Furthermore, as Petrunik (1972:34) notes, "A.A. speeches are a sort of semi-public confession or 'purification ceremony'." While it has been argued that within the context of Alcoholics Anonymous, "sharing of pain can be healing" (Flores, 1988:87), confession within the context of AA ultimately facilitates and serves judgement.

Sharing, that is confession, within AA meeting sites, serves two primary purposes. First, through sharing experiences and providing explanations for their drinking, members present "vocabularies of motive" (Mills, 1940). As Rudy (1986:44) notes,

Such accounts represent explanations (motives) for one's behavior or for viewing oneself as an alcoholic that make sense to the actor and to others in the setting. In this manner, explanations are not retrospective interpretations of a person's alcoholism in the outside world or in any other general setting, but they are explanations of a person's alcoholism within an A.A. setting, using "vocabularies of motive" learned and shared with other A.A. members. Similarly,...explanations...are seen not as springs of action but rather as acceptable justifications that make sense out of a person's past and current life for the participants of a social setting.

Here we can see that a member is moved into AA discourse through the common custom of *qualification* which requires the meeting's chairperson to provide a narrative around his/her personal admittance and acceptance of alcoholism (see also Pollner and Stein, 1996:209). Qualifying oneself as an alcoholic serves also

to afford the member explanations and reasons for past drinking behavior.⁷ As Rudy observes, this matrix of interaction is necessarily facilitated through AA discourse.

Alcoholics Anonymous is founded upon the central canon of telling that which is most difficult to tell. Where the souls of newcomers or members who relapse are rendered visibly imperfect through confession, others who adhere to AA doctrine, including the demand of abstinence, may be elevated by virtue of their assumed wisdom. Thus, prior authority becomes enhanced through confession. In this way, the power of both adherents and the larger AA discourse are reestablished and reproduced through the act of confession. Such reproduction further reifies the power relationship between subject and observer:

The confession is a ritual of discourse in which the speaking subject is also the subject of the statement; it is also a ritual that unfolds within a power relationship, for one does not confess without the presence (or virtual presence) of a partner who is not simply the interlocutor but the authority who requires the confession, prescribes and appreciates it, and intervenes in order to judge, punish, forgive, console, and reconcile (Foucault, 1978:61-62).

7. The tradition of qualification requires the meeting's chairperson to provide a rationalization for his or her AA membership, by which the chairperson explains reasons why s/he is an alcoholic. Invariably the explanation contains specific stories of drinking, "arrests, suicide attempts, therapists and therapies, mental hospitalizations, or ex-spouses" (Pollner and Stein, 1996:209). This qualification, given to the other attending members, underscores the point that the chair is, indeed, an alcoholic, and that s/he does, indeed, belong in AA. Rudy (1986:87) notes too that through qualification, members accept AA's definition of "how 'disease' is defined, what behaviors and experiences are characteristic of alcoholics, and what they must do about their condition."

Power, “or the agency of domination”, thus rests not in the one who confesses, but in “the one who listens and says nothing” Foucault (1978:62). Importantly, however, the requisite of confession is placed on all AA members, old and new. As a central policy and guiding principle then all members may be seen as disempowered to the virtual presence of the larger ideal discourse of Alcoholics Anonymous.⁸

According to Foucault, relations of power underlie confession as a form of self-knowledge and freedom. “The truthful confession,” he writes, “was inscribed at the heart of the procedures of individualization by power” (Foucault, 1978:58-59). As an “internal ruse” (Foucault, 1978:60), however, confession is assumed to confer freedom to the confessor:

The obligation to confess is now relayed through so many different points, is so deeply ingrained in us, that we no longer perceive it as the effect of a power that constrains us; on the contrary, it seems to us that truth, lodged in our most secret nature, “demands” only to surface; that if it fails to do so, this is because a constraint holds it in place, the violence of a power weighs it down, and it can finally be articulated only at the price of a kind of liberation. Confession frees, but power reduces one to silence (Foucault, 1978:60).

According to Grimshaw (1993:59), Foucault allows us to understand confession as a discursive practice, that is, as a practice organized and mediated through particular relations of power. Thus, the act of confession, once ‘second nature’, becomes reconceptualized as an issue of power.

8. The issue of confession is discussed further in Chapter Five.

MERGING POWERS

Although Alcoholics Anonymous has established a centralized power through its larger general and central service structures, at a group level pastoral power becomes constituted through one group working with a newcomer or one member working with another, as in sponsorship. To this end, AA merges centralized power and pastoral power. These two technologies of power become further merged with elements of disciplinary power. Members, therefore, are situated within an extremely complex set of power relations; as they seek to remedy their alcoholism, as required by their larger society, they become enmeshed in a variety of discourses that serve eventually to render obedience, and powerlessness through, importantly, self-regulation.

According to Rudy (1986:93), Jellinek's—AA's—disease phase model of alcoholism⁹—has “survived so well because the model is ‘the prototype of reified alcoholism models’.” As Jellinek's original data “were drawn from A.A. members...and because members were responsible for constructing and administering the initial measuring instrument” (Rudy, 1986:93), the disease model itself became circularly produced through a particular sample of research respondents. Nonetheless, AA affiliates and a large number of alcohol counselors “continue to proselytize phase models” (Rudy, 1986:93). AA's sponsorship rule

9. See APPENDIX 3-A for a diagram of Jellinek's disease model.

further reconstitutes the disease, or phase, model through face-to-face indoctrination of others, especially for newcomers.

Existentially, the solution to seemingly problematic drinking lies in establishing alternative meanings around previous drinking practices and personal responsibility in terms of personal behaviors:

The success of AA is related to its ability to place the alcoholic's suffering within a meaningful paradigm and to require the alcoholic to accept responsibility and limitations while breaking the pattern of isolation and alienation (Flores, 1988:73).

Hence, the AA alcoholic attaches meaning to his/her "illness" through Alcoholics Anonymous. Within AA discourse, moreover, what is normal has been established through authorized AA text/discourse which, in turn, becomes reproduced and reconstituted through the meanings drawn from AA by members. Members' practice, as a product of AA teachings, thus further establishes and reifies AA discourse.

As established (supposedly) through science, AA's notion of *alcoholism* becomes qualified through text as the correct model of treatment and recovery, or in Foucauldian terms, the "correct means of training". At times, researchers who reject absolute abstinence have been criticized harshly by others who propose more moderate approaches. (See, for example, Sobell and Sobell [1978, 1982] versus Pendery, Maltzman and West [1982]; Peele [1985]).

Interestingly, while over the past twenty years there has been overt critique of the disease model of *alcoholism*, there has been scant criticism of the

integrity of the actual organization of Alcoholics Anonymous. Certainly, this incongruity is interesting, as AA implicitly and explicitly adopts and promotes the disease concept of alcoholism and attrition rates remain largely speculative.

Notes Peele (1995:56-57):

[T]he standard wisdom is that AA is unmatched in effectiveness for dealing with alcoholism and that alcoholism would be licked if only everyone joined AA. Certainly, many people who belong to AA tell us that AA stopped them from drinking....In fact, research has not found AA to be an effective treatment for general populations of alcoholics.

While there is little scientific evidence that *alcoholism* is a primary disease warranted by scientific legitimacy (Mulford, 1994:519), over the years “[t]here has been a reluctance to challenge or modify some of its basic contributions, even in the face of contrary evidence” (Albrecht, 1973:18-19). Due to common misconceptions and AA’s self-advertising, the lay public regards AA as the solution to suspect drinking. Thus, though AA is absolutely rooted in a largely criticized notion of disease, its organization has, for the most part, escaped public criticism.

Importantly, abstinence based responses to patterns of alcohol consumption are inextricably linked to power of science, rather than to absolute truth, given that the demand for absolute abstinence is founded upon the idea that any drinking at all exacerbates the condition. Dismissing scientific claims to truth emancipates the necessary discursive space through which responses to alcohol consumption may be otherwise examined.

COMPETING DISCOURSES

In North America the trend in recovery has been to favor the disease model of *alcoholism* (Peele, 1985, 1995, 1998; Peele and Brodsky, 1991). While in recent years there have emerged harm reduction models which stand in opposition to the AA model, as yet such more moderate approaches in the United States and here in Canada have gained less support within treatment facilities (see also Peele, 2000:41). As Cohen (1983:102) notes, "On the abstinence side are most clinicians, Alcoholics Anonymous, the National Institute on Alcohol Abuse and Alcoholism..., and the rest of the alcohol establishment. Those who make up the pro social drinking group are a much smaller band of treatment personnel and researchers." AA, moreover, poses the position that only a recovering/recovered *alcoholic* can help a practicing *alcoholic* achieve sobriety. As such, personal experiences of *alcoholism* are tantamount to the ability to aid in the arrest of another's *alcoholism*.

In believing that *alcoholism* is a disease, AA asserts that problematic drinking is necessarily progressive and chronic. Observes Petrunik (1972:33),

[a]n interesting feature of A.A. ideology...is that the methods of other organizations and institutions for dealing with 'alcoholism' are challenged in favor of the knowledge based on personal experience touted by A.A. This is expressed in the A.A. literature in the contention that only A.A. can really help the alcoholic because only A.A. understands.

To this end, presupposing the importance of experience, AA asserts that only an AA alcoholic can help another alcoholic.

The competing discourses of controlled drinking and harm reduction pale in comparison to Alcoholics Anonymous' successful exploitation of the disease model. Those who attend AA learn quickly to reject/condemn treatment approaches that do not demand absolute abstinence from alcohol consumption. Such approaches, AA discourse argues, promote and facilitate denial and prolongation of one's disease. That heavy alcohol consumption is a disease, and not a habit, necessitates unequivocal abstinence in order to arrest, or remiss, the ailment. As Valverde (1998:39) observes:

The habit vs. disease contrast aligns habit with the freedom of the will. Anything that is managed as a disease is something we have little or no control over; by contrast, a habit, even if, like heavy drinking, it has become second nature, is nevertheless subject to some degree of personal control.

Thus, to classify alcoholism as a disease is to solicit a response, and to establish a solution, from medical science.

Miller (1983:69) observes that it was not until the 1960s in the U.S. that academic literature began to espouse the abstinence model over controlled drinking. Studies published during the 1940s and 1950s “unapologetically and routinely reported nonabstinent outcomes as successful” (Miller, 1983:69). Indeed, a multiplicity of research concludes that controlled drinking treatment methods produce overall success rates comparable to abstinence approaches (e.g., Caddy et al, 1978; Davies, 1962; Miller, 1983; Sobell and Sobell, 1978). Osborne and Bornet (1982:202) hypothesize, moreover, that the disease model espoused by Alcoholics Anonymous is paradoxical in that the prophesy of loss of

control becomes self-fulfilling (see also Peele, 1985 and 1989). Indeed, Peele (1985:122) argues similarly that persons who believe that they have the disease of alcoholism are more likely to drink more uncontrollably and destructively when they did drink.

If AA philosophy were to accept that heavy drinkers might exercise personal control over their alcohol ingestion, AA members would then be provided the option of decreasing consumption rather than striving for total abstinence. In order to insist on complete abstinence, it is, therefore, necessary to situate and define heavy alcohol consumption as a disease rather than as a habit. Thus, the only acceptable management of the behaviour is complete abstinence from the substance that grounds the disease. This stance is highly ironic, given that the AA success rate is estimated at only 10-20% (Miller, 1983:73).

As noted, AA's juxtaposition with science affords AA credence as a formal response to heavy or problematic alcohol consumption. Habits do not command the gaze of the medical community, but diseases do. Notes Valverde (1998:40):

habits are of interest to science only as symptoms of underlying pathological conditions or as useful tools for replacing one behaviour with another. While diseases are the entities upon which medical and psy expertise¹⁰ has been built, habits...have generally been left to the authority of low-level experts....

10. Valverde (1998:30-31) groups "psy experts" with writers of pop psychology—those persons or professionals who were/are largely responsible for creating a "new psychotherapy market", through pathologizing/creating diseases of a multiplicity of human behaviors, including codependency, and then offering treatment for those created diseases.

Founded upon disease, Alcoholics Anonymous positions itself apart from habit—which does not command the gaze of science.

The disease classification is significant because it assumes that *alcoholism* is arrested only through unmitigated abstinence. To situate heavy drinking as a habit concedes to more moderate approaches, but to categorize such behavior as a disease rationalizes the expectation of complete abstinence; anything less is seen as risking the life of the drinker. Furthermore, in abstinence terms, attempting to control ones drinking merely highlights denial of one's disease.

Valverde (1998:43-44) notes that the disease notion of alcoholism was implanted into the medical profession by outsiders (most markedly AA) to destigmatize heavy drinking. Within medicine itself alcoholism was not really promoted as a *disease*; this is evidenced by the dropping of the term by International Classification of Diseases in the 1970s. Fingarette (1988:22) observes nonetheless that

the wealth of new and better studies...have soundly refuted the classic disease concept [but] have so far had little influence on the general public. Almost everyone outside the scientific community still takes it for gospel that there is a scientifically proven, uniquely patterned drinking history peculiar to a disease called alcoholism.

Thus, the lay public and a variety of interest groups, expressly Alcoholics Anonymous, continue to adopt and promote the idea that *alcoholism* is a disease. AA truth is hence grounded in at least one fiction.

The disease concept of alcoholism further serves to draw heavy drinkers into AA discourse by removing self-blame for particular behaviors. As Fingarette (1988:25) notes, "if chronic drinkers are told that there is no disease of alcoholism, they will see their drinking as a personal failing; out of guilt and shame, they will tend to hide or deny their problems." Clearly, Alcoholics Anonymous discourse nourishes itself through the disease concept of alcoholism and perpetuates itself, in part, through its twelfth step which requires members/adherents to continue regular meeting attendance and to establish ties to practicing alcoholics who will also be (ostensibly) served by AA membership.

According to Peele (1985:133), the disease model of addiction carries with it implicit contradictions. "Disease notions of addiction", he contends,

undermine actual successes, as when they deny that alcoholics can incur fewer drinking problems without abstaining entirely or that people can quit addictions themselves (one television advertisement likened a person trying to cure his own addiction to someone trying to operate on himself).

Thus, AA adherents come to consider any slip as necessarily irreconcilable to their recovery from alcoholism. As Peele suggests here, while periods of abstinence might indicate one level of success from abusive alcohol consumption, through AA discourse persons learn to consider only absolute abstinence as *the* gauge of success.

Some writers highlight the fictional epidemiological grounding of alcoholism (e.g., Fingarette, 1988; Peele, 1989;). According to Mulford (1994:518), the disease concept took root because it

[fit] well with the public's hunger for a simple explanation of chronic drunkenness, its yearning for simple solutions, its faith in science and technology to find a quick fix and its awareness of medical science's dramatic successes in conquering many diseases.

Thus, as a theoretical and social construction, believing *alcoholism* to be a disease is useful largely because it serves to provide a simple, but pat, answer to seemingly problematic behavior.

While AA discourse, AA adherents and some researchers (e.g., Paredes, 1976; Pendery, Maltzman and West, 1982) claim that controlled drinking is virtually impossible for an alcoholic, several researchers have concluded that it is incorrect to believe that heavy drinkers are unable to practice controlled drinking (Davies, 1962; Mendelson and Mello, 1966; Mello and Mendelson, 1972; Heather and Robertson, 1981; Sobell and Sobell, 1982; Hore, 1991).¹¹ It is interesting, then, that more effort has not been expended to seek alternative paradigms of *alcoholism*. As Miller (1983:74) argues, “[i]t seems clear that current abstinence-oriented methods are not the final answer for all problem drinkers, and that there is much room for the development of all alternative approaches.”

As “[v]ery few problem drinkers who affiliate with Alcoholics Anonymous remain forever sober” (Ogborne and Bornet, 1982:199), one might

11. For retrospective discussions around the controlled drinking debate see Marlatt, 1983. More recent evaluations of this debate have been offered by Anderson (1995); Bühringer and Kufner (1995); Duckert (1995); Glatt (1995); Heather (1995); Hore (1995); Kahler (1995); Sobell and Sobell (1995); and Weisner (1995).

question why AA discourse has become so popular and so influential in informing responses to a wide range of patterns around alcohol consumption. Social conditions around drinking, however, reveal that there are many practices of harm reduction already in place. For example, Room (1997:S9) observes that state taxes serve as a form of “harm reduction” because taxes are implemented in part with the goal of deterring alcohol consumption. The pursuit of abstinence, moreover, even as a goal of AA discourse, can also be perceived as a form of harm reduction or controlled drinking. Indeed, as Marlatt (1983:1105) queries: “Isn’t abstinence itself a form of control?”

Hence, a close look at Alcoholics Anonymous reveals that its discourse/discipline/doctrine, rather than arresting problem drinking completely, assists *periods of abstinence*, not complete unadulterated abstinence as popularly believed. Periods of abstinence can be understood as a form of harm reduction or control, not as absolute soberness. If all members entering AA completely and absolutely ceased drinking, then AA could be regarded as a true program of abstinence. Given, however, that numerous persons enter AA only temporarily, and those who stay are not always successful at continuous abstinence, we might rather consider AA as a form of harm reduction.

Marlatt (1983:1105) also points to a paradox implicit in AA’s disease model. As he explains:

Patients in treatment are first told that alcoholism is a disease characterized by an inability to exercise voluntary control over drinking. Once they have accepted this diagnosis they are

told...that the only way to arrest the development of this progressive disease is to stop drinking—to assert control by abstaining. Usually, however, this message is geared toward reasons *why* an alcoholic should abstain, but not on *how* to abstain. People can be taught how to abstain, if they are motivated to do so, by using many of the same principles utilized in controlled-drinking programs.

Dismissing scientific claims to truth emancipates the necessary discursive space through which solutions to alcohol consumption may be otherwise examined. As Marlatt (1983:1108) contends, we may eventually experience a “paradigm shift” (Kuhn, 1970) in response to perceived problems with alcohol consumption.

DISCONTINUITY

Foucault’s “principle of discontinuity” recognizes that discourses do not enjoy complete and absolute power; rather, all discourse contains its own exclusions and contradictions, and at times, discourses stand in antagonistic relationship to other discourses, other possibilities of meaning, other claims, rights, and positions” (in Ball, 1990:2). Importantly, over the years much research has contributed to and evidenced “discontinuity” within the disease model of alcoholism. The larger of the two competing discourses still falls to the power of AA and a wealth of lay counselors who sponsor other AA members.¹²

12. AA adherents sometimes go on to formal alcohol counseling training; they are sometimes named “two-hatters” (Langton, 1996) or “bridge people” (van Wormer, 1995) within treatment settings. There remains somewhat of a controversy around whether an alcohol counselor should have both formal credentials and personal on-going abstinent recovery. As noted in Chapter Four, this controversy can be traced back to the position of Alcoholics Anonymous that only an alcoholic can help another alcoholic.

Often, these same sponsors go on to study and work as alcohol counselors, who then continue to promote AA's disease model as their professional approach to assessment and treatment

According to Foucault (1978:100-101), resistance surfaces in many forms and is necessarily strategized at a variety of levels:

Discourses are not once and for all subservient to power or raised up against it, any more than silences are. We must make allowances for the complex and unstable process whereby discourse can be both an instrument and an effect of power, but also a hindrance, a stumbling block, a point of resistance and a starting point for an opposing strategy. Discourse transmits and produces power; it reinforces it, but also undermines and exposes it, renders it fragile and makes it possible to thwart it.

The power of abstinence discourse may thus in time be successfully resisted and transcended, insofar as researchers, writers, and members from within continue to identify and challenge truths/fictions and the technologies of power embedded within the discourse of Alcoholics Anonymous.

This study adds to this resisting discourse in its examination of the mechanisms of power existing within Alcoholics Anonymous. In illuminating the Gaze of AA its real power can be better understood. Elucidating its power, moreover, may expose elements of discontinuity within AA.

CHAPTER FOUR

AUTHORIZED AA LITERATURE: TEXTUAL ANALYSIS

“If you seem to be having trouble with your drinking, or if your drinking has reached the point where it *worries you a bit*, you may be interested in knowing something about Alcoholics Anonymous” (Alcoholics Anonymous, 1984:5, emphasis added).

This chapter presents a textual analysis of a variety of authorized AA literature. The reviewed texts were selected, in large part, because they appeared to serve as introductions to Alcoholics Anonymous. I demonstrate that while based on selected evidence, members’ truth within AA is constituted through, and by, AA text. Indeed, AA text informs and influences members’ talk, and hence becomes reproduced by AA adherents as program practice. The following discussion: (a) traces some of the philosophical shifts from early to contemporary AA; (b) identifies repetitions of AA doctrine and rhetoric; and (c) captures AA’s agenda of casting an ever-widening net. The analysis below demonstrates that Alcoholics Anonymous presents itself as sensitive to a variety of social inequalities while claiming elsewhere to be unclouded by outside issues.

Alcoholics Anonymous truth is widely grounded upon such notions as illness, disease, “once an alcoholic, always an alcoholic”, abstinence, meeting attendance, powerlessness, higher power, fatality, and sponsorship. AA literature has held since 1939 that an alcoholic suffers from an illness, and as such “is a very

sick person” (Alcoholics Anonymous 1976a:xiii). Indeed, within the AA literature reviewed below the idea of alcoholism is firmly cemented as a disease. AA’s promotional literature frequently lists its twelve steps and twelve traditions. Serving as codes of conduct, particular dominant messages, the steps, and the traditions are invoked to define members’ reality within AA recovery practices.

Over the years, Alcoholics Anonymous has cast an ever-widening net. Now all persons, irrespective of age, gender, ethnicity, race, cultural background, sexual orientation, or even *drinking behaviors*, are viewed as suitable candidates for its treatment program. What appears at first glance to be unique between various AA texts becomes ultimately conflated in that all texts serve to widen the AA net. Furthermore, attention to family, friends, and employers reproduces and disseminates AA philosophy far beyond the experiences and practices of the targeted reader. Thus, AA philosophy is aimed at a myriad of others who are believed to be affected by another’s drinking behavior (see also Room, 1992).

Interestingly, while AA texts state that it is only the pondering reader who can ascertain whether s/he is an alcoholic, the questions posed assume that virtually anyone who has ever drank alcohol immoderately is a potential alcoholic, and as such, needs to attend AA meetings. It is AA’s position, moreover, that beyond its own program/remedy, recovery experiences are unsatisfying.

There are more than fifty promotional booklets produced and circulated by Alcoholics Anonymous General Service in New York. Such promotional literature is usually made available to persons free of charge at meeting sites. The

group distributing the material generally absorbs the charge, which in turn is paid to AA in New York. That is, AA General Service receives payment for the publications from an intergroup or central service agent, or from a group representative. While there is a multiplicity of these types of pamphlets, there tends also to be a great deal of overlap and repetition between booklets; there is thus a great deal of redundancy between texts. The pieces analyzed below speak to the essential issue of drawing in members. It appears that drawing in members serves as an overall agenda of all authorized AA text.

The reviewed literature urges the reader to approach AA teachings with an open mind. Promotional pamphlets examined for this research often duplicate sections of the *Big Book*, including most often “How it Works”, the twelve steps, and the twelve traditions. Furthermore, Alcoholics Anonymous claims itself to be successful, though it fails to provide a definition of what constitutes success. One might ask, for example, does achieving one year of continuous sobriety indicate success? Ten years? Is success measured by one’s ability to practice AA’s twelve steps? Is AA success determined in other ways? Or does success mean that a person has merely walked into a meeting site? These questions are not addressed in the authorized AA literature reviewed for this study.

A. MAJOR TEXTS

A.1. *Alcoholics Anonymous (The Big Book)*

This AA text (1975a:75) notes that in the early days “simply reading the [big] book was enough to sober up some people.” To date there have been three

editions of AA's *Big Book*, entitled formally as *Alcoholics Anonymous: The Story of How Many Thousands of Men and Women Have Recovered from Alcoholism*. The *Big Book* was first published in 1939, the copyright for the second edition was 1955, and the copyright for the third edition was 1976. For several years now there has been the promise of a fourth edition.¹ This future edition will, for the first time, acknowledge gendered language in the *Big Book*, and hence sexism in Alcoholics Anonymous more generally.²

In the Foreword to the First Edition (1939), Alcoholics Anonymous (1976a:xiii) referred to sober members as "recovered" rather than "recovering"; AA philosophy now holds that one never recovers from alcoholism but merely arrests the progressive disease through abstinence.³ As Denzin (1987b:14) notes, a recovering alcoholic is one "who (1) incorporates the identity of recovering alcoholic into his or her self-conception; (2) having once been an active drinking

1. The Alt.Recovery.AA FAQ reports that AA has failed to renew the American copyright for the 3rd edition of its *Big Book*. See APPENDIX 1-B.

2. Several years ago there were various local, district, and general meetings held with the mandate to determine AA's position on sexist language contained by the *Big Book* and other promotional literature. After lengthy discussions, delegates concluded that the solution is merely to add a qualifier at the beginning of the fourth edition to note that the pronoun "he" is to be read generically as "he or she". Clearly, this qualifier does not come close to solving the sexism inherent in AA's *Big Book* and much of its older copyrighted promotional literature.

3. Interestingly, the *Big Book* itself holds the notion that it is possible to recover from alcoholism; some early stories outlined in the *Big Book* also refer to the possibility of complete recovery (e.g., "The Keys to the Kingdom", page 309). As AA evolved, however, the trend has shifted to the view that one is in perpetual recovery; thus, a member is much more apt now to state that s/he is a "recovering" alcoholic, rather than "recovered".

alcoholic, becomes a nondrinker; and (3) calls himself or herself a member of Alcoholics Anonymous." It appears from this quote that AA's formal position on the prognosis of *alcoholism* has shifted since 1939.

AA's position on twelfth step work in the first edition proposed that members should work for AA as "an avocation" (Alcoholics Anonymous, 1976a:xiii). Thus, as a requirement for membership, expectations are placed on adherents to reproduce AA's own position on *alcoholism*. The power of AA has therefore (in part at least) become reinforced and reproduced through AA's own expectancy to propagate itself through membership.

The first edition of the *Big Book* stated that "[t]he only requirement for membership is an *honest* desire to stop drinking" (Alcoholics Anonymous, 1976a:xiv emphasis added). The "honest" qualification was dropped, as explained in promotional literature, because many members come into Alcoholics Anonymous not quite sure, or ready, to admit to *alcoholism*. In many cases then the "honesty" comes to follow—not precede—a member into its program. Abandoning the "honesty" requirement opens the door to persons who may only be contemplating the possibility of *alcoholism*. In turn, opening the door more widely provides a larger venue for recruits to grasp and reproduce AA truth.

Furthermore, in the Foreword to the First Edition Alcoholics Anonymous (1976a:xiv) states: "Inquiry by scientific, medical, and religious societies will be welcomed." Though this earlier version of the *Big Book* suggests that Alcoholics Anonymous can maintain scientific, medical and religious integrity, over time AA

has generated its own research for its own purposes. As noted earlier, however, their methodologies and data are not available for scrutiny. Rather, AA's research is presented without qualification or notation of limitations. Importantly too, promotional literature offering those "experiences, strength, and hope" of AA members are proffered only through the larger guise of Alcoholics Anonymous, that is, as anonymously written material. Again, as an authorized account, presented as and through the entity of Alcoholics Anonymous, the text commands more authority than one written by a named (either fully or partially) and bodied human being who happens to be an AA member. As the word of Alcoholics Anonymous, rather than an individual member, the stories/text of AA experience garner greater power and legitimacy. Thus, by enshrouding its texts through its own authority Alcoholics Anonymous commands a legitimacy that serves to propagate its own philosophy/truth through reification.

In the Foreword to the Second Edition (1955), Alcoholics Anonymous refers to itself as miraculous: "Since the original Foreword to this book was written in 1939, a wholesale miracle has taken place" (Alcoholics Anonymous, 1976a:xv). Moreover, Dr. William D. Silkworth, an AA proponent, is referred to as a "medical saint" (Alcoholics Anonymous, 1976a:xvi). As an expert in "the treatment of alcoholism", he presents Alcoholics Anonymous as offering a solution "of extreme medical importance" (Alcoholics Anonymous, 1976a:xxiii). Indeed, Silkwood proposes, "[B]ecause of the extraordinary possibilities of rapid growth inherent in this group they may mark a new epoch in the annals of

alcoholism. These men may well have a remedy for thousands of such situations” (Alcoholics Anonymous, 1976a:xxiii-xxiv). Despite admitting that in its early days there were “many failures” (1976a:xvii), Silkwood’s words provide Alcoholics Anonymous with a medical validation of its notion of *alcoholism*.

The *Big Book* states that Bill Wilson had been “convinced of the need for a moral inventory, confession of personality defects, restitution to those harmed, helpfulness to others, and the necessity of belief in and dependence upon God” (Alcoholics Anonymous, 1976a:xvi). As indicated in the previous chapter, these ideas had been drawn from the earlier Washingtonian Society and Oxford Groups. Bill’s story, as presented in the *Big Book*, also recounts that while hospitalized for *alcoholism* he experienced a spiritual awakening through his surrendering to his *alcoholism* and to a “God” of his own choosing (Alcoholics Anonymous, 1976a:12).

The religious base of Alcoholics Anonymous is firmly rooted through Wilson’s conception and experiences of God and spirituality. AA, then, promotes religious and spiritual conviction through Bill’s (and others’) story, though it paradoxically denies the requirement of deity veneration. AA claims not to be “a religious organization. Neither does A.A. take any particular medical point of view, though [it does] cooperate widely with the men of medicine as well as with the men of religion” (Alcoholics Anonymous, 1976a:xx). Its insistence, however, upon a belief in a “higher power” contradicts its claim of not being a religious organization. Furthermore, contrary to its claim that it does not take any

particular medical view, AA's notion of disease presents itself as a distinctive medical perspective. And despite claiming that "[u]pon therapy for the alcoholic himself, we surely have no monopoly" (Alcoholics Anonymous, 1976a:xxi), AA offers to members "the highroad to a new freedom" (Alcoholics Anonymous, 1976a:xxi); which suggests, of course, that AA does indeed hold the answer to *alcoholism*.

Alcoholics Anonymous holds assumptions around who can, and who cannot, help an alcoholic get sober. As noted previously, according to AA, only those persons who are recovering/ed alcoholics themselves are capable of assisting others in recovery. Through this principle, AA adherents learn that their own help for *alcoholism* comes in part through an AA sponsor. Importantly, Alcoholics Anonymous teaches that sponsors need to be sponsored too. In this way recovery becomes part of a hierarchical process facilitated and produced through lay treatment, with the only requirement for help in achieving sobriety being mutual AA support. Certainly, AA's position on sponsorship and treatment poses a dilemma, for as the *Big Book* instructs, AA members are not to trust counselors who are not themselves in AA: "only an alcoholic can help an alcoholic" (Alcoholics Anonymous (1976a:xvi).

The Foreword to the Second Edition affixes very clearly the notion that successful recovery from *alcoholism* lies only in complete abstinence. Indeed, since the beginning, complete abstinence has been a central and guiding code of

Alcoholics Anonymous. Wilson argues that even “desperate” cases can recover without ever having another drink (Alcoholics Anonymous, 1976a:xviii).

This Foreword reports on AA’s success—however misrepresented it may be. As of 1955,

of alcoholics who came to A.A. and really tried, 50% got sober at once and remained that way; 25% sobered up after some relapses, and among the remainder, those who stayed on with A.A. showed improvement. Other thousands came to a few A.A. meetings and at first decided they didn’t want the program. But great numbers of these—about two out of three—began to return as time passed (1976a:xx).

These figures are curious as Alcoholics Anonymous does not provide the source of its data, the study’s population base, or its larger methodology. AA cannot guarantee the accuracy of such percentages given that countless persons may only walk into one meeting never to return again, no formal/precise membership records are kept in terms of numbers and lengths of sobriety, and at times factual lengths of sobriety are misrepresented.⁴

Sexism is present within authorized AA literature and emerges in various texts. The AA *Big Book* presents women largely as “housewives” and “wives” of male alcoholics. Of the forty-three narratives presented in the third edition of the

4. Groups usually keep a book in which members’ names are kept for date of last drink. These records, however, cannot be considered accurate as some persons list their membership in multiple groups, although AA discourages such a practice. Many groups, moreover, list names of members who no longer attend meetings. It is not uncommon in larger groups to have five or six birthdays listed in one month, yet have only one or two members actually come to group to celebrate. Thus, there is no way that Alcoholics Anonymous’ General Service can ascertain membership base, lengths of sobriety, or even whether a member provides an honest dry date.

Big Book, only ten are of women. Even at a conservative estimate of female membership, eight narratives out of forty-three fall far short of being representative of women's 33% to 40% membership in AA (see Alcoholics Anonymous, 1996a). The preface to the third edition further refers to AA as "our society" (Alcoholics Anonymous, 1976a:xi), though clearly women appear to be excluded textually from this society.

AA accepts Dr. Silkwood's notion that alcoholism is an "allergy" (Alcoholics Anonymous, 1976a:xxvi) of sorts, and rejects the idea that alcoholics can control their drinking other than through absolute abstinence. AA also rejects the view that alcoholics are maladjusted to life, or that they are in "full flight from reality", or that they are "outright mental defectives". Rather AA views the alcoholic body as "sickened" (1976a:xxiv).

The *Big Book* also instructs adherents on the methods by which to bring newcomers into the AA program. The text states, for example: "When you discover a prospect for Alcoholics Anonymous, find out all you can about him.... Get an idea of his behaviour, his problems, his background, the seriousness of his condition, and his religious leanings" (Alcoholics Anonymous, 1976a:90). Indeed, instructs the *Big Book*, "Call on him when he is still jittery. He may be more receptive when depressed" (Alcoholics Anonymous, 1976a:90). The philosophy of Alcoholics Anonymous is therefore to seek out potential members when they are most vulnerable.

The *Big Book* begins with Bill Wilson's story, which is followed by two chapters that offer a "solution" to alcoholism. The opening paragraph contends that of the thousands of alcoholics known to AA, "[n]early all have recovered" (Alcoholics Anonymous, 1976a:17). Indeed, through Alcoholics Anonymous, those members "have solved the drink problem" (Alcoholics Anonymous, 1976a:17). The climate in AA is presented as sunny and affectionate. Those in AA "are like the passengers of a great liner the moment after rescue from shipwreck when camaraderie, joyousness and democracy pervade the vessel from steerage to Captain's table" (Alcoholics Anonymous, 1976a:17). It is difficult to imagine how a potential member might resist Alcoholics Anonymous, given its uplifting environment.⁵

Chapter Two reinforces its notions of disease and abstinence: "We are...positive that once he takes any alcohol whatever into his system, something happens, both in the bodily sense and mental sense, which makes it virtually impossible for him to stop" (Alcoholics Anonymous, 1976a:22). Indeed, the text contends, "there is no middle-of-the-road solution" (Alcoholics Anonymous, 1976a:25). Herein lies the root of AA's position that only complete abstinence is a feasible solution to suspect drinking behavior.

AA reinforces its association with medical authority in Chapter Three of the *Big Book* by declaring: "Physicians who are familiar with alcoholism agree

5. Humor and laughter in AA are explored in more detail by Pollner and Stein (2001), and Denzin (1987b:170-173).

there is no such thing as making a normal drinker out of an alcoholic” (Alcoholics Anonymous, 1976a:31). Based on its alleged tie to science, AA truth proclaims that “[o]nce an alcoholic, always an alcoholic” (Alcoholics Anonymous, 1976a:33), though the only defence against taking a first drink lies in a “Higher Power” (Alcoholics Anonymous, 1976a:43).

Chapters Four and Five respectively offer guidance to “agnostics” in AA,⁶ and outlines how AA works. Invariably, the first three pages of “How it Works” are read at the opening of AA meetings, along with the twelve steps and twelve traditions of Alcoholics Anonymous. Here attention is paid to a “Power” greater than oneself (Alcoholics Anonymous, 1976a:59), which is read as God, with a capital G, and as He, as a capitalized male pronoun. Indeed, all AA adherents are to subordinate themselves to God: “[W]e decided that hereafter in this drama of life, God was going to be our director. He is the Principal; we are His agents. He is the Father, and we are His children” (Alcoholics Anonymous, 1976a:62, caps in original text).

Thus, the notion of the Christian Father is central to AA ideology, though the chapter to the agnostic and the personal narratives presented in the *Big Book* pretend otherwise. Chapter Five refers to “the alcoholic” as “an extreme example of self-will run riot” (Alcoholics Anonymous, 1976a:62). This definition is contradictory to the AA party line that alcoholism is a disease of primary

6. AA’s chapter to the agnostic is also addressed in Chapter Six.

significance, yet the alcoholic has lost control of his drinking. Indeed, it is impossible to have both a physiological disease and “self-will run riot”.

Chapters Six and Seven provide guidelines to the inner machinery of the AA program, including the ways by which to work with and attract others to AA. The Christian concept of God is invoked throughout these two chapters. The “real purpose” of AA adherents, moreover, is “to be of maximum service to God and the people about [them]” (Alcoholics Anonymous, 1976a:77). This chapter is in tension with AA’s earlier claim that alcoholics can, indeed, be recovered. The reader is told instead that alcoholics “are not cured of alcoholism”, and may have only “a daily reprieve contingent on the maintenance of [a] spiritual condition” (Alcoholics Anonymous, 1976a:85). AA philosophy thus moves away from the notion that alcoholics can actually be recovered, as in past tense.

Chapter Seven reestablishes the importance of AA adherents working with others. Here members are told that in order to stay sober one must work with others, especially newcomers: “Practical experience shows that nothing will so much insure immunity from drinking as intensive work with other alcoholics. It works when other activities fail” (Alcoholics Anonymous, 1976a:89). This chapter further establishes that as a twelfth step requirement the member is to “carry [the AA] message to other alcoholics!” (Alcoholics Anonymous, 1976a:89, exclamation point in original text). The reader is advised: “You can help when no one else can. You can secure their confidence when others fail. Remember they are very ill” (ibid.:89). Here the text constitutes one of the manners by which AA

reproduces itself through member activity. By instructing members that only they/alcoholics can help others too “ill” to be reached by outsiders, AA ensures first that adherents believe that only through AA activity will they, themselves, remain sober, and second that its ideology is reproduced through drawing in additional members.

Chapter Eight informs “wives” of alcoholics. There is no chapter, however, to instruct husbands of female alcoholics. It is assumed that the alcoholic is a married heterosexual male. The Chapter informs the wife that AA needs to be a priority in her husband’s life if his recovery is to be successful. AA ideology is also taught here to the alcoholic’s wife: “Try not to condemn your alcoholic husband no matter what he says or does. He is just another very sick, unreasonable person. Treat him, when you can, as though he had pneumonia. When he angers you, remember that he is very ill” (Alcoholics Anonymous, 1976a:108). Wives are urged that “Patience and good temper are most necessary” (Alcoholics Anonymous, 1976a:111). Incredibly, the wife is advised here not to “nag” her alcoholic husband lest she lose him.

Wives are advised, moreover, not to become jealous or meddlesome of the attention that her alcoholic husband pays to AA:

You have been starving for his companionship, yet he spends long hours helping other men and their families. You feel he should now be yours. The fact is that he should work with other people to maintain his own sobriety. Sometimes he will be so interested that he becomes really neglectful. Your house is filled with strangers. You may not like some of them. He gets all stirred up about their troubles, but not at all about yours. It will do little good if you point

out and urge more attention for yourself. We find it a real mistake to dampen his enthusiasm for alcoholic work. You should join in his efforts as much as you possibly can.

AA discourse is thus made primary not only to the alcoholic who seeks help from AA, but also to the female spouse of the male alcoholic. As the entire chapter attends to the male alcoholic, assuming a heterosexual wife, AA makes an overt attempt to draw female spouses into its discourse.

A wife is thus instructed to support her alcoholic husband and to make her own commitment to Alcoholics Anonymous. To this end, AA situates itself as transcendental to any—and all—other requirements and responsibilities of familial and human life. Wives of alcoholics are advised to attend “*the fellowship of Al-Anon*”, a support group created by Bill Wilson’s wife, Lois, whereby friends and relatives of alcoholics may learn to deal with alcoholism through “*the general principles of the A.A. program*” (Alcoholics Anonymous, 1976a:121, italics in original text). Accordingly—and most importantly perhaps—through Al-Anon, Alcoholics Anonymous discourse becomes reconstituted and reproduced by and through the families and friends of AA alcoholics.

Chapter Nine provides hope to the family of the male alcoholic, and begins with “Our women folk have suggested certain attitudes a wife may take with the husband who is recovering” (Alcoholics Anonymous, 1976a:122). AA advises that after living with an alcoholic the entire family becomes neurotic and ill: “Years of living with an alcoholic is almost sure to make any wife or child neurotic. The entire family is, to some extent, ill” (unnamed doctor, in Alcoholic Anonymous,

1976a:122). Wives and children are thus advised not to criticize, condemn, or dredge up past misdeeds of the alcoholic who now attends AA. Given that neurosis is a family issue, all family members are advised to follow AA philosophy.

This chapter further advises that with the father/husband “head of the house” (Alcoholics Anonymous, 1976a:123) in AA, the road ahead will be rocky, though in time the family will witness a “[miracle] of mental health” (Alcoholics Anonymous, 1976a:133). Here AA counsels wives on issues of smoking, coffee drinking, and sex. Wives are advised that husbands’ abstinence from alcohol is of far more importance than are abstinence from nicotine and caffeine; thus wives are cautioned against judging husbands on the latter vices. Indeed, abstinence from alcohol consumption must take precedence over all other vices. On sex, moreover, wives are counseled by AA to not make an issue of their husband’s (temporary) impotence upon cessation of drinking: “Unless the reason is understood, there may be an emotional upset” (Alcoholics Anonymous, 1976a:134). Nonetheless, in the event that the condition of impotency persists beyond a few months, AA suggests that a medical doctor should be consulted.

Chapter Nine concludes with three mottoes for living with the recovering alcoholic: “First Things First”; “Live and Let Live”; and “Easy Does It”. Such slogans are also promoted nightly within AA meeting sites as codes for living and staying sober.

Chapter Ten provides information to the Employer of an alcoholic. The chapter begins with a number of stories of “alcoholics” who had been fired from jobs, all of whom had subsequently committed suicide. Employers are encouraged to understand the “malady” of alcoholism (Alcoholics Anonymous, 1976a:139), and are advised that their understanding and assistance in the end “will pay dividends” (Alcoholics Anonymous, 1976a:141). Indeed, the alcoholic will forever be indebted to the employer’s patience and understanding: “The right kind of man, the kind who recovers, will...work like the devil and thank you to his dying day” (Alcoholics Anonymous, 1976a:149). Here the text counsels the employer to give a second chance to an alcoholic; to do so will guarantee undying appreciation, and will ultimately serve to prevent an alcoholic’s suicide.

The clear mandate of the chapter is to steer the alcoholic employee into treatment—into Alcoholics Anonymous. Employers are urged to provide an opportunity for AA recovery to employees. According to the *Big Book*, “No man should be fired just because he is alcoholic. If he wants to stop, he should be afforded a real chance. If he cannot or does not want to stop, he should be discharged. The exceptions are few” (Alcoholics Anonymous, 1976a: 148). Here, the employer is to assume that the alcoholic in wanting to, has the volition to cease drinking. A further implication here is the proposition that an alcoholic who affiliates with Alcoholics Anonymous rarely warrants discharge from his job, as AA mediates and underscores the second chance required of the employer.

Chapter Eleven outlines the “vision” for the alcoholic in AA, advising potential members that the “fellowship of Alcoholics Anonymous” serves as a substitution for drinking. The chapter reiterates the notion that AA can indefinitely cease the alcoholic’s drinking (Alcoholics Anonymous, 1976a:156-158). One’s reliance on one’s God is said to ensure one’s sobriety: “God will constantly disclose more to you and to us. Ask Him in your morning meditation what you can do each day for the man who is still sick. The answers will come, if your own house is in order” (Alcoholics Anonymous, 1976a:164). Accordingly, one’s own house comes into order only through abstinence afforded by Alcoholics Anonymous: “We shall be with you in the Fellowship of the Spirit, and you will surely meet some of us as you trudge the Road of Happy Destiny. May God bless you and keep you—until then” (Alcoholics Anonymous, 1976a:164). Thus, when the alcoholic is ready to accept AA, and God, into his life, Alcoholics Anonymous will be waiting to assist in his recovery.

Finally, the *Big Book* offers brief narratives of forty-three AA converts/adherents, demarcated by sub-sections “Pioneers of A.A.”, “They Stopped in Time”, and “They Lost Nearly All”. The narratives typically begin with stories of drinking and alcoholism, proceed to the process by which Alcoholics Anonymous was found and by which one discovered that s/he was “sick”, and conclude with grateful, sober reflections around the power of AA, reflecting members’ customary model of speaking—“what it used to be like, what happened, and what’s it like now”.

Most of the narratives reiterate AA's position that *alcoholism* is a necessarily progressive *disease* and that the only solution lies in complete abstinence. The format of these narratives is further reproduced and reconstituted through the personal stories/narratives recounted by members within meeting sites. As Pollner and Stein (1976:210) observe, personal narratives found in AA tend to "recount a personal odyssey more or less conforming to the *Big Book* template of 'what we used to be like, what happened, and what we are like now'."

Personal narratives largely detail the occurrence of miracles, often including experiences respecting God or a Higher Power. All narratives present examples of success within AA. There are no stories of individuals for whom Alcoholics Anonymous did not work. Indeed, rare are the stories provided from persons who continue to "slip" despite going to meetings; and certainly there are no stories from members who have not found AA to be helpful. The clear mandate of the *Big Book* is to draw in its reader with the promise of a "new freedom" from the ravages of *alcoholism*.

A.2. *Living Sober*

This eighty-eight page book presents the "facts" of "alcoholism" (Alcoholics Anonymous, 1975:i). In this book, the point is reiterated that recovery from *alcoholism* is grounded in absolute abstinence: "any drinking at all leads to serious trouble for the alcoholic, or problem drinker" (Alcoholics Anonymous,

1975:iv). In this text, AA uses the terms alcoholic and problem drinker synonymously.

This book advises that its mandate is to help newly sober persons develop “new habits to take place of...old ones” (Alcoholics Anonymous, 1975:1). In time AA promises that “not drinking [will become] natural and easy” (Alcoholics Anonymous, 1975:1). Despite AA’s claim that it “does not ...offer scientific expertise on staying sober” (Alcoholics Anonymous, 1975:3), it contradictorily calls upon medical science for support:

Doctors who are experts on alcoholism tell us that there is a sound medical foundation for avoiding the first drink. It is the first drink which triggers, immediately or some time later, the compulsion to drink more and more until we are in drinking trouble again (Alcoholics Anonymous, 1975:5)

This contradiction surfaces often throughout the AA texts analyzed for this study.

Furthermore, without recognizing that adherents *draw their knowledge* from AA text/discourse, Alcoholics Anonymous, in the reverse, claims:

Many of us have come to believe that our alcoholism is an addiction to the drug of alcohol;...we have to keep away from the first dose of the drug we have become addicted to. Our experience seems to prove this, as you can read in the book “Alcoholics Anonymous”..., and as you can hear wherever A.A. members get together and share their experiences.

Alcoholics Anonymous, moreover, fails to acknowledge that the disease discourse is elevated and promoted first by itself, from which members and adherents subsequently draw; the discourse becomes reproduced secondarily within meeting

sites and between sponsor-sponsee⁷ communications. Ultimately, AA discourse informs members/adherents talk and practice, not vice-versa.

The book presents “tools of AA”, the numerous cliches and sayings heard around the rooms of Alcoholics Anonymous, which can be interpreted as AA codes: “Easy Does it” (Alcoholics Anonymous, 1975:3, 44); “If you don’t take that first drink, you can’t get drunk” (p.4); the “24-Hour Plan” (p.5-6); “One drink is too many, but twenty are not enough” (p.4);⁸ “Live and Let Live” (p.10); and “First Things First” (p.32).

As also asserted in the *Big Book*, alcoholism is proposed by AA to be analogous to an allergy. As a person with an allergy, members are counseled to respect their condition through abstinence:

A person with a food allergy...can go around feeling a lot of self-pity, complaining to everyone that he or she is unfairly deprived, and constantly whining about not being able, or allowed, to eat something delicious.... Obviously, even though we may feel cheated, it isn’t wise to ignore our own physiological makeup. If our limitations are ignored, severe discomfort or illness may result. To stay healthy and reasonably happy, we must learn to live with the bodies we have (Alcoholics Anonymous, 1975:7).

As an allergy then alcoholism is grounded in physiology, despite AA’s earlier claim that it does not offer “scientific expertise on staying sober.” Furthermore,

7. “Sponsee” is an AA term that defines a member who is mentored by another member of longer AA standing.

8. The text informs the reader that while “we never really wanted to give up drinking altogether...we know now that this is what works” (Alcoholics Anonymous, 1975:5). Here AA’s rejection of the possibility of controlled drinking is reiterated.

according to AA (1975:8), “[s]ome physicians expert on alcoholism tell us that there is no doubt that alcoholism steadily grows worse as one grows older.”

This text submits that most anyone can be classified as an alcoholic. Indeed, if a person goes for “even years” without a drink of alcohol, there is no reason to believe that s/he is not an alcoholic. Rather, even those who at some point throughout their lives abstain from alcohol for extended periods of time, have still, in actuality, an “incurable” “illness” (Alcoholics Anonymous, 1975:8). Therefore,

We cannot change our body chemistry and go back to being the normal, moderate social drinkers lots of us seemed to be in our youth. ...we can no more make that change than a pickle can change itself back into a cucumber. No medication or psychological treatment any of us ever had “cured” our alcoholism (ibid,:8).

The suggestion is that apart from Alcoholics Anonymous literally nothing can amend perceived alcoholism. In a repetitious manner, this book underscores the fatality of the “disease of alcoholism” and emphasizes the need for absolute abstinence. Finally, should AA not work for whatever reason, “It is your right to take back your misery if you want it” (Alcoholics Anonymous, 1975:10).

Though “no one is ever required to do, or not to do, anything”, readers are encouraged to be active both inside AA (in meeting sites and through the AA service structure) and outside AA, as in reading or exercising. Readers are also advised on nutritional matters of early soberness: “Newly sober alcoholics, when it is suggested they eat instead of drink, frequently wonder: What about getting too fat?” (Alcoholics Anonymous, 1975:23). The solution, counsels AA, is that

weight gain is a rare occurrence. Instead a newly sobered individual may expect to lose weight, though too thin individuals can expect to gain weight: "Many of us lose unnecessary fat when we start taking in wholesome food instead of the sheer calories of ethyl alcohol, and others have gained needed pounds" (Alcoholics Anonymous, 1975:23).

Through this text, the reader/newcomer comes to believe that not only can s/he get sober and stay sober, but once a member of Alcoholics Anonymous, a fat person can lose weight and a thin person can gain weight. AA now positions itself not only as a specialist on getting sober, but also pretends to be a diet and nutritional expert (what is good and not so good for you to eat [p.23]), fortifying the importance of both taking vitamin supplements and staying sober. Thus, AA presents itself as an authority on both drinking and weight control. Again, however, no substantiation is provided to support its weight control claims.

Further tools for newly "recovered alcoholics" (Alcoholics Anonymous, 1975:25) include "telephone therapy" (Alcoholics Anonymous, 1975:24-26); "availing [one]self of a sponsor"⁹ (Alcoholics Anonymous, 1975:26-30); rest therapy (Alcoholics Anonymous, 1975:30-32); "fending off loneliness" (Alcoholics Anonymous, 1975:33-37); "watching out for anger and resentments" (ibid.:37-41); "looking out for overelation", that is, being careful not to feel "extraordinarily good" (ibid.:43-44); gratitude (ibid.:47-51); "remembering [one's] last drunk"

9. Sponsorship is addressed further in Chapter Five.

(ibid.:51-52); “avoiding dangerous drugs and medications” (ibid.:53-56); “eliminating self-pity” (ibid.:56-58); “steering clear of emotional entanglements” (ibid.:61-62); “getting out of the ‘if’ trap” (ibid.:63-64); “reading the A.A. message” (ibid.:74-76); going to A.A. meetings” (ibid.:77-83); and doing the Twelve Steps (ibid.:84-86).

AA asserts that alcoholism is “the lonely disease, and very few recovered alcoholics argue the point” (ibid.:33). Accordingly, alcoholics are a lonely bunch who have a tendency to feel ostracized from larger groups: “We often felt a deep sense of not belonging, even when we cheerfully acted sociable” (ibid.:34). Thus, the chief purpose of alcoholic drinking is to feed the ego:

It is an observable fact, of course, that our chief use of alcohol was egocentric—that is, we poured it into *own* bodies, for the effect we felt within our own skin. Sometimes, that effect momentarily helped us to behave sociably, or temporarily assuaged our inner loneliness (ibid.:34, emphasis in original).

AA does not provide information for the named “fact” here, nor does it provide an explanation for its use of the term “egocentric”.

The text advises that gratitude is warranted given AA's awarding to members a flexibility and freedom in thinking: “We could have been grateful that A.A. has no dues or fees and demands no adherence to any doctrine, rules, or rituals” (ibid.:51). While AA makes such a claim, it does demand adherence to a specific doctrine, that of the AA discourse, and there are, indeed, rules and rituals imposed upon AA members. For example, “How it Works”, “The Twelve Steps”, and “The Twelve Traditions” are invariably read at meetings in Canada and the

U.S. The Christian “Lord’s Prayer” is read at the majority of meetings, and a monetary collection instituted through the seventh tradition is conducted at literally all AA meetings. All of these factors can be understood as organizing rules of Alcoholics Anonymous.

On “eliminating self-pity” the reader is counseled that the emotion of self-pity “is so ugly no one in his or her right mind wants to admit feeling it” (ibid.:56). Indeed, to question AA philosophy within meeting sites is often met with the accusation that one is on a “pity pot”, as according to Alcoholics Anonymous, “[S]uch thinking is a great ticket to a barroom” (ibid.:57). Those who do not accept their *alcoholism*, are thus “pressing salt into their own wounds” (ibid.:57). Given the “ugly” character of self-pity, members learn that questioning AA truth is to be avoided. To do otherwise poses a threat to one’s sobriety.

As with the *Big Book*, this text indoctrinates the reader to AA discourse. Primary tenets, or codes, of AA are reiterated throughout the text, and readers are encouraged to identify with the “hundreds of thousands” (ibid.:33) of AA members who have come before them. Should a member question his/her *alcoholism* (such questioning is classified by AA as the “If Trap” [ibid.:63]), s/he, according to AA, needs to accept that *alcoholism* is a result of biochemistry. Thus, those who think they are able to drink after long or short periods of sobriety need to know that drinking will never be a feasible option for them. To drink contradicts the biochemical and fatal nature of the “disease” of *alcoholism*. AA (1975:64) explains to persons who may be considering a drink:

In effect, we are ignoring the biochemical, unchangeable nature of our ailment. Alcoholism respects no ifs. It does not go away, not for a week, for a day, or even for an hour, leaving us nonalcoholic and able to drink again on some special occasion or for some extraordinary reason—not even if it is a once-in-a-lifetime celebration, or if a big sorrow hits us, or if it rains in Spain or the stars fall on Alabama. Alcoholism is for us unconditional, with no dispensations available at any price.

According to AA, to entertain the idea of drinking is a “childish notion” and a “dangerous delusion” (ibid.:73).

AA poses “that willpower all by itself is about as effective a cure for alcohol as it is for cancer” (ibid.:74). The book, like other AA texts, urges readers to attend meetings and to practice the twelve steps. Accepting AA ideology into one’s life requires a relinquishing of former thinking—what AA categorizes as “Letting Go of old ideas” (ibid.:71).

B. PROMOTIONAL PAMPHLETS

B.1. “AA for the Woman” (1976b)

This booklet was picked up at a meeting in 1999, though its copyright is dated 1976. Several of the questions reveal a sex role double standard. The pamphlet begins with a series of fifteen questions, eleven of which appear generic, that is, they are not geared toward identifying gender specific issues around drinking. Four questions, however, position the respondent as a highly sensitive housewife, vis-à-vis what a man might be asked of similar circumstances. For example, question number three asks: “Do you plan in advance to “reward” yourself with a little drinking bout after you’ve worked very hard in the house?”

Question four asks: "Are you often permissive with your children because you feel guilty about the way you behaved when you were drinking?" Question six asks: "Do you ever phone the hostess of a party the next day and ask if you hurt anyone's feelings or made a fool of yourself?" And question twelve asks: "Do you carry liquor in your purse?" These questions assume, first, that women who might be alcoholic are wives and mothers. Second, the questions suggest that a female alcoholic is more highly conscious of her drinking in public. Third, comparative questions cannot be found regarding men's drinking in AA text.

These questions carry different assumptions regarding motives and consequences for women's drinking vis-à-vis men's drinking. In not updating their questions, or information, AA is complicit in reproducing sexist stereotypes of women through its educational material, especially in asking, as the pamphlet does, why can't some women "drink like a lady?" (Alcoholics Anonymous, 1976b:8).

As with other AA material, this pamphlet reinforces the notions of disease and medical authority (ibid:7). Although highly contested as a primary disease, AA insists that the status of alcoholism as a "disease" is one that "most people accept" (ibid:8). AA thus offers the female alcoholic "freedom" from her disease.

The booklet follows with six narratives of alcoholic women who found AA; five of which are noted as being "married". All narratives credit AA for sobriety and for life itself. Noting husbands implies the heterosexuality of the five female AA adherents. Though this booklet claims to address special issues related to

female alcoholism, I demonstrate in the following chapter that AA has been highly criticized for its inability to address issues around gender and for its adoption of a male higher power.

Finally, the forty-page booklet implores its reader to attend meetings, and explanations of “open”, “closed”, and “newcomer” meetings are provided. Again the progressive and necessarily fatal nature of alcoholism is reinforced:

However far away from the last drink a member may be,...A.A. always says ‘I *am* an alcoholic.’ A.A.’s accept the fact that they have a chronic illness and cherish the Fellowship’s help in the ongoing process of their own recovery (ibid.:34).

Thus, whether one has been sober for one day or fifty years, one is always, according to AA, an alcoholic.

B.2. “44 Questions” (1952)

This forty-page booklet poses forty-four questions to potential alcoholics as a means of prompting the reader to recognize symptoms of alcoholism. The questions are too numerous to repeat and address individually, so I consider particular issues posed by some questions rather than treat each question individually.¹⁰

Each question is followed by AA’s response to its own question. The opening passage asserts that at the time of publication in 1952, AA had “helped more than 2,000,000 problem drinkers” (Alcoholics Anonymous, 1952:5). One’s sobriety through AA is contingent, the text reads, upon “continuing contact with

10. See APPENDIX 4–A for the list of all 44 questions.

alcoholics" (ibid.:5). This booklet, as with those reviewed above, informs its reader that *alcoholism* is "a health problem" (ibid.:7).

The text informs its reader that "the A.A. program will work for all alcoholics who are sincere in their efforts to stop drinking; it usually will not work for those not absolutely certain that they want to stop" (ibid.:7). This assertion can be read as peculiar, as if someone is "absolutely certain that they want to stop" drinking how central is the role of AA? Moreover, in what way is "absolutely certain" defined here? Furthermore, even those persons not yet convinced they are *alcoholic*, learn from adherents that they are alcoholic after all. The point must be made that AA serves an important role in convincing previously unconvinced persons that they are, indeed, *alcoholic*.

Readers are advised that whether a high-bottom or low-bottom drunk, AA welcomes all persons with open arms. Once an *alcoholic*, advises AA, one will "never" (1952:8) have control of one's drinking: "if a person is an alcoholic, touching alcohol in any form cannot be risked" (ibid.:9). Even "periodic drinkers" who go without consuming alcohol for years at a time, may well be alcoholic, cautions the booklet, as *patterns of consumption* are indicative of *alcoholism* rather than the lengths or periods of consumption (ibid.:10-11). Therefore, according to Alcoholics Anonymous anyone who drinks alcohol to excess, even once every year, is a candidate for its twelve step program.

The booklet addresses a barrage of questions that target possible ambivalence toward Alcoholics Anonymous and the reader's potential *alcoholism*.

The text advises that in order to get sober and/or stay sober one requires the assistance and support of Alcoholics Anonymous. Moreover, those sober, but non-AA affiliated, are characterized as maintaining an unhappy “self-enforced sobriety” (Alcoholics Anonymous, 1952:13). Testimony is provided from an anonymous source that there is “no comparison between the happy sobriety of today and the self-pitying of yesterday” (ibid.:14). Therefore, it is not enough to discontinue drinking; AA makes abstinence satisfying.

Information is provided on how to join a group, and on what is meant by an ‘open’ or ‘closed’ meeting. The number of weekly meetings attended is said to be of personal preference, though the reader is told that AA members find that “the quality of their sobriety suffers when they stay away from meetings for too long” (ibid.:23). Indeed, “Many know from experience that if they do not come to meetings, they may get drunk—and that if they are regular in attendance, they seem to have no trouble staying sober” (ibid.:23). AA reinforces its position on meeting attendance by suggesting that those who do not attend enough meetings will get drunk.

To this end, the text addresses the question of whether persons are required to “attend meetings for the rest of their lives” (ibid.:24). On the surface, AA states that it is a personal choice to attend meetings forever: “There is always a choice between doing and not doing a thing including the crucial choice of whether or not to seek sobriety through A.A.” (ibid.:24). The alcoholic who wants to stay sober, however, “will probably keep going to meetings” (ibid.:24). Meeting

attendance should be practiced on the basis of taking care of one's present sobriety, and "on this basis, no activity, including attendance at meetings, can ever resemble a long-term obligation" (ibid.:24). From this, the reader is left with a curious ambiguity as to AA's position on long-term meeting attendance. Adherents nonetheless assert the importance of regular and perpetual meeting attendance, as evidenced by the slogan "Keep Coming Back".

AA provides its definition of "slip" or "relapse" as that of getting drunk after being sober. Reasons behind slips are given as forgetting that one is an alcoholic, or as staying away from meetings, or as not associating with other AA members, or as becoming "too involved with business or social affairs to remember the importance of being sober", or as becoming tired and getting "caught" with "mental and emotional defenses down" (ibid.:29). Therefore, although regularity of meeting attendance is said to be of personal choice, to do otherwise appears to risk sobriety. The '24-hour program' is also outlined here as "the basic approach to the problem of *staying* sober" (ibid.:30). Rather than overwhelming members, especially newcomers, with the expectation of staying sober for the rest of their lives, the quest of working within a 24-hour time frame makes the mission of sobriety more manageable.

Another question addressed here is "why doesn't A.A. seem to work for some people?" In response, AA states that it will work only for those "who honestly want to stop drinking—and who are able to keep those facts uppermost in their minds at all times" (ibid.:31). Here we are told again that "most medical

authorities say no one who is an alcoholic can ever drink normally again. The alcoholic must accept this cardinal fact" (ibid.:31). To do otherwise is life-threatening, as implied by the following directive:

After they have been sober a while in A.A. some people tend to forget that they are alcoholics, with all that this diagnosis implies. Their sobriety makes them overconfident, and they decide to experiment with alcohol again. The results of such experiments are, for the alcoholic, completely predictable. Their drinking invariably becomes progressively worse.

Nonetheless, Alcoholics Anonymous continues to promote itself as having the capacity to help alcoholics arrest their progressive disease.

Finally, the booklet advises that AA does not directly assist members with financial or family problems, though eventually being "sincere" in their sobriety and working the Twelve Step Program will "work out" (ibid.:32-33) one's previous financial and familial difficulties. Once sober, the text advises that the alcoholic will find that many of the other problems of daily living can be successfully corrected.

Potential newcomers are introduced to Alcoholics Anonymous through these 44 questions. Vital AA issues such as meeting attendance, one's responsibility to AA, and AA's authority through medical science are emphasized through this text. In reestablishing its authority through science, AA claims: "Doctors, perhaps better than any other group, are in a position to appreciate how unreliable other approaches to the problem of alcoholism have been in the past" (ibid.:34).

B.3. “Is AA for you?” (1973)

This pamphlet contends that as a disease there is no disgrace in being alcoholic. To this end, alcoholics can face the fact that they have a problem. The reader is offered a list of twelve questions,¹¹ each followed by an elaboration, to which the reader can respond in order to decide whether AA is for him/her. This text reinforces the position that alcoholism is progressive, and unless arrested, the pondering reader will “die, or end up in an institution for the rest of [his/her] life” (Alcoholics Anonymous, 1973).

Importantly, moreover, through the use of the pronoun “we” the text promotes all AA affiliates’ thinking as being monolithic. All members are thus assumed to share the same experience: “before **we** came into A.A.”; “in A.A. **we** do not *tell* anyone to do anything”; “After **we** came into A.A., **we** found out that once **we** started to drink, we couldn’t stop”; “When **we** came into A.A., **we** found out that [a blackout] is a pretty sure sign of alcoholic drinking”; and “By the time **we** got into A.A., **we** felt trapped. **We** were drinking to live and living to drink. **We** were sick and tired of being sick and tired” (Alcoholics Anonymous, 1973, bold added).

The pamphlet concludes with an invitation to calculate the reader’s score. Four or more “yes” answers indicate that the reader is “probably in trouble with alcohol,” though ultimately advises AA, only the reader can decide whether AA is

11. See APPENDIX 4-B for the list of all twelve questions.

for him/her. Finally, in italics, the pamphlet underscores AA's disease concept of alcoholism:

A.A. does not promise to solve your life's problems. But we can show you how we are learning to live without drinking "one day at a time." We stay away from that "first drink." If there is no first one, there cannot be a tenth one. And when we got rid of alcohol, we found that life became much more manageable (ibid., Italics in original text).

Thus, only complete abstinence promises a life more manageable. Indeed, this is one of AA's primary codes—to not take that first drink.

B.4. "This is AA: An Introduction to the AA Recovery Program" (1984)

This twenty-three page booklet begins with an excerpt of AA's "How it Works." Again, the reader is told that only s/he can decide whether s/he is an alcoholic. The text goes on to state, however, that "if your drinking has reached the point where it worries you *a bit*" then "you may be interested in knowing something about Alcoholics Anonymous" (Alcoholics Anonymous, 1984:5, emphasis added). In targeting persons whose drinking worries them "a bit", AA inclusively invites all persons into its fold, regardless of drinking histories. Indeed, the reader is inspired "to join the thousands of men and women in A.A. who have put their drinking problems behind them" (ibid.:5).

"We of AA" are defined as being men and women who have discovered, and admitted, that they cannot control alcohol. Accordingly, such men and women have learned that they must live without alcohol if they are to avoid disaster for both themselves and for those close to the drinker (ibid.:7). AA's

authority is self-defined through acknowledging that its fellowship spans “146 countries” across the globe (ibid.:7).

Of particular interest, the text states that AA does “not recruit new members”, though, as I note above, a close look at AA literature shows that much of its text is designed to attract/recruit new members. Even persons who may not have encountered any serious consequences of drinking are targeted here as being potentially alcoholic:

Some of us drank for many years before coming to the realization we could not handle alcohol. Others were fortunate enough to appreciate, early in life or in their drinking careers, that alcohol had become unmanageable (ibid.: 7).

Thus, no matter how “high” or “low” the bottom, according to AA, all members and potential members “are united by [their] common problem” (ibid.:8). Common problems associated *around* alcohol, rather than alcohol itself, bind members irrespective of specific drinking behaviors or histories.

Interestingly, too, AA repeats: “We do not think we are the only people who have the answer to problem drinking” (ibid.:8). Yet in not awarding any credence to more moderate approaches, an affiliate appears to have no option other than the AA code of complete abstinence. Especially as the text advises: “We know that the A.A. program works for us, and *we have seen it work for every newcomer, almost without exception, who honestly and sincerely wanted to quit drinking*” (ibid.:8, emphasis added). Can AA really claim success for every newcomer who enters with a sincere desire to stop drinking? The reader is led to believe that

anyone who honestly wants to stop drinking may do so through Alcoholics Anonymous.

This pamphlet repeats AA's claim that once defined as an alcoholic, there can be "no turning back to 'normal' social drinking," as "[o]nce an alcoholic, always an alcoholic" (ibid.:10). "For an alcoholic," the text reads, "one drink is too many and a thousand is not enough" (ibid.:10). Indeed, this particular line has become a cliché within AA meeting sites.

This text advises, as did "44 Questions", that "enforced sobriety" without AA is "not" a "pleasant experience" (ibid.:11). Thus, only Alcoholics Anonymous holds the key to "a new outlook on sobriety" (ibid.:11). Part of this key is held in a self-proclaimed admission of powerlessness. "Telltale symptoms of alcoholism, moreover, are as follows: "if we got drunk when we had every reason to stay sober, if our drinking had become progressively worse, if we no longer got as much fun from drinking as we once had—these we learned, were apt to be symptoms of the illness we call alcoholism" (ibid.:12). Such are the symptoms of alcoholism, though, I might add, such may also be symptomatic of many drinkers, both problem and non-problem.

The booklet tells its reader that the experience of those achieving sobriety in AA serve as "certain 'tools' and guides" which may be accepted or rejected, though it is advised as more "wise" to follow the experience demonstrated by those for whom the A.A. recovery program really works (ibid.:13). Tools of the program include the "24-hour plan", and AA's "Twelve Steps". Certain slogans,

such as “First Things First”, “Easy Does It”, and “Live and Let Live”, serve also as program tools. Again, these slogans, or codes of behavior, are voiced nightly in meeting sites across North America.

AA promises members freedom. Indeed, “A.A. offers a sober way out of the squirrel cage of confused problem drinking. Most of us have found it an easy way” (ibid.:17). In its insistence that it offers an easy way out of alcoholic drinking, an implication is made that beating alcohol may not be that difficult to do after all. Surely, among the “millions” of AA success stories there must be others who have not been so successful, ultimately leaving AA, and yet others who, while remaining, continue to struggle with their desire to not drink alcohol. Sobriety certainly does not always come as easily as implied by Alcoholics Anonymous.

B.5. “Do you think you’re different?” (1976c)

This thirty-eight page booklet begins also with an excerpt from the *Big Book’s* “How it Works.” The text proceeds to introduce a variety of reasons that potential members may use to set themselves apart from AA’s program. As a “disease”, however, the text asserts, “alcoholism” can “strike” anyone, irrespective of “age, sex, creed, race, wealth, occupation, or education” (Alcoholics Anonymous, 1976c:7). And thus, “*anyone* who wants to stop drinking is welcome in A.A.” (ibid.:7). Therefore, no matter who or what you are, Alcoholics Anonymous welcomes you.

The booklet goes on to offer a collection of fourteen testimonies from AA members who thought at one time that they were different in some way from other members. The narratives come from: Gloria, a black female; Louis, a senior; Padric, a gay male; Ed, an atheist; Paul, a Native American; Diane, a teenager; Michael, a member of the clergy; Mary, a lesbian woman; George, a Jew; “Famous”, a movie star; Phil, a low bottom drunk; Jim, a high bottom drunk; and Jan, an agnostic. The point, I assume, is to have readers identify with one or more of the narratives presented through the text. Though Alcoholics Anonymous in actuality is grounded upon traditional family values and traditional gender roles, with men still constituting the majority of members (Mäkelä, 1996:170), the narratives suggest that all persons can get sober in AA, irrespective of gender, religion, sexual orientation, skin color, age, or for that matter, movie stardom.

In addition to “illness”, the narratives present the concepts of “high bottom drunk”, “low bottom drunk”, and the “24 hour”. The reader is told that agnostics and atheists can also get sober in AA. However, the agnostic’s narrative refers to “God”, and ends with the insight that there is something “beyond the realm of human reason” (ibid.:34). This narrative thus reproduces the message in the *Big Book*’s “Chapter to the Agnostic” which, I argue later, serves to jockey agnostics towards believing in “God”. Though AA rhetoric insists that one need only believe in a personal “higher power”, the *Big Book* and this narrative lead the reader to believe that one’s higher power is necessarily “God” (ibid.:32)—capital G, as in Christian God.

The concluding remarks entitled under the heading “Now we are all special together”, recapitulates from the previous narratives that persons in AA are “brothers and sisters” who are all alcoholics representative of “a community of sharing” (ibid.:35). While we are told that diversity in AA is important, *alcoholism* is the glue that holds members together. Thus, persons in AA are more the same than they are different (ibid.:35). In the midst of diversity then, *alcoholism* is the defining feature of the larger community. *Alcoholism*, therefore, supersedes all other elements of difference. Alcoholics Anonymous thus presents itself as utopian.

B.6. “A Message to Teenagers”

It appears that the purpose of this leaflet is to draw teenagers into Alcoholics Anonymous. Twelve questions¹² are offered for teenagers’ preliminary self-assessment of personal drinking habits. The brochure consists of a series of twelve animated drawings that depict teenagers in a variety of situations (e.g., at home, at school, at work, at a party).

This text asserts that “nobody is too young (or too old) to have trouble with booze” (Alcoholics Anonymous, 1988). Furthermore, “it doesn’t matter how long you’ve been drinking or what you’ve been drinking. It’s what drinking does to you that counts” (ibid., underline in original text). The reader/teenager is told that after answering the twelve questions s/he will be in a position to determine

12. See APPENDIX 4-C for the list of questions to teenagers.

whether s/he is an alcoholic. Surprisingly, however, only one “yes” response represents a problem: “If you answer yes to any one of these questions, maybe it’s time you took a serious look at what your drinking might be doing to you” (ibid., underline in original text). Thus, to answer yes to question four, “Are your grades starting to slip? Are you goofing off on your job?” indicates that the teenage reader needs to take a serious look at his/her drinking habits. Or, a yes response to question ten, “Do you ever get into trouble when you’re drinking?” indicates trouble with alcohol.

It could be argued that teenagers, while experimenting with alcohol, inevitably “get into trouble.” How realistic, however, is it to diagnose teenage *alcoholism* through a series of twelve questions that may be answered in the affirmative through possible experimentation? Or how reasonable is it to label a teenager as *alcoholic*, especially when the young man or woman may have drunk alcohol on only a few occasions? In this and other promotional material, Alcoholics Anonymous asserts that it is not the amount of alcohol consumed, or the length of time drinking that determines a teenager’s (or an adult for that matter, as noted above) *alcoholism*; rather, it is “what drinking does to you that counts” (ibid.). Can *alcoholism* of a teenager actually be diagnosed in this way? Apparently, no one is too young to be helped by AA.

B.7. “Too Young?” (1987)

This booklet is in the design of a comic book; six young persons, Beverly, Pat, Vinnie, Jim, John, and Juanita, are depicted as AA members. The frames provide narratives of the way by which each of the six teenagers found their way to AA. The text informs young readers that “A.A. members include TV actors, senators, judges, salespeople, construction workers, and even Rock Stars! (Alcoholics Anonymous, 1987, emphasis in original text).

The booklet also tells teenagers that in some areas “young people in A.A. have even formed their own groups (ibid., emphasis in original text). Moreover, AA informs the young reader that “successful sobriety has been achieved by members younger than **TWELVE**.... And not just in **ONE** case, but in **MANY**! (ibid., caps, emphasis and bold in original text). Clearly, no age group has escaped being targeted by AA and its disease model, if children as young as twelve can be diagnosed as having a progressive and chronic addiction. There appears to be an agenda here which supercedes appropriate diagnoses and prognoses of alcohol dependency. That is, Alcoholics Anonymous is targeting children as potential members.

This promotional literature concludes with the same twelve questions asked by the above leaflet, “A Message to Teenagers”, and a brief definition of “What is A.A.”, and the Twelve Steps of AA. Interestingly, “What is A.A.?” states that “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" (ibid.). Though a fellowship of "men and women", such literature clearly demonstrates that AA targets children as well.

B.8. "Is there an Alcoholic in your life?" (1976d)

This twenty-three page booklet speaks to persons who believe that they may have a friend or family member with an alcohol problem. Through AA's "simple program of recovery", the text claims, "over a million people who once drank too much are now living comfortable and productive lives without alcohol" (Alcoholics Anonymous, 1976d:5). Though the pamphlet's copyright date is 1976, Alcoholics Anonymous claims that at the point of copyright they had been helping people "For five decades" (ibid.:5), despite the fact that at the time of copyright AA had been in existence for only four decades. In any event, as of 1976 its claim was that it had helped "over a million people."

"[T]hose closest to an alcoholic", states AA, "find it hardest to see and admit that someone they care about can be an alcoholic" (ibid.:5). If the reader has been lied to and deeply discouraged by her loved one's drinking, AA can help (ibid.:5). The booklet thus offers "answers to...questions that people asked both before and after the alcoholic in their lives joined A.A." (ibid.:5-6). Note that the text presupposes that if a loved one is thought to drink "too much", that loved one is necessarily an alcoholic. Thus, if someone guesses that a loved one consumes too much alcohol, then that loved one requires the help of AA and its

disease/abstinence model. That perceived alcoholism is so rampant, however, is, in large part, a result of Alcoholics Anonymous. Therefore, it could be argued that paradoxically, persons require assistance from AA because of the efforts of AA.

This booklet repeats the message that AA helps everyone, irrespective of age, gender, financial status, education level, or religion. The booklet, moreover, contains a sympathetic tone to those who live with alcoholism—a “noncontagious” disease (ibid.:7). Through this particular promotional literature, AA reproduces its rhetoric not only to potential members, but to intimates of those persons who may find their way into AA. In this way, friends and family as well come to reproduce AA truth.

The text provides advice to the reader, noting that “the alcoholic’s compulsion to drink often creates stubborn resistance against help” (ibid.:9). Thus, it is important to approach the topic of alcoholism with the alcoholic when the time is right—that is, when the alcoholic is “ready” (ibid.:9), though the alcoholic may at first “[rebel] against the idea of A.A.” (ibid.:12). Advice is also offered on “slips”, dealing with them, and learning to prevent them.

This booklet concludes with recommendations on how the reader can help the alcoholic get and stay sober, the answers being held, of course, in Alcoholics Anonymous, though as observed earlier, AA pretends not to hold a monopoly on solutions around “problem” and/or alcoholic drinking.

AN OVERVIEW OF AA TEXT

Similar to my own introduction to the AA program, and as demonstrated through *Big Book* narratives (see, for example, “Fear of Fear”, Alcoholics Anonymous, 1976a:321-326), persons often enter AA without believing that they are *alcoholic*. However, the questions to their own surveys indicate that Alcoholics Anonymous casts its net so widely that virtually any person who may have experienced one immoderate drinking episode may meet a criterion of *alcoholism*. Undoubtedly, AA philosophy is engineered to expand its member base, now even including children and teenagers.

Alcoholics Anonymous doctrine furthers itself through its instruction to work with others and to expand the AA member base through the notion of cementing one’s sobriety through twelfth step work. In teaching adherents that “[h]elping others is the foundation stone of your recovery” (Alcoholics Anonymous, 1976:97), AA both promotes and reproduces itself. To this end, members learn that through helping others, one’s own sobriety is ostensibly protected; though importantly “helping” others ultimately further broadens AA membership. The larger its claimed member base, the more Alcoholics Anonymous is regarded as a legitimate and feasible treatment option.

Moreover, the AA demand that one self-identify as an alcoholic may bring with it the potential for misunderstandings outside of the supportive AA environment (Cash et al, 1984: 274). That is, within the confines of Alcoholics Anonymous, the label of “alcoholic” may be embraced; outside of the group the

same label may draw disapproval. Within the alcoholic group setting, as Flores (1988:78) points out, "Each self proclamation of 'I am an alcoholic' is a constant reminder to each AA member that one is just a drink away from a relapse and returning to the person they once were." Within the social milieu of alcoholism then, each member/adherent serves as an imminent reminder that Alcoholics Anonymous is an important safety net. Indeed, says Flores (1988:93), "In many ways, AA can be viewed as a safe, trusting, holding environment where the alcoholics achieve an in-depth understanding of the relationship between their public and private selves."

One might argue, however, that over time, as safety and satisfaction become experienced within the alcoholic reference group, members/adherents learn to function more comfortably within, rather than without, the AA social environment. Thus, the twelfth step expectation of working with other alcoholics, coupled with the security that accompanies working with another drunk who carries the same label, may serve mutual solace and dependency. Says Flores (1988:83), "AA members share 'the kinship of common suffering'".

AA truth is also disseminated through study within actual meeting sites, as many AA groups commit themselves to reading and understanding the *Big Book*; these groups are listed in meeting directories as Big Book study groups. Still, other groups list themselves as "12 Step and/or 12 Tradition Meetings" in which AA's steps and traditions are discussed and studied at length, from AA's *Twelve and Twelve*. AA's truth thus becomes learned, assimilated, and reproduced

through such *Big Book* and Step meetings. AA members/adherents, moreover, who learn to reproduce AA text become revered within AA meeting sites, thereby deriving respect from other members.

Clearly, AA text informs and governs members'/adherents' discourse. As the above review and analysis demonstrates, Alcoholics Anonymous, while denying so, positions itself as *the* authority on drinking behavior and recovery, represents itself as a medical model, and continuously reinforces primary points such as disease, abstinence and fatality interminably throughout its literature.

Importantly, members do not generate AA discourse through the sharing of experience, strength and hope, as AA contends. Rather, AA discourse was developed early in its genesis. Current AA text continues to be defined and informed by early AA discourse.¹³ Furthermore, adherents do not influence AA wisdom; rather, members learn AA doctrine and reproduce it within AA meeting sites, informal gatherings, through AA service work, and by way of the sponsor-ponsee relationship. Rather than constituting an archetype of truth in addiction and recovery, AA presents its truth to vulnerable persons, subsequently becoming reconstituted by followers as AA wisdom.

13. As we are informed by AA, the collective wisdom of only a "hundred or so" early "alcoholics" is drawn upon for the book *Living Sober* (Alcoholics Anonymous, 1975:75). "A.A. wisdom" (ibid.:74) is thus representative of only a few early members. Subsequent to the release of most AA texts, there have been persons who have come to disagree with the "wisdom" that comes to define AA truth. Nonetheless, early AA ideology continues to be presented as reflective of the collective experiences found within AA.

To resist or challenge AA discourse within meeting sites, or between sponsor and sponsee, results in a division from self and others who adhere to its discourse. Furthermore, for those who remain committed to the idea of sobriety through AA membership but continue to relapse, a division between self and AA emerges. Around the rooms of AA members must be careful not to appear to separate themselves from AA ideology, for to do so appears to deny the importance of one's sobriety. Questioning AA doctrine divides oneself from the very discourse that promises to change one's life. To question poses divisions, as only unwavering adherence to AA ideology promises a more satisfying life. Once in AA, a member's thinking becomes AA discourse. To think independently is to exacerbate the divisions between self and between self and others. Such divisions are to be avoided as only full acclimatization of AA doctrine proffers the solution to problem drinking/*alcoholism*.

As I read this authorized AA literature, I was struck by its familiarity, given that I had been long exposed to AA truth through meeting site discussion, personal narratives/stories shared at both open and closed meetings, service work, and through my own sponsee/sponsor relationships. According to AA, all alcoholics share specific characteristics, especially feelings of loneliness, isolation, and inferiority. The question is begged, however, as to the universality of such characteristics among drinking populations. A further problematic arises in that AA text and philosophy are grounded in the experiences and ideas of only a limited number of early AA adherents. Thus, AA discourse has been handed down

to current members/adherents; and indeed, as illustrated above, AA text has changed little since early Alcoholics Anonymous. The personal narratives, the exchanges between sponsors and sponsees, the experiences shared within AA meeting and service sites, and familial and employers' attitudes toward drinking are ultimately informed by AA discourse. In large part, AA members' experience subsequent to the mid-1970s, becomes defined and reproduced through AA text vis-à-vis early AA membership. Members' reality thus becomes understood in relation to, and in terms of, early AA ideology/doctrine, though in contrast, AA claims that its discourse arises from within current AA affiliation and membership.

This textual analysis demonstrates that Alcoholics Anonymous assumes something to be true and presents it as fact, which is subsequently reproduced as truth within members' experience. For example, AA states, restates, and reiterates its claim that alcoholism is a disease, though such a position has been highly disputed. Furthermore, while claiming not to be a medical authority, AA grounds itself in a highly disputed (e.g. Fingarette, 1988, 1991; Peele, 1985, 1995, 1998, 2000; Sobell and Sobell, 1982) disease concept of *alcoholism*. And while Alcoholics Anonymous claims repeatedly to hold no authority on the solution to *alcoholism*, the authoritative spirit of its text does, indeed, position AA as THE authority. To dismiss the notion that *alcoholism* is a disease and to question AA wisdom is posed as denial, and is thus to be avoided within members' practices.

CHAPTER FIVE

THE POLITICS OF AN APOLITICAL TREATMENT MODALITY

“The alcoholically divided self (and its other) lives two modes of existence, referenced by the terms *sober* and *intoxicated*. These two modes of existence contradict one another, producing deep divisions within the inner and outer structures of the subject's self and the self of the other” (Denzin, 1987a:135).

In this chapter I conduct an examination of the political dynamics intrinsic to the Alcoholics Anonymous recovery program. While ostensibly an apolitical program, AA assumes and promotes a multiplicity of politics that inform and organize its belief system, that when engaged, sustain particular socio-politics. Though largely undetected, such politics are in turn adopted and promoted by members/adherents. The following discussion: (a) examines Alcoholics Anonymous as a political institution which is itself located within and pervaded by larger cultural politics; (b) attempts to unravel some of these politics; (c) looks at the internal workings of the AA treatment model, through both philosophy and practice; and (d) from the “inside-out” draws upon autobiographical narratives as vehicles through which to analyze several AA truths/fictions.

INSIDE ALCOHOLICS ANONYMOUS

Alcoholics Anonymous assumes and perpetuates particular politics, though it presents itself as an apolitical response to suspect drinking. The notion of being

politically free can be, in part, located in AA's tenth tradition, which states that "Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy" (Alcoholics Anonymous, 1981:12). Originally, the intent of this tradition was to separate AA from the prohibition movement. However, the notion that Alcoholics Anonymous and members within the organization have "no opinion on outside issues" spuriously conceals the reality that one cannot be removed from outside issues merely by virtue of being an affiliate of AA. As I demonstrate below through autobiographical vignettes and other research, Alcoholics Anonymous, and its membership, despite claiming so, cannot be removed from its surrounding culture, regardless of the pretense to do otherwise.

A. THE GROUP

The *Big Book* (Alcoholics Anonymous 1976a:xix) delineates particular governing policies/politics of Alcoholics Anonymous. They are: (a) that no alcoholic man or woman be excluded from its society; (b) that leaders might serve but never govern; (c) that each group is to be autonomous; (d) that there is to be no professional class of therapists; (e) that there are to be no fees or dues; (f) that expenses are to be met by voluntary contributions; and (g) that there is to be the least possible organization, even in service centers.

All persons are welcome to attend AA on the basis of the third tradition, that is, that persons have a desire to stop drinking. Anyone who contemplates

his/her alcohol consumption patterns is thus invited to become a member of Alcoholics Anonymous. Once inside the organization, AA groups are to be self-supporting. According to its seventh tradition, AA is obliged to decline large contributions, from both within and without its organization. As Alcoholics Anonymous (1981:164) recounts, "Whoever pays the piper is apt to call the tune, and if the A.A. Foundation obtained money from outside sources, its trustees might be tempted to run things without reference to the wishes of A.A. as a whole." AA, then, must remain free from conflicts over money; such conflict, it notes (1981:160-165), may arise internally and externally. AA finances are thus grounded upon "the principle of corporate poverty" (Alcoholics Anonymous, 1981:165). That is, Alcoholics Anonymous "must always remain poor" (Alcoholics Anonymous, 1981:177).

A newcomer's initial introduction to Alcoholics Anonymous tends to be through an AA group. Typically through the group, the newcomer first learns AA philosophy, and is acquainted with AA texts and the various clichés/slogans promoted by AA as grounding sobriety. Each group has the liberty to govern itself insofar as the group follows AA's suggested guidelines and adheres to the Twelve Steps and Twelve Traditions of Alcoholics Anonymous. Groups are also advised to contribute money to AA's larger formalized service structure at the

intergroup level (sometimes called Central Service Centre), and general service, AA's head office located in N.Y., New York.¹

The AA group plays an important role in attracting new members. A newcomer at his/her first meeting is often introduced to the AA group through what is known as the "First and Third", that is, by virtue of AA's first step and third tradition. During this introductory meeting, current members take their turn in sharing with the newcomer their stories/experiences of coming to terms with the first step of AA and the importance of AA's third tradition. Through recounting their own stories, including "drunkalogues" (see also Pollner and Stein, 1996:210), of the means by which they came to AA, current members seek both to qualify themselves as alcoholics and to draw in the newcomer through identification of experiences of drinking and hitting a personal bottom.

Given that AA's third step requires only that a member has "a desire to stop drinking", all persons are invited into AA irrespective of whether a potential member honestly believes that s/he is actually an alcoholic. It remains the job of the group to convince the newcomer that s/he has a problem with alcohol and that s/he requires the assistance of AA to abstain from drinking. As Denzin (1987b:102) has observed, "the group inserts itself into each individual... [and] extends itself through and into each group member."

1. Though interesting, an examination of the economic structure(s) of Alcoholics Anonymous reaches beyond the scope of this research.

Importantly, a member's indoctrination to AA through this first meeting is both crucial in establishing an open door policy to all potential members and imperative to the conviction that all seemingly problematic patterns of alcohol consumption be addressed through Alcoholics Anonymous. The adage heard around the rooms of AA—"I didn't get AA, AA got me"—is testament to the drawing power of the group.² Furthermore, the group is instrumental in facilitating affiliation of new members. Indeed, as Rudy (1986:42) observes: "The affiliation process is structured in such a way as to enhance the likelihood that prospective affiliates will come to define themselves as "alcoholics" and make a commitment to "become sober."

B. SPONSORSHIP

Sponsorship is a vehicle through which the shepherd/sheep relationship becomes constituted within AA. In interaction with members, especially newcomers, a relationship of obedience, confession, and self-regulation is established through the larger group overseeing, pastoring, newer members at one level, and a sponsor overseeing, pastoring, members at a further level. Through these relationships members are guided to self-examination within sites that can be characterized as public, as in group discussion, and as private, as in member/member or member/sponsor exchanges. Says Davis (1983:279), "The

2. Pollner and Stein (1996:214) note, too, that often persons coming into AA do not believe that they are actually alcoholic.

relationship between a sponsor and a sponsee is clearly a kind of authority relationship.”

AA’s booklet on sponsorship, “Questions & Answers on Sponsorship” (1983), is designed to acquaint newcomers and other members to the views AA espouses toward the appropriate ways by which to engage sponsorship within the AA fellowship. The booklet is authorized AA literature; therefore, it can be found at many AA groups. In this pamphlet questions posed include: “How does sponsorship help the newcomer?” “Is it ever too late to get a sponsor?” “How can a sponsor explain the A.A. program?” “How should a sponsor deal with slips?” And, “Should a sponsor lend money to a newcomer?”

According to Alcoholics Anonymous (1983:7), sponsorship involves sharing the tools of sobriety with newcomers:

The process of sponsorship is this: An alcoholic who has made some progress in the recovery program shares that experience in a continuous, individual basis with another alcoholic who is attempting to attain or maintain sobriety through A.A.

The idea is that a member who has already done so is in a position to help newer members establish modes by which their sobriety may be maintained and enriched.

All AA adherents are encouraged to sponsor other members. Indeed, says AA, even “The group as a whole” (Alcoholics Anonymous, 1983:8) is responsible for guaranteeing sponsorship possibilities to new members. As AA advises, “In many successful groups, sponsorship is one of the most important planned activities of the members” (Alcoholics Anonymous, 1983:8). Sponsorship,

moreover, is institutionalized into AA through its twelfth step that asserts that all AA members perpetuate the AA program through carrying the AA message to others.

The adage of “sticking with the winners” (Alcoholics Anonymous, 1983:9) is intended to advise newcomers to stay away from members who have not yet fully appreciated AA philosophy, including those who continue to relapse. The irony here, however, is that newcomers, still struggling with not drinking, enter the rooms of AA without the ability to differentiate the “winners” from the “losers”. A newcomer must therefore rely on gossip through the informal culture in order to learn about others from whom one must stay away. As slipping tends to preclude respect in AA, those who relapse do not qualify to be “winners”. States AA, “It’s only reasonable to seek a sharing of experience with a member who seems to be using the A.A. program successfully in everyday life” (Alcoholics Anonymous, 1983:9). Certainly, a member who continues to drink violates AA’s absolute ethic of continuous sobriety. Members who drink, therefore, remain on the fringes of AA culture. Indeed, according to AA,

Sponsorship can be the answer for the person who has been able to achieve only interludes of sobriety. Perhaps such a member has been associating with people who stay on the fringes of A.A. ...Or the member may have drifted into the company of others who slip repeatedly. Obviously, it’s impossible to learn from them what they haven’t learned themselves. For such a person, a sponsor with a firm grounding of sobriety in A.A. can make all the difference (Alcoholics Anonymous, 1983:12-13).

The message here is that only those persons who are able to typify the AA program through adhering to its philosophy make suitable sponsors. To this end,

members/adherents become further immersed into the AA environment and increasingly committed to AA.

According to Alcoholics Anonymous (1983:11), sponsorship is the best way to introduce newcomers to the AA program. Importantly, to introduce a newcomer to AA through a non-adherent or a nonbeliever compromises the potential to enlarge the AA member base. Thus, to enhance the possibility that a newcomer stays sober and remains in AA, there are rules to sponsorship. For example, AA advises that only persons of the same sex work in a sponsor/sponsee relationship (see also Mäkelä, 1996:177-180). This advice is premised on the belief that a male/female sponsoring relationship may give rise to a romance, and romancing members may go out and drink should the relationship terminate. As heard often around the rooms of AA, "There's a slip under every skirt."³ This heterosexist assumption ignores the possibility that gay and lesbian newcomers may be better suited to sponsoring by persons of the other sex.

Potential sponsors are advised to direct sponsees to authorized AA literature. For example, in the event that a newcomer is experiencing a problem

3. Clearly, this AA cliché is rooted in sexism. Here the male is positioned as victim and the female as perpetrator in that the male member is seen as vulnerable to "the skirt". Through this creed, male members are warned not to involve themselves with female newcomers for to do so places them in a vulnerable position as they may eventually drink. This cliché says nothing of the male sexual predators of women in AA (see also Chapter Six). Indeed, the real threat to men's sobriety lies in the "skirt". This dictum fuels the old double standard that women are seductresses and men are their victims.

in his/her workplace, a sponsor is advised to acquaint employers with the AA text "Is there an Alcoholic in the Workplace" (Alcoholics Anonymous, 1983:20). In the event, moreover, that a newcomer's family does not understand the importance of AA, a sponsor is advised to direct family members to Al-Anon literature and meeting information (Alcoholics Anonymous, 1983:19). Here, again, Alcoholics Anonymous extends itself—and its discourse—beyond the reach of the actual person who seeks assistance with assumed problem drinking. As Rehm and Room (1992:556) observe, "...the foundation of Al-Anon was merely the first of an exponentially increasing diversification and proliferation of 12-step movements, applying the Twelve Step program...of AA to a broad variety of personal problems."

As "the primary purpose of an A.A. group is to carry the message of the recovery program to alcoholics who want and ask for help" (Alcoholics Anonymous, 1983:26), Alcoholics Anonymous espouses that persons seeking help find it in AA (see also Pollner and Stein, 1996:207-208). As, moreover, AA promotes working with alcoholics as a job done best by itself,⁴ the role of sponsorship brings with it the responsibility of nourishing and perpetuating AA philosophy. Sponsors teach newcomers the process by which to become an AA alcoholic, and adherents learn, in turn, the ways by which to espouse and reproduce AA doctrine. Through such reproduction, within the scope of AA at least, members garner respect for their capacity to represent AA truths.

4. See also Chapter Four.

Importantly, such respect serves a sponsor's normalizing gaze over his/her sponsee and self.

C. INSIDE/OUTSIDE ISSUES

One evening at a meeting when I was newly sober I suggested a topic for that night's discussion. I learned then that some topics are appropriate for discussion while others are inappropriate. As a person without an established belief in any organized religion, I was interested in asking—in closed discussion—how other members came to understand their AA God. I had been visiting the rooms of AA for about a month or so and it was becoming clear that the program required me to commit to some sort of understanding of a higher power. Indeed, the words God and Higher Power were laced through the twelve steps, the twelve traditions, and "How it Works". At that point, I had read AA's Chapter to the Agnostic in the *Big Book*, but felt unsatisfied and patronized by what AA had written. Subsequently, I began reading books on religion, but still felt unsatisfied. I thought that it would help to bring up the issue of god in closed discussion so other members could share with me the processes by which they had come to embrace a higher power in their lives. I had hoped that once others shared their concepts of their higher power I could better develop a personal meaning of a god—one that would work for my new sobriety.

When the chair of the meeting invited members to suggest a topic for that night's meeting, I responded by stating that I would like to hear discussion on

members' concepts of god. The response of the chairperson baffled me, as he informed me that god is a personal issue, and certainly one that is classified as an "outside issue". How, I thought, could god be an outside issue when the concept is so central to AA philosophy and teachings? And why was I left to my own devices to find a god when most members around me attested to having a personal relationship with their God. Indeed, it was not uncommon to hear members state that their god watched over them throughout the day, and their god watched out for them, guided them and gave them no challenges that they were unable to handle. Why, I thought, is god an outside issue in AA? The meeting that evening was devoted to explanations around why god is an outside issue in AA. I felt increasingly dissatisfied and frustrated. According to AA, staying sober required coming to some understanding of a higher power, yet no one was willing to help me establish a meaning of god that would work for me. That evening, the meaning of AA's inside/outside issues was perplexing indeed.⁵

Over the following thirteen years in AA, I was never to hear another topic struck down on the basis of it being an outside issue. Nonetheless, over those years in closed discussion sites I had heard men admit to violence against their female partners, sexual assault, incest, and a variety of other crimes. Yet, the meeting's chairperson had not dissuaded discussion of these seemingly outside

5. A few years ago Alt.Recovery.AA had a healthy thread entitled "Your conception of God." As noted earlier, discussions within the NG seem to be much more vibrant and open to controversy when compared to those found within traditional meetings sites.

issues. Though, moreover, AA's sixth tradition states that at a group level, AA "ought never endorse, finance, or lend the A.A. name to any related facility or outside enterprise" (Alcoholics Anonymous, 1981:11), members have come into meetings wearing political badges, or t-shirts advertising alcohol or cannabis. Indeed, what exactly is the real meaning of "outside issues" to AA?

As previously noted, avoiding supposed outside issues is institutionalized through AA's tenth tradition. Alcoholics Anonymous also advises that in debating issues apart from their sobriety, members risk their demise, for to do so loses "their effectiveness in helping other alcoholics" (Alcoholics Anonymous, 1981:178). And, indeed, as AA emphasizes through its tenth tradition, "Survival and spread of A.A. are [its] primary aims" (Alcoholics Anonymous, 1981:12).⁶ If Alcoholics Anonymous identifies outside issues as those that drag AA into public controversy, how could my topic of god be defined as an "outside issue"? As a newcomer I did not understand then that what comes to be defined as an "outside issue" has more to do with a chairperson's refusal to discuss an issue than it does with a formal position of AA. Thus, AA politics can be grounded in both AA discourse and human subjectivity. This resistance to a topic posed for discussion was also experienced when I suggested discussing the sexist language contained by the *Big Book*. At the time, and still now, I see sexism in the *Big Book* and sexism in AA more generally as being synonymous.

6. Certainly, AA's proliferating is central to its agenda, and is discussed more fully in the previous chapter.

D. SEXISM
Vignette One (1989)
Sexism in AA

I am home from the meeting tonight very angry, though I am not sure if my recovery program provides for my anger.

I am a feminist. A lot of my university education is in Women's Studies. I am greatly disturbed by the sexist language and the horrific stereotypes of women contained by the AA Big Book. Tonight, when invited to suggest a topic for discussion, I submitted "sexist language" in the Big Book. I thought that the other women, at least, would also have problems with AA sexist language.

I was wrong. They are so lame brained. No one else saw sexist language as a problem. In fact, several members instructed me to stop feeling sorry for myself, to stop putting up roadblocks to my recovery, and to stop making excuses for getting drunk. They told me that if I continued to see problems where there are none, I would end up drunk. They wanted to know why I couldn't just get on with the program. I am almost a year sober and think that if I wanted to construct obstacles for myself I would have done so long before now. They can all go fuck themselves! I doubt that I will be back.

As the above vignette illustrates, to suggest within AA meeting sites that sexism is problematic tends to invite criticism (sometimes hostile) from AA adherents.

The tone of the above passage displays my anger as I left the meeting that particular evening. With less than a year's sobriety, I was already struggling with elements of authorized AA text. More importantly, however, others in AA had positioned me that evening as an outsider in my apparent audacity to question the *Big Book*. As my sobriety became more secure, and as I became more committed to challenging elements of AA doctrine, I came to understand the nature of

dividing practices in AA. As this vignette demonstrates, that I problematize an element of AA poses a primary division between AA authority and myself. My questioning, however, poses a further division between myself and others as attending adherents had constructed a separation through their positioning of me as an outsider who dared question AA doctrine. Over time I came to see that sexism in AA is an issue taken up by several scholars, and that many writers share my objection to sexism in AA (see also Mäkelä, 1996:177-181). That evening, however, I sat alone in my division.

Several writers argue that male dominated treatment models, such as traditional AA, do not fully address the needs or conditions of women's addictions (Beschner and Thompson, 1982; Cuskey, 1982; Ettorre, 1989; Abbott, 1994; Kaskutas, 1994, 1996b; Lightfoot, Adrian, Leigh and Thompson, 1996; Davis, 1997). According to McCrady and Rayteck (1993:315), populations of female alcoholics are so heterogeneous that they escape clear identification and treatment assessment possibilities as a singular group. Thus, sexism in AA may serve to exacerbate the already tenuous location of women placed in the limited continuum of treatment possibilities. Other writers see AA as promisingly flexible because it appears to attract large numbers of women, especially in the United States and the Nordic countries (Mäkelä, 1996).

Some writers have explored elements of women's power within Alcoholics Anonymous (Beckman, 1993; Smith and Seigel, 1985). According to Beckman (1983), gender socialization scripts which condition females to be co-operative,

powerless, and deferential somewhat paradoxically facilitate women's recovery within AA more so than men's recovery. Conversely, Smith and Seigel (1985) argue that women in AA must come to secure power in a system that ultimately denies them power. As a double bind, "the obvious solution...is to exercise power while denying it; [and] to reach toward a goal while pretending...not to want it" (Smith and Seigel, 1985:17).

As a female member, my position on sexist language was too overt, perhaps too threatening. My goal to have others dialogue around the sexism inherent in AA text was met with resistance as the goal was clearly an exercise in wanting sexism recognized by others in Alcoholics Anonymous. Thus, being rendered powerless in AA may not, as Beckman (1983) suggests, position women as advantageous in their attempts to get sober in AA.

Certainly, as a woman in AA I was/am required to ignore sexism and concede to the larger politics of Alcoholics Anonymous if I determine my sobriety to be of primary importance. Given that its recovery program is androcentric by nature (Mäkelä, 1996), AA serves men first and women second.⁷ Moreover,

7. It is difficult to discern from AA research whether women have parallel recovery success vis-à-vis men. Some writers challenge the belief that women in general have lower success rates than men in treatment for alcoholism (see Henderson and Anderson, 1982). These writers argue that women in fact do better in treatment than men when such treatment is in augmentation to AA, or when treatment independent of AA is provided. Curlee (1971) has concluded that female alcoholics seem to prefer individual therapy, while alcoholic men show preference for group therapy (in Priyadarsini, 1986:180). In addition, "all-women AA groups are enjoying some success" (Henderson and Anderson, 1982:41), as is Women For Sobriety (Kaskutas, 1989, 1992, 1994, 1996b).

Beschner and Thompson (1982:166) argue that “[c]ompared to male drug abusers, drug-abusing women have higher levels of personal distress (depression, anxiety, etc.) and lower levels of self-esteem, thus indicating the need for special counseling and support services.” Such special services for women are far from being addressed by AA. Indeed, special issues for men are also left unaddressed, as AA does not offer a holistic approach to treatment. For women, however, as secondary members, issues such as sexism in AA need to be recognized and redressed, not resisted.⁸

Sexism in AA is certainly an issue that has been taken up by several writers in recent years (Kaskutas, 1989, 1992, 1994, 1996b; Abbott, 1994; Hall, 1996). And as the above vignette suggests, this attention is well deserved. As an issue of contention, moreover, sexism in AA has been a prime motivator in the outgrowth recovery program designed to address issues specifically relevant to women, *Women for Sobriety* (WFS).

AA is not palatable to everyone; sexism and gender scripts can play a role in women's comfort and feeling of safety while attending Alcoholics Anonymous (Kaskutas 1989, 1993, 1994, 1996a, 1996b; Mäkelä 1996). As noted by Kaskutas (1994:186), in mixed groups women have “been found to defer to men, especially if there are more men in the group” (as is the case in virtually all AA gatherings

8. Certainly other issues surface in AA through power differentials. For example, as noted by Abbott (1994:74), racism, homophobia, and sex-role stereotyping surface as problematic within AA as in most other social environments. Earlier, moreover, Lofland and Lejeune (1960) observed systems of class within AA. Alcoholics Anonymous, then, does not constitute an unstratified system.

apart from specialized meetings for women in Alcoholics Anonymous). Sexism can also be seen as embedded in the process by which members are provided a space to speak within AA meeting sites. As all persons in AA, whether new or just inclined to shyness, are prohibited from crosstalk,⁹ there is no space provided for a word interjected here or there or an individual comment directed toward a sharing member. While such a policy might appear nobly inclusive, Kaskutas (1994:189) observes that it might, on the contrary, deny a voice to less assertive, competitive, and domineering persons (see also Mäkelä, 1996:177). Women who attend WFS find comfort away from the eye of men (Kaskutas, 1994:189). Though, as suggested by Beckman (1993), some women adapt well to AA, others are less able to assimilate AA doctrine and less inclined to accept its inherent sexism.

Indeed, as discussed in the following chapter, some men in AA actively pursue female AA members. The sexist language with which I struggled early in my sobriety, and still do today, represents only one manifestation of sexism in AA. Within members' practice within Alcoholics Anonymous, sexism is clearly a problem that requires serious attention and resolution if Alcoholics Anonymous is to continue attracting women of various political stations to its discourse.

9. In AA all members are provided the opportunity to speak without the threat of interruption, in the same way that a First Nations person is entitled to have the floor when being in possession of the talking stick. Before group sharing commences the meeting's chair is expected to warn attending members that crosstalk is forbidden during closed discussion meetings.

E. LEARNING TO TALK THE TALK AND WALK THE WALK**Vignette Two (1997)*****Man Wearing Brown Leather Mini Skirt***

A man wearing a brown leather mini skirt sat across from me in discussion group last night. It was about two a.m., and the marathon meeting was just getting underway; it would continue for the duration of this last evening of the regional Narcotics Anonymous Convention. This man, who I will call "Aaron," sat with his almost hairless, and shapely, legs crossed, then later wide apart with his arms and hands folded between his knees so as not to reveal his underclothing beneath his mini skirt. Aaron had long wavy hair, falling just past his shoulders, a Jesus-like beard, and a calmness about him that immediately captured my attention. As I watched him I was intrigued by both his mini skirt and his appearance of serenity. As members shared pieces of their souls with the group that was now growing larger by the minute, Aaron sat almost motionless, staring straight ahead; at times he closed his eyes as though in deep reflection.

The next member to speak in circle, I will call him Ryan, introduced himself and began to tell the rest of us about his loneliness, and his inability to move beyond his current state of personal growth. He shared with us his sadness and his need for acceptance and love. I grew bored and impatient as Ryan droned on about his inability to feel loved, his former girlfriend who abandoned him, and his desperate need for affection. "Work your program," I thought; "stop feeling so sorry for yourself," I judged. "Just hurry up and finish your monologue," my thoughts continued. Five or six more minutes passed, Ryan was still speaking, telling us about his sad existence. Then he paused briefly. Wait, oh yes, I think he may be finishing; he pauses again. "Please," I think to myself, "be finished with your sharing." Finally, he stops speaking and thanks all of us in the room for being here for him tonight, for listening to him, for being patient with him, and for loving him. I feel guilty for my judgment; I know I need to work on my "inventory taking" and on my impatience. I am thankful, though, that Ryan has finished speaking. Who will share next, I wonder.

At the moment Ryan finishes, however, Aaron, the man in the brown leather mini skirt, rises from his seat, turns, and approaches Ryan, who rises to meet him. Aaron extends his long arms in gesture towards Ryan. The two men hug, firmly, and longingly; the embrace lingers for a full minute or more. Neither man moves other than to rub the other's back on occasion. When they finished embracing, Aaron walked slowly toward, and out, the door, leaving the rest of us to continue with our meeting. I sat motionless, struck by the meaning and the power of what had just happened. This guy in the brown leather mini skirt epitomizes all that is magic in the program of Narcotics (and Alcoholics) Anonymous. He reflects the wonder, and manifests the love, contained and offered so freely within so many twelve step rooms of recovery. Who is this angel, and how has he moved beyond a life of drug addiction and human desperation to such a level of peace, serenity, and care for others in recovery? Aaron's level of recovery manifests the ultimate spiritual wholeness representative of twelve step programs; unfortunately, however, as I remind myself of my impatience and judgement, such a condition is more the exception than the rule. The angels, though, are among us.

The above narrative epitomizes the ideal spiritual essence of Alcoholics Anonymous. As Pollner and Stein (1996:215) observe, "the destination [in AA] is a 'spiritual awakening'...". That love and acceptance can be found in AA serves to compensate for a lack of affection and feelings of alienation within our postmodern world. Similarly, Flores (1988:93) poses: "Feeling alienated, empty, and misunderstood is a struggle which every chemically dependent person experiences. The program of AA gives them this sense of belonging and of being understood at a very basic level." As Aaron encapsulates the power of the love in the room that early morning, the rest of us are left to reflect upon our defects, the very ones that AA demands we seek to uncover and then to subsequently reveal

through various levels of exposure—and confession—within Alcoholics Anonymous.

While I reflected upon my own shortcomings, as determined by AA discourse, I was at once overwhelmed by the spiritual expression of Aaron, yet separated from the discourse that defined me as defective. Adherents learn that the essence of recovery lies, in part, through particular slogans.¹⁰ Adherents learn through such slogans and through the twelve steps to work towards **serenity*** through patience, gratitude, and non-judgement of others. Through steps five to eight especially, AA members learn that, as human beings in recovery, they have shortcomings or defects (see also Pollner and Stein, 2001). Such defects of character may be processed and remedied as long as the member accepts the steps into his/her life and works them on a daily basis. As a character defect, AA teaches that to judge is to be defective, though to not judge goes beyond what is human.

On the one hand, as posed by Flores (1988:93), persons need to feel a sense of community in order to belong. And, indeed, such a sense of belonging is voiced often around the rooms of AA. On the other hand, in their quest to find that unconditional acceptance and love, members of Alcoholics Anonymous must be one both with AA adherents and with the larger discourse. To be one with the

10. Several of these slogans have been covered in Chapter Four. They include: First Things First; Live and Let Live; One Day at a Time; Let Go and Let God; and Keep it Simple.

discourse requires that members, through confession, reveal their character defects and the means by which they attempt to transcend those flaws.¹¹

This process of self-discovery and enlightenment is to continue on a daily basis for the AA member *ad infinitum*. Flores (1988:93) observes too that within the context of AA, “[e]ach person’s growth and evolution continues throughout life. AA helps propel this process. It is a process that only begins when the person gets sober, for the issues of belonging and being alone remain constant themes in every person’s life.” Indeed, that Alcoholics Anonymous requires perennial attention to supposed human frailties and misgivings is not at issue here. Rather, AA discourse, as a life-long process, requires members/adherents to evaluate themselves against virtually impossible standards. In order to manifest spiritual health and well being members must talk the talk of AA-speak and exemplify the AA-walk of spiritual progress. While perfection is said not to be the goal of members’ spiritual recovery (Alcoholics Anonymous, 1976:60), in-group attendees, do indeed, search for manifestations of perfection. A member who purports to walk the AA walk is one who exhibits patience, non-judgement, and serenity. Talking the talk and walking the walk, however, mean that members, in speaking and reproducing AA discourse, engage the same speak. As Denzin (19787b:33) observes, the recovering AA alcoholic is taught the language of A.A., which is a group, not an individual language of self.”

11. See the passage provided in APPENDIX 5-B for an example of the fourth step process by which members are guided by AA discourse to dispel such character ‘flaws’/‘defects’ of character.

Davis (1983:280) observes that “[T]here is a tendency for members to speak in stock phrases, to use a limited number of terms to describe their own emotions and reactions and those of others.” Often members repeat and reproduce the AA narrative through the stories/narratives, or confessions, of others. As Pollner and Stein (1996:207) observe, “formulations implicitly proffered as a product of the speaker’s individual experience may originate in a text or the talk of...another speaker—who may or may not have originated the particular formulation.”

AA adherents thus engage and reproduce the same discourse, and in so doing come to understand their own social, emotional and human conditions through AA speak. I, and countless others who have not yet perfected the spiritual progress encouraged by AA are reminded of our imperfection through displays of seemingly spiritual perfection, as evidenced by Aaron on that early morning in 1997. Inasmuch as the search for self-discovery in AA is achieved through its own discourse, AA informs and defines the foundation to self-knowledge and truth. While admirable, the goals placed before its members are, however, virtually unobtainable.

While appearing as an angel to me that morning, at that particular time even Aaron continued to struggle with the expectation of spiritual perfection placed upon him by his twelve step program. Perhaps far from being an angel,

Aaron's search for self-discovery was, like the rest of us, organized and coerced by Alcoholics Anonymous.¹²

F. HOW IT WORKS

Vignette Three (October 1998)

I am not a Newcomer!

I broke down and cried at the meeting tonight. I was excited to be there, my first group, the church basement where I attended my very first AA meeting. I hadn't been there for about three years, and I was anxious to see a few members again. I was greeted enthusiastically as I entered the building, with questions about my Ph.D. and my research. I explained that I was doing a "reading" on the AA meta-narrative; I looked into puzzled faces. I added that my reading was to be somewhat critical, but repeated that it was just a "reading." One member, Harold, added that it was good that I was doing only a reading.

Inside I brought up the topic "the importance of meetings," as I do at every meeting I attend now, because I rarely attend meetings anymore. I always hope that members will respond to my topic in such a way that I will be drawn back into regular meeting attendance. Tonight, though, as I began to speak during discussion, I broke down and cried. As I looked around the room I was reminded of several AA members, who over the past few years had died. Two members in particular, Belinda and Coulton, were instrumental in my early sobriety and nourished my sense of personal safety. Both members gave freely of themselves. Their attention and interest in my early abstinence championed my original attempt to abstain from alcohol. Both Belinda and Coulton

12. Though I did not know Aaron beyond my intrigue with him that evening, I came to learn later through a mutual acquaintance that while manifestly spiritual and appearing as an angel, his own journey in AA and NA left him with feelings of discontentment. And like Ryan, who shared in group that night, Aaron felt dissatisfied with his own spiritual progress and personal growth. Thus, while an angel to me, Aaron suffered his own divisions from the AA discourse.

were gentle with me and worked their way patiently through my resistance and my antipathy towards AA.

Tonight during discussion, Felix said that his sobriety depends upon three essential ingredients: his higher power, his meetings, and the people who sit around the rooms of AA. He said nothing I had never heard before; I learned many years ago that meetings and the people who constitute the meetings are essential to the longevity of AA and to the successful recovery of AA members. Tonight, though, his words electrified me, as I realized that I was one of those people he so needed.

As I went to comment on the wisdom which resonated through the room, I discovered I couldn't speak. Instead, I cried. I am not sure if the members in the room felt sympathy for me, or embarrassed for me. In either case, I felt awkward and new; most of all I felt my loss of Belinda and Coulton.

As we concluded the meeting with the "Lord's Prayer", a member who had not known me when I entered the program thirteen years ago, advised me to take it easy and to keep coming back. "Things will get better," he said. I resented him for patronizing me, and for not knowing that I had been in the program for many years. I left the meeting once again feeling disturbed, this time because someone had assumed mistakenly that I was a newcomer. As I write these words, I wonder why this assumption disturbs me so.

On this evening I was overcome with emotion. I had not been to an AA meeting for about six months and it was the first time in years that I had visited the very first AA group of which I had been a member. I had moved to another province six years earlier, and I had not attended this particular meeting for three years. It was a happy night in that I was visiting old friends and acquaintances, yet at the same time it was a sad night because I felt the loss of my friends so profoundly.

Given that I had not attended this particular meeting for such a long time, there were several members in attendance who did not know that I had been a member for many years. At the time I was confused by my weeping and by my inability to speak without sobbing. The warmth and the gentleness in the room overwhelmed me that evening. It occurred to me later that in the face of such warmth and acceptance I may have been feeling guilty for my critical reading of the recovery program that had, as I learned years ago, saved my life. I wondered, moreover, whether I could garner respect within the rooms of Alcoholics Anonymous when being mistaken for a newcomer? I wondered whether I was moving toward my departure from AA. Perhaps my research was proving to be a means by which I was moving away from AA.

Similarly, Bean-Bayog (1993) examines the ways in which alcoholics use or avoid using Alcoholics Anonymous, and emphasizes the value of AA's philosophical overtures which romance otherwise resistant individuals into the AA program. According to Bean-Bayog, Alcoholics Anonymous contains particular nuances that promote safety, comfort and commitment to its program, and serve to dissipate cognitive obstacles to potential recovery through AA. That evening, I felt those nuances, yet my critical research on AA was providing me with new tools by which to see the previously invisible AA discourse, and the enormous power that discourse wields over AA members/adherents. Could it be that I was moving away from the social world that had for several years provided meaning to my life and afforded me a place to belong?

To this end, Smith (1993) examines Alcoholics Anonymous as a 'social world' into which social integration is a key factor for individual success. She suggests that all persons, even those with minimal group dependent proclivities and nonaffiliative self-concepts can be integrated into the interactive social world of AA. According to Smith, despite arguments to the contrary, a high degree of affiliative need and group dependency are not preconditions to success in AA. Rather, she argues, the integrative processes within the AA social world may foster a social climate that is conducive to those who do not fit an affiliative profile. While fitting such a profile for many years, AA appeared to no longer resonate with me, given my new sensibilities and ability to understand the inherent power structures of the AA narrative.

That evening I was both an insider and an outsider. Though technically an AA member, I had positioned myself apart from the larger discourse. In perceiving the power that the AA discourse exercises, I was beginning to transcend AA discourse. While potentially liberated from the discourse, paradoxically I was angry that I was mistaken for a newcomer. How does one transgress a coercive discourse while that discourse remains central to one's life world and self-knowledge? How, indeed, does one escape reproducing such discourse while it remains central to the truth of one's inner being? And how does one come to terms with being the gazed, rather than the gazer?

AA discourse becomes reproduced in large part through the twelfth step, and through the tenet that “in order to keep it you must give it away”.¹³ As discussed in the previous chapter, AA adherents believe that in order to stay sober they must give what they have to someone else. Rudy (1986:111) observes too that “A.A. members earn or gain sobriety through sharing their ‘experience, strength, and hope’ with others.” An adherent “gives away” what s/he has through twelve step work, twelve step calls, telling one’s story, and self-inventory taking (Rudy, 1986:111). However, to see the vistas upon which AA sobriety is constructed, and to illuminate the power enjoyed by the AA narrative, is to question what it is exactly that I have to give away.

DISCOURSE AND CULTURAL POLITICS

AA power is both politically generated and politically constituted. AA has in large part come to determine knowledge of and around *alcoholism*. As Alasuutari (1992) poses, “Alcohol does generate effects within the human metabolism, but it does not convey meanings to the human consciousness.” Such meanings have been largely constructed through Alcoholics Anonymous.

13. The promotional pamphlet entitled “To Keep it You Must Give it Away” (n.d.), released by the Ottawa Area Inter-group of Alcoholics Anonymous, also instructs members on how to reproduce the AA program and philosophy. The text reads in bold print: “Practical experience shows that nothing will so much insure immunity from drinking as intensive work with other alcoholics.” Though the pamphlet recommends that those that do Twelve Step work “have at least one year of sobriety.” Those qualified are invited to fill out a form provided on the pamphlet to indicate a willingness to conduct Twelfth Step work for AA.

Rohan (1978:211) observes that “Alcoholism exists...in our language and in our minds, but not in the objective world around us.” *Alcoholism* then is a human creation grounded in a variety of socio-politics that inform, guide, and reinforce the state of being *alcoholic*. Says Rudy (1986:95), “‘Alcoholism’ is a historical and political accomplishment.” Increasingly, research is demonstrating that human responses to alcohol consumption are culturally informed and defined (Bunzel, 1940; MacAndrew and Edgerton, 1969; Heath, 1962, 1981, 1982; Room, 1997). Meanings constructed around alcoholism are therefore culturally relative and largely significant from culture to culture. MacAndrew (1969) observes, moreover, that the term “alcoholic” itself, far from being neutral, is laden with various ideologies, theories, and assumptions gained through both medical discourse and lay perceptions of alcoholism.

What is interesting about Alcoholics Anonymous is the fact that its discursive reach is now permeating the globe (see also Mäkelä, 1996). If AA’s authorized website is to be taken at face value, otherwise culturally specific meanings and their concomitant social responses to alcohol consumption are increasingly being informed and organized through AA’s disease model, which, as we have seen, constructs particular meanings around *alcoholism* and its treatment. The disease belief system is, therefore, increasingly transgressing upon cultures outside of North America, cultures which have traditionally managed drinking behaviors through their own social contexts.

Importantly, as Davies (1962:102) notes, the disease model holds that there is a point at which a person becomes an alcoholic; at that point, “something happens to the individual which is irreversible and renders [the person] unable to ever drink again.” Once beyond this point, persons are rendered—through *alcoholism* discourse—*alcoholic*. Attempting to control one’s drinking highlights one’s denial of his/her disease. This point is important, in light of the fact that, as Kurtz (1982:43) notes, “A.A. addresses itself not to alcoholism, but to the alcoholic.” Thus, whether adherence to AA is successful falls to the responsibility of the member rather than to the complications associated with the etiology of the supposed “disease.” To this end, members are ultimately responsible for their own abstinence, despite AA’s claim that problematic alcohol consumption is a disease. Paradoxically, and problematically, to not be successful at adhering to AA doctrine is seen as being in denial of one’s disease.

Alcoholics Anonymous does not offer a holistic approach to early treatment, what Rush (1996) sees as a “multivariate syndrome model” of alcohol dependence. Rather, newcomers are educated on the disease model of alcoholism, and told to abstain completely from drinking, while related issues such as family, work, medical, or financial problems are left largely unaddressed. Importantly, the AA model affirms and reconstitutes itself through teaching employers, family members, and *alcoholics* themselves to defer to AA discourse. Issues such as sexual abuse are seen as ‘outside issues’, for which outside counseling is required.

Rudy (1986:48) points out that “[b]y definition, disease explanations are organizational explanations of the highest degree. They represent the sharing of the organization’s values among A.A. members themselves and between A.A. members and outsiders. When members utilize these explanations, they affirm the organization itself.” Indeed, AA adherents *learn to be* alcoholic through Alcoholics Anonymous. The AA alcoholic thus learns to be alcoholic largely, if not wholly, through AA discourse. Adherents’ philosophy on addiction and recovery becomes necessarily that of Alcoholics Anonymous.

Alcoholics Anonymous discourse nourishes itself through the disease concept of alcoholism and perpetuates itself through its twelfth step, which requires members/affiliates/adherents to maintain perpetual meeting attendance and to establish ties to practicing alcoholics who will also be served by AA membership/adherence. At a further level, AA discourse perpetuates itself through its primary tenet that alcoholism is a disease which becomes reproduced through “explanations gained through affiliation with A.A. that specifically represent the belief system of the organization” (Rudy, 1986:46). Thus, the AA belief system ultimately becomes reproduced through its own discourse. Indeed, as Rudy observes, the views of AA affiliates, “theories of causation, and models of recovery are the organization’s view—the organization’s ideology.”

According to Rudy (1986:43), there is a matrix of social interaction that facilitates affiliation to AA through self-identification of, and in, “becoming alcoholic.” As he explains:

While the focus is upon the actors' selection, interpretation, and definition of events leading to their becoming alcoholic, the most significant events result from the interplay of the actors' behavior and meanings with those of the various significant others involved in the total setting (Rudy, 1986:43).

One's definition of self then as a newcomer is constituted through the interpretations of definitions around alcoholism provided through authorized AA text, which in turn becomes reconstituted as knowledge and, hence, truth by other members who have already adopted larger AA philosophy and who have thus already defined themselves *alcoholic*. What is more, as persons become defined as alcoholic within, and through, Alcoholics Anonymous discourse, those individuals "become a particular type of alcoholic—an A.A. alcoholic" (Rudy, 1986:53).

While Alcoholics Anonymous promotes the disease model as the most promising treatment possibility, Peele (1985:133) observes that "[d]isease notions of addiction undermine actual successes, as when they deny that alcoholics can incur fewer drinking difficulties without abstaining entirely or that people can quit addictions themselves." Therefore, rather than offering a solution to problem drinking, the disease concept paradoxically reinforces the notion that *alcoholics* cannot drink safely after taking just one drink. In other words, to be taught that one cannot drink safely, after taking just one drink, becomes a self-fulfilling prophecy for an AA alcoholic.

Moreover, far from being impartial, alcoholism and AA's role in its construction positions the ostensive disease through discourse rather than through objective truth. As Rudy (1986:105) observes,

Interaction with significant others, public stereotypes of alcoholics, media presentations of labeling material, the learning of drinking styles and practices, and social control agency definitions and assumptions regarding alcoholism feed into a process in which behaviors and definitions of behaviors are shaped into alcoholism characterizations.

In Alasuutari's (1992:54) view, above all else, alcoholism is "a Western myth, a shared concept of the meaning of heavy drinking, associated with an individual biography." Beliefs around *alcoholism* are then founded largely upon several AA fictions; media representations of AA further reinforce and immortalize the ideal success of Alcoholics Anonymous.

In addition, Alcoholics Anonymous envelope *alcoholism* and *alcoholic* under one determinate category (Rudy, 1986). As one category, the complexity of *alcoholic* drinking and treatment possibilities become subsumed under the necessary umbrella of Alcoholics Anonymous. Says Rudy (1986:105),

If one couples the media bombardment of information and misinformation regarding alcoholism with the messages of regional and local alcohol treatment centers, it becomes clear that frequent and powerful messages are being transmitted that clarify and simplify drinking behavior into a stock category.

Thus, if we are ever to understand the various forms of human drinking behaviors more impartially, AA must abandon the notion that all categories may be subsumed under its one treatment possibility.

Alcoholics Anonymous, moreover, serves its political agenda through expansion of its member base. In promoting itself as the only viable solution to problematic drinking, despite whether persons see themselves as alcoholic prior to entering its program, AA speaks to audiences beyond those traditionally considered alcoholic. Alcoholics Anonymous promotes itself to all persons, irrespective of a multiplicity of defining characteristics, especially its targeting of “vulnerable” persons.

Further, the group plays an instrumental role in attracting persons to AA, as does the practice of sponsorship once a newcomer opts to become a member of AA. Categorizations of inside/outside issues underscore the authority of a meeting’s chairperson, establishing limits of legitimacy within meeting sites. As a whole, however, Alcoholics Anonymous establishes no such boundaries other than to state vaguely that members and groups are to have no opinion on “outside issues” (Alcoholics Anonymous, 1981:11). These “outside issues” remain highly interpretive.

As outlined above, Alcoholics Anonymous constructs specific expectations by which members are to measure their recovery success. Many of these expectations, especially those geared towards AA’s notion of “spiritual progress”, serve essentially to divide members. AA discourse provides positive recognition to those who adhere to its doctrine while attributing failure to those who do not. Cleavages thus emerge between individual members, and between members and the larger AA discourse.

In response to some of the politics inherent in Alcoholics Anonymous, several alternative self-help groups oriented toward managing drinking behavior have emerged. And in response to the issues around god, gender, and so-called intellectualism (to name only a few problematic issues), self-help groups (as noted earlier) have emerged which also seek to address patterns in alcohol consumption apart from apparent AA dogma.¹⁴ As the following chapter demonstrates, there are now observable forms of resistance to particular politics surfacing from within AA membership. It appears that all is not well in the world of Alcoholics Anonymous.

14. See APPENDIX 5-C for a descriptive list of the responding recovery programs. This Appendix also notes the corresponding website addresses for further information regarding the programs.

CHAPTER SIX

NEWSGROUP DISCUSSIONS: RESISTANCE

"Where there is power, there is resistance" (Foucault, 1978:95).

This chapter examines text from a public Usenet NG that is designed to solicit dialogue around staying sober through Alcoholics Anonymous. Over the few years the NG has been established, a great deal of criticism toward AA has surfaced through its dialogue. In the following discussion, I present such criticism as resistance to the AA narrative and as a form of reverse discourse.

Below I have captured data from a public Usenet NG which is inhabited primarily by AA members.¹ While the previous chapters examined politics from within traditional meeting sites and larger AA text, this chapter probes meanings and messages that surface from NG text in particular. The data disclose internal tensions and disputes around the otherwise powerful AA discourse. NG data possibly represent more accurate pictures of members' questions and resistance

1. Denzin (1995:253) notes that this particular NG, Alt.Recovery.AA, was created November 17, 1994, and by December 13, 1994 there had been 600 posted messages. The NG had sprung from an earlier established group, Alt.Recovery which was started by and for persons interested in recovery through Alcoholics Anonymous. Denzin (1995:265) also notes that at the time of his study Alt.Recovery.AA was a male-dominated NG. Indeed, his inspection of 144 messages posted to the group revealed no women as posters. As of March 2001, there were many women posters, though males were still dominating the NG; sexism, moreover, is evident in some of the posts.

toward AA text, discourse, and contrary-minded members, as persons are free to post while escaping direct confrontation and immediate group response. Thus, it appears that the Internet provides a safer environment for subversion to Alcoholics Anonymous. As Denzin (1995:254) posits, the "Internet moves oral traditions of AA into a new interactive space." Importantly, however, "talk in this space is defined in terms of [AA's] history" (Denzin, 1995:254). Thus, an analysis of this NG data can also illustrate methods by which members' reality is constituted through AA "canonical texts" (Denzin, 1995:255) and discourse.

The following analysis examines 34 NG threads, holding on average 28-30 postings.² These threads were selected for length and header topic. That is, the threads address questions I would have posed during interviews or focus group sessions (for example, whether alcoholism is a disease),³ had this research design been more traditional. The sample may not be representative of the larger AA population given that not all members have access to the Internet. However, representation is not the specific goal here. Though I am drawing upon a special population, my concern lies in discerning tensions between theory and practice.

2. Threads of this length provide a suitable amount of data, yet are analytically manageable. There is a possibility that postings were added to threads after I had downloaded them for analysis. If so, further postings were not overlooked intentionally.

3. Given that my goal is to protect the names of the posters as much as possible, I will not name the specific threads under examination here. I can say, however, that the topics analyzed included querying the legitimacy of the disease concept of alcoholism, exploring meeting attendance requirements, and what criteria constitute authentic sobriety.

Furthermore, a representative sample of AA members cannot be drawn given that there is no population list. According to Seiden (1960), moreover, AA populations tend to be transitory and complex.

SITES OF RESISTANCE

As noted earlier, over the years a large scope of literature addressing or examining AA exalts and praises its twelve step treatment program. Though work critical of AA has surfaced over the past two decades, there remains a trend to epitomize Alcoholics Anonymous as a saving grace for drunks and as a program necessarily spiritual and transcendental in nature (Blumberg, 1977; Kurtz, 1982; Denzin, 1987b; Spalding and Metz, 1997; Valverde and White-Mair, 1999). Such research positions Alcoholics Anonymous purely and idealistically without attention to invariable tensions and difficulties that necessarily surface through interaction within AA. That is, while a largely perceived panacea for drunks/alcoholics, AA does not insulate against peculiarities of human interaction.

FROM IDEAL TO REAL

In a recently published article researchers Valverde and White-Mair (1999) valorize AA's twelve step program as morally pure and ideal as a mutual-help fraternity. Theirs is a misleading analysis that fails to consider inner conflict and questioning around larger AA politics voiced by members and former members in environments more conducive to such challenges. While Valverde

and White-Mair argue that “AA is...not a theory-driven organization...and its basis of unity is not a set of beliefs but rather a set of practices”, I argue that AA is, in large part, only theoretically oriented. When given a safer forum in which to voice and to express themselves, members’ practice frequently violates the seemingly pure principles of Alcoholics Anonymous. Recovery from alcoholism may at times occur despite members’ hostility and judgements of one another, rather than because of some purely driven agenda of “helping people achieve inner peace” (Valverde and White-Mair, 1999:397-398).

As noted previously, AA is grounded in a number of fictions which tend to be projected through larger AA text and politics, and through members’ reproduction of such textual and political discourse. I suggest that while some writers reproduce AA ideology, that is, theoretical Alcoholics Anonymous (Kurtz, 1982; Denzin 1987b; Valverde and White-Mair, 1999), at the level of member practice such life principles as anonymity, higher power, and one-day-at-a-time are frequently violated and often manifest themselves in tension with theoretical Alcoholics Anonymous.

Valverde and White-Mair (1999:393) propose that while AA incorporates elements of the disease model of alcoholism it remains “fundamentally a spiritual programme.” In their view, AA is essentially a pragmatic organization of which its basis of unity is not so much a set of beliefs as it is a set of *practices* (1999:394, emphasis in original text). They assert further that “AA does not attempt to

universalize its ethical techniques; that is why it does not, as an organization, preach from the pulpits..." (1999:398).

I would suggest rather that there *is* necessarily preaching both within AA textual discourse and through meeting sites by virtue of reinforcing and forwarding the AA steps, traditions, slogans, larger discourse, and through members' adherence to such enforced criteria. Indeed, most meetings begin or end with the reading/teaching/preaching of the twelve steps, twelve traditions, AA's "How it Works", and the Protestant version of "The Lord's Prayer". In addition, at the end of some meetings, members provide personal interpretations to the group of the different AA slogans (e.g., "First Things First"; "One Day-at-a-Time"; "Let Go and Let God"; "Think, Think, Think"), which also results in promoting AA philosophy further. As Alcoholics Anonymous promotes the use of its own publications, it may be argued further that the discourse taught/preached through text does ultimately support Alcoholics Anonymous itself, "as an organization".⁴ In this way, AA becomes reproduced tautologically. How can this not be perceived as preaching? What other interpretation can we take from members' disclosures and testaments that "AA saved my life"? (Valverde and White-Mair, 1999:398).

4. My point here takes issue with the assertion that "AA does not attempt to universalize its ethical techniques: that is why it does not, *as an organization*, preach from the pulpits or from our television screens" (Valverde and White-Mair, 1999:399, emphasis added). I might also point out that district AA organizations have been promoting themselves through television advertisements, which does, in fact, promote AA as "an organization".

As a “bottom-up organization”, Alcoholics Anonymous affords members particular ethical practices, that is, a “sophisticated toolkit of devices” (Valverde and White-Mair, 1999:400). Though the Alcoholics Anonymous Service Manual (1995) represents itself as an inverted triangle, with the member base (or group consciousness) dictating group and, in turn, AA General Service policies, in practice, as typically happens elsewhere, some members hold and exercise power while others, especially newcomers, do not. Thus, larger group and AA policies tend to be influenced and governed by members with extended periods of sobriety. Indeed, often members, and frequently groups themselves, have either formal or informal policies which prevent newcomers (members with less than a year or so dry time) from partaking in the larger AA service structure. Newcomers tend to be encouraged more to attend their home group’s monthly business meetings, greet at the door, put chairs away, and traditionally, to clean ashtrays.⁵ While there are surely exceptions to this rule, the newcomer’s voice tends not to be revered as knowledgeable in AA matters; that is, until that voice reproduces AA doctrine.

An examination of actual practices is important because they clearly contradict the assertion that “AA members do not use certain techniques to achieve a distant end: for them...values and ideas are nothing but actions—doing

5. See also Room (1993:176), who notes that seniority in the AA movement plays a considerable role in who ends up in what position in the AA structure, and groups often impose a minimum length of sobriety as a prerequisite for election to office.

is being” (Valverde and White-Mair, 1999:400). If “doing is being”, the discussions within the NG community demonstrate very clearly that there are tensions between theoretical AA and its practice. Consequently, such tensions dispute the point that there is necessarily serenity/peace within AA members’ practice.

While such AA slogans as “anonymity”, “higher power”, and “one-day-at-a-time” underscore AA’s mutual-help success and members’ promotion of inner-peace (Valverde and White-Mair, 1999), I would suggest that when examined empirically there is clear strain within members’ text/discourse, and thus, clear violations of such claims of pure principles of practice. That theory and members’ practice are contradictory to one another is evidenced by the recent “I **hate** that phrase!’ Thread”, in which AA members’ most “hated” AA phrases were solicited. While not inclusive, the offerings included: “I feel your pain” (John); “Listen to your inner child” (Brian); “Life on life’s terms” (Charles); “My best thinking got me here” (Leonard); “Pain is inevitable—suffering is optional” (Kirk); “Let go, and let God. Yeeech!” (Mitchell); “Put the plug in the jug” (Joseph); and, “My higher power whom I choose to call God. Personal preference: God_*OR*_Higher Power”, appended by “Talk about redundancy” (Charles). The preceding phrases are heard frequently around the rooms of AA. Clearly, some members see these phrases and slogans as irritating rather than as informative or helpful central program philosophies.

ANONYMITY

According to Valverde and White-Mair (1999:401), “Anonymity nurtures humility” and as such “there are no stars in AA” (citing Hamilton B., 1995:96). This statement is misleading for a variety of reasons. For example, many members who attend conferences come to recognize particular speakers as having a higher profile—and being more famous—than other members. The more recognizable speakers, or ‘stars’, also sell large numbers of their audio tapes, and they are typically held in higher regard than many other members. Indeed, John Bradshaw, known by last name, and Nan Robertson, also known by last name, have garnered prestige and financial success through their identification with AA. As Pollner and Stein (1996:206) assert, such audio taped narratives are “pitches” which are disseminated by “better known” members who are invited to speak at larger meetings and regional conventions.

While de-anonymizing themselves breaks with AA’s eleventh tradition, both Robertson and Bradshaw convey levels, or at least semblances, of personal inner-peace, and have earned substantial incomes from their public identification with AA. It may be highly inaccurate to say that these writers are without humility only because they reveal their family names to reading audiences. Numerous others have also broken with this tradition, which illustrates one manner of AA’s changing face in the contemporary world.

It is questionable as to whether the releasing of last names threatens the integrity of Alcoholics Anonymous. Indeed, many NG participants identify

themselves by first and last name, many of whom support and reinforce AA as a whole. Thus to suggest that “anonymity is...a technique necessary to practice a form of self-denial—“a despotism not only over one’s own desire for fame, ...but over some dominant ethical trends in contemporary culture” (Valverde and White-Mair, 1999:402)—is misleading. This tension around anonymity evidences tension between the theory of AA and members’ actual practice.

Of particular note is AA’s proposition that its members are encouraged to use or develop knowledge of AA according to personal agendas. As the *Twelve Steps and Twelve Traditions* (Alcoholics Anonymous, 1981:171) advises, anonymity is a secondary concern which is outweighed by freedom of expression and personal interest:

It is significant, now that almost no AA in our Fellowship breaks anonymity at the public level, that nearly all these fears have subsided. We see that we have no right or need to discourage AA’s who wish to work as individuals in...wider fields. It would be actually antisocial were we to forbid them. We cannot declare AA such a closed corporation that we keep our knowledge and experience top secret. **If an AA member acting as a citizen can become a better researcher, educator, personnel officer, then why not?** Everybody gains, and we have lost nothing (emphasis added).

One might presume, of course, that in 1952 Bill Wilson and collaborators, at the time of original copyright of these words, did not anticipate the enormous recent influences of information technologies.

As shown here, cyberspace allows for much greater critique, and much wider forum of discussion around Alcoholics Anonymous and its discourse. Denzin (1995:253) observes too that clear violations of traditional AA meeting

etiquette surfaced within the first month of the existence of the Alt.Recovery.AA NG.⁶ All of the violations are of specific interest here: (1) cross-talk, whereby members give advice when it is not solicited; (2) discussions of religion; (3) non-alcoholics telling alcoholics how to get sober; (4) **flames*** directed at specific postings; and (5) academic discussions concerning the disease notion of alcoholism (Denzin, 1995:253). A further violation that is observed by Denzin (1995:253) is the trend to include dry dates in members' signature profiles⁷ or somewhere else in postings. As discussed in the previous chapter, AA rhetoric dictates that all members are only sober for any given twenty-four hour period. Privilege and respect are nonetheless established through the length of members' sobriety (Pollner and Stein, 1996).

HIGHER POWER

AA members frequently use the concept "higher power" in much the same way as held by the *Big Book*, though over time notions of god/higher power have been processed by members in a variety of ways. I suggest that those who do incorporate a notion of higher power into their twelve step program tend to

6. I came across Denzin's examination of Alt.Recovery.AA after I began my own analysis of the NG. His work then serves to support, not direct, my own examination.

7. The signature profile of NG participant refers to some sort of notation tagged to the end of the user's post or email. Some persons, for instance, attach their name, phone number and a catchy phrase, to the end of each computer correspondence. In the case of an AA member posting to Alt.Recovery.AA, one's dry date would be tagged, for example, as 09-27-92, meaning that the date of the member's last drink was September 27th, 1992.

continue to use the concept of the traditional Christian deity. In both open and closed discussion meetings, members often refer to their God in such a way as to state that his/her God watches the member and makes the world a safer, kinder place for him/her specifically. Or, often a member will state that their higher power has “a sense of humour” (Valverde and White-Mair, 1999:404), which implies that one’s god/higher power is being facetious or playing practical jokes on the AA member.

The widespread and enthusiastic use of the Lord’s Prayer in meeting sites attests to this point. If AA is not grounded in Christianity, why is higher power classified as “Him”, capitalized, and of the male gender? The room left to interpretation, as AA claims, remains unclear. Indeed, Christianity underscores AA discourse and informs members’ practice. For example, I lobbied for some time years ago in my “home group” to have the “Lord’s Prayer” removed from our group’s closing ceremonies. After several monthly group business meetings of championing my cause, the majority voted along with my motion to replace the Lord’s Prayer with the AA Responsibility Pledge. As it happened, however, at the close of each meeting, upon recitation of the Responsibility Pledge, AA members, both in-group (those who had not attended the previous business meeting) and visiting members, broke into the Lord’s Prayer. Thus, removing the prayer officially did not have any effect on members’ tradition to close our meeting with the Christian Lord’s Prayer.

Had my campaign been a breaching experiment, members' practice would have shown that this Christian prayer organizes reality within Alcoholics Anonymous. Borrowing from Foucault's work, we can see that the recitation of the Lord's prayer is part of the larger system of control that renders docility. That is, through assimilation of such religious practice members acquiesce as they are integrated into the AA system of control, including importantly, those persons who enter Alcoholics Anonymous as atheists or agnostics.

AA's attitude toward the agnostic is suspicious in that there is little interpretive or discursive space provided for expressing contrary views around AA's God/Higher Power. A close look at The Big Book's chapter to the agnostic, 'We Agnostics' (1976a:44–57), reveals as well that rather than providing understanding and/or a discursive place for the agnostic, one is encouraged to convert belief to AA's Christian God:

As soon as we were able to lay aside prejudice and express even a willingness to believe in a Power greater than ourselves, we commenced to get results, even though it was impossible for any of us to fully define (sic) or comprehend that Power, which is God.

The *Big Book* further asserts that those who do not hold a belief in God are "handicapped by obstinacy, sensitiveness, and unreasoning prejudice" (Alcoholics Anonymous, 1976a:48).

To a large extent, Alcoholics Anonymous (1976a:55) condescends to agnostics:

...[D]eep down in every man, woman, and child, is the fundamental idea of God. It may be obscured by calamity, by pomp, by worship of other things, but in some form or other it is there. For faith in a

Power greater than ourselves, and miraculous demonstrations of that power in human lives, are facts as old as man himself (capitalization in original text).

Thus, the goal of the *Big Book* is not to accommodate or welcome alternate views to its Christian notion of God, but to convert previously unconverted members into the AA conception of Higher Power—the Christian God.

On the other hand, some members⁸ are now questioning the validity of Alcoholics Anonymous' higher power tenet. Discussions within the NG range from the etiological roots of the word "deity", to sometimes heated arguments around religion and god. As one discussant states: "I consider myself a 'theistic agnostic', in that I acknowledge the inability to prove/disprove the existence of a deity, as well as the inability to know for certain about any such deity's attributes" (Jake). Jake adds that he nevertheless has "an 'irrational' gut-feeling belief that there is a God" — not surprising, given the Western and AA's emphasis on the Christian tradition.

8. Quotes taken from the NG discussions are not acknowledged by name, date, or geographical location as many postings are archived by Deja News and would thus be rendered more identifiable. Therefore, all names used here have been changed. The NG data were collected over an eleven-month period, from November 1998 to October 1999 and all posters have been given a pseudonym in order to indicate the multiplicity of posters drawn upon for this research. In the beginning threads were downloaded and saved to disk randomly, but over the last two months of collection threads were garnered on the basis of whether the topics resonated resistance—in some way—to the larger AA discourse. All data were naturally occurring.

ONE DAY-AT-A-TIME

In theory, AA members are only sober for any one 24-hour period at a time. In practice, however, if one has been sober for a long time, his/her length of sobriety often makes its way into one's discussion contribution, or into one's coffee talk conversation, and thus into common knowledge about that individual. As noted too in Chapter Four, the length of sobriety also announces to others that one is qualified to sponsor newcomers, and one is wise in the philosophy and ways of AA.

Many posters to the AA NG are now including their dry date in their signature profile (as noted previously, also observed by Denzin in 1995). Thus, if, for example, John Smith has been sober for eight years, he will note so as 02-06-91. Including one's dry date, aside from breaking the "One-Day-At-A-Time Principle", positions those who have been sober longer above those who have been sober for a shorter period of time. As discussed earlier, "Elder Statesmen" (Alcoholics Anonymous, 1981:135), as AA text names them, are wise old-timers who have accomplished long lengths of uninterrupted sobriety, but who do not allow their success to serve their egoism. Denzin (1995:253) observes that in posting one's sobriety date one also establishes one's credibility and authority. As one poster announces, "let's face it, in real life AA, sober time gives you status. If people get an ego burst as well, I don't begrudge them that" (Nathan). As

discussed in Chapter Two, a major goal of AA is, however, to quash the human ego (Alcoholics Anonymous, 1957:13).⁹

The AA tenet of ego busting and working toward humility is inverted both in traditional meeting sites and in cyberspace by members with long lengths of continuous sobriety through such assertions that newcomers need to see evidence that some members have been successful in maintaining long-term sobriety. As observed by Norman, sober for fourteen years: “we cannot say there is not an element of ego involved in displaying the DOS [date of sobriety, or date of last drink]—we are after all, human, but the primary reason is to give newbies a reason for trying.” Conversely, Greg suggests that announcing one’s dry date is about “vanity” and to “establish a pecking order”. Another suggests that the trend of dry dating oneself is, though somewhat mythical, a mechanism by which to evidence AA’s success (Jason).

All alcoholics are NOT equally sober by virtue of the one-day-at-a-time tenet. AA members know this well in their practice, although some members do question the high status afforded to long term abstinence. Indeed, contrary to the AA party line, Barbara raises the following point on questioning the authority of “old-timers”: “I don’t see being an ‘old-timer’ as being synonymous with knowing all there is to know about staying sober. Sometimes I think [being an old-timer] is over rated...”. “Tell me”, she adds, “if having ‘old-timers’ around is so fucking

9. One evening many years ago, I heard a member phrase the AA goal of ego busting as robbing him of his spirit. His words continue to resonate with me.

important, just how did those original members of AA manage without such an abundance of expertise as a result of ‘time’?”

JUDGEMENT

My analysis of the data reveals that there are clear judgements being made of fellow members, including issues around quality of sobriety, frequency of meeting attendance, and general attitudes towards AA. However, according to Valverde and White-Mair (1999:397), “The gaze of AA is first and foremost an ethical one,” in the sense that members judge their *own* habits, desires, relations with others and overall spiritual progress (my emphasis). In contrast, as I argue in Chapter Three, the gaze of AA is one of observation and normalization.

Some writers categorize non-serene recovering alcoholics as “dry drunks” (Denzin, 1987a; Denzin, 1987b; Valverde and White-Mair 1999), those persons who no longer drink but who still exhibit old behavior patterns such as “egoism, boastfulness, and a misguided feeling of power” (Valverde and White-Mair, 1999:398). The pejorative term “dry drunk” poses that within AA recovery processes, members are expected to move beyond mere soberness to a state of serenity. Such an expectation, however, positions the perceived quality of sobriety held by some individuals as superior to that of others. Such a proposition can be interpreted as judgmental inasmuch as particular expectations are established by which individual members are judged first by others (that is, through AA

discourse), and then self-judged only subsequently. The gaze, therefore, far from being an ethical one, is a discriminating one.

Such judgement gets played out through AA's larger technology of power.

As one poster eloquently writes:

AA wants your mind. Some people reach a point in AA where this battle for the mind share becomes more apparent than before, more uncomfortable than before. It seems as though AA is not about "returning to life" as it were; it's about something akin to religion. That's why when someone challenges AA sayings or [AA] literature, it generally is taken at a personal level because those who have accepted this line of thinking and believing have had to make it personal to make it work for them. Then there are whole sets of fear items which are promulgated to keep your "faith" in line. They deal with the oft instilled fear that your sobriety is very tentative. I think this line of suggestion tends to create a self-fulfilling prophecy in the mind of people. There is also the very real 'group pressure' to conform or face personal ridicule, shame, put downs, and the like. Members are continually told of their obligation to AA for 'what it has done for them'. And what is that obligation but your continued mind and body. Love and tolerance is not really anyone's code. There is not much "Live and Let Live" in AA. Not much tolerance or diversity or certainly not of opposition to AA thought and practices and literature (Greg).

As this discussant observes, AA party liners see themselves as committed to perpetual meeting attendance as a life-long obligation to AA's twelve step program. This debt, he suggests, requires a cult-like adherence, and sets up an expectation of members to accept the AA politic blindly and devotedly. Members who do not adopt a perennial commitment to AA are seen by party-liners as ungrateful, in denial, and as noted earlier, prone to relapse. And as this poster notes, to challenge the AA program is to be targeted at the personal level. The

slogan “Live and Let Live”, that is, tolerance (see also Nowinski, 1993:31) towards others, can be understood as more fictional than real.

This member continues to identify the actual intolerances of practice displayed by other individuals within the AA NG community. He further captures the mechanism of fear instilled in members to perpetuate AA doctrine:

This NG exemplifies the presence of those who practice meanness, intolerance, and subtle and not so subtle personal attacks, slams, innuendoes. When “new” wears off and the “ecstasy” of conversion wanes, and the faith becomes chants and repetition, seemingly more than substance, then one has to deal with it. In some, the fear is so great and so instilled, they plod on, fearful of any new direction or significant change from the routine of meetings, etc. (Greg)

As a supposed relapse preventative measure, members are thus educated to believe that committed AA meeting attendance parallels continued sobriety. Members must persevere in their loyalty to AA despite monotony and repetition, because not to do so would supposedly jeopardize one’s being sober. Thus, there is little discursive latitude provided members who prefer to navigate their own lives apart from AA doctrine.

This same member predicts his “heretical” status within AA, given his questioning of the AA narrative. He challenges the larger AA politic which demands continued meeting attendance and adherence to the twelve steps through problematizing long-term support of Alcoholics Anonymous as a whole. As this member observes, the role of AA may be less valuable as a long-term policy, and more constructive as a short-term measure of fracturing the dependency cycle:

I am heretical because I stand opposed to the main line of AA thinking as necessary for sobriety or a good life. I do think AA serves a purpose and has provided great service to the communities in which it served. And while AA has no “central” control point, it has those dynamics in each individual group. No one will go to an AA group and get objectivity or a balanced perspective on AA. That’s why when so many people tire of it and yearn to leave, they will not do so because they will be counseled [by other members] in the ways of fear and condescension (you’ll be back on your knees, comes to mind). No, “Good luck and God bless you, may you live a long and happy sober life.” (Greg)

The point made here is this: If AA doctrine and members were genuinely concerned with the “spiritual progress” and longevity of sobriety for AA membership as a whole, as ostensibly held by the *Big Book* and the larger AA narrative, why is there no gray area which allows for self-searching and self-seeking around recovery matters?

Indeed, if freedom from one’s dependency on the substance of alcohol is the goal, why are there no grounds upon which a member may free him/herself from dependency on AA discourse and meeting attendance? The following quote exemplifies this inherent contradiction of AA:

Reliance on AA seems so ostrich-like. It simply hides the fact that there are so many more addictions, all sitting inside each other like so many Chinese boxes. And yet, this feels so dismissively arrogant and ungrateful. AA was singularly responsible for very literally lifting me out of a gutter. But what now? Does one get to a plateau? (Barbara)

As indicated, this member feels guilty because step twelve instructs her to maintain regular meeting attendance and to remain a life-long member of Alcoholics Anonymous. While this member pays tribute to the power of AA to get her sober, she is nevertheless instructed by another member to retain

“professional help”. As Fingarette (1988:28) notes, views that dispute the disease model are frequently, especially within AA membership, regarded as “heresy”.

A further observation made through the above quotes is the point that AA’s discursive reach is now appropriating responses toward a variety of human behaviors. Today the AA twelve step program informs and regulates issues such as: eating, Overeaters Anonymous; gambling, Gambler’s Anonymous; shopping, Shopaholics Anonymous; human emotions, Emotions Anonymous; and sex, Sexaholics Anonymous (see also Room, 1992). Furthermore, as a result of AA politics, several other recovery groups have surfaced not so much *because* of AA, but in direct resistance to the AA model. They include: Women for Sobriety, Rational Recovery, Moderation Management, Secular Organizations for Sobriety, and S.M.A.R.T.¹⁰ “Like so many Chinese boxes” (Barbara), one of the legacies of AA has been/is its ability to promote otherwise questionable habits as pathologies/diseases. As such, the formal institutionalized response of AA poses a seemingly altruistic solution to the disease of *alcoholism*.

As noted previously, there is little tolerance or discursive space provided to questioning larger AA doctrine which dictates that members need forever attend meetings and through step twelve members need always be available/responsible to those who come after them. As illustrated, however, not all believe that they are destined to attend AA for the rest of their lives. As one

10. Web addresses for these alternative organizations are provided in the Bibliography.

discussant states: “I was in tremendous pain, but after getting a much improved life I eventually grew tired of re-runs, slogans, interpersonal sniping, and higher powers, which for me, don’t keep me sober—I do” (Janet).

The above discussion also illustrates a tension between AA members’ practice and the theory of unconditional acceptance and non-judgment within AA and clear resistance to step twelve which requires life-long meeting attendance. The AA view is that “‘Stepping’ is an activity, and the steps are something one *works* on: the steps as a whole are a programme for governing one’s life” (Valverde and White-Mair 1999:399, my emphasis). This assumes that members accept the steps and concomitant AA philosophy without question. A diligent stepper, sometimes called a “Step Nazi” (Mäkelä, 1996:121), engages and advocates the twelve steps of Alcoholics Anonymous openly and enthusiastically. If a member questions the value of one or more steps, or perhaps questions the existence and utility of a “higher power”, does it follow that one cannot stay sober in AA? This is one of the primary questions posed by both Fingarette and Peele; their point being that Alcoholics Anonymous may not be all that important to long term solutions for supposed alcoholism.

The NG discussions demonstrate that members’ practice can be diametrically opposed to the theory of AA’s step practicing. Indeed, as the following quote illustrates, not all members view AA as inspiring inner-peace.

I think it is important to separate “the Program” and “the Fellowship”. I have gone to some so called AA meetings and had to literally carve the sickness off of me after I left the meetings. We sit

in OUR AA meetings and talk about everything but recovery (Frank, caps in original).

Interestingly, and somewhat ironically, he adds that despite the sickness and separation of program and fellowship he sees no problems, “only 12 step solutions” (Frank).

One very active thread dealt with “Criticisms of AA”. In a response to a participant who had criticisms of AA, another poster asserted:

You seem to feel as though you are too intelligent to buy all the AA dogma. My only advise to you is to go to more meetings. Go to different meetings... Try all different kinds. You have to put IQ's aside before you will be able to get anything from the AA program (Brett).

This member is reproducing the *Big Book's* claims that there is no place for intellectualism in AA. As Pollner and Stein (1996:210) note too, members are warned through the personal narratives of others that being “too intelligent” or “acting too smart for the program” may lead to relapse.

Again, we see little tolerance for a contrary-minded view of the larger AA technology of power, and members' judgement towards others. Another poster contributes to the thread the following criticism:

In AA there is sobriety and there are catch phrases and there are stories, but in these meetings there is a very strong sense of futility and very little joy and very little spirit. Surely, sobriety is the prerequisite for a new beginning, but AA promises this new beginning but robs with the other hand. The catch is that you must spend the rest of your life listening to tales of woe and misery and reliving your own over and over again. What is worse is the intellectually stifling atmosphere in AA. I cannot accept that in order to stay sober I must reduce my vision of myself and most of my experience of life to something consistent with the twelve steps and a bunch of phrases that make my skin crawl (Sam).

To which another member responds:

Buck up bucko. Wake up and smell the Antabuse. I remember when they would not let us talk until our second year. Now the majority of AA is full of crackpots giving bullshit goody two shoes advice. You are worse than them. Don't like us? Then go to HELL. You will find none of us there" (Fred).

Condescending, yes, and undeniably intolerant of different viewpoints, this adherent unilaterally dismisses, and judges, those experiences beyond those defined by Alcoholics Anonymous discourse.

MEETING ATTENDANCE

Alcoholics Anonymous teaches members that faithful meeting attendance serves as an insurance policy against relapse (see also Kaskutas 1996:191). One poster (Annette) noted that she had been sober for seven years, but had not been to a meeting in close to a year. The responses from other discussants beseeched her to get to a meeting. One person replied: "even if your ass falls off, pick it up and carry it to a meeting" (Donald). Another, "Follow your heart and go to a meeting" (Michael). Someone else further argued that "the seven year itch is commonplace in AA, at which point the rate of relapse went up" (Mervin). It should be noted that there is no research or real evidence to indicate that this assertion is correct. As pointed out earlier, AA keeps no accurate statistics on either membership or relapse rates. Another discussant makes my point in response to the "seven year itch" contention. The belief in step twelve, the perpetuation of the AA program, is reproduced very clearly through the above

comments and through other advice such as: “Get your ass to a meeting and don’t look back” (Mervin). And, “Remember to Pass it On and Keep Coming Back” (Peter, capitals in original text). As noted by a previous discussant, fear is also instilled as a tactic for meeting attendance. For example, a poster told a story of a friend who relapsed because of a lack of meeting attendance. In the midst of all the furor in advising the original poster to get herself back to meetings, two posters resist AA doctrine when they suggest: “It’s not a shoulda’ situation. Either you want to be there, or you don’t...if you need a meeting, go to one” (Adam). And, “Sounds like you just need a friend or two, someone to talk with. Can be in AA or not” (Adam).

Members also discuss their inability to engage intellectually around AA philosophical issues. As Mervin notes: “From my own experience, AA has never been very intellectually satisfying—too much emphasis on faith and love and good works and such, not to mention all the God stuff.” Thus, members who wish to think intellectually around AA tenets and principles are resisted by those adherents who accept AA philosophy blindly. Those adherents who do not question or “intellectualize” the philosophical tenets of AA are more inclined to promote the AA discourse through agreeing with it.

Within the NG community there are also questions around the labelling and diagnoses of “alcoholism”. To do so overtly questions one of AA’s most sacred principles, the disease concept of alcoholism. As one poster comments:

If alcoholism is viewed as a behavior, a bad habit, then it is well known that the farther one gets from reinforcing the habit, then the lesser the urge to return to it. A belief in the “disease model” tends to weaken the solidarity of ones sobriety, by injecting into it the inevitability of it to return and inflict one again. Thus, one views oneself as constantly susceptible to it. Viewing it as just a bad habit that one will never return to, is far healthier, and places full control in the hands and mind of the ex-alcoholic (Bruce).

To which another member replies: “This is getting ridiculous. Especially since so much hard evidence has shown that [the disease model] was instrumental in the largest scale of recovery for alcoholics in all recorded history” (Victor).

While this poster’s assertion is groundless—that is, not based in fact—he nonetheless exemplifies a common misconception held by AA members, a fiction which is promoted through the **chip system*** and through the celebration of annual birthdays (see also Pollner and Stein, 1996:206). Valverde and White-Mair (1999:397) point out that “AA members do not observe themselves, and neither do they collect aggregate information about their groups for purposes of risk management”. As I suggest earlier, perhaps information is not collected because it may not depict Alcoholics Anonymous in a positive light. AA is better served by not gathering empirical evidence, as such evidence would reveal internal contradictions. In an attempt to illustrate specific AA fictions, some AA members even advise others to read the work of anti-AA’er Stanton Peele, who challenges both the disease model of alcoholism and AA as a whole.

SEXISM ON ALT.RECOVERY.AA

In AA members speak of a “thirteenth step”, which refers to members, usually men, who prey sexually on female newcomers to AA. Sexism in AA may not be surprising given the sexist climate in which we continue to live and interact. Several comments in the NG data indicate that some male AA members illuminate a glaring tension between theoretical, or spiritual, AA and members’ practice. For instance, when discussing “character defects” and the Lord’s Prayer, one member, contributes the following comments:

The removal of character defects by a higher power, the Easter Bunny, or the Tooth Fairy is something I lump in with the turgid mass of AA-speak that seems bizarre to me. Amongst that turgidness (sic) is the recitation of the lord’s prayer at the conclusion of meetings [during] which I invariably spend gazing in unfettered freedom at the women’s breasts (especially easy as they generally have their eyes screwed up tight), or laughing, as I recall [someone’s] comment in this NG that he sometimes sings in low tempo and volume, ‘There’s Something Happening Here’ (Peter).

So much for the importance of keeping female newcomers safe in their new AA environment and for passing on the word of AA, and so much for the AA Responsibility Pledge.¹¹

The point is also made here that even within the ostensibly pure and principled organization of AA, women are being demeaned and reduced to body parts. Being in AA clearly does not afford women respect necessarily; as the following comment demonstrates: “When I came in the babes were a little the

11. Which reads: “Anywhere, anytime someone reaches out, I want the hand of AA to be there. And for that I am responsible.”

worse for wear. Are you familiar with the term, 'Coyote ugly'?" (Leonard). I should add here that these comments were not criticized or problematized by any other posters, male or female, although in a much later discussion one female poster asserted that AA's primary purpose is to provide a "fucking ground" for men (Joanne). There was only somewhat of a response to her claim. Importantly, in not problematizing these utterances, a code of behavior is created.

Aside from the vulgarity of these comments, it appears that AA may not be the safest place for women (see also Mäkelä, 1996:177). My assertion is underscored by the following comment made by a male poster on the relevance of speaker meetings versus discussion meetings: "Speaker meetings," he states, "are the place to check out the babes. Discussion meetings are the place to move in on them" (Leonard). And while such comments may be argued to be atypical of AA experience, one look at the sexist language (Wright, 1997:83) and sexist stereotypes in the *Big Book* demonstrates that AA textual discourse is just as offensive and demeaning to women.¹² Once again, a tension between ideal AA and its practice is revealed.

12. As discussed in Chapter Four, AA's *Big Book* greatly misrepresents women's membership by including only a fraction of narratives vis-à-vis AA's purported female member base. As reviewed too, women are depicted in the *Big Book* as shamed "housewives" or potentially nagging wives of male alcoholics who need to allow their husbands the latitude to devote their new lives to AA.

RESISTANCE

The AA meta-narrative can be viewed as a regime of power. As a discourse Alcoholics Anonymous constitutes knowledge and seeks to regulate the practice of its membership. Members' knowledge and practice are thus constituted and reproduced through larger AA text. In turn, expectations around appropriate recovery practices are informed and evaluated through members' successful assimilation of the AA discourse. As demonstrated here, criticism towards AA is little tolerated by adherents loyal to traditional AA text. However, while there is little discursive space for opposition, resistance is, indeed, surfacing through very articulate and apparently formally educated members and former members.

Weedon (1987:110) observes that "[r]everse discourse has important implications for the power of the discourse which it seeks to subvert."¹³ As noted in Chapter Two, "[I]t is in discourse that power and knowledge are joined together" (Foucault, 1978:100). Discursive meaning and power must therefore be challenged through resistant discourses. Foucault (1990:101-102) proposes that while discourses do not exist in simple "bipolar" relations of power and powerlessness, they are "tactical elements or blocks operating in a field of force relations." As such, "these 'force relations' are relations of power which take specific forms in particular societies..." (Weedon, 1987:110). Within the larger AA society reverse discourses are now apparent through members' subversion of

13. The term "reverse discourse" is drawn from Foucault (1978:101).

traditional core tenets and philosophies. As Foucault (1978:101) posits, “[d]iscourse transmits and produces power; it reinforces it, but also undermines and exposes it, renders it fragile and makes it possible to thwart it.” An analysis of the AA cyber community reveals that AA members, past and current, are now undermining and exposing the internal AA fictions which underlie the larger AA meta-narrative.

As Denzin (1995:256) argues, assuming resistance “recognizes that the postmodern period is defined by fascistic, xenophobic tendencies which are morally conservative, homophobic, racist, and sexist.” A peek into this particular NG underscores Denzin’s point, though it could be argued that resistance needs to be recognized and actively engaged. Discourse only contains power inasmuch as its control and oppression are not recognized. The question perhaps left to ask is whether the traditional AA discourse will survive members’ subversion over time.

ALCOHOLICS ANONYMOUS IN THE POSTMODERN

The Internet now offers a global discussion meeting for AA NG posters. No longer are members’ discussions localized at the level of group and/or sponsor. AA has its own website—pointedly authorized—which allows interested parties to access authorized AA literature. Literally, today a member can participate in the AA program solely through cyberspace. Availability of literature and other members on the web now means that a person who “has a

desire to stop drinking” (that is, on the basis of AA’s third tradition) never physically has to enter an AA meeting room, nor needs to experience face-to-face contact with other AA members.¹⁴ As we move away from the traditional influence of AA text and member’s reproduction within conventional meeting sites, we may be facing the end of an era. As AA continues to change and as AA discourse continues to be resisted, Alcoholics Anonymous as we know it will either fade away or metamorphize itself to the changing times.

Certainly, I am not suggesting that there are not persons in AA who truly believe that they are practicing AA principles and perceive themselves as embarking upon a life course motivated by spiritual and inner peace. What I do suggest is that the real condition both inside and outside of AA is not as selfless, harmonious, and purely driven as documented by some researchers (Kurtz, 1993; Khantzian and Mack, 1994; Valverde and White-Mair, 1999). As demonstrated above, those persons who have been involved with AA, including those who remain committed to AA, are frequently at odds with the larger AA dogma. As an educational program its principles and religion are reproduced reflexively, though, as shown, there are tensions and resistance toward the AA framework.

As the AA face continues to change within the postmodern, the character of the AA program and the makeup of the members themselves will, I predict,

14. Although the Internet continues to be largely a mechanism and tool of privileged western persons, in time computer technology will likely permeate the globe. The NG data examined here stem from primarily North American and European posters.

shift significantly. Identifying present and future transformations within AA is not sacrilegious, but rather is being cognizant of future problems and possibilities within the current AA discourse. In order to protect the theoretical benevolence of the AA program and philosophy it is worthwhile to trace today the resistance and malevolence that pose tensions within AA. After all, so-called *alcoholics* are merely mortal. Transcendence of what is human is impossible, even for hard line AA adherents. Thus, members' practices may never be fully reflective of the pure theoretical spirituality that is otherwise inspired by Alcoholics Anonymous.

CHAPTER SEVEN

NG DISCUSSIONS: THE “HOW” & THE “WHAT”

“All of the [members’] possible responses of others to drinking characterizations are built into our belief system regarding ‘alcoholic behavior’ and ‘alcoholic responses.’ In this regard, much of what ‘alcoholics’ and significant others do, say, and think in regard to drinking characterizations is influenced by scripts, expectations, and beliefs” (Rudy 1986:103).

In this chapter I examine Alt.Recovery.AA NG text through a broadly interpreted and applied conversation analysis (CA) and discourse analysis (DA). As an institution, Alcoholics Anonymous poses a rich source of institutional talk. As actors within the institution of AA, the NG participants’ texts pose valuable sites for analyses through CA and DA.

The following analysis presents two complete threads, of approximately 100, that were downloaded over a period of two-and-a-half years. These two particular threads were selected primarily for their length as they provide texts manageable for the purposes of this analysis.¹ The postings for “What’s Up With the Sobriety Date Signature” and “Sober But Miserable” were 56 and 49 respectively. Some downloaded threads contained more than two hundred

1. NG threads vary greatly in their content and their number of postings. Some threads contain only the one original post, while others might attract 300 or more follow-up postings. The threads examined here contain more postings than would the average thread.

postings, which would not be suitable for the present analysis given the space such text would command. Both threads were selected because their titles appeared to speak to some of my own research questions. The first because, at first glance, it seemed to address shifting AA politics (i.e., boasting of one's length of sobriety), and the second because it appeared to pose the feasibility that persons can be "miserable" even with the assistance of Alcoholics Anonymous. Neither thread was read prior to their selection for analysis.

While the following discussion engages subject-generated texts as forms of analyzable discourse, the analysis presented borrows from both CA and DA insofar as both analytic methods share the larger project of reading texts for cultural meaning. Thus, in somewhat of a contrast to traditional CA, which largely concerns itself with linguistic rules of talk, I offer here an examination of the mechanisms by which meanings are constituted through, and by, Alcoholics Anonymous. Rather than adopting stringent rules of CA and DA, I borrow instead from particular principles and tools offered by the two methods. Though only *borrowing* from elements of CA and DA, a brief overview of both methodologies is in order.

Some writers see discourse analysis as grounded in examinations of language, especially linguistics, necessarily (Brown, 1983; Stubbs, 1983), while other writers see discourse analysis as posing broader analytic possibilities (Silverman, 1993; Potter, 1997; van Dijk, 1997). Whereas CA is largely concerned with sequential order of talk, DA may be organized around a far

broader range of activities, including forms of social control (Silverman, 1993:121). At a larger level, as Potter (1997:146) observes, DA “becomes analysis of what people do”, not necessarily what they say. In any event, “DA shares many concerns with conversation analysis” (Silverman, 1997:5).

Silverman (1993:120) notes that CA “is based on an attempt to describe people’s methods for producing orderly social interaction.” Drawn originally from Garfinkel’s ethnomethodology, CA is an analysis of “folk” methods” (Silverman, 1993:120). Like DA, CA can also pay attention to the sequential organization of talk/conversation (Silverman, 1993:120). Furthermore, “to become data, observations have to be recorded in some way, e.g. through fieldnotes or pre-coded schedules. However sophisticated such recording devices may be, they cannot offer detail found in transcripts of recorded talk” (Silverman, 1993:117). According to Heritage (1997:161):

Conversation analytic studies...describe how people take turns at talk in ordinary conversation and negotiate overlaps and interruptions; how various kinds of basic action sequences are organized and different options are activated inside those sequences; how various kinds of failures in interaction...are dealt with; how conversations are opened and closed; how gaze and body form and discourse particles are related to turn-taking and other interactional issues, and so on.

A general rule of talk is to take turns (Silverman, 1993; Potter, 1997); one limit of the following analysis looks at the rules of talk prescribed by the parameters of NG posting. While in AA formal communicative procedure prohibits crosstalk (see also Mäkelä, 1993:201), in the NG the rules of talk are more strictly

organized by the physical technical limits imposed by the computer-based NG itself.

One goal of CA is to discern and illuminate context. Thus, the underlying meanings of interaction are rendered valuable. As Heritage (1997:163) notes:

CA starts with the view that "context" is both a project and a product of...participants' actions. The assumption is that it is fundamentally through interaction that context is built, invoked and managed, and that it is through interaction that institutional imperatives originating from outside the interaction are evidenced and made real and enforceable for the participants.²

One goal of examining the NG texts then lies in highlighting contexts around participants' talk.

In being a complex system of knowledge and truth, AA provides contextual meanings to inform and constitute members' reality of addiction and recovery.³ As Denzin (1987b:33) observes, recovering AA alcoholics must learn to apply a group perspective to their own recovery. The language of AA serves as a primary communicative code. Note Potter and Wetherall (1987:9): "logical distinctions depend on people sharing a complex symbolic representational system. Moreover, language is not just a code for communication. It is inseparably involved with processes of thinking and reasoning." Thus, though language is central to the construction of members' reality, it serves also to

2. See also van Dijk (1997:3), who argues that "discourse studies are about *talk* and *text* in *context*."

3. AA also provides contextual meanings around addiction and recovery to the lay public, given its widespread familiarity and its level of advertising.

influence ways of knowing within AA. The language provided by AA, therefore, serves to undergrid members' reality.

Given members' interaction within, and through, the institution of Alcoholics Anonymous, Alt.Recovery.AA discourse can be examined for the ways by which participants manage their interaction *as* AA members or, on the odd occasion, as former members. As I demonstrate here through NG text, participants' reality of addiction and recovery is created and informed by and through AA discourse. Indeed, participants create and manage their realities of alcoholism through overtly engaging AA text and larger discourse.

Texts provided by NG participants offer "documents of interaction", which create naturalistic records. According to Potter and Wetherall (1987:163),

discourse analysts work very frequently with *records* and *documents* of interaction, as opposed to material garnered from the researcher's own dealings with participants. Traditionally, one of the most important advantages of collecting naturalistic records and documents is the almost complete absence of researcher influence on the data.

Potter (1997:146) notes that DA has an analytic commitment to studying discourse as "*texts and talk in social practices*" (italics in original text). "Typical discourse analytic studies focus on transcripts of talk from everyday or institutional settings, on transcripts of open-ended interviews, or on documents of some kind" (Potter, 1997:147). The analysis below is guided, however unconventionally, by transcripts of talk generated within the institutional setting of Alcoholics Anonymous. The transcripts have been produced naturalistically by the subjects themselves.

DA, reaches beyond mere linguistics, as discourse represents a vast process under which theory and interaction convene. "Naturally occurring talk" then is "not a straightforward discovered object, but...a theoretical and analytic stance on conversational interaction" (Potter, 1997:148). As van Dijk (1997:2) poses, one task of discourse studies is to understand the ways by which "beliefs control language use and interaction." To this end, the following analysis and discussion searches through Alt.Recovery.AA text/talk to understand better the mechanisms by which larger AA discourse gets constituted, resubstantiated and reproduced through AA-speak and AA codes of approved conduct. As Denzin (1987b:56) notes, AA alcoholics "teach one another how to talk the language that makes...understandings and self-identification possible."

Rudy (1986:16) reports that "sobriety can only be reached by members when they practice the twelve-steps and the twelve-traditions, which encompass...a total way of life or philosophy of living." These steps and traditions, as representing the code of approved conduct, are examined here for their importance to the constitution of realities, and the contextual meanings proffered within, and by, the AA narrative. Note Gubrium and Holstein (1997:186): one mission of ethnomethodology is to maintain a concern for *what* is going on while describing socially constituting *hows*.

EXAMINING THE 'HOW'

Gubrium and Holstein (1997:14) address "a sensitivity to the ways people participate in the construction of their lives and social worlds" as giving rise to

“how questions”. *How* questions pay attention to the production of meaning. *How* questions, therefore, examine the ways that “the meaningful realities of everyday life are constituted and sustained” (Gubrium and Holstein, 1997:14). As part of the ethnomethodological project, I ask how realities of everyday life are accomplished within the AA NG, and whether the findings here can be applied to the generation and sustenance of members’ realities within real life AA?

To examine the *how* I temporarily bracket the *what* in order to illuminate the *how* more fully. The following NG thread, entitled “What’s up with the sobriety date signature?” is examined closely for the ways by which the AA informed realities are constituted through interaction between members, and between members and larger AA discourse.

The NG threads are first presented below in their full texts, followed subsequently by the analyses. I have, to the best of my ability, reproduced the sequence of posts in chronological order.⁴ Direct responses to individual posts have been indented and inserted as closely as possible after the post to which it was responded. When possible, I insert the original author’s follow-ups, that is, the author of the first post who began the discussion, to the subsequent posts immediately after the corresponding response. Discussion forum posts are typed single-spaced and with a Courier font to demarcate them from my own

4. Chronicling postings in their exact original order is difficult, given that posters often tag the texts of others to their own in order to identify previous comments to which one is responding. APPENDIX 7-A provides an illustration of this difficulty.

discussion. All posts made by the original author are set in a Bold Courier font. The thread is presented in its entirety so all postings are included.

The following discussion examines *how* questions through NG text that are generated around the thread entitled “What’s up with the sobriety date signature?” As noted earlier, the AA position on ego asserts that members/adherents are taught to live by a twenty-four hour, one-day-at-a-time principle. That is, as discussed in previous chapters, AA advises members against positioning themselves above other members on the basis of length of sobriety. However, despite being an integral AA principle, members/adherents employ lengths of continuous sobriety as a means by which to garner recognition and respect within AA. The thread examined below begins by having a poster take issue with the practice of announcing one’s dry date publicly—in this case, in the forum of the public NG.⁵

With the exception of inconsequential spelling errors, all postings are presented unedited and uncut so that particular nuances of each post are maintained. The thread, “What’s up with the sobriety date signature”, begins:

In filtering thru a few of these posts I noticed that some of you put your sober date in the sig file. Why? You know what would be great? If you answered this question honestly instead of saying something like "it's for the newcomer" or "so people will know there are people here with time". Here's my take..... You do it because of ego. If I am wrong then please tell me why. If I am right, please admit it. (Jason)

5. To trace the development of individual contributors to the thread, I have reorganized the entries by author—See APPENDIX 7-B. Levels of participants can therefore be assessed more easily.

The responses to Jason's original post are as follows.

1. It proves AA works, enough said. (Morley) (7-1-84)

1.a. It proves that some people want to be thought of in a certain light. By the way, why do you feel the need to prove that AA works? (Jason)

1.b. I don't really think it *proves* anything, Morley. But I do see it as an example that the program *can* work if you let it. ;-) (Marilyn)

1.c. You are cool, my dear. You *are* a great example of many nice traits and I think you should be the AA Poster Girl...Lady. What I like about all this discussion over sobriety dates and in particular, those who leap in to defend a 'mere date' as if the 'mere date' were sacred. Then on the other side of the mouth, there is this talk about 'quality sobriety' when apparently a date is not enough, in fact 'mere sobriety' is pooh poohed. And then (gasp) out of the third side of the mouth is the praise and accolade seeking (which isn't half bad, really....hell we all need a little reinforcement) and on the fourth side, God does it all...based apparently on God's criteria.....(which is known by some, though not all...sort of like a 'secret society'). But I bet you already know that all it takes to get sober is to 'dumb down'. It seems that intelligence is a major factor in the cause of alcoholism. So, intelligence has to be smashed, I guess and that means 'dumbing down' so everyone can be at one level....following 'suggestions', what your sponsor says, not questioning anything, not saying anything 'against' (see the list of no-no's in another post) AA lest someone else get the 'wrong idea' and inadvertently gets smart again and well, you know, gets drunk, because intelligence is a key factor, in alcoholism. That's strange of course, because AA has some people that appear like they never were intelligent, so to speak, relatively speaking that is. No offence to anyone in particular lest the shoe fits..heh. So you see Marilyn, it all flows together. However, you deftly pointed out something that Morley had, surely inadvertently, overlooked, in his haste to have a good answer that might help a newcomer and reinforce the 'code of AA;', I like your kind of AA better, even the God part that you do, because I think you don't just spout it....sure looks like you adhere to it. Best to you, (Greg)

- 1.d. I'm fairly sure this was sarcasm (hope it was) - but I have encountered this argument for real in AA and it really winds me up. I know someone who isn't allowed to make any significant decision in his life without clearing it with his sponsor first. I'd rather die drinking than abdicate responsibility for my life in this way. I have always questioned everything I've heard, and always will. Nathan
2. It saves lives jason.....
how much *time* do you have? (Morley)
3. Because that's the way I started out in this NG, although I've thought about taking it out a couple times as of late. But then again I don't post that much either, and it's not a big deal for me either way. OK, I'll give you an honest answer based solely on my personal experience. When I first came to this NG I had only been sober for a couple months. Putting my sobriety date in my sig was as much an admission of the troubles I was having as it was a plea for folks to go easy on me and for them to help me out. So, I'd say my reason for putting my sobriety date in my sig was at that time more related to humility than it was ego. And now? Well now, it's more of a reminder than anything else. From my perspective it has nothing to do with ego or pride. Barnet (3/10/97)
 - 3.a. That explains me, but from the other end: I don't want folks thinking I know squat about the program, so my date puts me at the sorta-**newbie*** end of the spectrum. They cut me some slack, if they read it. PS - And yes, it's a bit of vanity, but more the "appropriate sense of pride" the earlier post mentioned. (Dennie) 6/14/99
4. (getting ready to work on the diet and exercise demon next...sigh...) (Jean)
 - 4.a. Me, too! Me, Too!!!
non-smoker since 1997-07-17
(coming up on 10 months sober-- 1999-03-01) (Leonard)
 - 4.b. I was smart, smoked the cheap stuff, no-name brands. A carton of no-name is now \$29 here in upstate NY, on sale, advertised on a sign in a store window. JeanSaving (how come if I'm saving all of that \$\$\$, I'm still broke...???)
DOSD(1stTime) 1982-02-12
Slip-five years... (sigh...)
DOSD(2ndTime) 1999-03-01

DOSS(umpteenthTime) 1997-07-17

DOB 19**-04-01 (Jean)

4.c. I went into a gas station today and asked how much cigarettes are now.. they told me that Marlboro's [which I smoked]{for 47 years!!!!} are US\$4.25 per pack with a \$.50 increase [tax] coming 1 Jan. Man.. I'm gonna retire on what I'm saving on cigs and booze.

DOSD 10-03-83

DOSS 5-26-98 (Harris)

5. But it's "honest ego", Jason. It used to be "bullsh*t ego". Big [sober] difference, dood. (Harris)

6. I'll tell you what...

If you don't think time matters, then what I suggest is you get some, and then lose it. You'll change your mind in a hurry. Not only that, but I seem to feel differently about people who have 10 years of sobriety telling me something about living sober than I do about someone with 6 months. Experience counts here, as well as in the rest of life. I learn from other's examples and their passing on what they have learned, and you can't be an example of what you don't have. When someone tells me how long they have been sober, I know if they know what they are talking about, or if they are blowing smoke up my ass. How's that? (Sean)

6.a. That's about what you'd expect from someone who does nothing but try to blow smoke up people's asses. (Deryk)

6.b. Sigh. You caught us, big guy. Unless you want YOUR turn being the sheep tonight. (Dennie)

6.c. Tch tch AA pat answer put down Sean.....a man of your education....tch tch Oh wow. Hey. You heard that somewhere, right? Hehe. Oh....what kind of experience. Sober experience???? 'splain how that makes one wiser or smarter or better, not just longer.....nothing comes automatic Sean...nothing.....time in grade is time in grade...time passes whether you do anything or not.....some people have learned from others....for sure. some people just repeat what others have told them to say....again and again and again and again and again and again.... sort of like your post. Sean, you got a Ph.D., right? Spend a little time and at least trick me. Make me think you gave the concepts some thought and not just memorized them.....fair? Would that be an axiom? You don't really buy that crap that you come in completely stupid about everything, do you? If you do, you are doing

just what you need to do....repetez moi. I'd hoped for better from you. Thump thump.....You'll win the adoration of those who teach pat answers, though. Guess you showed everyone. Huh? Best, (Greg)

6.d. Of course Greg when we put our D O B or our names under what we wrote what does that tell us, In my case its ahem its just so you can tell who what and if ' I am'. That and individuality yep that's it, I'm a vain individual. (Todd)

6.e. S'natural Todd. S'not bad. T'is those who try to make what is natural immoral that sucks.....but hell, if we didn't have other people to run lives for, what would we do? Best, sometime in the 39's (Greg)

7. Cheerio and godbless, sometime in the 40's (Todd)

7.a. God did not do it because God does not exist.
So why not take credit yourself? (Deryk)

8. You're right. It's ego. Cheers 19xx-08-04 Non-smoker since 1972-05-20 (Leonard)

8.a. Well, I don't put my sobriety date in a sig file. But I do like honesty and do wish to admit something...I likes Sheeps. .Sheeps are kool. (Evan)

8.b. Sheeps *am* kool. Kool? Do sheeps get stump broke? (Greg) xx xx xxxx

8.c. Another sobriety date not y2k ready. Regards (Dana)

8.d. Actually that was my wedding anniversary date.....and my birth date...my sobriety date is the day after.....(Greg)

8.d. My peedle dog (she weighs ten pounds) bounced into the sheep yard down the road from us, and found the sheep ran away from her. NOTHING has ever run away from her! She had a wonderful time. D'ya ever see Japanese Chin laugh??? heeheehee... (Jean)

8.e. I didn't know that they ever *didn't* laugh!!! Their faces look "built" for laughter, IMO. That must've been great for the little one's ego!!! (Tammy)

8.f. Naw, don't you know what frightens sheep the most????? The sound of a zipper (Sean)

8.g. And I suppose that next you'll be saying that the people who don't agree with your bigoted beliefs fuck sheep. (Deryk)

- 8.h. Just curious... *Why* do you believe that? Jswondern
(Ron)
- 8.i. Perhaps we need a Trollean Bo-Peeper. (Kirk)
- 8.j. You cannot control sheep threads - they grow and multiply like huge, grotesque moths chowing down on your favorite wool sweater. (Evan)
- 8.k. RrroooOOOAAAAaaaariinggg with laughter right now!!!!
Thanks Evan! (Tammy)
- 8.l. Course not. Well not since the dwarf strain has been developed. Regards (Dana)
- 8.m. OK....lemme get my dawg.....now there's a guy who *really* loves to round up sheep (and squirrels and cats and.....) (Tammy)
- 8.n. Please stop RrroooOOOAAAAaaaariinggg - you'll frighten the sheep. On second thought maybe you can frighten them enough that they will go back to the sheep thread (where they belong). (Lara)
9. When I came into the program, Each person introduced their self: Hello I'm an alcoholic and through the grace of God and the 12 steps I have been sober these past 24 hours. When I moved to the west coast a few years later.... They were doing birthdays. God only knows the date of my last drink. So I set the date a year before my daughter's birthday. Best I can do. Also not knowing has not taken me out in these past 24 hrs. (Hank)
10. As it was told to me and I believe it if you forget your sober date you are soon looking for a new one!!! (Kelsie)
11. Also, when I came into AA, it was traditional here in Dallas for members to always introduce themselves with their sobriety date. And so, I still do. 7/9/79 (Barrie)
12. Aren't we all just ONE example (good, bad, or indifferent) that the A.A. program works? Sometimes length of sobriety is just a number. (Jared)
13. Here's a typical alcoholic answer to that question:
The dictionary describes "ego" like this: eŷgo (g, g) n., pl. eŷgos.
1.The self, especially as distinct from the world and other selves. 2.In psychoanalysis, the division of the psyche that is conscious, most immediately controls thought and behavior, and is most in touch with external reality. 3. a. An exaggerated sense of self-importance; conceit. b. Appropriate

pride in oneself; self-esteem. I think 3b would be the appropriate reason for the signature dates. However, being that we are alcoholics suffering at times from excessive negativity, I think some would think it to be 3a. What a sad state of mind that is. Keep coming Jason. It gets better. (Michelle)

14. By their sobriety dates shall ye know them.....(Greg)
15. You'll get lots of blah blah on this. Remember that only a fool would use such to judge ...what? I never tell the truth about my sobriety length. Don't believe any of um. Gotta see how they live...then it don't matter anyhow. Regards (Dana)
16. Also, lets face it, in real life AA, sober time gives you status. By and large I know roughly how long the people in my groups have been sober. I try to find out actually - so I can spend time talking to people who know something about staying sober. (Nathan)
 - 16.a. There are a number of ways to gain status in AA:
 - Doing service work
 - Complaining about the lack of volunteers for service work
 - Corraling a large number of sponsees
 - Making long spiritually oriented orations at AA meetings
 - Making long diatribes about how tough it was in the Old DaysNot drinking for a long time is one of the least effective ways for getting recognition since there will always be those who say 'I'd rather be drinking than have his kind of sobriety'. Cheers, (Leonard)
 - 16.b. Right on. If sober time is not important then why do we hear all of the pissing and moaning about where the old timers have gone. (John)
17. I generally include my DOS so people will know how retro I am. Definitely an ego thing. (b vvvvvvvvAndre)
 - 17.a. I'll bet that if the DOS was tattooed on the forehead it would cut the number of slips in half. (John)
 - 17.b. Is sure would. Can you imagine trying to explain that DOS tattoo to the person sitting beside you at the local pub. (Jared)
18. I've had a lot of (drinking) drinkers tell me it's impossible to "Stay" sober. Others (just sobering up) have said they came into AA with the hope of staying sober just long enough to

feel better. They were astonished to find that it was possible to stay sober for years. I know I was. That's not to say there is not an element of ego involved in displaying the DOS - we are, after all, human, but the primary reason is to give newbies a reason for trying. Sorry you have a problem with that. Best, 6/15/86 (Norman)

19. I enjoy seeing the sobriety dates myself. It communicates to me that their way worked, and their way is probably AA. (James)
20. Look for this thread. Many are listed in it: "alt.recovery.aa sobriety countdown -- 512 years! ok Basil!" (Charles)
21. Sometimes length of sobriety is just a number. (Jared)
22. Is it wrong to be proud of one's sobriety? Its probably one my most amazing accomplishments (albeit with God's strength and encouragement). At least when I meet up with some one I knew in my drinking days they are pretty amazed. On my anniversary I don't have them slip me a chip out the back door I can tell you that. (Jules)
23. I used to dislike revealing my sobriety date but my sponsor kept telling me that it was important to let newcomers know that staying sober is possible. So, itrw [in the real world], whenever it seems appropriate I willingly let my time be known. As for the "status" & "ego burst"... it's all just one day at a time and after 10 years I am still *vigilant* as I have witnessed many long term members pick up again... humility is the cornerstone of spirituality IMHO. As a newcomer it is important to stick with the winners but I find that as long as I keep an open mind I can find help staying sober from anyone, whether they have one day or a quarter century (like my sponsor). BTW [by the way] Nathan, I missed your date on your post :-) Peace, 7/12/89 Not even one one day at a time. (Patrick)
24. As someone with almost no sober-time, I like seeing the dates. It reminds me this works. Also, let's face it, in real life AA, sober time gives you status. By and large I know roughly how long the people in my groups have been sober. I try to find out actually - so I can spend time talking to people who know something about staying sober. If people get an ego burst as well, I don't begrudge anyone that... (Nathan)

AN ANALYSIS OF TEXT: THE 'HOW'

The following discussion examines the ways by which NG posters participate in the construction of their reality and interaction within their social world. I examine here *how* meaning is produced within a particular NG thread.

In contrast to traditional methods of conversation, NG participants must necessarily post in turn. Accordingly, all posters have the same opportunity to read, engage, and participate in the NG. Given the nature of NG interaction, then, it is not possible to examine the text for interruptions, or more generally, for intonations or systems of coordination within the talk. The “socio-organizational unit” (Whalen, 1992:306) of NG conversation may not be analysed in the same way as traditional “ordinary conversation” (Gubrium and Holstein, 1997:124). Unlike traditional organizations of talk, cyberspace talk goes uninterrupted, as no participant has the technical capacity to speak over, or physically dominate, the interaction. The organization of NG communication is such that all interaction proceeds necessarily by “single-speaker turns” (Gubrium and Holstein, 1997:124).

As noted in the previous chapter, AA participants in cyberspace appear to take more liberty in challenging the larger AA discourse, given the even greater anonymity posed by the interaction. In cyberspace, participants do not have the immediate feedback of the group. Some participants post anonymously. Thus, direct feedback, including animosity, may relatively be avoided, vis-à-vis traditional meetings interaction. Furthermore, a NG participant can block other

participants from being read by his/her newsreader. To this end, a poster need not read any material/texts posted by another participant who may be deemed distasteful to the reader.

The thread analyzed below begins with a question from a poster who does not identify himself in terms of membership or, if a member, length of sobriety. While not disclosing either an affiliative or nonaffiliative relationship with AA, the poster, Jason, implies in the original post that some responses to his question may not be honestly forthcoming.

> In filtering thru a few of these posts I noticed that some of you put your sober date in the sig file. Why? You know what would be great? If you answered this question honestly instead of saying something like "it's for the newcomer" or "so people will know there are people here with time".

As indicated, the opening question/post sets an initial tone of distrust. Certainly, it is interesting that the originator of this first post avails himself to the potential indignation of subsequently posting AA members/adherents who may take issue with the insinuation of being distrusted.

The first response is grounded in standard AA rhetoric. Sobriety date profiles, asserts the first respondent Morley, "proves AA works, enough said." Nathan concurs. As noted in previous chapters, however, there is no substantiation for such a claim that AA is, indeed, successful when compared to other treatment approaches. Nevertheless, as standard rhetoric, affiliates believe the fiction to be true, as does this poster. Not satisfied with Morley's claim that

sobriety dates corroborate AA's success, Jason poses another question to Morley, and to the larger group:

- > **It [announcing sobriety dates] proves that some people want to be thought of in a certain light, why do you feel the need to prove that AA works?**

Jason now poses to NG inhabitants the further contention that there is an apparent need on the part of AA affiliates to reproduce the idea that AA does, indeed, work. In just these first three posts we can see a conflict emerge that positions traditional AA discourse against cyber practice and subject against subject. And while Morley make a sweeping claim that the AA way is successful in its recovery program, Jason counters by implying that AA affiliation is possibly grounded upon a faulty reality that requires members' support.

Marilyn then adds that sobriety dates do not "prove anything." Rather, she asserts that announcing sobriety dates evidences that the AA program "can" work, if you let it. Her claim repeats the common cliché heard virtually every night in meeting sites that "AA works if you work it." Marilyn's claim directly reproduces AA-speak. Her AA-speak, moreover, while not proving anything really, assumes that sobriety dates are only made possible through the AA program. Thus, responsibility for success lies with the member, not with AA as the reality-informing organization. In other words, AA works only because of individual members' efforts.

To the responses provided by Morley and Marilyn, Greg adds a lengthy post that in essence identifies apparent contradictions contained by AA logic. Greg observes, as I have too in Chapter Six, that while length of sobriety should

be perceived as important within AA, members, perhaps AA discourse itself, attaches a further condition of success in that one's sobriety must be of a particular "quality." Here Greg notes that within AA, quality, rather than sobriety itself, is viewed by AA members as an indicator of success. Such quality can be seen as being rooted in spiritual perfection, as discussed as well in Chapters Five and Six. Thus, it is not enough to be just sober; one must make every attempt to reach an overtly represented spiritual inner peace, as espoused by AA discourse—one that emphasizes the redemption from character defects.

Greg also comments on the necessity to "dumb down" in order to grasp what AA has to offer. His comment here speaks to the *Big Book's* caution against intellectualizing the AA program:

- > It seems that intelligence is a major factor in the cause of alcoholism. So, intelligence has to be smashed. I guess...that means 'dumbing down' so everyone can be at the same level...following suggestions, what your sponsor says, not questioning anything, not saying anything 'against'.

We see here an overt struggle over construction and ownership of authority. Greg implies, moreover, in his post, that truth founded upon the reinforcement of "the 'code' of AA" is truth necessarily contradictory and unfounded. While an AA member,⁶ Greg represents a dissenter in that he separates himself from AA-speak and AA logic. Thus, he becomes divided from the larger AA discourse.

6. Greg is a regular contributor to Alt.Recovery.AA, and has been for quite some time. From reviewing a multiplicity of threads for various elements of this study it appears that Greg is a long-time AA member/affiliate. It also appears that he continues to attend AA meetings.

Another poster, Nathan, attempts to understand the tone of Greg's earlier post, though he is clear in his allegiance to AA, as long as he is provided space to question AA discourse as required. At this point, Morley asserts the AA party line once again by stating to Jason that AA "saves lives", and asks further of Jason: "how much *time* do you have?" Certainly, the implication made by Morley's comment is that without Alcoholics Anonymous, Jason's life span may be effectively limited.

At a somewhat separate level, various participants try to address the original question regarding ego. Two posters confess that in their early days in AA they announced their dry dates, in part, as a ploy to discourage criticism and judgment by more senior AA/NG participants. The implication here is that at times interaction within the NG can be difficult, if not outright hostile.⁷ Barnet claims that he posted his dry date early in his sobriety in order to remain humble. Humility around lengths of sobriety, however, is only made possible through their relativity to one another. If length of sobriety were not such a status enhancer in AA, claiming humility would be a moot point. Furthermore, that interaction can be fraught with difficulty within the NG is in tension with AA's position on patience and non-judgement. In other words, if the AA creed of patience truly existed within membership, and if there really were no judgements

7. This point can be illustrated by the following example. One thread I examined began with a plea by someone who was searching for support and help. It went as follows: "I'm an alcoholic who has fallen off the wagon rather hard. I'm trying to get a grip again. Where should I start?" To which a poster replied: "How about suicide? Do your part to make the world a better place!"

made of others, egoism would be transcended. Such transcendence would also serve humility. That, however, egoism and judgement still exist within AA membership exemplifies a tension.

Jean offers a post that does not appear to be related to the original question posed by Jason. The relevance to the discussion is unclear, though a closer look reveals that Jean's efforts to quit smoking provides a diversion to the original discussion on dates of sobriety drinking (DOSD). Her post receives at least three follow-ups in which local narratives of quitting smoking are juxtaposed against quitting drinking. Here members Leonard, Jean, and Harris attempt to pervert the earlier comment regarding sobriety and egoism by placing dates of smoking sobriety (DOSS) in their signature profiles. To further humor, or perhaps divert from the original point regarding ego, Jean appends her date of birth (DOB) to both her DOSD and DOSS. In this sub-thread, we see attempts to interject humor into the discussion, consequently trivializing Jason's original question regarding dry dates. It appears that the tension between the AA narrative and members' practice is better left unaddressed by some adherents. One adherent, Harris suggests to Jason that announcing one's dry date reflects "honest ego", as opposed to "bullshit ego". The implication here is that, while in tension with the AA narrative on ego, recovery from alcoholism through Alcoholics Anonymous affords room for "healthy ego." AA, of course, advises otherwise, both through its Big Book and its central "One-Day-At-A-Time" principle, as discussed as well in Chapter Four.

Different levels of friendly banter surface throughout the thread. In one instance, there is a seemingly facetious discussion around “sheep”. The inference contained by the bantering, however, is that sheep get “screwed”, and by implication no one would want to be a sheep.

Sean: Naw, don't you know what frightens sheep the most????? The sound of a zipper.

Deryk: And I suppose that next you'll be saying that the people who don't agree with your bigoted beliefs fuck sheep.

As a double entendre, sheep can also be understood here as passive followers.

The interjection of humor may, therefore, serve here a purpose beyond the obvious. As Khantzian and Mack (1994:77) observe:

the use...of self-deprecating humor, banter, and aphorisms (e.g., ‘No one is too dumb to get the program, but some might be too smart’; or ‘KISS—keep it simple stupid’), serves a purpose. The storytelling might as well serve “to address the character flaws or ‘defects of character’ that disguise personal vulnerability (Khantzian and Mack, 1994:77).

Importantly, however, although possibly purposeful, the topic posed for discussion is at times evaded in favor of the interjection of diversionary humor.

Sean's contribution to the discussion plays back to Jason's request for an honest answer. Ultimately, however, Sean works through the AA narrative while simultaneously departing from it. There arises here another tension in AA logic, as Alcoholics Anonymous, on the one hand, tells members that experience counts, hence the requirement to share one's “experience, strength, and hope”. As noted previously, part of the AA recovery process involves listening to the personal accounts of other members (see also Pollner and Stein, 1996:206). Yet,

on the other hand, AA advises against hierarchical ordering on the basis of sober time. Sean exemplifies this tension when he states:

- > Experience counts here, as well as in the rest of life. I learn from other's examples and their passing on what they have learned, and you can't be an example if you don't have it. When someone tells me how long they (sic) have been sober, I know if they know what they are talking about, or if they are blowing smoke up my ass. How's that?

Nathan concurs with Sean, although Leonard argues that "not drinking for a long time is one of the least effective ways for getting recognition" in AA. This comment begs the question as to what distinctions do gain recognition in Alcoholics Anonymous. Nonetheless, members do learn that experience counts in AA, as evidenced greatly by the multiplicity of personal narratives provided by the *Big Book* and by the requirement to share one's story in AA. Yet, AA also teaches members to strive for humility and anonymity as spiritual foundations of recovery.

Greg ridicules Sean's "AA-speak" for its mere repetition of recovery rhetoric. Where Sean asserts that length of sobriety is synonymous with wisdom, Greg questions. Where Sean "thumps" AA (as in bible thumping), Greg criticizes. And where Sean sees experience as constituted through AA membership, Greg challenges "those who teach pat answers." A sub-theme emerges when Todd attempts to diffuse the heat of the Sean-Greg exchanges by showing support for Sean, though Greg quickly reestablishes his position by making the point that the hidden agenda of Sean's AA-speak is to run the lives of others. At this point, Sean retreats and refrains from further posting to the thread.

Eventually one poster, Leonard, concedes to the proposition that posting one's dry date is an issue of egoism. To which Hank underscores AA's twenty-four hour principle by recounting his introduction to AA, at which time members refrained from listing dry dates even with their home groups. Instead, all members presented themselves only as being sober for the past twenty-four hours. Kelsie responds back to Harris in AA-speak by asserting that when an AA member forgets his sober date that member will soon be looking for a new one. Barrie, however, adds his experience of belonging to an AA group in an area where members were expected to introduce themselves with their sobriety date. Jared goes back to both Morley's original comment, and to Sean's earlier note regarding wisdom coming from experience, by adding: "Aren't we all just ONE example (good, bad, or indifferent) that the A.A. program works? Sometimes length of sobriety is just a number." The length of sobriety is now thus just a number, though according to Jared, AA does nonetheless work. Moreover, what exactly does Jarred imply when he characterizes the discussants as "good, bad, or indifferent" examples of AA success?

One poster, Michelle, goes to a dictionary to find a definition of "ego", and attempts to relate AA ego to dictionary terms. Seemingly exasperated by the difficulty in reconciling the various definitions, she advises the thread's original poster, Jason, to "Keep coming." "It gets better", she tells him. Jason, however, has not indicated in this thread that he is a newcomer. Rather, with the exception of his one follow-up to Morley, Jason refrains from contributing further to the

discussion. Michelle assumes, however, given the nature of his question, that he is new to AA. Nonetheless, any member cognizant of AA doctrine would find the contradiction raised by Jason an absorbing one.

Towards the end of the thread a participant contributes to the discussion for the first time, in an honest attempt to address Jason's original question.

Patrick writes:

> I used to dislike revealing my sobriety date but my sponsor kept telling me that it was important to let newcomers know that staying sober is possible. So ITRW [in the real world] whenever it seems appropriate I willingly let my time be known. As for the "status" & "ego burst"...it's all just one day at a time and after 10 years I am still *vigilant* as I have witnessed many long-term members pick up again. Humility is the cornerstone of spirituality [in my humble opinion]. As a newcomer it is important to stick with the winners but I find that as long as I keep an open mind I can find help staying sober from anyone, whether they (sic) have one day or a quarter century (like my sponsor).

Though a heartfelt response to Jason's original quandary, Patrick's text can be deconstructed to reveal inherent tensions and problematics. First, Patrick announces his 10-year dry date in his post despite later claiming humility. Second, he informs his reader that his sponsor's guidance is integral to his own sobriety. Third, he reveals that if not "vigilant", even long-term members are at risk of relapse. And fourth, he "thumps" AA's counsel to "stick with the winners".

Importantly, Patrick's own AA reality is largely constituted through his sponsor, whose reality was in turn previously constituted in large part through his sponsor, and so on and so on—just as AA discourse dictates. As explained

earlier in Chapter Five, the AA sponsorship relationship is instrumental in reproducing the AA narrative. The reader might question the independence of Patrick's reality insofar as it has been constituted through both AA adherents and larger AA discourse. As this analysis has disclosed, separating members' reality from the AA narrative is difficult at best. Members' realities, especially newcomers who tap into AA chat rooms and the AA NG become further constituted through public discussions that serve generally to embrace and reproduce the AA party line. As evidenced by this analysis, only one poster throughout this entire thread challenged AA logic.

Moreover, while the apparent goal of Patrick's text is to espouse the merits of Alcoholics Anonymous, he nevertheless announces that AA sobriety is frail, even for long time members. His claim here, however inadvertently, diametrically opposes Morley's earlier claim that announcing one's dry date proves that AA works. If even long-standing members are at risk of relapse, how successful or reliable can we claim Alcoholics Anonymous to be? Finally, Patrick's attention to both his long-standing dry date and that of his sponsor contradicts the humility he espouses as the "cornerstone" of spirituality. If, indeed, AA teaches humility as implicit to spirituality, what exactly is the purpose or the value in announcing the length of one's sobriety?

This NG thread demonstrates that members' realities are constituted both apart from and through the AA narrative. The texts provided here by members/affiliates affirm that members' practice is fraught with contradictions.

In seeking to reconcile the contradiction between humility and posting dry dates members redefine their truth apart from AA discourse. The constitution of reality is, itself, laden with tensions, as participants seem to construct the reality most suited to their immediate needs. That AA proffers a spiritual program of recovery with the ultimate quest of human transcendence is not in question here. The question is whether adherents, as mortal beings, can rise to the virtually impossible challenge of AA discourse. Other than Greg, posters do not see the issue of posting dry dates as a tension between AA theory and members' practice.

There are, moreover, clear codes of conduct at play in the NG, for dissenters tend to be marginalized through application of AA-speak. In the case of Greg, this marginalization was unsuccessful. In contrast, one AA-speaker retreated from further interaction. The code of conduct is ordered first by the sequential order imposed by the limits of computer mediated communication, and second by the principles passed down by the AA narrative. Tugs of war surface between a few primary discussants. Some posters make an attempt to answer the original question, while others merely dance around the topic or further divert the discussion into apparent foolishness. As noted, apart from Greg, no participant concedes to the contradiction embedded in Jason's original question.

In this thread realities appear to be in tension when a poster departs from AA rhetoric, though interestingly, and importantly too, tensions surface not only between detractors and AA doctrine but also between hard line adherents and AA doctrine. There is thus no consistent level of adherence to the AA narrative.

Rather, members' practice and levels of adherence to AA doctrine vary greatly. Greg, however, in his questioning of AA rhetoric, may be the only poster to understand the tension between theoretical AA and members' practice.

From the NG postings examined above, it is clear that meanings of Alcoholics Anonymous are constructed both apart from and through the AA narrative. NG participants contribute to the discussion at different substantive levels, with each ultimately playing an important role in the larger dynamics of interaction. Perhaps most interesting, however, is the observation that when the internal logic of AA rhetoric is challenged the discussion dissipates. Interesting too is the fact that none of the posters took issue with Jason's original insinuation that posters to Alt.Recovery.AA NG may not be trustworthy. In any event, it appears that, however fraught with contradiction, members who post to this NG in large part employ AA-speak to construct their realities of *alcoholism* and recovery. As Pollner and Stein (1996:206) observe, "[e]xperienced members speak about their lives in accord with the basic AA template." Moreover, as AA-speak is by and large grounded in authorized AA text, it can be further argued that members' realities are ultimately shaped by and constituted through AA discourse.

EXAMINING THE 'WHAT'

Gubrium and Holstein (1997:14–15) note that the "commanding focus of much qualitative research is on questions such as *what* is happening, *what* are people doing, and *what* does it mean to them?" As an ethnomethodological

exercise, this study now examines *what* questions as NG participants construct meanings as mediated through AA truth. “What” questions are applied here as they relate to rules and codes of expected behaviour, and as they represent “the machinery of conversation in order to recover the structures that undergrid interaction” (Gubrium and Holstein, 1997:55). “The aim,” similar to that posed by conversation analysis, “is to document the systematic practices used to achieve social order” (Gubrium and Holstein, 1997:55). The goal of the following analysis is to trace the *what* of the social order, as it is constituted and mediated through AA culture.

This thread is organized, presented and printed in the same way as the previously presented thread. Thus, the order of postings is chronicled as consistently as possible and responses are set in Courier font while the original and subsequent posts made by the original author are set in Bold. The following analysis examines the *what* of reality construction as much as possible in suspension of the *how*. Again, with the exception of inconsequential spelling corrections, the text is first presented uncut and unedited.

The original post from Daniel that initiated the thread, “Sober but Miserable”, is as follows:

Can't get myself to work. Deepening financial crisis. All I wanna do is watch the waves and sleep. Any suggestions?

Responses to Daniel's original post:

1. How 'bout - turn off the computer. Go outside. Get some exercise. Eat a balanced diet. Take your vitamins. Work a bit whether you want to or not. Hit a few meetings. Get some more

exercise. If you still feel lethargic after a few days. See your family doctor. Helpfully (Lara)

2. Major ditto what Miz Lara said, Daniel. Booze can mask a lot of "other stuff" and if you've been feeling this way for more than a week, please see somebody who might have a clue about whassup with you. If it just seems like a case o' the blahs and isn't cyclical, could be that SOBER is setting in on you -- Son Of a Bitch, Everything's Real. Then I'd say refer back to Lara's advice, "don' drink and go to meetings" and take some small steps to finding work/going back to work. A good ol' fashioned healthy routine can do wonders. Oh, and keep talking about it...sometimes that's enough to get my engine started again. (Janet)
3. What step are you working? Is it time to move on to the next one, or time to back up and see what you missed in the one before? (but Lara's suggestions sound good too.) (Thornton)

3.a. Getting ready for nine. (Daniel)

**3.b. Been doin' all that. Just mentioning it here helps.
Thanks (Daniel)**

4. Oh. Why do I think the financial state of affairs has something to do with it? Ouch. And even if I'm dead wrong I'll defer to others on the 9th step -- the discrete ones that even made it past my 8th step were pretty easy for me (the overall amending of my ways and thoughts is a different matter...) (Thornton)

4.a. Brilliant minds think alike. Understanding is half the battle for me. When I feel shitty and can't figure out why it gets worse. Thanks for helping me clear it up. (Daniel)

5. The whole idea of being sober is being happy. You should read the big book. All the answers are in there. Try some meetings and twelve step programs. It works wonderful for me. (Jerry)

5.a. Stick around, reality will eventually catch up to you. (Dylan)

5.b. How are you Jerry, btw [by the way], and welcome, if I didn't meet you before, pull up a chair, leave your horse at the rail, unsling your 6 shooters and take out you baccy, this is gonna be a long night. (guess who was watching the Duke tonite) Cheerio and Godbless (Todd)

6. When I started on recovery road, it was a new and great joy to experience the sanity of sobriety. I would get comfortably settled in the feeling of being sane, then discover I had made

another insane judgement. Always in the back of my mind was the advice I still consider impeccable, "When you're hurtin, work the steps." I have followed that advice. After a few of those errors of judgement habitually smashed my comfort zone, it became apparent to all but me that I had mistaken sane for Saintly. As my goals became more aligned with progress, rather than perfection, the wider my comfort zone became. Then, I started to enjoy the journey, rather than fantasize I was at the destination. (Eddie)

7. Surrender to your Higher Power, don't pick up, go to a meeting and read your BB [Big Book]. Sounds easy, but what's easy for me, might not be so easy for you. I know it's hard, especially when finances are involved. (I've been there, done that episode in life already) But if you hang in there, eventually, you'll reap the blessings entitled to 'ya! I've got you in my prayers sweetheart. I pray that things will turn around just enough to give you a glimpse of bright light instead of the darkness you seem to be surrounded with at the moment. Remember, only one moment at a time. That's all it takes. That's all we have. Hang in there, and keep posting. Cyber Hugs, (Marilyn) 5/24/99

7.a. Marilyn, You're such a sweetheart. Too good to be true.

Love you too. Thanks Daniel

8. No suggestions just a personal observation: I've been treating chronic recurring depression almost as long as I tried to get sober. Sober going on 3 yrs. now and still taking medication for the depression. I get along OK when I take the med. but when I stop taking it for a few months I get to where I can't even get out of my chair to take out the garbage (it's just too complicated!) I'm content with taking the anti-depressant for the rest of my life if necessary. The Big Book says there are doctors and psychiatrists out there and to make use of them. I don't have any idea whether this might apply to you or not since I'm neither a doctor nor a psychiatrist, just a recovering old drunk who uses this as a recovery tool for himself. (Giles)

8.a. Valuable insights. Thanks (Daniel)

- 8.b. I too have some experience with endogenous depression. This isn't one of those. I think it's a combination of the changes I am going through (Mental, emotional and physical. Did I mention spiritual) all at once. It's a bit much. I really dug deep on the fourth step. To the point of using regression to make sure it all came out.

I am detoxing from tobacco and changing career. I could go on. It's great to know that there are sympathetic ears here, people who have been through it and are genuinely supportive. Sometimes it makes the difference whether I have gone forward or backward when the day is over. After my initial post I succeeded in getting quite a bit done. Looks like it's going to be a productive day. Thanks (Daniel)

8.c. dear dan,

Have an assessment anyway! Depression is another of those cunning, and baffling things! There is a HUGE problem! Nicotine was a tougher drug for me to ditch than any of my addictions! I hope that you can continue to have "productive days", one foot in front of the other.....if you have the feeling that you are walking with cement boots on, see someone about it! (and i DON'T mean another 4th step) (Ronda)

8.d. I have a friend who was troubled with depression (which I know nothing about). After he was sober for a couple of years he quit smoking. In short order he lost his job, new wife, and fell into a deep pit and had to be hospitalized. All this, in my opinion, precipitated by nicotine withdrawal. As I said, this is only anecdotal, but made me a believer in the power of the aboriginal gift to western civilization - we been trying to get even ever since. Regards (Dana)

8.e. Sounds very similar to my experience with quitting drinking. Within two years of getting off the sauce my marriage was in trouble, my job went in the crapper, and I had picked up another addiction. (Leonard)

8.f. So are you blind yet? Just curious. (Nancy)

8.g. I think someone has a resentment. Time for a Step 10, sweetie. Cheers, (Leonard)

8.h. Ok, I'll do it. I was wrong to take a pot shot atcha. I just couldn't imagine what other addiction a manly man would fall prey too. (Nancy)

8.i. A week ago I would have agreed intellectually. Now I am in agreement on an emotional basis as well. What a sonofabitch!!! Yesterday I couldn't take a breath without pain, excruciating pain. I am NOT going to go through that again EVER. If the time comes I'll check into a detox ward. (Daniel)

9. Good for you. I had hit a pretty rocky "bottom" so a lot of "the worst" had already happened: financially and situationally. Weirdest thing was that even though it was pretty materially devastating, as well as powerfully ego-deflating, there was this sweet sense of "relief." So I worked on finding a practical way to do steps 2 and 11 that had a lot to do with the difference in my "spiritual condition." Lara's suggestions were great, coupled with Nancy's about the ongoing service element. IME [in my experience], this has been a combo that got me through some spells that at the outset I just couldn't comprehend how I was going to continue any further. Many of us know very closely how that feels. I don't know if that helps you, but it sure has helped me. (Joshua)
10. I started to write something. But you know, I finally learned how to be a good parent, now that my children are grown. A lot of the problems they 'brought' to me or I 'heard' would have been better handled by me with a little time, patience, and not really giving any advice. I read your lament and immediately a 'solution' came to mind, and then I decided to wait...and sure enough, you're better....and seemed to have concluded what I would have said, 'life goes up and down and back and forth' That's quite an adjustment coming from life on such an 'even' keel.....drunk most of the time... (Greg)
11. Watch the waves, sleep, go to meetings and most of all do service no matter how menial but regular and often. This will pass. You will be surprised how that will work. That is a promise. (Nancy)
- 11.a. You sure do know how to cheer a guy up. Hopefully I can reciprocate one day. Daniel in better now mode. (Daniel)**
- 11.b. Damn, Daniel.. It's obvious to me. If God gives you waves.. go surfin'!!!! (Harris)
- 11.c. Now how can you not love this kind of advice.....Harris you are the BEST (Daniel)**
12. Well, you can sit there and keep watching the waves until the tsunami arrives. You could start moving your gear, a little at a time, further inland. You could go back to sleep. Farther down the thread, you replied to someone who asked if you've been turning off the computer, getting exercise, eating right-you said yes. If this feeling hangs in there for more than two weeks to the point you can't act despite it, you could go see your doctor. You could go to the local Unemployment

Security office and look around for someone who looks more miserable than you, strike up a conversation. Maybe undertake the job search together. Oh wait—that reminds me of another recovery program... :) Best to you. (Bertina). 5/25/88

13. Ditto Thornton and Lara.

Daniel, I don't know, but Step 8 is where I 'go' a fair amount of time. Maybe talk about yourself in the third person, as in tell someone about this guy, who gave you permission to speak about him, and then go on to relate to another, the failings and shortcomings, the hurts and the harms he befell on others, and about how he made amends and made changes and how that 'person' is today. I constantly have to 'be reminded' that I'm just a sick s'o'b trying to get well - not a bad immoral pervert, trying to appear holy. I do remember at some stages I just couldn't 'hold' all this new information about 'me', about living, about the future, about the recent past and still trying to deal with this information. In short, step 8 is just about coming to the time when you've put in the big hard work, and are getting ready for these promises, which you will find are mostly already in place, just not too 'evident'. Hang in there, fwiw [for what its worth], its where you are and there's no measure of where you should be. If I can explain an analogy to you : My life's a jigsaw of X pieces. Before I saw a piece of the puzzle now and again. Never two or more pieces at the same time. Jean would tell you that a good counselor or even a good sponsor, might put two or more pieces together and then something recognizable may form. But today all the pieces are there on the same table, so it 'should be easier' to fit the pieces where they should be, even if by trial and error. You're able to write about this so even that has more likely helped you. No quick fixes for me though, ;-(but I do feel more 'alive' some days. Cheerio and godbless. (Todd)

14. True Jerry, and I forgot to mention to Daniel, if you read immediately after H I W [How it Works], (64, I think) it says something to the tune of, having become convinced, you are now ready for step 3. Think about the next paragraphs, they actually, to Todd, are the greatest eye-opener of the whole width of the programme. Just my tuppence worth. (Todd)

15. Thank you Daniel for reminding me just exactly how it was for me when i got sober (12 years ago today) Trust me when I tell you that your feelings of misery will pass. Above all do not drink, and you will recover..... (Miles)

15.a. Happy Anniversary Miles :)

Grace and Peace 10/31/88 (Basil)

15.b. Sorry to be 3 days late on this. There's simply no excuse for it. ;-) but, in any case....

{{{CONGRATS MILES ON 12 YEARS!}}} (Marilyn) 5/24/99

15.c. Congratulations, Miles. (Berrie)

16. Gee, Daniel, after reading what you're up to, I'm feeling a bit worn-out myself. Why is it that we expect so bloody much out of ourselves? How come you can tell me - and mean it - to slow down, relax, quit taking things so seriously - but you can't see it for yourself? This AA thing isn't a marathon, Daniel. The one thing time sober has given me is a perspective on this stuff - I don't have to do it all and I don't have to do it all now. Easy does it - breathe in...breathe out...just be. (Kirk)

16.a. Thanks Kirk.

In addition to everything else that's going on my financial status will have me watching waves from the beach rather than from my living room if I don't come up with about five grand in the next week. That is the reason for the pressure. Trying to find balance. Pressure myself into fixing all these problems or relax into homelessness. I know that it will all work out but it would sure be nice to have some idea how. Grateful (Daniel)

16.b. I hear ya, Daniel. I do know that you can come through this, regardless of the financial outcome, and go on to bigger and better things. In retrospect, many of my "losses" have signaled new beginnings. Hugs, (Kirk)

17. Well- yeah. I would suggest that basic food, exercise, sleep. etc. are a more likely place to look before one begins obsessing over whether they are "working the steps" properly. (Greta)

18. What's the solution to your deepening financial crisis? Go to work, one foot in front of the other..the important thing is that you try. If all you want to do is watch waves and sleep.. Make a new wants and needs list... Maybe, one day, the things you need will become the things you want. Don't forget to put "love" on both lists. (Mira)

19.a. Where can you cut costs? (Dylan)

19.b. Doing it. Saving money on booze and cigarettes. Now to collect some of the 150k that is outstanding. (Daniel)

The original poster, Daniel, contributes further to the discussion:

19. Hi gang

Yeah. Now that my head is a little clearer - many of the symptoms are consistent with opiate withdrawal. I have seen people go through opiate withdrawal while detoxing from something they are sensitive/allergic/addicted to. I have explained the mechanism to others, how we elaborate endogenous morphine aka endorphin in response to an allergen and end up dependent on our own endorphins. In my case it seems I am far more addicted to tobacco than I ever imagined. It is really kicking my ass. Wish I had anticipated it. Oh well. I guess it's good to know what others go through. Booze was easy compared to this! Funny thing is, six months ago I woulda said "screw it" and had a cigarette. This time my thought process is the opposite. I have put too much effort into myself, come too far, had far too much help from above to throw it away. Who woulda thunk it. Opiate withdrawal from cigarettes. Benefits of sobriety. I get to live the scene that they left out of "The insider". I am overcome with gratitude at the quality of the support here. The best things in life really are free. Godbless (Daniel)

20. Way to go, Daniel. Great time to quit smoking. I always thought of smoking as a safety net on drinking. Gave myself permission to smoke before picking up a drink. Not that I suggest it for you. May be closer to the drinkie than I could believe since have taken up cigars a couple of times a week. I remember getting off the butts in '84. After the real bad days were past, there came a day when the monkey jumped back - oh my god-after two weeks -bad as the first day- good news was it lasted only 10 minutes not all day. Hang in there. Get some extra help with any of the really big things. Regards (Dana)

21. Hi Daniel,

I guess my ISP's new USENET server is still catching up with the message flow. This thread just downloaded for me and looks like that before I could read your article you had already moved on through most of the sticky parts. I'm not complaining. Goodness no. I think it's really cool that you're handling the common difficulties of early, new-found sobriety so well, on your own. Frankly, your state of mind, body, and spirit (MBS), as you've expressed it to have so recently been, is pretty much the condition I was in just before I got my last DWI and was 'guided' toward my first experiences with the

fellowship and suggestions of A.A., by my first (in hindsight) higher power(s). Just add my abuse of alcohol to your description and it'll pretty well serve to describe my state of MBS, at that time and for some time after that. I really have nothing 'new' to add to the goodies that folks posted. Because it was helpful to me in my own early sobriety and may be helpful to you, Daniel, and others, I would like to emphasize the emphasis Lara put on her exercise suggestion and maybe also emphasize a few other things folks put out 'here' for all to see, so I will. Maybe. I'll try to do that, anyway. I bought a bicycle so that I wouldn't have to entirely depend on others for my transportation needs. As one thing so often leads to another thing, it wasn't long before I was using my bicycle, for getting strenuous aerobic exercise, in order to get more of the benefits I had observed myself to be getting from merely using my bicycle for transportation. I'm going to try and run off a list of some of the personal benefits I directly attribute to my strenuous exercise while undergoing withdrawal symptoms, from my long-term and continuous abuse of alcohol. That list includes but isn't limited to things like helping to clear muddled thinking processes, to ease the aches/pains in my joints that I experienced during alcohol withdrawal, to hite... hith... damn!...htihen... ahk!... heighten my sense of well-being, to increase my energy/endurance level, to learn how to breath properly... ha! - that's a *good* one... to get to the meeting-before-the-meeting on time... LOL! - lot's of goodies to be experienced by doing that... to learn better time planning, so I could fit more into the day... blah blah blah Well, darn. For time and brevities sake, I guess I'll let it go at this point, and not try to elaborate on any other suggestions folks offered. Suffice it to say that many of the suggestions and observations which folks wrote/posted are confirmed to have been applicable and useful to do, in helping with modifying the state of my MBS, in early sobriety. Thanks for your article, Daniel. You helped to get the ball rolling on a topic that's relevant to readily observable phenomenon which lots of folks experience, in the early stages of not using alcohol. Oh, one more thing, Daniel; the pointer about getting a doctor's advice and guidance is a very 'good' one. I haven't picked up on what kind of exercise you are doing or how strenuous it may be. I had been living an (euphemistically speaking) send... sedentary... <grunt> sedentary life and so I visited with a doctor, to get some kind of assurance that my heart wouldn't explode when I stepped up the level of my exercise program. Like someone pointed out, if some of those

conditions persist it's permissible... ha!... for an A.A. member to seek 'outside' help with resolving 'problems.' For example, the financial advisor I've most often consulted with also happens to be my father, but there are lots of alternative to that. Sometimes we have trouble detaching ourselves from the seemingly automatic father-knows-best vs. contrarian-son thing, but we eventually work through that noise and get to the beneficial consultant/consultee bit. I neither grow nor accept the notion that some folks have attempted to project upon me... that the program of recovery of A.A. contains all the solutions to all the problems that I ever had/will have. YMMV. Cheers, (Farlee)

21.a. Damn. This stuff is publishable! 'Good stuff I learned in the NG'. Thanks! (Daniel)

22. Manly men have been known to become addicted to aerobic exercise. They don't think they are addicted, but their wives easily cut through the web of denial. That's what happened to me. I would promise my wife I would only go for a 10K run, and come back three hours later after 25. Or I would promise I would only run at lunchtime, but sneak out after work or on weekends to get my fix. It caused serious damage to my home life. Cheers (Leonard)

22.a. Oh, I getcha, that is too bad that running had to be affected by that addictive disorder. I run but I have to make myself do it and I only run 3 - 3.5 miles a day. (Nancy)

AN ANALYSIS OF TEXT: THE 'WHAT'

The following discussion pays attention to what questions—what is happening? What are the NG participants doing? In what ways do these particular NG subjects mediate meanings of recovery through the larger culture of Alcoholics Anonymous? What realities are actually being negotiated within the following interaction of AA members?

This thread, "Sober but miserable", opens with a post from a current AA member who makes a plea to other members for advice. It appears, too, that

beyond his plea for advice, this poster, Daniel, seeks support, and perhaps even help, from other NG participants. Unlike Jason, the originator of the previous “What’s up with the sobriety date?” thread, this poster is actively engaged in the discussion throughout the entire text.⁸ Daniel begins by posting:

> Can’t get myself to work. Deepening financial crisis. All I wanna do is watch the waves and sleep. Any suggestions?

While Daniel does not state so explicitly, the tone of his post indicates that he is in a depressed state. This possibility is picked up and addressed by several respondents to Daniel’s original post.

The first response is from Lara who tells Daniel he should shut off his computer, go outside, get some exercise, eat a balanced diet, take vitamins, work, hit a few meetings, and see his family doctor. Deducing that Daniel is suffering from depression, Lara volunteers advice in suggesting to Daniel that a visit to his doctor would be in order. By locating the primary problem in depression, Lara sees only part of the solution as lying in AA meetings. Her advice to Daniel is holistic and the weight she attaches to AA here is minimal, although she does nonetheless see AA contributing to the solution.

The second response comes from Janet who underscores Lara’s previous advice. Janet also addresses Daniel’s plea as that of one suffering from depression. Her advice, while appearing sympathetic, is weighted, however, with AA clichés. She provides, moreover, an acronym for SOBER—“Son of a Bitch, Everything’s

8. See APPENDIX 7-C for an individualized list of postings to this thread. As indicated, Daniel’s activity in this thread exceeds the activity of any other poster.

Real”—to which she aligns Daniel’s apparent depression. Assumably, this saying holds that once sober a member is faced with the realities of everyday life. According to Janet, the solution to Daniel’s problem lies partly in not drinking and going to meetings: “Don’t drink and go to meetings.” In addition, Daniel is advised to “take some small steps” to finding or going back to work. The answer, says Janet, can be found in establishing a “good ol’ fashioned healthy routine”; but for Janet AA is central to that healthy routine.

Thornton asks Daniel what step he is currently working. Daniel responds that he is getting ready for step nine. The problem, according to Thornton, may lie in moving along to the next step, or perhaps in going back to correct a possible problem with an earlier step. Here, again, Alcoholics Anonymous is positioned as the fundamental solution to Daniel’s apparent depression. Thornton thus frames depression as an issue that can be rectified solely through the steps of AA.

Throughout the thread Daniel responds frequently to the support he receives from the members of the NG. Indeed, his presence looms as he tags his appreciation frequently for the support that he receives here. For example, Marilyn writes:

If you hang in there, eventually you’ll reap the blessings entitled to ya’. I’ve got you in my prayers sweetheart. I pray that things will turn around just enough to give you a glimpse of bright light instead of darkness you seem to be surrounded with at the moment.

Given the hostility contained by many threads on this NG, it is curious that absolutely all responses to Daniel are supportive, including that of Greg who, as discussed previously, tends to invert AA-speak and questions blind reproduction of the AA narrative. In this thread, Greg prioritizes supporting Daniel to challenging the AA-speak of others. Indeed, in Greg's one post to the thread he affords Daniel the latitude to determine his own solution to the problem.

On this thread, participants pose no criticisms of Daniel, only advice, fellowship, and spiritual nourishment. The supportive climate of the group draws Daniel in, as he notes:

You sure know how to cheer a guy up. Hopefully I can reciprocate one day. Daniel in better mode now.... Now how can you not love this kind of advice?

He is reassured by the freely provided support found in the NG, though the advice given is promoted largely through AA rhetoric. Todd, for example, directs Daniel to page 64 of the *Big Book* so Daniel can determine whether he is ready to embark upon step three. Earlier, however, Daniel told the group that he was "getting ready" to do step nine. It appears that after reading Daniel's various posts, Todd determines that Daniel should work step three rather than step nine. Todd's comment serves to position himself as a better authority on Daniel's recovery than Daniel himself.

Through Daniel's despair, Miles remembers how it was for him when he first got sober twelve years previously. His dry date is noted in the signature file tagged to his posting. In the midst of advice offered to Daniel, several posters then applaud Miles for his AA birthday. The series of congratulations diverts the

issue at hand temporarily, that being Daniel's crisis, and establishes through Miles' AA birthday the notion that AA does, indeed, work.

This thread poses that all solutions can be found in, and through, Alcoholics Anonymous. Thornton observes, moreover, that there may be a financial issue at the heart of Daniel's problem, although to this point there is no mention that Daniel is experiencing financial problems. Issues of finance surfaces later as well when Daniel admits that he must come up with \$5,000.00 within the next week, which may not be much of a problem if he is able to collect the \$150,000.00 owed to him. In reporting that he is due such a large amount of money, his previous concerns over \$5,000.00 seem insignificant, not to mention unusual. Though muddled with financial problems, Thornton suggests to Daniel that step work is warranted.

Jerry contributes to the discussion in simple AA-speak: "You should read the big book. All the answers are all there. Try some meetings and twelve step programs. It works wonderful for me." Additional AA-speak is offered by various other posters. For example, Eddie suggests working the steps, and Marilyn encourages Daniel to surrender to his "Higher Power", don't drink, go to a meeting, and read the *Big Book*. Kirk, moreover, repeats the AA slogan "Easy Does It". All suggestions obviously borrow from AA discourse and assume that to act upon these suggestions will continue one's sober state.

Leonard shares his story of divorce and unemployment in an attempt to align Daniel's experiences with his own. A particularly funny exchange goes as follows:

Leonard:

> Within two years of getting of the sauce my marriage was in trouble, my job went in the crapper and I had picked up another addiction.

Nancy:

> So are you blind yet?

Leonard:

> I think someone has a resentment. Time for Step 10.

The joke is, of course, that Leonard's new addiction is masturbation. In reply, Leonard suggests instead that Nancy needs to look at her resentment through working or reworking her tenth step. While potentially funny, Leonard's response to Nancy, though potentially humorous, is cloaked in AA-speak. On the one hand, such bantering suggests that all problems are resolvable through AA discourse. On the other hand, the bantering demonstrates that some members play with the AA code of behavior.

In Alcoholics Anonymous members are urged to identify with one another rather than to find differences between life experiences. Denzin (1987b:99) observes that "[i]n order for deep, authentic, shared emotional understanding to be produced and understood, a common field of shared and sharable experience must be created" that enables "each individual to locate himself or herself in the experiential framework of the other." This thread illuminates such identification

posing, wherein posters make sense of Daniel's experience vis-à-vis their own.⁹ For example, Marilyn contributes: "I know it's hard, especially when finances are involved. (I've been there, done that episode in life already.)" One poster, Giles, shares a personal narrative with the group of his personal struggle with depression. Both Joshua and Ronda also jockey to identify with Daniel.

Eddie emphasizes the AA goal of spiritual "progress" rather than spiritual "perfection". Through such identification strategies, posters homogenize experiences, their lives, and indeed themselves while engaging the larger AA discourse that informs the construction of homogenization. Thus, identification serves the appearance of homogeneity, yet as a self-fulfilling prophecy, it also serves to resubstantiate one underlying theme of the AA narrative—sameness. As demonstrated in Chapter Four, AA's promotional booklet "Do you think You're different?" supplies the message that despite all other diversity, AA members are united above all else through their "illness".

Ultimately, all members who adopt, promote, and reproduce AA discourse are similar in their quest for a particular condition of personal recovery inasmuch as they do not depart from AA discourse. They are, moreover, manifestly the same in their reconstitution and galvanizing of AA discourse. And as a superseding condition, *alcoholism* both draws together and then keeps together—that is the AA goal. There appears to be little room for difference.

9. See also Wright (1997:92), who observes that most AA members report "similar feelings surrounding the ways that they [deal] with experiences in their lives, even though particular events may have been radically different."

Though “[n]ormalization *does* impose homogeneity”, it should at the same time be possible “to individualize, to measure gaps, to differentiate according to the norm whose function is to make differences intelligible as *such*” (Caputo and Yount, 1993:6). Thus, one of the roles of normalization is posed by the ability to see difference as it surfaces in relation to what is normal. This thread, however, despite Greg’s contribution, proffers only what AA normalizes, and fails to evidence the discursive space required for opportunities of difference.

Borrowing from the larger discourse, members within AA are afforded the capacity to assign status to actors within that discourse. In general, those granted an elevated status are persons with whom its discourse resonates. Those denied such a status are persons with whom the discourse does not resonate and from whom the discourse is sometimes challenged. At various levels, divisions occur—between member and member, and between member and discourse. In either case, “Institutions...form and well-adjust the young into supple, happy subjects of normalization. Institutions will reform the abnormal who stray beyond the limits” (Caputo and Yount, 1993:6). Those who are immersed in the AA discourse, are afforded either ingroup or outgroup status. One question that remains, however, is for how long do outgrouped individuals and divided realities remain within the fray of AA?

As Alt.Recovery.AA, we might expect NG discussions that borrow from and contribute to AA discourse, just as, say another NG that might attend to issues around weight control contribute to such discussions. Participants’

knowledge and personal belief systems, however, would divide such interaction. And unmitigated adherence to only one particular method of weight control by all participating discussants would be unthinkable. Thus, such commonality would not be gelled together by only one doctrine. Indeed, even a NG committed to feminism has very volatile discussions and disagreements. Notable in the above thread is the high level of reinforcement and reproduction of the AA narrative. Other threads on this NG indicate that there can be, and often is, more disagreement around central AA tenets, as demonstrated in the previous chapter. This thread, however, perhaps because Daniel implied depression and posed no threat to AA philosophy, attends to Daniel's question with unadulterated conviction to the AA narrative, with absolute commitment to his support. Clearly, the discussants on this NG are unified in their commitment to both Daniel and larger AA discourse.

According to Miller (1997b:33), "discourses are conditions of possibility that provide us with the resources for constructing a limited array of social realities, and make other possibilities less available to us." Through the larger discourse of Alcoholics Anonymous, members' are provided a social reality that is presented to them as the only viable reality for recovery from *alcoholism*. Through its narrative, AA excludes other recovery possibilities. Meanings of recovery are thus attached necessarily to those offered by Alcoholics Anonymous.

AA provides a model of meaning for those who learn its discourse. As van Dijk (1997:18) notes, "[w]hen we want to say something, a model will serve as

the starting point for the production of discourse. Some beliefs will be selected as relevant for communication in the present context and will serve as input to the construction of the...meaning of the discourse.” As the above analyses demonstrate, those beliefs relevant to communication within AA are framed and constituted through the meanings supplied by the AA narrative. Members’ realities are constituted largely through the very meanings learned from Alcoholics Anonymous.

Finally, as van Dijk (1997:21) argues, “[w]e need to account for the fact that discourse as social action is being engaged in within a framework of understanding, communication and interaction which is in turn part of broader sociocultural structures and processes.” Indeed, to examine members’ talk on Alt.Recovery.AA is to see that members’ own discourse is engaged, communicated, and interacted both within and through the larger constructed AA discourse. From this examination, it appears that through the *how*, the *what* becomes reconstituted. That is, “how” meanings are constructed heavily upon “what” is being forwarded by the speakers-as-writers.

CHAPTER EIGHT

DISCUSSION AND SUMMARY

"From what perspective and for what social groups is the study of drinking and drunkenness conducted? Does the operative definition of pathological behavior reflect societal consensus or does it reflect a situation of conflicting standards of propriety and impropriety?" (Gusfield, 1996:9).

Alcoholics Anonymous has contributed widely to professional and lay definitions of addiction and treatment, especially within North America. We must ask, however, just what it is that Alcoholics Anonymous offers as a social and political response to perceived addictive behaviors. Perhaps it is the case that AA offers less than commonly thought. It may also be the case that Alcoholics Anonymous does not serve to advance theoretical, social, and empirical understandings of problematic alcohol consumption. Indeed, Peele (1985:72) argues that

[a] successful addiction model must synthesize pharmacological, experiential, cultural, situational, and personality components in a fluid and seamless description of addictive motivation. It must account for why a drug is more addictive in one society than another, addictive for one individual and not another, and addictive for the same individual at one time and not another. The model must make sense out of the essentially similar behavior that takes place with all compulsive involvements. In addiction, the model must adequately describe the cycle of increasing yet dysfunctional reliance on an involvement until the involvement overwhelms other reinforcements available to the individual.

A satisfactory model must, moreover, “be faithful to lived human experience” (Peele, 1985:72). Investigations around addiction and recovery must then pay attention to experiences far beyond just a few very early AA members.

Critique of the medical model of alcoholism produces what Levine (1978:166) names a “postaddiction’ model” (see also Room, 1978). Such a model, rather than looking at the interaction between the individual and the substance, looks at the relationship between the individual and his/her social environment. The postaddiction gaze, as Levine (1978:166) notes, is rooted “in changes in the organization of daily life.” The larger environment, moreover, as proposed through Foucault’s “history of the present”, is engendered as a matter of past historical and political processes. As demonstrated throughout this research, what AA offers persons today is, for the most part, rigidly stuck in its past experiences. Therefore, Alcoholics Anonymous has remained largely unevolved for the past six decades.

To revisit the goals of this study, I have: (1) closely examined text and discourse of the AA treatment model; (2) illustrated political enterprises within an ostensive apolitical institution; (3) contextualized and deconstructed official AA text; (4) explicated codes of behavior within Alcoholics Anonymous; (5) taken into account the relative power of the more moderate approaches vis-à-vis the abstinence model; (6) drawn upon ethnomethodology and postmodern discourse to examine discursively constituted reality; (7) located alcoholic healing and recovery within disciplinary practices and relations of power; and (8) traced

systems of power within Alcoholics Anonymous. In so doing, this research has drawn upon a vast body of scholarly and theoretical literature.

This study has identified the strengths of Alcoholics Anonymous as its non-profit basis, which makes it highly attractive to the state. As Eliany and Rush (1992:62) observe, "Given...the fact that there is no cost to the individual or government, the use of AA...should be encouraged." A further strength is AA's persistence and perpetuity in the face of increasing challenge to its central tenet of disease. Its strength rests also upon researchers' tendency to study from the outside-in, often unable to grasp problematics beyond what is presented as ideal AA, and therefore strength is generated through researchers' allegiance to affirmed members and the larger discourse. Vulnerabilities of AA rest in its non-evolving discourse, its increasing critics, and its location outside more comprehensive and holistic models of treatment.

Methodologically, as demonstrated by McCrady and Miller's edited volume *Research on Alcoholics Anonymous* (1993), researching Alcoholics Anonymous can be fraught with difficulty, especially through sampling and because of the special circumstances surrounding the largely respected nature of the closed AA discussion meeting. While in the past AA has been subjected to deceptive research, today researchers appear to be more ethically cognizant of imposing themselves deceptively on AA and its membership. Whether AA is genuinely interested in supporting independent research on itself remains uncertain. On the one hand, AA claims to welcome empirical research on its

doctrine and organization as a whole. Yet, on the other hand, there is little indication to suggest that this invitation is authentic.¹ It is not clear at this time whether the difficulty to do empirical research on—or with—AA can be categorized as a strength or a vulnerability. Certainly, it would appear to be a strength for AA, as empirical research may in time dismantle many of the fictions upon which Alcoholics Anonymous is founded.

This study has also examined “dividing practices” within Alcoholics Anonymous. As demonstrated in Chapters Three and Five, affiliation and success within AA is grounded upon an adherent’s ability to remain one with the larger AA discourse, which in turn, becomes constituted through members’ ability to remain undivided from *Big Book* thumpers who in a circular manner reproduce AA doctrine. Dividing practices arise further when AA discourse fails to speak to members/adherents, in that members judge themselves by their ability or inability to appreciate or work the AA program. As AA offers “a simple program for complex people,”² to not get the program suggests that there may be

1. While making inquiries to AA’s General Service Office in New York, regarding permission to reprint AA material, I was informed that AA will not grant permission to reprint for research that is “contrary to AA philosophy” (personal correspondence, February 15, 2001). This indicates to me that AA does not welcome research on AA unless such research promises to reproduce AA rhetoric/discourse. I was, however, able to obtain permission to reprint AA material. See APPENDIX 8-A for the letter I sent to AA General Service.

2. This is a common saying heard around the rooms of AA. The notion suggests that absolutely anybody can get the AA program, given its simplicity, though when persons are unable (hopefully only temporarily), it is because alcoholics are complicated people. The saying is often heard in a context of resistance or of questioning the feasibility or value of AA.

something innately wrong with the member who is expected to embrace it. Thus, dividing practices surface too through members' reflection and representation of ideal AA.

Gendered discourse has also been identified as a dividing practice as members become alienated from one another on the basis of gender politics through both text and practice. This study has revealed that sexism is evident in Alcoholics Anonymous, and surfaces at a variety of levels. For example, I have documented sexist language and sexist stereotypes of women as prevalent within authorized AA literature. Indeed, AA text is directed to men, not women; this is very apparent in AA's chapter to "Wives." As noted previously, there is no parallel chapter to "Husbands." Sexism also emerges within members' practice as outside politics are reproduced within traditional meeting sites; this was made evident through the local narrative which recounted my attempting to address sexist language in the *Big Book* in a traditional closed discussion site. Furthermore, sexism was captured within the AA NG; this was illustrated through demeaning epithets of women and the inference that closed AA meetings served as the ideal place where men can "move in" on women. Clearly, issues of sexism are highly visible within Alcoholics Anonymous, both textually and experientially.

This study has revealed, too, through an examination of authorized AA literature, that members' reality becomes constituted through repetitious reinforcement of central AA philosophical tenets. And while pretending to

embrace diversity, Alcoholics Anonymous preaches the same message to various groups of persons without sensitivity to larger social or political dynamics of inequality. Indeed, Alcoholics Anonymous now opens its doors to all persons, irrespective of age, gender, race, ethnicity, sexual orientation, or even patterns of alcohol consumption. Moreover, as AA now targets not just *alcoholics*, but heavy drinkers, and even persons whose drinking worries them only “a bit”, it casts an ever widening net.

An examination of cyber AA demonstrates that there is a changing AA face. As indicated, there are subtle nuances within members' philosophy and practice that indicate shifting attitudes toward some central AA dictums. The postmodern era and information technologies reveal that some members are rejecting conventional AA etiquette. Websites, moreover, now provide copies of AA literature, allowing persons to access AA discourse without even attending meetings. The fact that there are now AA cyber discussion groups also illustrates that there is a shifting AA postmodern face.

Information technologies are changing, to a great extent, the availability of Alcoholics Anonymous and the nature of that availability. Linguistically, too, rules of communication are different in cyberspace than they are in face-to-face communication. Virtual interaction governs rules of communication; crosstalk is thereby impossible and members necessarily take part in turn. Furthermore, and most significantly, cyber participants create their own texts. These “speakers as writers” largely unknowingly are producing ready-made data for researchers who

might want to take a closer look at AA members' interaction without violating the sacred nature of the closed AA meeting site.

Advances in information technologies, moreover, have provided researchers with new opportunities for data collection. Publicly and naturally occurring NG data have allowed me to conduct conversation and discourse analyses in which dynamics of interaction have been traced and documented. Through these analyses I have been able to discern that there is, not surprisingly, resistance taking place within Alcoholics Anonymous. Information technologies now provide sites of analyses previously unavailable to researchers. NG data, for example, have revealed that contrary to the AA principle of humility, many AA members see nothing wrong with advertising their sobriety dates; those who do, provide rationalizations for their breaking of AA tradition.

As noted earlier, today a person contemplating personal drinking habits may access AA entirely through the virtual world of computers. From the comfort of one's own home, a recovering person may learn the AA program and interact virtually with AA members. Through its authorized website Alcoholics Anonymous offers a large selection of its own literature, and through NGs and chat rooms, AA members can participate in recovery processes without ever having to enter a traditional meeting site. This point is important because, as demonstrated in Chapter Six, cyberspace appears to offer a more conducive environment in which to question—or resist—central AA principles and larger AA discourse. In time, members may be more attracted to Alcoholics Anonymous

through virtual means rather than through traditional means. As many cyber participants appear to be formally educated, and textually and perceptually articulate, we may see virtual AA become increasingly occupied by resistance and subversion. The influence of such dynamics on traditional AA will unfold over the coming years.

The issue of *recovered* versus *recovery* remains yet unresolved. As the *Big Book* has not been updated since its 1976 publication, readers are left with the early proposition that one can actually recover from alcoholism. Within meeting sites, however, members today are advised that one never recovers, but engages in a life-long process of recovery. To this end, *recovering* AA members are obligated to perpetual meeting attendance and are necessitated by AA discourse to practice the twelfth step, requiring them to forever disseminate the AA program and philosophy.

This research recognizes the empirical value of interpretive interactionist generated knowledge. In agreement with symbolic interactionism, the study questions the legitimacy and prominence of grand *Truths*, capital “T” Truths. Rather, more micro sites of analyses are recognized as locations, which when examined, give rise to ever important localized truth(s). As those truths get played out through AA text and discourse, members’ reality—truth—becomes constructed and reconstituted through that AA discourse. Thus members work to represent their realities as harmonious with larger AA discourse. The AA self is, moreover, constituted by larger politics and by historical processes. As Pollner

and Stein (2001:46) observe, more generally, the self is now recognized “as a sociohistorically shaped, institutionally mediated, and interactionally realized construction.”

Furthermore, this study has examined the relationship between normalization and Alcoholics Anonymous. As a discourse, and as a well-embraced institution, AA has normalized, especially in the West, the formal social response to suspect patterns of alcohol consumption. Normalization has also been traced here through normalizing judgement as a system of observation, or gaze, within and among members themselves. The gaze arises through relations of power that situate members/adherents hierarchically. Normalizing judgement is a product and consequence of disciplinary power. Through normalizing judgement persons in AA are positioned as sites of observation. Those with power observe, or Gaze, while those without power are observed, or Gazed.

Perhaps above all, this research has demonstrated the ways by which power relations inform members' practice within AA and has illuminated the technologies of power that underlie, facilitate, and reconstitute AA discourse. We must recognize that all institutions, whether seemingly benevolent or malevolent, are constructed upon and maintained through complex relations of power. Even the most well-intentioned feminist cooperatives have had to deal with power struggles (see, for example, Amethyst Women's Addiction Centre, 1994). Therefore, to suggest that AA is nonhierarchical and ignores the fact that in general issues of power inform human interaction.

Foucault has added to our ability to comprehend and articulate the ways by which dynamics of power ground and inform all social and human interaction. As noted by Caputo and Yount (1993:4), "Foucault situated institutions within the thin but all-entangling web of power relations....Power is the thin, inescapable film that covers all human interactions, whether inside institutions or out." For Foucault, "critique is always a strategic exercise within networks of power(/knowledge)" (Caputo and Yount, 1993:10).

Importantly, moreover, critique must not only begin from an analytic of relations of power, it must be initiated by "agents of normalization." Observe Caputo and Yount (1993:7):

It is those most immediately caught up in these fields of power who can best expose them for what they are. To expose the intelligible structure of a local power regime, to show how the differentials in power relations work from their microstructures to their larger effects, is to expose a regime to criticism, to assist resistances not yet imagined. So, if a narrow claim to "expertise" allows one to operate machineries of domination, that person is also positioned to leak the secrets of the machine, even to calibrate its parts towards opposite functions (Caputo and Yount, 1993:8).

Ultimately and consequentially, I have conducted this research as a "specific intellectual." "Unlike the 'universal intellectual' who would speak as a master of truth and justice, the specific intellectual operates her intelligence where she is already situated, at the precise points of her own conditions of life or work" (Caputo and Yount, 1993:8).

Through juxtaposing my own stories particular power relations intrinsic to the AA discourse have unfolded as cultural texts. As an insider I seek the truth

from the “inside-out”, and as a “specific intellectual” I offer an examination of a powerful discourse that reaches beyond the more customary “outside-in” analyses of Alcoholics Anonymous. As both a “machine” and an “agent of normalization”, yet as a site of the gaze, I am well positioned to leak the secrets of AA’s machinery of domination.

CONCLUSION

"The question of whether we *should* study AA, for this writer at least, is unequivocally affirmative. The vectors of scientific curiosity, moral concern, and social policy all converge to indicate that we would be wise to invest some of our resources in efforts to evaluate objectively exactly how effective AA is at helping people to achieve its objectives, how it does this, and who it helps most" (Nowinski, 1993:27).

What will be the future of Alcoholics Anonymous? Blumberg (1977:2142) predicted more than two decades ago that "A.A.'s remarkable growth rate may slow down as the resistance to total abstinence builds up. Social movements often do not die; rather, they fade away through a process of ideological and organizational transformation." Levine (1978:167) argues, however, that "even if a new paradigm or model does emerge, it will have to compete and coexist with the addiction perspective for a long time—just as, for the last 200 years, the addiction model has had to compete and coexist with the preaddiction view." Perhaps in the future we will move toward postdisease paradigms of alcoholism/addiction and treatment, thereby concomitantly moving toward understanding the ways by which power informs such models and hence regulates human behavior.

This study moves beyond previous sociological representations and theoretical analyses of Alcoholics Anonymous. Here I have exposed assumptions, contradictions, silences, discursive practices, modes of power inherent in the larger Alcoholics Anonymous narrative, and repetitious messages that serve as its

dogma. This research has demonstrated that the nexus of pastoral and disciplinary power within Alcoholics Anonymous is underscored by regulation and docility. As noted, the concern here is not so much that persons may want to stop drinking alcohol completely, but rather with the authority enjoyed by the AA grand narrative. Recognizing the relations of power within AA discourse has been a worthwhile project.

For professionals or other persons interested in forwarding the AA program and strengthening its member base, discerning the vulnerabilities within its program, text, and practices helps to strengthen the AA program as a whole, as once vulnerabilities are made visible they may be tackled and hence ameliorated. Through deconstruction, discourse analysis, and textual analysis, this study has revealed various levels of power embedded within Alcoholics Anonymous and in turn, members' AA talk. This study underscores the possibilities posed by alternative responses to "problematic" drinking.

As a project influenced by postmodern discourse, this research accepts the value of interpretive approaches to the excavation of knowledge. This study has adopted the view that in understanding surrounding dynamics of power, human freedom is more likely to follow (Foucault, 1983:383). To this end, this research has disclosed the regulatory world within AA text and discourse. As a process grounded in relations of power, Alcoholics Anonymous, is, itself, both a pastoral and a disciplinary technology of power.

In the future, through content analysis (see also Kurtz, 1993:22), researchers may examine authorized AA text more systematically in order to

identify the repetitive rhetoric of the AA language (e.g., illness, disease, musts, etc.). In this way, those interested could understand more quantitatively specific ideological indoctrination. Through content analysis of Alt.Recovery.AA newsgroup, researchers may also come to identify more quantitatively the actual levels of support to Alcoholics Anonymous within this particular site. In time, analyses of Alt.Recovery.AA may serve to reveal and illuminate more clearly that resistance may, indeed, be traced through AA members' interaction. Moreover, we might investigate whether women are adequately served by Alcoholics Anonymous, as argued by Beckman (1993), or whether women have more cause to resist the treatment afforded them by AA.

More rigorous and creative research on AA is required in order to assess its real success. It is important to enumerate more accurately the persons who come into AA, leave AA, and/or stay with AA. Such research may in time be conducted in alliance with data collected by AA. At the moment, however, membership numbers and success rates self-provided by Alcoholics Anonymous are meaningless. If the twelve step model proffered by Alcoholics Anonymous is to be erected as a stimulator of successful recovery from various addictions, it is important to assess first through research that the model does, indeed, do what it claims to do. As Miller and McCrady (1993:8) assert: "Studies of AA are not only possible, but much needed...New Studies of AA offer a terrain that will challenge and stretch us, and no doubt cause us to reconsider some of our cherished beliefs."

Indeed, future research may also examine the systemic production of homogeneity or identity with AA discourse. To this end, investigators might

better understand the ways by which AA adherents reconcile dividing practices, that is, points of tension or ambivalence between self and AA discourse, and between self and others who create meaning from, and conform to, the larger AA discourse.

De-anonymizing authorized AA literature is, moreover, an important step in demising the canonizing of authorized AA text. As humanly created texts, AA literature is no more sacred than any other mortally created text. We might ask whether members will in time come to deconstruct, as I have done here, the pretension and authority claimed by Alcoholics Anonymous through presenting individually authored texts as the divine word of AA. Will members, and researchers, for that matter, not come to understand eventually that AA reproduces its doctrine through humanly created texts? — Not vice-versa. That is, Alcoholics Anonymous has created its doctrine; members, in turn, reproduce that doctrine in the form of alleged anonymous texts. Indeed, we now know that Bill Wilson was the primary author of the supposedly anonymously authored *Alcoholics Anonymous* — the *Big Book* (see also Robertson, 1988:69-74).

Finally, researchers can pay closer attention to AA informed NG texts. Subsequent research might code NG texts more systematically and/or quantitatively in order to evaluate more specifically tensions and levels of resistance within members' practice. Moving toward identifying and understanding the contradictions underlying members' activity should elucidate more clearly constitutions of members' reality within AA. That some members within cyberspace openly challenge AA rhetoric and larger discourse indicates

that there are discernable tensions surfacing between AA doctrine and members' practice. Tracing out such tensions should prove interesting for future analyses of Alcoholics Anonymous.

I am not suggesting here that support groups do not play an important role in our very complex postmodern world (see also Moos et al, 1993). Indeed, if help is sought for problematic drinking, Alcoholics Anonymous may prove useful and satisfying for some persons. As noted by Peele and Brodsky (1991:314), "Support groups can be valuable. Social support is a major dimension of healthy human functioning, not only for avoiding addictions, but for maintaining all aspects of human well-being." The task, therefore, is to identify the "flaws" (Peele and Brodsky, 1991:314) "of A.A. and other twelve-step groups."

To understand more clearly the problematics of the most widely received treatment for addiction known to human kind is to mark the beginning of our move forward in responses to human addictive behaviors. This move forward will necessarily consider larger social conditions and will encompass a more holistic approach to treatments for alleged addictive behaviors. Alcoholics Anonymous, though pretending to, does not offer the only solution to seemingly problematic drinking, nor does it possibly offer even the best solution. Rather, argue Peele and Brodsky (1991:30-39), AA's disease model may do "more harm than good", given that it offers only "short term benefits."

The promises and hopes posed by AA are thus embedded in a complex system of power, pleasure, regulation, and perhaps paradoxically, repression. This complexity is compounded by investigators' allegiance to theoretical Alcoholics

Anonymous. In order to go beyond such allegiance, Emrick et al (1993) propose that future research might be guided through a diversity of opinions regarding the value of AA. In this way, research may reduce “the impact of investigator’s allegiance on the design, conduct, analysis, interpretation, and reporting processes” concerning analyses around AA (Emrick et al, 1993:62).

Alcoholics Anonymous (1976a:162) wrote several decades ago: “Some day we hope that every alcoholic who journeys will find a Fellowship of Alcoholics Anonymous at his (sic) destination.” Indeed, the reproduction and proliferation of AA discourse, and hence its expansion of who qualifies as *alcoholic*, has helped to realize this early hope. Perhaps, more importantly, however, is the promise of individual healing and security of the person offered through AA’s twelve step program. Indeed, says Flores (1988:93), “[t]he primary conflict for everyone, the addicted as well as the nonaddicted, is to belong and feel connected to something larger than themselves without their belonging coming at the cost of their individuality.” And herein lies the greatest paradox: Within AA, the price of one’s individuality and personal freedom comes about only through sameness, normalization, and disciplinary regulation of practice. Though grounded upon a variety of fictions, one’s uniformity is ultimately ensured through AA’s normalizing gaze, the constitution of docile bodies, and the now evident technologies of power intrinsic to the Alcoholic Anonymous discourse.

GLOSSARY

Alcoholism — For purposes of this research, the term alcoholism is grounded socially. Drawn from Peele (1985:95), “a person is addicted—as opposed to being a controlled user of a substance—when he or she disregards health, personal well-being, and social propriety in order to continue a behavior.” While some writers (e.g. Pendery, 1982) situate alcoholism through literal physical dependency and indications of withdrawal, such physiological conditions are merely representative of bodily states and not of socio-psychological and experiential component of alcohol dependency. As Peele (1985:72) notes, “[a] successful addiction model must synthesize pharmacological, experiential, cultural, situational, and personality components in a fluid and seamless description of addictive motivation.”

Browser — A program which renders HTML codes as a composed web page. Netscape and Internet Explorer are examples of browsers for the World-Wide Web. They sit on the client's computer and work in tandem with the computers publishing HTML pages on the web server side (Google, 2001b).

Chip System — Alcoholics Anonymous members are rewarded publicly for claimed lengths of sobriety. At the one-year mark members are usually recognized by their home group by presentation of a cake and a special meeting wherein the celebrating member selects a speaker of choice. Prior to the first year, members collect a series of poker tokens for shorter periods of sobriety. Some groups purchase mass produced metal or plastic chips designed especially as AA chips. While time frames may vary somewhat from group to group, chips are usually awarded for demarcated periods of sobriety for one month, three months, six months, and nine months. Many groups also award a 24-Hour chip which

members may collect if they are new to AA or if they are going through a rough time and fear that their sobriety may be in danger. The collection of chips tends to be ritualistic whereby a group designates a special period of the meeting for the awarding of chips, and whereby another member gives a short speech to the group on the meaning and the importance of the chip system. Members do not have to belong to the group from which a chip is taken.

Deconstruction — Derived from Jacques Derrida, and used more generally here, deconstruction is a method of analysis through which reality-constituting practices are revealed (Gubrium and Holstein, 1997:10). Its goal is to undo all constructions. Deconstruction tears a text apart, reveals its contradictions and assumptions, but does not seek to improve, revise, or offer a better version of the text (Rosenau, 1992:xi). Deconstruction is concerned as much with what a text excludes, conceals, or marginalizes; its aim is to transform or redefine a text, undoing, reversing, displacing, and resituating the categories that constitute the text in the first place (Gubrium and Holstein, 1997:105).

Discourse — All that is written and spoken and all that invites dialogue or conversation (Rosenau, 1992:xi). Discourse “restricts, limits and arranges what can and cannot be said about the phenomena within its domain” (Prior, 1997:62). Michel Foucault (1974:48-49) perceives discourse as a practice which systematically forms the objects of which it speaks. At another level, discourses are historically embodied and informed by specific knowledge and truth claims (Ramazanoglu, 1993:19). A discourse operates and functions as a set of rules that specify what is or is not. For example, alcoholism is constituted through a disease model discourse which contains a set of rules and regulations around expectations and treatment. Discourses are very powerful. Those who are labelled are in one way or another situated within a dynamic of power. Such “power may be exercised by officials through institutions, or through many other practices, but power is constituted in discourses and it is in discourses...that power lies”

(Ramazanoglu, 1993:19). Discourses are about what can be said and thought, but also about who can speak, when, and with what authority (Ball, 1990:2; Prior, 1997:71). Discourses embody meaning and social relationships, they constitute both subjectivity and power relations.”

Disciplinary Practices/Power — Bodies are rendered docile through disciplinary practices, that “policy of coercion” which breaks down the body and rearranges it (Foucault, 1979:138). Disciplinary practices represent a “mechanics of power” which are methods of domination, or “general formulas of domination”, of control over the body (Foucault, 1979:137). Disciplines, for example, of education, military, and health care, effected their own modes of disciplinary power through their respective discourses. The possibilities of apprehending and understanding social stimuli are embedded in, and depend upon, historically situated disciplinary gazes (Gubrium and Holstein, 1997:180). Disciplinary codes of knowledge are thus organized around particular social discourses. The final result of disciplinary practices is the exercising of power over actions of others (Hindess, 1996:100).

Discussion Forums — The primary method for group communication on the Internet and include Usenet newsgroups, mailing lists and corporate discussion groups (Google, 2001b).

Disease Model of Alcoholism — Embraced and promoted by Alcoholics Anonymous as early as the 1930s (see Alcoholics Anonymous [1939], in particular the section entitled “The Doctor's Opinion”, which situates alcoholism as a medical condition), and subsequently popularized further by E.M. Jellineck in the 1940s and 1960s, drinking behaviours can be typologized and diagnosed through “spheres,” or “phases” with the gamma and delta representing the authentic varieties of pathological addiction (my emphasis). Gama alcoholism is characterized by increased tissue tolerance, withdrawal symptoms, and a loss of

control. Pathological progression occurs, and interpersonal relationships are affected and impaired to the highest degree. Delta alcoholism is similar to gamma alcoholism, but while the drinker is not marked by a loss of control, s/he is unable to abstain for even one day (which, of course, suggests a “loss of control”). Also, while there are no distressing social problems for the delta alcoholic, health problems may be evident or may result (Jellinek, 1960). Rooting alcoholism in disease tantamountly medicalizes the condition, thereby generating a legitimized treatment response that grounds itself in pathology. The disease model of alcoholism is predicated upon an assumption of progression, and is aligned with a treatment modality based upon the belief that only complete abstinence can place one's disease in remission. A medicalized model of alcoholism treats the disease as primary to the drinker. As a disease, moreover, concern shifts from the substance itself to the condition/disease of alcoholism (Hore, 1991; Alasuutar, 1992).

Dividing Practices — Dividing practices is a Foucauldian term that pays attention to classifications and divisions within organizing processes (Ball, 1990:3-4). Through organizing practices which inform and determine normalization or stigmatization, such divisions occur both within a subject and between subjects. Particular modes of classification, control, and containment are over time instituted, through which norms of behaviour become constituted (Ball, 1990:4). Within educational sites, for example, administration of examinations and expectations around performance have come to divide some students from others based upon academic performance. Similarly, within Alcoholics Anonymous, the Twelve Steps, the Twelve Traditions, authorized AA texts, and individual or group AA talk all serve as codes of behaviour. Members, based upon individual performance or adherence to the AA discourse, become either part of, or divided from, the larger normalized order. Thus, the external authority figure of AA discourse mediates self-understanding, success, or failure within individuals and between individual members.

Docile Bodies — “A body is docile that may be subjected, used, transformed, and improved” (Foucault, 1979:136). Docility of bodies is actualized as persons become/are integrated into new systems of control (Ramazanoglu, 1993:22). Successful execution of discipline results in docile bodies, those bodies which have been rendered/engendered compliant (Goodson and Dowbiggin, 1990:107).

Ethnomethodology — “Ethnomethodological studies analyze everyday activities as members' methods for making those same activities visibly rational – and - reportable - for - all - practical-purposes” (Garfinkel, 1967:vii). Ethnomethodology examines the methods by which ordinary activities and commonsense knowledge are made sense of from within social settings (ibid:viii). That is, the ethnomethodological approach begins by problematizing the plethora of taken-for-granted activities, practices and interactions through which social order is constituted. When the familiar becomes strange, the social activity is available for ethnomethodological description (Gubrium and Holstein, 1997:42).

FAQ — Frequently Asked [or Answered] Questions. A compendium of accumulated lore, posted to high-volume forums in an attempt to forestall the perpetual re-asking of the same questions. Users new to a group should read its FAQ before posting (Google, 2000).

Flame —

1. To post a message intended to insult or provoke.
2. To speak incessantly and/or rabidly on some relatively uninteresting subject or with a patently ridiculous attitude.
3. To direct comments with hostility at a particular person or people.
4. When a discussion degenerates into uninformative bickering. (Google, 2001b).

Indexicality — That meanings of words and objects depend upon context (Gubrium and Holstein, 1997:54). For ethnomethodologists, index is context. Indexicality “is the insight that there is no such thing as a clear, extensive definition of any word or concept in language, since meaning comes from reference to other words and to the context in which the words are spoken” (Marshall, 1998:204). Thus, examination of social activity need consider the social context in which it occurs. The circumstances, moreover, that provide the context for meaning are themselves *reflexively* generated through talk and interaction, from within the circumstances themselves (Gubrium and Holstein 1997:54, emphasis in original text). Reflexivity can be understood as a process by which the researcher consciously examines his/her location and role in the research and interpretive process.

Local Narrative — Mini, or autobiographical-narratives consist of micro stories that make no truth claims, and are therefore more acceptable to postmodernists (Rosenau, 1992:xiii). Stories about social life which can be linked to perspectives and interests of their story tellers deprivilege the status of master narratives, and theory, is deprivileged (Gubrium and Holstein, 1997:76).

Lurk — The practice of tapping into a NG for observation purposes only. Lurkers do not post, but only read contributions to the NG. Frequently, a FAQ will advise new posters to lurk for while first in order to get a sense of the cultural community before becoming involved textually.

Meta-Narrative — Global or world views, mastercodes, are modern creations, assuming the validity of their own truth claims (Rosenau, 1992:xii). In science and the social sciences, positivism has been the prevailing meta-narrative of the modern world. Science in general, provides an example of a meta-narrative in that it organizes truth through method and knowledge structures.

Narrative — Narratives are accounts that offer some scheme, either implicitly or explicitly, for organizing and understanding the relation of objects and events described (Gubrium and Holstein, 1997:147).

Newbie — A Usenet neophyte. The label “newbie” is sometimes applied as an insult to a person who has been around discussion forums for a long time but who appears clueless (Google 2001b).

Newsgroup — One of Usenet’s huge collection of topic groups or forums. Newsgroups can be “unmoderated” (anyone can post) or “moderated” (submissions are automatically directed to a moderator who edits or filters and then posts the results). Some newsgroups have parallel mailing lists for Internet people with no Usenet access, with messages to the forum automatically propagated to the list and vice versa. Some moderated forums are distributed as “digests” with groups of messages periodically collected into a single large message with an index (Google, 2001b).

Normalization — Normalization indicates extension of control and self-regulation. Discourses define what is normal and what is not normal, and that which is seen as abnormal requires reformulation, or conformity to the norm (Ramazanoglu, 1993:22). Normalization is positioned and enforced through hierarchical observation and normalizing judgment (Foucault, 1972:184–185). A normalizing gaze is a mechanism of surveillance which enables and enforces qualification, classification and punishment (Foucault, 1972:184). Foucault observes that the panopticon (originally developed theoretically by Jeremy Bentham in the late 18th century) epitomizes the efficiency of normalization. Eventually a normalizing gaze is ultimately absorbed by individuals, giving rise to self-judgment and self-regulation, to the extremity of becoming “the principle of [ones] own subjection” (Foucault, 1979:203). In the modern world, psychiatry

has been poised as the normalizing gaze of self-introspection and personal growth.

Outgroup — As defined by Kendall et al (1997:677), “a group to which a person does not belong and toward which the person may feel a sense of competitiveness or hostility.”

Postmodern Discussion/Discourse — Postmodern scholarship recognizes that a multiplicity of subjectivities, social locations, and voices define and give rise to truth, with a small “t”. Accordingly, meta, or grand, narratives must be held suspect for their pretext to envelope, define, and explain social realities, or truths without recognizing or attending to important pluralities. Pauline Rosenau (1992:3) sees the postmodern project as rejecting grand epistemological assumptions, refuting methodological conventions, resisting grand/traditional knowledge claims, and obscuring all versions of truth.

Recovery — Treatment can be defined as a formal, perhaps institutionalized response, to a behaviour resting outside of the individual him/herself. In contrast, recovery is the personal response to treatment. Thus, treatment rests within external formal structures, while recovery rests within the individual him/herself. Recovery is the personal assimilation of the external treatment expectations. Recovery is considered successful when the individual is thought to meet the requirements of a particular treatment program. Success of one's recovery is defined through tenets of the theoretical model of alcohol consumption which informs the treatment facility or program. For example, recovery within AA is aligned with complete abstinence, while recovery within a harm reduction model may be aligned less stringently with a decrease in alcohol consumption rather than uninterrupted abstention.

Serenity — “A.A. term for peace of mind, emotional sobriety, and the absence of negativity in one’s life” (Denzin, 1987b:208).

Slip — “A return to drinking by a recovering alcoholic. May be planned or unplanned. Also called a relapse” (Denzin, 1987b:215)

Thread — “Thread” refers to a chain of messages on a single topic. To follow a thread is to read a series of forum messages sharing a common subject which are connected by reference headers (Google, 2001b).

Treatment — At a broad level, treatment refers to a cognizant, and usually formal, professionalized response to a condition/behaviour that is seen as requiring change or modification. Of interest here, the more parochial behaviour of immoderate alcohol consumption is typically seen as a behaviour and/or condition which requires modification. The resulting attention can be defined as treatment. Treatment can be self-defined and prescribed, or it can be precepted through a more formal, institutionalized response/care as in legitimized centres or hospitals which participate in diagnoses and prognoses of seemingly indecorous alcohol consumption.

Within Canada and the United States, treatment centres can be situated in association to funded hospitals or facilities specifically designed to address matters regarding problematic behaviours. Treatment facilities may also be privately owned and operated.

While it could be argued that Alcoholics Anonymous constitutes a “mutual aid” response to alcohol consumption, it can also be argued that as a formal response to a supposed medical condition, AA constitutes a form of “treatment.” If immoderate alcohol consumption is categorized as a “disease,” it follows then that while one “drunk” is “aiding” another “drunk,” through Alcoholics Anonymous the aid remains formal and structurally organized, and thus constitutes a form of

“treatment”. While the AA modality may not be viewed as a “medical” treatment per se, the twelve step program has become legitimized largely as an approach to treatment nonetheless. See, for example, Katherine van Wormer's *Alcoholism Treatment: A Social Work Perspective* (1995) for a closer look at the definition of “treatment” and a discussion of AA as a treatment modality. According to Denzin (1987b:31), treatment for alcoholism requires the alcoholic to become his/her own therapist—“temporal work on the self is the work of treatment”.

Typification — Typification is to draw upon the taken-for-granted to make sense of action and experiences under analysis. Typifications assert memberships within a particular category; the use of a particular category implies a multiplicity of associative features (Gubrium and Holstein, 1997:138). The normal form is constituted out of the given circumstances at hand; comparisons are then made in reference to the taken-for-granted normalized form. References are so routine and commonplace as to go virtually unnoticed, constituting “factual” representations that attract no special attention and appear on the surface to be unimportant. Yet such references can serve as significant sources of perceptual and evaluative organization, providing implicit instructions for how to understand and relate to what is being described (Gubrium and Holstein, 1997:142). An immoderate alcohol drinker, for example, may be typified as a 'drunk', who may then be typified as requiring treatment/AA.

APPENDIX IN-A

*The Twelve-Steps of Alcoholics Anonymous.**

1. We admitted we were powerless over alcohol—that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God *as we understood Him*.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.
9. Made direct amends to such people whenever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. 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.
12. 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.

* The Twelve Steps and The Twelve Traditions of Alcoholics Anonymous, 44 Questions, Twelve Questions, and the reprinted excerpt (from Alcoholics Anonymous, 1976a:65) are reprinted with permission of Alcoholics Anonymous World Services, Inc (A.A.W.S.). Permission to use this material does not mean that A.A.W.S. has reviewed or approved the contents of this publication, or that A.A.W.S. necessarily agrees with the views expressed herein. A.A. is a program of recovery from alcoholism only—use of this material in connection with programs and activities which are patterned after A.A., but which address other problems or concerns, or in any other non-A.A. context, does not imply otherwise.

APPENDIX IN-B

Central Offices, Intergroups and Answering Services for U.S. and Canada

**OFICINAS CENTRALES, INTERGRUPOS,
SERVICIOS DE CONTESTACION TELEFONICA (EE.UU.
Y CANADÁ)**

**BUREAUX CENTRAUX, INTERGROUPE
ET SERVICES TÉLÉPHONIQUES (É.-U. ET CANADA)**

CANADA

**ALBERTA
BRITISH COLUMBIA
MANITOBA
NEW BRUNSWICK**

**NEWFOUNDLAND
NOVA SCOTIA
ONTARIO
PRINCE EDWARD ISLAND**

**QUEBEC
SASKATCHEWAN
YUKON TERRITORY**

UNITED STATES

**ALABAMA
ALASKA
ARIZONA
ARKANSAS
CALIFORNIA
COLORADO
CONNECTICUT
DELAWARE
DISTRICT OF
COLUMBIA
FLORIDA
GEORGIA
HAWAII
IDAHO
ILLINOIS
INDIANA
IOWA
KANSAS**

**KENTUCKY
LOUISIANA
MAINE
MARYLAND
MASSACHUSETTS
MICHIGAN
MINNESOTA
MISSISSIPPI
MISSOURI
MONTANA
NEBRASKA
NEVADA
NEW HAMPSHIRE
NEW JERSEY
NEW MEXICO
NEW YORK
NORTH CAROLINA
NORTH DAKOTA**

**OHIO
OKLAHOMA
OREGON
PENNSYLVANIA
PUERTO RICO
RHODE ISLAND
SOUTH CAROLINA
SOUTH DAKOTA
TENNESSEE
TEXAS
UTAH
VERMONT
VIRGINIA
WASHINGTON
WEST VIRGINIA
WISCONSIN
WYOMING**

WWW

Web Site Link Available

ARGENTINAAUSTRALIABELGIUM **WWW**BOLIVIABRAZILCHILECOLOMBIACOSTA RICACUBADENMARK **WWW**DOMINICAN REPUBLICECUADOREL SALVADORFINLAND **WWW**FRANCE **WWW**GERMANYGREAT BRITAIN**WWW**GUATEMALAHONDURASICELAND **WWW**INDIA **WWW**IRELANDITALY **WWW**JAPAN **WWW**MALTAMEXICO **WWW**NETHERLANDSNEW ZEALANDNICARAGUANORWAY **WWW**PARAGUAYPERUPOLAND **WWW**PORTUGALRUSSIAN FEDERATIONSOUTH AFRICASPAINSWEDENSWITZERLAND **WWW**TRINIDAD/TOBAGOUNITED STATES/CANADAURUGUAY **WWW**VENEZUELA

AFRICA

BENIN / BOTSWANA / EGYPT / ETHIOPIA / GHANA / KENYA / MADAGASCAR
 MALAWI / MALI / MAURITIUS / MOROCCO / MOZAMBIQUE / NIGER / NIGERIA
 REUNION / SENEGAL / SIERRA LEONE / SOUTH AFRICA / SWAZILAND
 TANZANIA / UGANDA / ZAIRE / ZAMBIA / ZIMBABWE

ASIA & INDIAN OCEAN ISLANDS

BANGLADESH / BURMA / CAMBODIA / DIEGO GARCIA / HONG KONG / INDIA
 INDONESIA / JAPAN / KOREA / MALAYSIA / NEPAL / PAKISTAN
 PEOPLE'S REPUBLIC OF CHINA / PHILIPPINES / REPUBLIC OF SINGAPORE
 SRI LANKA / TAIWAN / THAILAND / VIET NAM

AUSTRALIA, NEW ZEALAND, PACIFIC ISLANDS & ANTARCTICA

AMERICAN SAMOA / AUSTRALIA / COOK ISLAND / FIJI / GUAM
 JOHNSTON ISLAND / MARSHALL ISLANDS / MICRONESIA / NEW CALEDONIA
 NEW ZEALAND / PAPUA NEW GUINEA / SAIPAN / SOLOMON ISLANDS / TAHITI
 TONGA / VANUATU / WESTERN SAMOA

BERMUDA & CARIBBEAN ISLANDS

ANGUILLA / ANTIGUA / BAHAMAS / BARBADOS / BERMUDA / BONAIRE
 CAYMAN ISLANDS / CUBA / CURAÇAO / DOMINICA / DOMINICAN REPUBLIC
 GRENADA / HAITI / JAMAICA / NEVIS / SABA ISLAND / ST. BARTHELEMY
 ST. KITTS / ST. LUCIA / ST. MAARTEN / ST. VINCENT / TORTOLA / TRINIDAD & TOBAGO

TURKS & CAICOS ISLANDS / VIRGIN GORDA / (U.S.) VIRGIN ISLANDS

EUROPE

**AUSTRIA / BELGIUM / BOSNIA HERCEGOVINA / BULGARIA / CHANNEL ISLANDS
CROATIA / CZECH REPUBLIC / DENMARK / ENGLAND / ESTONIA
FAROE ISLAND / FINLAND / FRANCE / GEORGIA / GERMANY / GIBRALTAR
GREECE / HUNGARY / ICELAND / IRELAND / ITALY / KAZAKHSTAN / LATVIA
LITHUANIA / LUXEMBOURG / MACEDONIA / MALTA / MOLDOVA / MONACO
NETHERLANDS / NORWAY / POLAND / PORTUGAL / ROMANIA / RUSSIA
SCOTLAND / SLOVAKIA / SLOVENIA / SPAIN / SWEDEN / SWITZERLAND
UKRAINE / WALES**

MEXICO & CENTRAL AMERICA

**BELIZE / COSTA RICA / EL SALVADOR / GUATEMALA / HONDURAS / MEXICO
NICARAGUA / PANAMA**

NEAR & MIDDLE EAST

**BAHRAIN / CYPRUS / ISRAEL / KUWAIT / LEBANON / OMAN / QATAR
SAUDI ARABIA / TURKEY / UNITED ARAB EMIRATES / YEMEN ARAB REPUBLIC**

NORTH AMERICA

CANADA / GREENLAND / UNITED STATES

SOUTH AMERICA & FALKLAND ISLANDS

**ARGENTINA / BOLIVIA / BRAZIL / CHILE / COLOMBIA / ECUADOR / GUYANA
PARAGUAY / PERU / URUGUAY / VENEZUELA**

APPENDIX IN-C

*The Twelve Traditions of Alcoholics Anonymous**

1. Our common welfare should come first; personal recovery depends upon A.A. unity.
2. 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.
3. The only requirement for A.A. membership is a desire to stop drinking.
4. Each group should be autonomous, except in matters affecting other groups or A.A. as a whole.
5. Each group has but one primary purpose—to carry its message to the alcoholic who still suffers.
6. 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.
7. Every A.A. group ought to be fully self-supporting, declining outside contributions.
8. Alcoholics Anonymous should remain forever nonprofessional, but our service centers may employ special workers.
9. A.A. as such, ought never be organized; but we may create service boards or committees directly responsible to those they serve.
10. Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy.
11. Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio, and films.
12. Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities.

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APPENDIX 1-A

THE TRI-COUNCIL ON CYBERSPACE

In 1998 the Canadian Tri-Council released its Policy Statement, "Ethical Conduct for Research Involving Humans."¹ Importantly, funding by the councils is "conditional on research organizations' adherence to guidelines..." (Grubisic, 1998:1). Thus, scholarly research in Canada is expected to abide by the Tri-Council's specifications for conducting academic research. While not yet addressed by the Councils, and while not yet widely practiced, cyberspace data can be used, in part, for such research methods as ethnography, including observation, participant observation, case studies, content analyses, linguistic studies, biographies, and discourse and textual analyses. Cyberspace therefore poses new and exciting possibilities to researchers. Through examining the Councils' Policy Statement, I demonstrate that thus far investigators who exploit newsgroup (NG) data for research are exempt from the normal REB (Research Ethics Board) approval.

Some researchers, including sociologists, are now exploiting the Internet for sources of data (see, for example, Denzin, 1995; Schneider, 1996; McKie 1997; Kayany, 1998); the Internet is hence offering a useful tool to researchers who wish to locate normally difficult to access data (Denzin, 1995:249). Indeed, chat

1. I would like to thank Lee Chalmers and Florence Kellner for helping me process some of the issues examined below.

rooms, NGs, and Listserves, allow researchers to access thousands of potential research “subjects”² at a mere click of a mouse. Researchers may now also access traditionally difficult to locate populations through the Internet. Populations, for example, of atheists (alt.atheist), wiccans (alt.religion.wicca), drug users (alt.drugs.hard; alt.drugs.pot; alt.drugs.psychedelic), swingers (alt.swingers), persons considering and championing suicide (alt.suicide), impotent men (alt.support.impotent), balding men (alt.baldspot) and transgendered persons (soc.support.transgendered) may now be found through cyberspace NGs, again at the click of a button.

Clearly, the use of cyberspace material and garnering data from Chatrooms, Listserves, and Usenet and Websites is treading new research ground. As yet, however, though the practice is becoming increasingly popular, there remains little discussion or debate around the ethics of using Internet data for research purposes. The Tri-Council’s position on exploitation of such data leaves researchers to decipher relevant methodological ethics.

BACKGROUND NOTES ON THE USE OF CYBER DATA

Schwimmer (1996:562) observes that “e-mail has created a unique form of academic activity through distributed discussion lists.” Through subscription to

2. The language “subject” is used here as adopted by the Tri-Council’s Policy Statement. Though, the authors (Tri-Council, 1998:i3) explain that “subject” was the chosen language only after a great deal of discussion and debate, the language ultimately serves to impose positivist terminology over more participatory methods preferred by many qualitative researchers. The Tri-Council document appears then to favor positivism over other forms of methods.

e-mail discussion groups, individuals may access all messages posted to a NG. Individuals may also “submit queries, answers, comments, notices, and longer pieces and follow trains of postings from other contributors” (Schwimmer, 1996:562). Email alone presents new forms of data through the multiplicity of discussions distributed through list serves.

A mailing list, is a discussion group on the Internet that links a group of people with a common interest together, while a “Newsgroup...is a virtual area reserved for the discussion of a certain topic” (Gormley, 1998:33). As Schwimmer (1996:562) notes, “there is usually little screening because of...the conviction that Internet communication should not be restricted according to any standards, including those of propriety, taste, or relevance.” Such latitude is clearly evidenced through the breadth and diversity of topics found in public NGs.

Not unlike e-mail discussion groups, individuals may also subscribe to Usenet (short for Unix User Network) NGs (Kayany 1998:1135). As Schwimmer (1996:563) notes, newsgroups are discussion groups that are stored in an open central depository or bulletin board rather than distributed to subscribers. There exist literally thousands of NGs each focused on a specific topic, ranging from rape to feminism to support for obesity. Indeed, as Schneider's (1996:380) research attests, over a twelve-month period, one Usenet NG alone yielded 46,592 articles posted by 3,276 different authors. Kayany (1998:1136) further observes that “[a]ccording to some estimations, there are over 10 million users of Usenet who exchange over 25 million bits daily in...newsgroups.” Thus, a

great deal of potential data can be found in cyberspace (Kayany, 1998:1136). The magnitude of NG conversations provide, moreover, massive amounts of data.

According to Schwimmer (1996:561) the Internet “promises, or perhaps threatens, to transform the character of academic work.” As the utilization of computer technology increases, so too will reliance on the technology. As this discussion demonstrates, NGs can provide new and exciting possibilities for research and analyses. Indeed, we have only begun to scratch the surface of the potential posed by IT data. The NG examined here, Alt.Recovery.AA, like all NGs, is organized and driven by its own guidelines and policies for use.³

THE RESEARCH ISSUE

Schneider (1996:376) notes that persons with no previous public voice can, when posting to Usenet discussion groups, “suddenly find themselves in a public forum, offering their opinions, and having other people respond to them.” To post carries with it a knowledge that one’s post is placed within a public domain.

3. The Alt.Recovery.AA FAQ outlines the NG’s purpose and realm of discussion and provides a disclaimer that the file is not intended to be a complete description of Alcoholics Anonymous. Some questions engaged by the newsgroup include: What is Alt.Recovery.AA? Is Alt.Recovery.AA a group or meeting? How can I get sober through AA and can Alt.Recovery.AA help? What about anonymity? Is Alt.Recovery.AA public? The newsgroup’s formal definition is as follows: “Alt.Recovery.AA is a USENET newsgroup. Its purpose is to discuss [AA] and the program of recovery from alcoholism.” In response to whether Alt.Recovery.AA is a group or meeting, the FAQ reads: “Alt.Recovery.AA lacks a few things common to many ‘live’ groups and meetings.” This implies to the subscriber that solidarity to the AA program can be found within the site. The dynamics of the newsgroup reveal, however, a great deal of dispute, flaming, and resistance to both specific elements of AA and to AA as a whole.

Thus, one's participation becomes constituted as public voice. In turn, public voice becomes public text, public documents, and hence, public data.

As Schwimmer (1996:562) observes, "The efficiency, versatility, and power of Internet facilities have created new possibilities for communication, publication, and instruction and engendered a growing body of electronic literature, primarily because of low production and distribution costs". The efficiency and versatility of capturing data from the Internet, moreover, serves specific goals of researchers. As the simplicity of gathering, and the richness, of such data become more widely recognized so will the exploitation of cyberspace information bases, especially NGs.

Individuals who access the Internet may also access NGs, either to participate in discussions or merely to lurk and observe. Thus, a researcher may easily become an observer of a NG community. Interestingly, in their discussion on the ethics of gathering data from the Internet, Mann and Sutton (1998:211) argue that there are at least three reasons why traditional research ethics of natural observation do not apply to research conducted through data collected from NGs. As they explain:

First, participants in NGs are fully aware that their conversations are being watched by many people who do not reveal themselves... Secondly, some members believe they are actually being monitored by the police or other officials... Thirdly, it is not always possible to infer from a participant's email address the jurisdiction in which they are located (Mann and Sutton 1998:211).

Not knowing the location of a poster prevents true identification of a participant. Thus, in cases where the participant prefers anonymity, one of the criteria by which the Councils regulate ethical clearance, may be more assured.

Miller (1995:9) points out that in Canada committee review as a standard requirement for regulating research on human subjects began in 1966. The most recent Canadian effort to revise and standardize academic research guidelines rests upon the formation of the Tri-Council's Policy Statement, "Ethical Conduct for Research Involving Humans," which informs and systemizes appropriately deemed research ethics through independent Research Ethics Boards (REBs). In Canada it has become increasingly important to ensure a particular standard of ethics when conducting research *on* "human subjects."

Interestingly, moreover, Mann and Sutton (1998:210) note specific advantages of collecting data from NGs:

On the Net there is no need to be present at the time when important postings, discussions or events actually happen. ...Also, with newsgroups, there are no real problems gaining access to the setting.... Useful research can be undertaken without the need to interact with the group..., or influencing the behaviour of the group... . There is no need to strike up a rapport, or establish empathy with the group. Consequently, there is less risk of 'going native'.

Thus, research conducted through NG data can circumvent several of the more traditional problems related to observational studies, such as access to a population and loyalty to one's research group. To these benefits, I would add that one does not have to travel distances to the study site, when researching potentially threatening or dangerous populations, a researcher may avoid harm

through exposure to the group or community under study, and most importantly, from NG data researchers can access information unobtainable from traditional data gathering techniques.

Importantly, NG data present to researchers a merging of oral and written expressions. Whereas traditional interviewing of life experiences are generally recorded on audio tape and then transcribed, NG posters offer already transcribed “subject” histories, attitudes, and behaviours, with the actual transcription being labored by the respondent him/herself. Significantly, the final product becomes one’s oral story transcribed into textual form by the “research subject”. That a researcher may simply download and print reams of data was thirty years ago unimaginable.

While the Tri-Council’s policy statement organizes and directs general ethics around conducting research on humans, Miller (1995:9) notes that in general “Research Ethics Boards exercise wide discretion to approve or reject research protocols...before giving their approval for research to proceed.” Nevertheless, as a means of authority short of governmental legislation, the Tri-Council’s policy statement provides defined guidelines for researcher conduct. Thus, Miller (1995:13) observes that “research in Canada is...governed on the basis of moral-suasion, rather than on the basis of legislative authority.” Indeed, the issue of morality is addressed in the 1998 Policy Statement, though the term “moral” itself remains largely undefined in the Councils’ document.

Some of the more obvious problems with the Tri-Council's merging of the Medical Research Council (MRC), Natural Sciences and Engineering Research Council (NSERC), Social Sciences and Humanities Research Council (SSHRC) include its vastness, the quantitative imposition of language, and its ambivalent use of the term "moral imperative" (Tri-Council, 1998:i4). The Policy Statement, moreover, completely fails to consider the ethical implications of data drawn from the use of ITs. In Canada one may consider the ethical ramifications of using Internet data for research only through extrapolation from the Tri-Council's document. That is, as I discuss below the Tri-Council's position on the use of IT data is left completely unaddressed, leaving researchers and REBs to interpret their own relevant guidelines.

THE TRI-COUNCIL ON CYBERSPACE

The question here is this: Does using IT data serve to exempt researchers from otherwise mandatory ethical review? The Tri-Council (1998:i8) notes that it hopes "to encourage continued reflection and thoughtful consensus around more contentious ethical issues"; this issue of exemption is of importance to continuing debate. In seeking, moreover, to (a) "outline guiding principles and basic standards and to (b) "identify major issues, and points of debate and consensus," in surfacing, non-traditional modes of data collection present new challenges to ethicists.

It appears from the language of the 1998 Tri-Council's Policy Statement that there are three primary grounds by which the collection and use of data from

NGs renders such research methods exempt from otherwise customary ethical review: first, through the document's discussion of "minimal risk"; second, through the determination that NG data constitute public texts; and third, that cyber inhabitants may not, in fact, constitute actual "human subjects".

1. Minimal Risk

According to Tri-Council's Policy Statement (1998:i6) rests in harm-benefits analysis. It is thus the researcher's responsibility to guarantee minimal harm to human research subjects.

Research subjects must not be subjected to unnecessary risks or harm, and their participation in research must be essential to achieving scientifically and socially important aims that cannot be realized without the participation of human subjects.

When considering the use of NG data, however, cyber-participants themselves into the public arena, so researchers' use of the data does not violate a poster's privacy or pose risk of harm beyond that posed by cyber participants themselves.

The Tri-Council document further proposes standards of minimal risk:

[I]f potential subjects can reasonably be expected to regard the probability and magnitude of possible harms implied by participation in the research to be no greater than those encountered by the subject in those aspects of his or her everyday life that relate to the research then the research can be regarded as within the range of minimal risk" (Tri-Council, 1998:1.5 [bold in original text]).

Persons within cyber communities post to NGs as a practice of their everyday activities, the use of their texts can thus be estimated to pose as little harm as that encountered normally in their everyday lives.

The Tri-Council (1998:2.5) explains, moreover, that when considering naturalistic observation

researchers and REBs should pay close attention to the ethical implications of such factors as: the nature of the activities to be observed; the environment in which the activities are to be observed...; and the means of recording the observation.... Naturalistic observation that does not allow for the identification of the subjects, and that is not staged, should normally be regarded as minimal risk.

Once again, the use of NG data falls well within the parameters of what the Council regards as not requiring ethical review, on the grounds that the use of such data, inasmuch as anonymity is assured, poses minimal risk. Hence, one can extrapolate from the Tri-Council's document that naturalistic observation of NG communities is both acceptable research and requires no ethical review.

The Tri-Council Policy Statement can therefore be read as suggesting that NG data do not pose risk of harm beyond that encountered by everyday activities, given that participants do so as an everyday activity. Thus, as a product of everyday activity, the use of cyberspace data does not pose undue risk onto those participants who, themselves, produce the data.

2. Newsgroup Data as Public Documents

The Tri-Council Policy Statement proposes that research requires no ethical review when it is about

a living individual involved in the public arena, or about an artist, based exclusively on publicly available information, documents, works, performances, archival materials or third-party interviews (Tri-Council, 1998:1.1, emphasis added).

Clearly, as cyber-participants place themselves in the public eye with the goal of public consumption, their self-produced data become public documents. Thus, by virtue of the public nature of NG documents, the use of their texts requires no special ethical approval.

Importantly, moreover, the Council (3.2) states that persons known to the public and all publicly accessible information/material is also exempt from ethical review:

[I]dentifiable personal information means information relating to a reasonably identifiable person who has a reasonable expectation of privacy. It includes information about personal characteristics such as culture, age, religion, and social status, as well as their life experience and educational, medical or employment histories. *However, Article 1.1(c) excludes from REB review research that is based exclusively on publicly available information. This includes documents, records, specimens or materials from public archives, published works and the like, to which the public is granted access.* REB approval is not required for access to publicly available information or materials, including archival documents and records of public interviews or performances (Tri-Council, 1998:3.2, emphasis added).

Thus, insofar as NG postings are publicly available, largely archived, and publicly accessed, one can assume that the data released by the postings are available to researchers for public consumption, and that the use of such data requires no ethical approval for their use.

As stated by the Tri-Council, the exploitation of publicly available information “only requires ethics review if the subject is approached directly for interviews or for access to private papers” (Tri-Council, 1998:A2). As autobiographers have already provided public information about themselves, the Tri-Council’s direct approach requirement is moot. Moreover,

REBs should recognize that certain types of research—**particularly biographies**, artistic criticism or public policy research—may legitimately have a negative effect on organizations or on public figures in, for example, politics, the arts or business. **Such research does not require the consent of the subject**, and the research should not be blocked merely on the grounds of harms/benefits analysis because of the potentially negative nature of the findings (Tri-Council, 1998:i9, emphasis added).

Hence, as public figures, NG posters and their postings may be researched without ethical review.

Article 2.3 states further that REB approval is not required in cases where a participant is “seeking public visibility”:

...[R]esearch involving observation of participants in, for example, political rallies, demonstrations or public meetings, should not require REB review since it **can be expected that the participants are seeking public visibility**” (Tri-Council, 1998:A5, emphasis added).

Accordingly, there is no need to approach “speakers as writers” (Denzin, 1995:254), as the data already exist, having been previously produced by cyber inhabitants. Indeed, the public nature of NG postings serves to exempt the use of such data from formal ethical review in Canada.

3. Definition of Human Subject

As the Tri-Council Policy Statement is currently written, “research subject” remains largely undefined. “Subjects” are implied to be both physically and emotionally involved at some level of a research enterprise. For the Council, research subjects are “those persons, on, or about whom, research is carried out” (Tri-Council, 1998: i3). A level of personal involvement on the part of the research subject is implied here, especially as the Tri-Council (1998:i.3) submits,

“research subjects are unique amongst the many participants [of a research enterprise] because it is they who bear the risks of research.” Cyber inhabitants, however, as discussed above, do not bear risks of research as long as anonymity of individuals is ensured wherever possible.

As a means of naturalistic observation, NGs present dynamic and novel sites in which to conduct naturalistic research. In light of traditional risks involved with such observation the Tri-Council (1998:2.5) asserts that even naturalistic observation may threaten the privacy of those observed. However, it remains entirely possible to observe individuals naturalistically who have placed themselves in the public eye. Thus, by virtue of self public promotion cyber-participants cannot be classified as reflective of persons who prefer privacy. Rather, researcher protected NG posters forgive their privacy as a consequence of their public participation in their cyber community(ies).

The question needs to be asked as to whether cyber inhabitants constitute “research subjects”, as envisioned and protected by the Tri-Council. That is, do NG posters constitute “living, human subjects”? This question is significant, particularly, as the Councils assume that there are potential risks involved for the subjects of research, which are perhaps not relevant to cyber inhabitants who are not physically and emotionally connected to the research conducted through their texts. If a cyber participant’s identity and geographical location are not revealed, then the NG poster suffers little, or no, risk. And, as research on public

figures does not warrant ethical review, research on or about a self-positioned public figure such as a NG poster similarly does not require ethical review.

EMERGING ISSUES

According to the Tri-Council (1998:i4), all research must advance both knowledge and human welfare. Though these criteria appear to be noble goals, their actual accomplishment is left largely speculative. How, for example do we ascertain that knowledge and human welfare have been advanced through research? Must the political agenda be immediately identified and/or accomplished? Who, or what, determines whether a research plan or enterprise represents the advancement of knowledge and human welfare? Clearly, the answers to these questions are highly interpretive. Thus, the Tri-Council Policy Statement is in many ways itself left largely interpretive.

Computer technology is increasingly expanding human communication and communicative possibilities. Indeed, computer technology now offers changing techniques of conducting research. Observes Schwimmer (1996:566):

creation and expansion of Internet communication services...[allow] for ethnographic presentations expanded and embellished by inclusion of visual images, case studies, complementary texts, and field notes. It also opens the possibility for new forms of expression that can better capture the multilevel referencing and interrelatedness of complex symbolic and behavioral systems. Accordingly, postmodernists might more easily realize their objectives of articulating numerous voices and perspectives without the restraints of linear exposition.

Clearly, the research potential of cyberspace presents to researchers a range of possibilities and problematics.

The future, moreover, of exploitation of IT data may bring with it new legal issues. Once cyber inhabitants realize that their written texts are being used as data we may see new issues emerge around copyright of intellectual property. For example, NG posters may begin to copyright their texts in order to prevent reproduction without consent of the author. Hence, we may begin to see NG postings preceded by notifications that a following posting may not be quoted or reproduced without express permission of the author. Infringement of copyright may then carry into civil, or eventually perhaps even criminal, cases around ownership of property. It will be interesting to see how long researchers have before NG posters deny access to their public texts. Indeed, it will be interesting to see if, or how, the Tri-Council comes to address the increasingly popular use of Internet material for research purposes. That ITs are redefining research protocol and opening new modes of data collection is unquestionable. That we do not, however, assess the implications and ethics of such redefinitions begs the question of whether there are ethics involved in such research at all.

Furthermore, the Policy Statement reads that "REBs should not reject research proposals because they are controversial, challenge mainstream thought, or offend powerful or vocal interest groups" (Tri-Council, 1998:1.6). Thus, research conducted on or around controversial or otherwise sensitive areas, are not to be held to more scrutiny or more stringent review than other research deemed less controversial or sensitive in nature. My critical research on Alcoholics Anonymous, then, or any research for that matter, which challenges

mainstream thought, is afforded by the Tri-Council the same legitimacy and authority as less threatening forms of research.

Given the “evolving” nature of the Tri-Council’s Policy Statement (SSHRC, 1999:1), shifts and amendments to its “guiding principles and basic standards” (Grubisic, 1998:1) are to be expected. As the importance and breadth of ITs expand, garnering data from such sites as Usenet NGs will increase significantly. The free access, efficiency, and simplicity, moreover, of such data capturing serve the attractiveness of exploiting naturally occurring NG discussion data.

As noted, NG data can be exploited for a variety of methods, including ethnographies, discourse analysis, textual analysis, content analysis, and natural observation. Researchers interested in exploring new research possibilities are now considering the potentialities posed by cyberspace. At this point it is crucial to examine the ways by which exploitation of cyberspace is addressed or represented through extrapolation from the 1998 Canadian Tri-Council Policy Statement. At the current time the Tri-Council document suggests that using NG data circumvents the requirement for formal REB approval. For this facilitative reason alone the exploitation of IT data becomes increasingly attractive to social researchers who view the Tri-Council’s ethical policies as zealously restrictive and possibly ineffective to many qualitative research practices.

APPENDIX 1-B

URL: <http://www.well.com/~dhawk/AA.FAQ.html>

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IV. Miscellaneous

I. Alt.Recovery.AA, the Newsgroup

1. What is Alt.Recovery.AA?

Alt.Recovery.AA is a USENET newsgroup. Its purpose is to discuss Alcoholics Anonymous (A.A.) and the A.A. program of recovery from alcoholism. Note that 'Alt.Recovery' is also a valid USENET newsgroup name and sometimes articles are cross-posted between the two newsgroups, so watch the Newsgroups and Followup-To header lines both when you read and when you respond or post. One of the customs of USENET is the FAQ, or Frequently Asked Questions document. Normally the FAQ provides information about the newsgroup and the subject matter of the newsgroup.

This is the FAQ for Alt.Recovery.AA. There is a separate FAQ for Alt.Recovery.

If you are unfamiliar with USENET then some of the postings in news.announce.newusers might be handy in explaining the customs.

2. Is Alt.Recovery.AA a group or meeting?

Alt.Recovery.AA lacks a few things common to many "live" groups and meetings.

- (a) Non-alcoholics can read and post here
- (b) Anti-AA folks can do likewise
- (c) People can and will "shout" you down no matter what you say or how nicely you say it. This can be intimidating.
- (d) Alt.Recovery.AA is public (see question below) with these caveats, call Alt.Recovery.AA what you will.

[philw@moscow.com]

Note also that Alt.Recovery.AA was not proposed and discussed in alt.config as a meeting or group, but simply as a newsgroup and is listed as being about 'Recovery and Alcoholics Anonymous.' Posting to the rest of the net that alt.recovery.aa was a group and under special rules would probably be counter-productive. Also, check a following section about what a meeting or group is.
[dhawk]

3. How do I get sober through AA and can Alt.Recovery.AA help?

"In our experience, the people who recover in A.A. are those who:

- (a) stay away from the first drink;

- (b) attend A.A. meetings regularly;
- (c) seek out the people in A.A. who have successfully stayed sober for some time;
- (d) try to put into practice the A.A. program of recovery."
 — the A.A. leaflet "a Newcomer asks..."

Alt.Recovery.AA can help with the above in a variety of ways.

Some participants may know of good meetings to go to, or may even be available to take you to a meeting.

They may also know specific ways that worked for them in avoiding taking a drink.

They may also be online for a live chat session when you really need to talk to someone. It may also be that you'll see participants demonstrating the A.A. program of recovery.

Alt.Recovery.AA can be a good place to ask for help.

Also, as you learn more about the A.A. Program you can incorporate more information you get on the net with what you learn from your meetings and your reading.

Discussion, Hot Debate, and Flaming

There are people on the net who like to go into newsgroups and stir things up. If you want to stir things up in Alt.Recovery.AA here's what to post:

1. A.A. is a religion [leaving 'religion' undefined]
2. I recovered from alcoholism and can still drink
3. A.A. is just a bandaid and doesn't handle the root problem
4. There would have to be some changes in A.A. before I'd join
5. I'm not powerless
6. Derisive comments about the newsgroup itself
7. Cross-link in posts from other newsgroups, like alt.atheism
8. Post about non-recovery related items
9. I'm an atheist, so A.A.'s not for me!
10. Non-alcoholic beer/wine helps me stay sober
11. You're not really recovered if you're still smoking.
12. Probably any post that's a judgment about 'you'

Alternatively, you can wait for a post like one of the above and respond to it.
 (Note: some of those items will be covered in later sections of the FAQ.)

If you do not find the debates and flaming helpful, then you can

- put the articles in a kill file as they show up
- set your newsreader to not show you cross-postings
- find something helpful and post about that.

- remember that you are not required to read every posting
- quit reading the newsgroup.

Keep a sense of humor. There's little room for self-righteous stuffed shirts in the world of network news.

"... we cannot and should not enter into public controversy, even in self-defense."
— Bill W. in the Twelve Concepts

"Let us suppose that A.A. does fall under sharp public attack or heavy ridicule; and let us take the particular case where such pronouncements happen to have little or no justification in fact. ...Almost without exception it can be confidently estimated that our best defense in these situations would be no defense whatever—namely, complete silence at the public level. Unreasonable people are stimulated all the more by opposition. If in good humor we leave them strictly alone, they are apt to subside the more quickly." — Bill W. in the Twelve Concepts

4. Does discussion here influence GSO or A.A. as a whole?

A.A. as a whole is guided by the Twelve Concepts (discussed in a later section). Normally that's a process of input from groups, districts and areas, which leads to a flow of information to GSO. GSO or A.A. as a whole cannot control individual groups. Sometimes the information coming back from GSO leads groups to change how they do things, but a counter-reaction can also occur.

If there is something you'd like to see changed about A.A., then the most effective course of action might be to get a group consensus (at a local group that has a General Service

Representative [GSR]), which could be carried to the district and area meetings and then on to GSO. I doubt GSO will be monitoring this newsgroup as a means of obtaining feedback.

I have never heard anyone get up at a Area meeting and pass along a viewpoint found on a newsgroup or bulletin board system. Since anyone can post here there is no way for a service person to know that the idea came from a member of A.A. The people who really know you're a member of A.A. are at your local meeting.

It may be that sharing here about your opinion will lead others to get their groups to examine the issues as well. At the same time the Traditions and Concepts are pretty clear [at least to me, dhawk] as to avoiding public controversy. It may be that a mailing list of members of AA would be a more effective and 'Traditional' means of expressing your views if you want to do so electronically.

5. What about anonymity? Is Alt.Recovery.AA public?

A.A. has a Tradition that states that we should remain anonymous at the level of press, radio, and film. Use of full names does happen within various meetings — in the A.A. service meetings I've been to it is common to use one's full name. But — this is a broadcast medium. So you might want to consider what anonymity means to you before you post. So what does anonymity mean on a computer network? That's for you to decide.

There are anonymous reposters and email services out there.
For details send email to help@anon.twells.com
or check the following URL: <http://www.cs.berkeley.edu/~raph/remailer-list.html>

6. Additional information available in WWW [World Wide Web] sites.

There are a number of Web pages devoted to Recovery and/or A.A. The following are good

places to start. Links were active as of 12/11/96.

<http://www.alcoholics-anonymous.org>

<http://www.recovery.org/aa/>

<http://www.netwizards.net/recovery>

II. Alcoholics Anonymous

1. What is Alcoholics Anonymous?

Alcoholics Anonymous is an international fellowship of men and women who have had a drinking problem. It is nonprofessional, self-supporting, non-denominational, multiracial, apolitical, and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to do something about his or her drinking problem.

— "Info on A.A." leaflet

2. What does A.A. do?

A.A. members share their experience with anyone seeking help with a drinking problem; they give person-to-person service or "sponsorship" to the alcoholic coming to A.A. from any source.

The A.A. program, set forth in our Twelve Steps, offers the alcoholic a way to develop a satisfying life without alcohol.

This program is discussed at A.A. group meetings.

— "Info on A.A." leaflet

3. What doesn't AA do?

A.A. does not:

Solicit members

Engage in or sponsor research

Keep attendance records or case histories
 Join "councils" of social agencies
 Follow up or try to control its members
 Furnish initial motivation for alcoholics to recover
 Make medical or psychological diagnoses or prognoses
 Provide drying-out or nursing services, hospitalization, drugs, or any medical or psychiatric treatment
 Offer religious services
 Engage in education about alcohol
 Provide housing, food, clothing, jobs, money, or any other welfare or social services
 Provide domestic or vocational counseling
 Accept any money for its services, or any contributions from non-A.A. sources
 Provide letters of reference to parole boards, lawyers, court officials
 — "Info on A.A." leaflet

4. What literature is available?

The books include from AAWS:

"Alcoholics Anonymous", the 'Big Book', 3rd edition
 "Twelve Steps and Twelve Traditions", the '12x12'
 "Pass It On", the story of Bill W., AA co-founder
 "Dr. Bob and the Good Oldtimers", the story the other co-founder
 "AA Comes of Age", more AA history from Bill W.'s perspective
 "As Bill Sees It", selected quotations from Bill W.
 Daily Reflections, a daily devotional book written by AA members
 From GSO (and updated yearly):
 The AA Service Manual, with Twelve Concepts for World Service
 From the Grapevine:
 There are two "Best of the Grapevine" books
 "Language of the Heart", Bill W.'s writings for the Grapevine

Magazines:

The Grapevine is A.A.'s monthly meeting in print. It includes stories from all over the world, some humor, a list of conventions, some A.A. history, and an article in Spanish.

The monthly focus is usually on the Step for that month, since there are 12 Steps and 12 months.

To subscribe to the Grapevine, send check or money order to:

The Grapevine, PO Box 1980, Grand Central Station, NY, NY 10163-1980

Subscriptions are 1 year 2 year

United States \$12 \$23

Canada \$16[Canadian] \$31[Canadian]

Foreign \$14[US] \$27[US]

and GSO (the General Service Office) has a monthly magazine: Box 4-5-9. It includes news and notes from GSO, items about A.A. around the world, sharing stories, and a bulletin board of A.A. events.

Individual subscription for one year is \$3.50 (US) and there is a special bulk rate for groups of ten of \$6.00 (US). To subscribe to Box 4-5-9, send check or money order to:

A.A. World Services, Inc.
P.O.Box 459
Grand Central Station
New York, NY 10163

There is also the L.I.M., the "Loners-Internationalists Meeting," distributed bimonthly by GSO as an A.A. meeting for those who cannot attend meetings. Write to GSO at the Box 459 address for more information.

There are three booklets from AAWS:

Came to Believe

Living Sober

A.A. in Prison: Inmate to Inmate

and two booklets from the Grapevine:

AA Today (a booklet for the 25th anniversary of AA in 1960)

The Home Group

The pamphlets cover a wide variety of topics. This is a partial list:

44 Questions

Is A.A. For You?

Is A.A. For Me?

This is A.A.

Questions and Answers on Sponsorship

A.A. for the Woman

A.A. for the Native North American

A.A. for the Gay/Lesbian Alcoholic

A.A. and the Armed Services

Is There An Alcoholic in Your Life?

Inside A.A.

The A.A. Group

A Newcomer Asks

Understanding Anonymity

A Member's-Eye View of Alcoholics Anonymous

Too Young? [cartoon for teenagers]

Speaking at non-A.A. Meetings

Videos include:

A.A.—An Inside View

A.A.—Rap With Us

Hope: Alcoholics Anonymous

It Sure Beats Sitting In A Cell

Young People and A.A.

Order forms for most of the above can be obtained from
General Service Office of Alcoholics Anonymous
Box 459, Grand Central Station, New York, NY 10163
or you can check your local Central Office or Intergroup.
The Grapevine stuff is available from the Grapevine.

There is sometimes some confusion as to the purpose of A.A. literature. Here's what Bill W. had to say:

The Literature Committee: This body is charged with the revision of existing books and pamphlets; also with the creation of fresh pamphlet material to meet new needs or changing conditions. Broadly speaking, its mission is to see that an adequate and comprehensive view of A.A. in its every aspect is held up in writing to our members, friends, and to the world at large. Our literature is a principal means by which A.A. recovery, unity, and service are facilitated.

— Concept XI

If you have a WWW browser (mosaic, lynx, netscape, etc.) then a full list of literature is available at the following URL:

<http://www.recovery.org/aa>

5. What are meetings, groups, and conventions?

A meeting is when one or more alcoholics get together. It can be informal, sporadic, and one time only — or it can be ongoing and structured. An example of a meeting that is not a group is one held at an institution, like a jail or hospital, even though the meeting is not self-supporting, but accepts contributions from other groups.

A group is when a group of alcoholics agrees to operate under the Twelve Traditions (see below). The difference between a meeting and a group is explained in the pamphlet, "The A.A. Group" — and you'd better get the revised edition, since that's what changed when they revised it. Roughly, a meeting can become a group if it agrees to accept all who have a desire to stop drinking and has no outside affiliation. Some Central Offices and/or Intergroups will not list meetings that don't meet the 'group' criteria.

"As we see it, an A.A. convention is almost any A.A. get-together beyond the group-meeting level." (The GSO in the A.A. Guidelines on 'Conferences and Conventions.') There is a list of some of the conventions in the monthly magazines: the Grapevine and Box 4-5-9. The 1995

International Convention was held in San Diego, CA, USA, June 29 to July 2, 1995. There was a "CyberSuite" setup with computers so AA members could login to various online services/resources and use IRC [Internet Relay Chat]. Various reports from the CyberSuite are available in some of the WWW pages listed in the first section of this file.

The Twelve Steps

"A.A.'s Twelve Steps are a group of principles, spiritual in nature, which, if practiced as a way of life, can expel the obsession to drink and enable the sufferer to become happily and usefully whole." (Twelve Steps and Twelve Traditions, p. 15)

The steps are:

1. We admitted we were powerless over alcohol — that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God *as we understood Him*.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscience contact with God *as we understood Him*, praying only for knowledge of His will for us and the power to carry that out.
12. 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.

Source: Alcoholics Anonymous, 3rd edition, pages 59 and 60
Italics in Steps Three and Eleven are in original text

"Many people, nonalcoholics, report that as a result of the practice of A.A.'s Twelve Steps, they have been able to meet other difficulties of life. They see in them a way to happy and effective living for many, alcoholic or not." (Twelve Steps and Twelve Traditions, pp. 15-16)

The Twelve Traditions [short form]

1. Our common welfare should come first; personal recovery depends upon AA unity.
2. 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.
3. The only requirement for AA membership is a desire to stop drinking.
4. Each group should be autonomous except in matters affecting other groups or AA as a whole.
5. Each group has but one primary purpose—to carry its message to the alcoholic who still suffers.
6. An AA group ought never endorse, finance, or lend the AA name to any related facility or outside enterprise, lest problems of money, property, and prestige divert us from our primary purpose.
7. Every AA group ought to be fully self-supporting, declining outside contributions.
8. Alcoholics Anonymous should remain forever nonprofessional, but our service centers may employ special workers.
9. AA, as such, ought never be organized; but we may create service board or committees directly responsible to those they serve.
10. Alcoholics Anonymous has no opinion on outside issues; hence the AA name ought never be drawn into public controversy.
11. Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio, and films.
12. Anonymity is the spiritual foundation of all our Traditions, ever reminding us to place principles before personalities.

The above is how they are found in the Big Book, page 564, and is known as the 'short form.' The 'long form' is on pages 565 and following. Note that Tradition Two is longer in the 'short form.'

The Twelve Traditions are the guidelines that A.A. groups are encouraged to follow.

The Twelve Concepts

The Twelve Concepts are too long to type in here. They have traditionally been printed with the A.A. Service Manual and are called 'Twelve Concepts for World Service' and are the guidelines for A.A. as a whole to follow. The Concepts are printed at the back of "The

A.A. Group" pamphlet, with this footnote:

Note: The A.A. General Service Conference has recommended that the "long form" of the Concepts be studied in detail. "Twelve Concepts for World Service", in which A.A. co-founder Bill W. closely examines all these principles of A.A. service, may be ordered from G.S.O.

6. Overview of the History of Alcoholics Anonymous

The fellowship of Alcoholics Anonymous dates its inception from June 10, 1935, when a 6-month sober (at the time) Wall Street hustler helped an Akron rectal surgeon through his last binge. The New Yorker had been relieved of his obsession to drink through a sudden spiritual awakening while hospitalized for acute alcoholism. He realized, however, that to maintain his sobriety, he needed to help others. The two men set out to carry this message: that a spiritual way of life could arrest the chronic, progressive and fatal condition known as alcoholism. The man from New York is commonly referred to as Bill W., and the surgeon was Dr. Bob.

By 1937, after approximately 40 solid successes and many failures, a decision was made to spread the message as widely as possible. Work began on a book that would "Of necessity... have .. discussion of matters medical, psychiatric, social, and religious."

(Alcoholics Anonymous, Third Edition, p.19). In addition to broadcasting the message of recovery, the book also served to codify what had been until then a "word-of-mouth" program. In the spring of 1938, the principal author of the book, Bill W., took the six principles in use at that time and expanded them, in his words, "to break this program up into small pieces so they can't wiggle out" (remarks in Fort Worth, Texas, 1954). Thus were born the original Twelve Steps.

A revolutionary document for its time, "Alcoholics Anonymous" (from which the Fellowship took its name) presented for the first time in print the concept that alcoholism was an illness of both mind and body. The first edition (5,000 copies) was set in fairly large type and on the thickest possible paper (so that

people would feel they were getting their money's worth) hence the nickname, "Big Book". The first 179 (then, 164 in second and third editions) pages including a section titled "The Doctor's Opinion" describe the problems of alcoholism and the accompanying "personality disorder", the program of recovery, and some of the expected results. The first section has had only minor changes through three editions, mostly dealing with estimates of the number of people who have used the program. The balance of the book set out personal stories by members of the Fellowship. These have changed to reflect the wider nature of the fellowship through its growth.

On page vii in "A.A. Comes of Age" is the start of a list called "Landmarks in A.A. History." It only goes up to 1981.

III. Actual Frequently Asked Questions about Alcoholics Anonymous

1. What do the Steps mean by 'God'?

Well, what the Steps say is "God as you understand Him." The added phrase is to help folks use their own perception of a "Higher Power." There are people in A.A. who use various Higher Powers, including a rock, a tree, a rose bush, a light bulb, the Grateful Dead, the sun, the earth, ... well, the list just goes on and on. Buddhists have been known to substitute 'Good' for 'God'. The "12x12" (Twelve Steps and Twelve Traditions) has the following on pages 26 and 27: First, Alcoholics Anonymous does not demand that you believe anything. All of its Twelve Steps are but suggestions. ... You can, if you wish, make A.A. itself your 'higher power.' Here's a very large group of people who have solved their alcohol problem. In this respect they are certainly a power greater than you ...

Also, from the Big Book:

"When, therefore, we speak to you of God, we mean your own conception of God. This applies, too, to other spiritual expressions which you find in this book. Do not let any prejudice you may have against spiritual terms deter you from honestly asking yourself what they mean to you. [...] We needed to ask ourselves but one short question. 'Do I now believe, or am I even willing to believe, that there is a Power greater than myself?'" (Alcoholics Anonymous, p.47)

2. What's a spiritual awakening?

"The terms 'spiritual experience' and 'spiritual awakening' are used many times in this book which, upon careful reading, shows that the personality change sufficient to bring about recovery from alcoholism has manifested itself among us in many different forms.

Quite often friends of the newcomer are aware of the difference long before he is himself. He finally realizes that he has undergone a profound alteration in his reaction to life; that such a change could hardly have been brought about by himself alone. What often takes place in a few months could seldom have been accomplished by years of self discipline.

With few exceptions our members find that they have tapped an unsuspected inner resource which they presently identify with their own conception of a Power greater than themselves.

Most of us think this awareness of a Power greater than ourselves is the essence of spiritual experience. Our more religious members call it 'God-consciousness'. (Alcoholics Anonymous, pgs. 569-570)

3. Why do people keep going to meetings after they're sober?

"To watch people recover, to see them help others, to watch loneliness vanish, to see a fellowship grow up about you, to have a host of friends—this is an experience you must not miss. We know you will not want to miss it. Frequent contact with newcomers and with each other is the bright spot of our lives." (Alcoholics Anonymous, p. 89)

"We sit in A.A. meetings and listen, not only to receive something ourselves, but to give the reassurance and support which our presence can bring. If our turn comes to speak at a meeting, we again try to carry A.A.'s message." (Twelve Steps and Twelve Traditions, pg. 110)

4. What about the Lord's prayer? Is it in line with the Traditions?

Some A.A. members think so. Some don't.

Some A.A. groups use it. Some don't.

Decide for yourself.

The pamphlet, "The A.A. Group", under 'Suggested Meeting Procedures' has a paragraph that says, "Many meetings close with members reciting the Lord's Prayer or the Serenity Prayer."

However, experience has shown that extended discussion on alt.recovery and other newsgroups hasn't solved the conflict yet.

5. I hear Bill W. used LSD. Is that true?

There's a chapter about this in "Pass It On", the A.A. published biography of Bill W. The short answer is Yes. Rumor has it that he also drank heavily prior to 1935. ;-) Seriously, LSD was still legal and Bill was using it under clinical conditions. The time period was 1955 to 1959.

6. How do I get an online copy of the Big Book?

You will need to have a WWW browser to read this: Mosaic, Netscape, Lynx, etc. The URL is: <http://www.recovery.org/aa/bigbook/www.index.html>
 Copyright on the 1st and 2nd editions has expired in the U.S. because A.A. didn't renew it. In all other countries, the copyright is still in force.
 [philw@moscow.com]

7. Is A.A. the only way to get sober?

"It would be a product of false pride to claim that A.A. is a cure-all, even for alcoholism." (Bill W. in "A.A. Comes of Age", page 232.) Bill W. repeatedly said that "our hats are off to you if you can find a better way" and "If [those seeking a different cure] can do better by other means, we are glad." (Bill W. in Concept XII).

8. What does A.A. say about drugs?

[check the pamphlet "The AA Member - Medications and other Drugs"]

Should A.A. Change?

Perhaps our very first realization should be that we can't stand still. Now that our basic principles seem established, now that our functioning is fairly effective and widespread, it would be temptingly easy to settle down as merely one more useful agency on the world scene. We could conclude that "AA is fine, just the way it is."

... We have to grow or deteriorate. For us, the 'status quo' can only be for today, never for tomorrow. Change we must; we cannot stand still.

So then, if our basics [Steps and Traditions] are so firmly fixed as all this, what is there left to change or to improve? The answer will immediately occur to us. While we need not alter our truths, we can surely improve their application to ourselves, to AA as a whole, and to our relation with the world around us. We can consistently step up "the practice of these principles in all our affairs."

... Let us continue to take our inventory as a Fellowship, searching out our flaws and confessing them freely. Let us devote ourselves to the repair of all faulty relations that may exist, whether within or without.

— Bill W., "The Shape of Things to Come", reprinted in
 "The Language of the Heart"

If you don't like A.A. why don't you leave?

The only requirement for membership is a desire to stop drinking. Or to state the Third Tradition in its long form: "Our membership ought to include all who

suffer from alcoholism. Hence we may refuse none who wish to recovery. Nor ought A.A. membership ever depend on money or conformity."

Then there's the matter of inventories. See page 64 of the Big Book. AA has to be serious about inventories at the individual, group, and overall levels. Saying "We dare not look" (12x12) isn't going to cut it.

Bill W. welcomed criticism:

"Thanks much for your letter of criticism. I'm certain that had it not been for its strong critics, A.A. would have made slower progress.

"For myself, I have come to set a high value on the people who have criticized me, whether they have seemed reasonable critics or unreasonable ones. Both have often restrained me from doing much worse than I actually have done. The unreasonable ones have taught me, I hop, a little patience. But the reasonable ones have always done a great job for all of A.A.—and have taught me many a valuable lesson.

— As Bill Sees It, page 326
But A.A. Works!

A.A. works for the people it has worked for. But there is no way, short of experimentation, to know if a change will make A.A. more effective or less. Quoting Bill W. again: "Though three hundred thousand did recover in the last twenty-five years, maybe half a million more have walked into our midst, and then out again. No doubt some were too sick to make even a start. Others couldn't or wouldn't admit their alcoholism. Still others couldn't face up to their underlying personality defects. Numbers departed for other reasons. ... Yet we can't well content ourselves with the view that all these recovery failures were entirely the fault of the newcomers themselves. Perhaps a great many didn't receive the kind and amount of sponsorship they so sorely needed. We didn't communicate when we might have done so. So we AAs failed them." (The Language of the Heart, page 252).

Explain that Flame Section back at the start, please.

OK, up in Section I, part 4, "Discussion, Hot Debate, and Flaming" it says that people sometimes come to the newsgroup and (intentionally or unintentionally) stir things up with statements like

AA is a religion [leaving 'religion' undefined],
I recovered from alcoholism and can still drink
AA is just a bandaid and doesn't handle the root problem
There would have to be some changes in AA before I'd join
I'm not powerless
Derisive comments about the newsgroup itself

Cross-link in posts from other newsgroups, like alt.atheism
Post about non-recovery related items
I'm an atheist, so AA's not for me!
Non-alcoholic beer/wine helps me stay sober
You're not really recovered if you're still smoking.

If this happens intentionally, then it's known as 'trolling.'
So, what to do? Well, what Bill W. would have suggested is not replying, not even in defense of AA. That public controversy isn't worth it. If I always react to a prod, then that makes me reactionary, which I don't think falls on the 'attraction' side of public relations. Pages 66 and 67 in the Big Book are appropriate in this context, I think — "We avoid retaliation or argument."

If all else fails, I will post what I know is true for me. I do not speak for AA as a whole. Likewise, I do not have to defend AA as a whole.

IV. Miscellaneous

The following really didn't fit in the outline form, so I'm putting it here.

If you are willing to sponsor or correspond with someone behind bars, GSO maintains a list of inmates who've requested correspondents. The May 1994 Grapevine said there were 150 inmates waiting to be matched with an outside "sponsor." You can get more information from the corrections desk at GSO, Box 459, Grand Central Station, New York, NY 10163.

Quote for the month:

".. I was painfully learning how not to communicate. No matter how truthful the words of my message, there could be no deep communication if what I said and did was colored by pride, arrogance, intolerance, resentment, impudence, or a desire for personal acclaim.."

— Bill W., "Language of the Heart" (p. 246)

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APPENDIX 3-A

M.M. Glatt, "Group Therapy in Alcoholism," *British Journal of Addiction*, Vol.54, No.2, 1957. Used with permission of Taylor and Francis Limited, England, formerly the Society of Addiction, Edinburgh, Scotland.

APPENDIX 4-A

The questions posed and answered by the booklet "44 Questions" are as follows:

1. What is alcoholism?
2. How can I tell if I am really an alcoholic?
3. Can an alcoholic ever drink 'normally' again?
4. Can't an A.A. member drink even beer?
5. I can stay sober quite a while between binges; how can I tell whether I need A.A.?
6. Others say I am not an alcoholic. But my drinking seems to be getting worse. Should I join A.A.?
7. Can a person achieve sobriety all alone by reading A.A. literature?
8. Won't everyone know I am an alcoholic if I come into A.A.?
9. How can I get along in business, where I have to make a lot of social contacts, if I don't drink?
10. Will A.A. work for the person who has really 'hit bottom'?
11. Do alcoholics who are already sober ever join A.A.?
12. Why is A.A. interested in problem drinkers?
13. What is Alcoholics Anonymous?
14. How did A.A. get started?
15. Are there any rules in A.A.?
16. What does membership in A.A. cost?
17. Who runs A.A.?
18. Is A.A. a religious society?
19. Is A.A. a temperance movement?
20. Are there many women alcoholics in A.A.?

Alcoholics Anonymous (1952). Reprinted with permission of Alcoholics Anonymous World Services, Inc (A.A.W.S.).

21. Are there many young people in A.A.?
22. How does a person join A.A.?
23. What is an 'open' meeting?
24. What is a 'closed' meeting?
25. May I bring relatives or friends to an A.A. meeting?
26. How often do A.A. members have to attend meetings?
27. Do A.A.s have to attend meetings for the rest of their lives?
28. How will I be able to find the time for A.A. meetings, work with other alcoholics, and other A.A. activities?
29. Can newcomers join A.A. outside their own community?
30. If I come into A.A. won't I miss a lot of friends and a lot of fun?
31. What are the 'Twelve Steps'?
32. What are the Twelve Traditions'?
33. What are 'slips'?
34. Does A.A. have a basic 'textbook'?
35. What is 'the 24-hour program'?
36. What is the A.A. Grapevine?
37. Why doesn't A.A. seem to work for some people?
38. Will A.A. help me financially?
39. Will A.A. help me straighten out my family troubles?
40. Does A.A. operate hospitals or rest homes for alcoholics?
41. Does A.A. sponsor any social activity for members?
42. What do medical authorities think of A.A.?
43. What do religious leaders think of A.A.?
44. Who is responsible for the publicity about A.A.?

APPENDIX 4-B

*The Twelve Questions posed by "Is AA For You?" are as follows:**

1. Have you ever decided to stop drinking for a week or so, but only lasted for a couple of days?
2. Do you wish people would mind their own business about your drinking—stop telling you what to do?
3. Have you ever switched from one kind of drink to another in the hope that this would keep you from getting drunk?
4. Have you had to have an eye-opener upon waking during the past year?
5. Do you envy people who can drink without getting drunk?
6. Have you had problems connected with drinking during the past year?
7. Has your drinking caused trouble at home?
8. Do you ever try to get "extra" drinks at a party because you do not get enough?
9. Do you tell yourself you can stop drinking any time you want to, even though you keep getting drunk when you don't mean to?
10. Have you missed days of work or school because of drinking?
11. Do you have "blackouts"?
12. Have you ever felt that your life would be better if you did not drink?

Alcoholics Anonymous (1973). Reprinted with permission of Alcoholics Anonymous World Services, Inc (A.A.W.S.).

APPENDIX 4-C

*A Message to Teenagers...How to Tell When Drinking is becoming a Problem**

Questions:

1. Do you drink because you have problems? To Relax?
2. Do you drink when you get mad at other people, your friends or parents?
3. Do you prefer to drink alone, rather than with others?
4. Are your grades starting to slip? Are you goofing off on your job?
5. Did you ever try to stop drinking or drink less—and fail?
6. Have you begun to drink in the morning, before school or work?
7. Do you gulp your drinks?
8. Do you ever have loss of memory due to your drinking?
9. Do you lie about your drinking?
10. Do you ever get into trouble when drinking?
11. Do you get drunk when you drink, even when you don't mean to?
12. Do you think it's cool to be able to hold your liquor?

Alcoholics Anonymous, (1988). Reprinted with permission reprinted of Alcoholics Anonymous World Services, Inc (A.A.W.S.).

APPENDIX 5-A

*Women For Sobriety**

13 STATEMENTS OF WOMEN FOR SOBRIETY "NEW LIFE" PROGRAM.*

1. I have a drinking problem that once had me.
2. Negative Emotions destroy only myself.
3. Happiness is a habit I will develop.
4. Problems bother me only to the degree I permit them to.
5. I am what I think.
6. Life can be ordinary or it can be great.
7. Love can change the course of my world.
8. The fundamental object of life is emotional and spiritual growth.
9. The past is gone forever.
10. All love given returns twofold.
11. Enthusiasm is my daily exercise.
12. I am a competent woman and have much to give others.
13. I am responsible for myself and my sisters.

* Reprinted with permission of Women For Sobriety, Inc.

APPENDIX 5-B

*From the Big Book**

As part of one's PERSONAL inventory, members are advised to conduct a fourth step. Alcoholics Anonymous suggests that members evaluate their "grudge list" in the following way.

I'm resentful at:

Mr. Brown

The cause

His attention to my wife.

Told my wife of my mistress.

Brown may get my job at the office.

Affects my:

Sex relations.
Self-esteem (fear)

Sex relations.
Self-esteem (fear)

Security.
Self-esteem (fear)

Alcoholics Anonymous (1976a:65). The above excerpt is reprinted with permission of Alcoholics Anonymous World Services, Inc (A.A.W.S.).

APPENDIX 5-C

EMERGING RECOVERY PROGRAMS—ALCOHOL RELATED*

MODERATION MANAGEMENT

<<http://www.moderation.org>>

Known as MM, founded in 1994, suggests guidelines and limits for moderated drinking, and provides professionally advised meetings for those attempting to moderate. MM provides a supportive mutual-help environment that encourages people who are concerned about their drinking to take action to cut back or quit drinking before problems become severe.

RATIONAL RECOVERY

<<http://rational.org.recovery>>

RR was founded in 1986 by Jack and Lois Trimpey in response to the lack of choice in the field of addictions. RR is based on Addictive Voice Recognition Technique (AVRT), and is a total abstinence program. RR advises that participation in recovery groups is not necessary for those who learn AVRT.

SECULAR ORGANIZATIONS FOR SOBRIETY

<<http://unhooked.com>>

(SOS) a.k.a. "Save Our Selves"

SOS, founded in 1985, is basically AA without god, the steps, or the insistence that one must attend meetings for life. SOS accepts the disease model, and is a strict abstinence program.

S.M.A.R.T. RECOVERY

<<http://smartrecovery.org>>

SMART (Self Management and Recovery Training), founded in 1994, is based on the principles of Rational Emotive Behavior Therapy. SMART is a time-limited free, professionally advised abstinence program based on the theory that addictions are learned behaviors caused by faulty self-defeating thinking, and that one can learn to change that thinking and also, with practice and repetition, change the behaviors resulting from it.

* The above information was posted anonymously to Alt.Recovery.AA in November 1998.

WOMEN FOR SOBRIETY

<<http://www.mediapulse.com/wfs/>>

WFS is the oldest—founded in 1975—of the modern (non 12-step) programs, and is dedicated to helping women overcome alcoholism and other addictions. WFS accepts the disease model and is largely an abstinence program. The “New Life” program helps women achieve sobriety and sustain ongoing recovery.

OTHER EMERGING RESPONSES TO ALCOHOLICS ANONYMOUS

CLIFF WALKER'S RECOVERY WATCH

<<http://rogue.northwest.com/~crt/tocrw.htm>>

One of the lone voices in the wilderness selflessly furthering the cause of providing choice in recovery systems for addicted people, and ending 12 Step dominance in the addiction treatment field.

STANTON PEELE

<<http://peelee.net>>

Stanton Peele is a Ph.D. psychologist and attorney, well-known author, and advocate for addictions treatment based on valid scientific research rather than religious tradition.

APPENDIX 7-A

Illustration of a Newsgroup Post, including follow-up posting.

From: someoneidentified@usa.net (Greg)
Newsgroups: alt.recovery.aa
Subject: Re: AA is for people who want it...not need it!
Date: Not Identified
Lines: 61
Xref: cunews alt.recovery.aa:#unidentified

On Tue, 2 Nov 1999 18:55:30 -0500, Brad
<notidentified@somewhere.net> wrote:

>In a preceding article Greg says...
>> On Tue, 02 Nov 1999 01:38:22 -0800, Dabney
<dabney@somelink.net>
>> wrote:
>>
>> >God might have something to say to the person about life, its
>>>meaning and the way to get the most out of it. Some of this
>>>information might be missed by those who choose to discredit
the >>>source.
>> >
>> Aww Don, how quick you get to the personal level of put
down....tch
>> tch. Nothing new under the sun, is there?
>>
>> Best,
>> Greg
>>
>You would have made such an excellent martyr, how quickly you
>put on the thorns.

Damn. Ad hominem night. Can't you God select boys *not* do
that?....besides why do you speak for Don? Oh right. You speak
for God, right? And God tells you to do ad hominem...the ways of
the Lord are sure mysterious.....

>
>I think what Don was saying is that if you want to understand
>something you have to believe its credible.

Here is what Don said that I referred to. I could care less
about his rantings: Apparently with a very high spot on the
mountain, he spoke thusly:

>>>Some of this information might be missed by

>> >those who choose to discredit the source.

No how do you get from that statement to where you got? Don't you get weary of being the Pontiff?

> The mysteries of the Bible are spiritually discerned only by those >that believe in it. Non believers will only see it as a limited >history
>lesson or a list of morals or stories with morals.

Yes Pope, go on.

>

>Now if Don weren't speaking of the Bible we could place any book >in our list of beliefs. Say you used "Seasons of a Man's Life" >as your "bible." You would pour over it until you could discern >truth in every sentence. By this method you would obtain most of >the information in it. Say I found it in the philosophy section >of the book store and immediately trashed it because of my >prejudice against man made philosophies. I would be lucky to >understand 30% of it because of my contempt prior to >investigation.

If you want to take a personal shot at me, go ahead. But please don't lecture me after it about how much you think you know. Fair?

Best,
Greg

Explanation of markers:

Unmarked text belongs to the current poster. (First party)

> Indicates the immediate text to which the post immediately follows. (Second party)

>> indicates the text that preceded the immediate text to which a post responded. (Third party)

>>> indicates the text belonging to a fourth party earlier in the discussion.

Note that the original post may be situated 10, 20, 30 or more messages prior to its tagging to another post.

APPENDIX 7-B

Thread *"What's up with the sobriety date in the signature profile?"*

Contributions by individuals posters in alphabetical order:

Andre

- > I generally include my DOS so people will know how retro I am. Definitely an ego thing.

Barnet

- > Because that's the way I started out in this newsgroup, although I've thought about taking it out a couple times as of late. But then again I don't post that much either, and it's not a big deal for me either way. OK, I'll give you an honest answer based solely on my personal experience. When I first came to this newsgroup I had only been sober for a couple months. Putting my sobriety date in my sig was as much an admission of the troubles I was having as it was a plea for folks to go easy on me and for them to help me out. So, I'd say my reason for putting my sobriety date in my sig was at that time more related to humility than it was ego. And now? Well now, it's more of a reminder than anything else. From my perspective it has nothing to do with ego or pride. (3/10/97)

Barrie

- > Also, when I came into AA, it was tradional here in Dallas for members to always introduce themselves with their sobriety date. And so, I still do. 7/9/79

Charles

- > Look for this thread. Many are listed in it: "alt.recovery.aa sobriety countdown -- 512 years! ok Basil!"

Dana

- > Another sobriety date not y2k ready. Regards
- > Course not. Well not since the dwarf strain has been developed. Regards
- > You'll get lots of blah blah on this. Remember that only a fool would use such to judge ...what? I never tell the truth about my sobriety length. Don't believe any of um. Gotta see how they live...then it don't matter anyhoo. Regards

Dennie

- > That explains me, but from the other end: I don't want folks thinking I know squat about the program, so my date puts me at the sorta-newbie end of the spectrum. They cut me some slack, if they

read it. PS - And yes, it's a bit of vanity, but more the "appropriate sense of pride" the earlier post mentioned. 6/14/99

> Sigh. You caught us, big guy. Unless you want YOUR turn being the sheep tonight.

Deryk

> That's about what you'd expect from someone who does nothing but try to blow smoke up people's asses.

> God did not do it because God does not exist.
So why not take credit yourself?

> And I suppose that next you'll be saying that the people who don't agree with your bigoted beliefs fuck sheep.

Evan

> Well, I don't put my sobriety date in a sig file. But I do like honesty and do wish to admit something...I likes Sheeps. .Sheeps are kool.

> You cannot control sheep threads - they grow and multiply like huge, grotesque moths chowing down on your favorite wool sweater.

Greg

> You are cool, my dear. You *are* a great example of many nice traits and I think you should be the AA Poster Girl...Lady. What I like about all this discussion over sobriety dates and in particular, those who leap in to defend a 'mere date' as if the 'mere date' were sacred. The on the other side of the mouth, there is this talk about 'quality sobriety' when apparently a date is not enough, in fact 'mere sobriety' is pooh poohed. And then (gasp) out of the third side of the mouth is the praise and accolade seeking (which isn't half bad, really....hell we all need a little reinforcement) and on the fourth side, God does it all...based apparently on God's criteria.....(which is known by some, though not all...sort of like a 'secret society'). But I bet you already know that all it takes to get sober is to 'dumb down'. It seems that intelligence is a major factor in the cause of alcoholism. So, intelligence has to be smashed, I guess and that means 'dumbing down' so everyone can be at one level....following 'suggestions', what your sponsor says, not questioning anything, not saying anything 'against' (see the list of no-no's in another post) AA lest someone else get the 'wrong idea' and inadvertently gets smart again and well, you know, gets drunk, because intelligence is a key factor, in alcoholism. That's strange of course, because AA has some people that appear like they never were intelligent, so to speak, relatively speaking that is. No offence to anyone in particular lest the shoe fits..heh. So you see Marilyn, it all flows together. However, you deftly pointed out something that Morley had, surely inadvertently, overlooked, in his haste to have a good answer that might help a newcomer and reinforce the 'code of AA;, I like your kind of AA better, even the God part that you

- do, because I think you don't just spout it....sure looks like you adhere to it. Best to you.
- > Tch tch AA pat answer put down Sean.....a man of your education....tch tch Oh wow. Hey. You heard that somewhere, right? Hehe. Oh....what kind of experience. Sober experience???? 'splain how that makes one wiser or smarter or better, not just longer.....nothing comes automatic Sean...nothing.....time in grade is time in grade...time passes whether you do anything or not.....some people have learned from others....for sure. some people just repeat what others have told them to say....again and again and again and again and again and again.... sort of like your post. Sean, you got a PhD, right? Spend a little time and at least trick me. Make me think you gave the concepts some thought and not just memorized them.....fair? Would that be an axiom? You don't really buy that crap that you come in completely stupid about everything, do you? If you do, you are doing just what you need to do....repetez moi. I'd hoped for better from you. Thump thump.....You'll win the adoration of those who teach pat answers, though. Guess you showed everyone. Huh? Best
 - > S'natural . S'not bad. T'is those who try to make what is natural immoral that sucks.....but hell, if we didn't have other people to run lives for, what would we do? Best, sometime in the 39's
 - > Sheeps *am* kool. Kool? Do sheeps get stump broke? xx xx xxxx
 - > Actually that was my wedding anniversary date.....and my birth date...my sobriety date is the day after....
 - > By their sobriety dates shall ye know them.....

Hank

- > When I came into the program, Each person introduced there self: Hello I'm an alcoholic and through the grace of God and the 12 steps I have been sober these past 24 hours. When I moved to the west coas a few years later.... They were doing birthdays. God only knows the date of my last drink. So I set the date a year before my doughters birthday. Best I can do. Also not knowing has not taken me out in these past 24 hrs.

Harris

- > I went into a gas station today and asked how much cigarettes are now.. they told me that Marlboro's [which I smoked]{for 47 years!!!!} are US\$4.25 per pack with a \$.50 increase [tax] coming 1 Jan. Man.. I'm gonna retire on what I'm saving on cigs and booze.
DOSD 10-03-83
DOSS 5-26-98
- > But it's "honest ego", Jason. It used to be "bullsh*t ego". Big [sober] difference, dood.

James

- > I enjoy seeing the sobriety dates myself. It communicates to me that their way worked, and their was is probably AA.

Jared

- > Aren't we all just ONE example (good, bad, or indifferent) that the A.A. program works. Sometimes length of sobriety is just a number.
- > Is sure would. Can you imagine trying to explain that DOS tattoo to the person sitting beside you at the local pub.
- > Sometimes length of sobriety is just a number.

Jason

- > In filtering thru a few of these posts I noticed that some of you put your sober date in the sig file. Why? You know what would be great? If you answered this question honestly instead of saying something like "it's for the newcomer" or "so people will know there are people here with time". Here's my take..... You do it because of ego. If I am wrong then please tell me why. If I am right, please admit it.
- > It proves that some people want to be thought of in a certain light. By the way, why do you feel the need to prove that AA works?

Jean

- > (getting ready to work on the diet and exercise demon next...sigh...)
- > I was smart, smoked the cheap stuff, no-name brands. A carton of no-name is now \$29 here in upstate NY, on sale, advertised on a sign in a store window. JeanSaving (how come if I'm saving all of that \$\$\$, I'm still broke...???)
DOSD(1stTime) 1982-02-12
Slip-five years... (sigh...)
DOSD(2ndTime) 1999-03-01
DOSS(umteenthTime) 1997-07-17
DOB 19**-04-01
- > My peedle dog (she weighs ten pounds) bounced into the sheep yard down the road from us, and found the sheep ran away from her. NOTHING has ever run away from her! She had a wonderful time. D'ya ever see Japanese Chin laugh??? heeheehee...

John

- > Right on. If sober time is not important then why do we hear all of the pissing and moaning about where the old timers have gone.
- > I'll bet that if the DOS was tattooed on the forehead it would cut the number of slips in half.

Jules

- > Is it wrong to be proud of one's sobriety? Its probably one my most amazing accomplishments (albeit with God's strength and encouragement). At least when I meet up with some one I knew in my drinking days they are pretty amazed. On my anniversary I don't have them slip me a chip out the back door I can tell you that.

Kelsie

> As it was told to me and I beleive it if you forget your sober date you are soon looking for a new one!!!

Kirk

> Perhaps we need a Trollean Bo-Peeper.

Lara

> Please stop RrroooOOOAAAAaaaariiiinggg - you'll frighten the sheep. On second thought maybe you can frighten them enough that theywill go back to the sheep thread (where they belong).

Leonard

> Me, too! Me, Too!!!
 non-smoker since 1997-07-17
 (coming up on 10 months sober-- 1999-03-01)

> You're right. It's ego. Cheers 19xx-08-04 Non-smoker since 1972-05-20

> There are a number of ways to gain status in AA:

- Doing service work
- Complaining about the lack of volunteers for service work
- Coralling a large number of sponsees
- Making long sprititually oriented orations a AA meetings
- Making long diatribes about how tough it was in the Old Days

Not drinking for a long time is one of the least effective ways for getting recognition since there will always be those who say 'I'd rather be drinking than have his kind of sobriety'. Cheers.

Marilyn

> I don't really think it *proves* anything, Morley. But I do see it as an example that the program *can* work if you let it.

Michelle

> Heres a typical alcoholic answer to that question:
 The dictionary describes "ego" like this: eŷgo (g, g) n., pl. eŷgos.
 1.The self, especially as distinct from the world and other selves.
 2.In psychoanalysis, the division of the psyche that is conscious, most immediately controls thought and behavior, and is most in touch with external reality. 3. a. An exaggerated sense of self-importance; conceit. b. Appropriate pride in oneself; self-esteem.
 I think 3b would be the appropriate reason for the signature dates. However, being that we are alcoholics suffering at times from excessive negativity, I think some would think it to be 3a. What a sad state of mind that is. Keep coming Jason. It gets better.

Morley

> It proves AA works, enough said. (7-1-84)

> It saves lives jason.....
 how much *time* do you have?

Nathan

- > I'm fairly sure this was sarcasm (hope it was) - but I have encountered this argument for real in AA and it really winds me up. I know someone who isn't allowed to make any significant decision in his life without clearing it with his sponsor first. I'd rather die drinking than abdicate responsibility for my life in this way. I have always questioned everything I've heard, and always will.
- > Also, lets face it, in real life AA, sober time gives you status. By and large I know roughly how long the people in my groups have been sober. I try to find out actually - so I can spend time talking to people who know something about staying sober.
- > As someone with almost no sober-time, I like seeing the dates. It reminds me this works. Also, lets face it, in real life AA, sober time gives you status. By and large I know roughly how long the people in my groups have been sober. I try to find out actually - so I can spend time talking to people who know something about staying sober. If people get an ego burst as well, I don't begrudge anyone that...

Norman

- > I've had a lot of (drinking) drinkers tell me it's impossible to "Stay" sober. Others (just sobering up) have said they came into AA with the hope of staying sober just long enough to feel better. They were astonished to find that it was possible to stay sober for years. I know I was. That's not to say there is not an element of ego involved in displaying the DOS - we are, after all, human, but the primary reason is to give newbies a reason for trying. Sorry you have a problem with that. Best, 6/15/86

Patrick

- > I used to dislike revealing my sobriety date but my sponsor kept telling me that it was important to let newcomers know that staying sober is possible. So, itrw [in the real world], whenever it seems appropriate I willingly let my time be known. As for the "status" & "ego burst"... it's all just one day at a time and after 10 years I am still **vigilant** as I have witnessed many long term members pick up again... humility is the cornerstone of spirituality IMHO. As a newcomer it is important to stick with the winners but I find that as long as I keep an open mind I can find help staying sober from anyone, whether they have one day or a quarter century (like my sponser). BTW Nathan, I missed your date on your post :-)
Peace, 7/12/89 Not even one one day at a time.

Ron

- > Just curious... **Why** do you believe that? Jswondern

Sean

- > I'll tell you what...
If you don't think time matters, then what I suggest is you get some, and then lose it. You'll change your mind in a hurry. Not

only that, but I seem to feel differently about people who have 10 years of sobriety telling me something about living sober than I do about someone with 6 months. Experience counts here, as well as in the rest of life. I learn from other's examples and their passing on what they have learned, and you can't be an example of what you don't have. When someone tells me how long they have been sober, I know if they know what they are talking about, or if they are blowing smoke up my ass. How's that?

> Naw, don't you know what frightens sheep the most????? The sound of a zipper (S

Tammy

> I didn't know that they ever *didn't* laugh!!! Their faces look "built" for laughter, IMO. That must've been great for the little one's ego!!!

> RrroooOOOAAAAaaariinggg with laughter right now!!!!!! Thanks Evan!

> OK....lemme get my dawg.....now there's a guy who *really* loves to round up sheep (and squirrels and cats and.....)

> Of course Greg when we put our D O B or our names under what we wrote what does that tell us, In my case its ahem its just so you can tell who what and if ' I am'. That and individuality yep that's it, I'm a vain individual.

> Cheerio and godbless, sometime in the 40's.

APPENDIX 7-C

Thread: *Sober but Miserable*

Contributions by individual posters in alphabetical order:

Basil

- > Happy Anniversary Miles :)
Grace and Peace 10/31/88

Berrie

- > Congratulations, Miles.

Bertina

- > Well, you can sit there and keep watching the waves until the tsunami arrives. You could start moving your gear, a little at a time, further inland. You could go back to sleep. Farther down the thread, you replied to someone who asked if you've been turning off the computer, getting exercise, eating right-you said yes. If this feeling hangs in there for more than two weeks to the point you can't act despite it, you could go see your doctor. You could go to the local Unemployment Security office and look around for someone who looks more miserable than you, strike up a conversation. Maybe undertake the job search together. Oh wait-that reminds me of another recovery program..Best to you. 5/25/88

Dana

- > I have a friend who was troubled with depression (which I know nothing about). After he was sober for a couple of years he quit smoking. In short order he lost his job, new wife, and fell into a deep pit and had to be hospitalized. All this, in my opinion, precipitated by nicotine withdrawal. As I said, this is only anecdotal, but made me a believer in the power of the aboriginal gift to western civilization - we been trying to get even ever since. Regards
- > Way to go, Daniel. Great time to quit smoking. I always thought of smoking as a safety net on drinking. Gave myself permission to smoke before picking up a drink. Not that I suggest it for you. May be closer to the drinkie than I could believe since have taken up cigars a couple of times a week. I remember getting off the butts in '84. After the real bad days were past, there came a day when the monkey jumped back -oh my god-after two weeks -bad as the first day- good news was it lasted only 10 minutes not all day. Hang in there. Get some extra help with any of the really big things. Regards

Daniel

- > Can't get myself to work. Deepening financial crisis. All I wanna do is watch the waves and sleep. Any suggestions?
- > Getting ready for nine.
- > Been doin' all that. Just mentioning it here helps. Thanks
- > Brilliant minds think alike. Understanding is half the battle for me. When I feel shitty and can't figure out why it gets worse. Thanks for helping me clear it up.
- > Marilyn, You're such a sweetheart. Too good to be true.
- > Love you too. Thanks Daniel
- > Valuable insights. Thanks
- > I too have some experience with endogenous depression. This isn't one of those. I think it's a combination of the changes I am going through (Mental, emotional and physical. Did I mention spiritual) all at once. It's a bit much. I really dug deep on the fourth step. To the point of using regression to make sure it all came out. I am detoxing from tobacco and changing career. I could go on. It's great to know that there are sympathetic ears here, people who have been through it and are genuinely supportive. Sometimes it makes the difference whether I have gone forward or backward when the day is over. After my initial post I succeeded in getting quite a bit done. Looks like it's going to be a productive day. Thanks
- > A week ago I would have agreed intellectually. Now I am in agreement on an emotional basis as well. What a sonofabitch!!! Yesterday I couldn't take a breath without pain, excruciating pain. I am NOT going to go through that again EVER. If the time comes I'll check into a detox ward.
- > You sure do know how to cheer a guy up. Hopefully I can reciprocate one day. Daniel in better now mode.
- > Now how can you not love this kind of advice.....Harris you are the BEST
- > Thanks Kirk.
In addition to everything else that's going on my financial status will have me watching waves from the beach rather than from my living room if I don't come up with about five grand in the next week. That is the reason for the pressure. Trying to find balance. Pressure myself into fixing all these problems or relax into homelessness. I know that it will all work out but it would sure be nice to have some idea how. Grateful
- > Doing it. Saving money on booze and cigarettes. Now to collect some of the 150k that is outstanding.
- > Hi gang
Yeah. Now that my head is a little clearer - many of the symptoms are consistent with opiate withdrawal. I have seen people go through opiate withdrawal while detoxing from something they are sensitive/allergic/addicted to. I have explained the mechanism to others, how we elaborate endogenous morphine aka endorphine in response to an allergen and end up dependent on our own

endorphins. In my case it seems I am far more addicted to tobacco than I ever imagined. It is really kicking my ass. Wish I had anticipated it. Oh well. I guess it's good to know what others go through. Booze was easy compared to this! Funny thing is, six months ago I woulda said "screw it" and had a cigarette. This time my thought process is the opposite. I have put too much effort into myself, come too far, had far too much help from above to throw it away. Who woulda thunk it. Opiate withdrawal from cigarettes. Benefits of sobriety. I get to live the scene that they left out of "The insider". I am overcome with gratitude at the quality of the support here. The best things in life really are free. Godbless

> Damn. This stuff is publishable! 'Good stuff I learned in the NewsGroup'. Thanks!

Dylan

> Stick around, reality will eventually catch up to you.
> Where can you cut costs?

Eddie

> When I started on recovery road, it was a new and great joy to experience the sanity of sobriety. I would get comfortably settled in the feeling of being sane, then discover I had made another insane judgement. Always in the back of my mind was the advice I still consider impeccable, "When you're hurtin, work the steps." I have followed that advice. After a few of those errors of judgement habitually smashed my comfort zone, it became apparent to all but me that I had mistaken sane for Saintly. As my goals became more aligned with progress, rather than perfection, the wider my comfort zone became. Then, I started to enjoy the journey, rather than fantasise I was at the destination.

Farlee

> Hi Daniel,
I guess my ISP's new USENET server is still catching up with the message flow. This thread just downloaded for me and looks like that before I could read your article you had already moved on through most of the sticky parts. I'm not complaining. Goodness no. I think it's really cool that you're handling the common difficulties of early, new-found sobriety so well, on your own. Frankly, your state of mind, body, and spirit (MBS), as you've expressed it to have so recently been, is pretty much the condition I was in just before I got my last DWI and was 'guided' toward my first experiences with the fellowship and suggestions of A.A., by my first (in hindsight) higher power(s). Just add my abuse of alcohol to your description and it'll pretty well serve to describe my state of MBS, at that time and for some time after that. I really have nothing 'new' to add to the goodies that folks posted. Because it was helpful to me in my own early sobriety and may be helpful to you, Daniel, and others, I would like to emphasize the emphasis Lara put on her exercise suggestion and

maybe also emphasize a few other things folks put out 'here' for all to see, so I will. Maybe. I'll try to do that, anyway. I bought a bicycle so that I wouldn't have to entirely depend on others for my transportation needs. As one thing so often leads to another thing, it wasn't long before I was using my bicycle, for getting strenuous aerobic exercise, in order to get more of the benefits I had observed myself to be getting from merely using my bicycle for transportation. I'm going to try and run off an list of some of the personal benefits I directly attribute to my strenuous exercise while undergoing withdrawal symptoms, from my long-term and continuous abuse of alcohol. That list includes but isn't limited to things like helping to clear muddled thinking processes, to ease the aches/pains in my joints that I experienced during alcohol withdrawal, to hite... hith... damn!...htihen... ahk!... highten my sense of well-being, to increase my energy/endurance level, to learn how to breath properly... ha! - that's a *good* one... to get to the meeting-before-the-meeting on time... LOL! - lot's of goodies to be experienced by doing that... to learn better time planning, so I could fit more into the day... blah blah blah Well, darn. For time and brevities sake, I guess I'll let it go at this point, and not try to elaborate on any other suggestions folks offered. Suffice it to say that many of the suggestions and observations which folks wrote/posted are confirmed to have been applicable and useful to do, in helping with modifying the state of my MBS, in early sobriety. Thanks for your article, Daniel. You helped to get the ball rolling on a topic that's relevant to readily observable phenomenon which lots of folks experience, in the early stages of not using alcohol. Oh, one more thing, Daniel; the pointer about getting an doctor's advice and guidance is a very 'good' one. I haven't picked up on what kind of exercise you are doing or how strenuous it may be. I had been living an (euphemistically speaking) send... sedintary... <grunt> sedentary life and so I visited with a doctor, to get some kind of assurance that my heart wouldn't explode when I stepped up the level of my exercise program. Like someone pointed out, if some of those conditions persist it's permissible... ha!... for an A.A. member to seek 'outside' help with resolving 'problems.' For example, the financial advisor I've most often consulted with also happens to be my father, but there are lots of alternative to that. Sometimes we have trouble detaching ourselves from the seemingly automatic father-knows-best vs. contrarian-son thing, but we eventually work through that noise and get to the beneficial consultant/consultee bit. I neither grok nor accept the notion that some folks have attempted to project upon me... that the program of recovery of A.A. contains all the solutions to all the problems that I ever had/will have. YMMV. Cheers,)

Giles

- > No suggestions just a personal observation: I've been treating chronic recurring depression almost as long as I tried to get sober. Sober going on 3 yrs. now and still taking medication for the depression. I get along OK when I take the med. but when I

stop taking it for a few months I get to where I can't even get out of my chair to take out the garbage (it's just too complicated!) I'm content with taking the anti-depressant for the rest of my life if necessary. The Big Book says there are doctors and psychiatrists out there and to make use of them. I don't have any idea whether this might apply to you or not since I'm neither a doctor nor a psychiatrist, just a recovering old drunk who uses this as a recovery tool for himself.

Greg

- > I started to write something. But you know, I finally learned how to be a good parent, now that my children are grown. A lot of the problems they 'brought' to me or I 'heard' would have been better handled by me with a little time, patience, and not really giving any advice. I read your lament and immediately a 'solution' came to mind, and then I decided to wait...and sure enough, you're better.....and seemed to have concluded what I would have said, 'life goes up and down and back and forth' That's quite an adjustment coming from life on such an 'even' keel.....drunk most of the time..

Greta

- > Well- yeah. I would suggest that basic food, exercise, sleep. etc. are a more likely place to look before one begins obsessing over whether they are "working the steps" properly.

Harris

- > Damn, Daniel.. It's obvious to me. If God gives you waves.. go surfin'!!!!

Janet

- > Major ditto what Miz Lara said, Daniel. Booze can mask a lot of "other stuff" and if you've been feeling this way for more than a week, please see somebody who might have a clue about whassup with you. If it just seems like a case o' the blahs and isn't cyclical, could be that SOBER is setting in on you --- Son Of a Bitch, Everything's Real. Then I'd say refer back to Lara's advice, "don' drink and go to meetings" and take some small steps to finding work/going back to work. A good ol' fashioned healthy routine can do wonders. Oh, and keep talking about it...sometimes that's enough to get my engine started again.

Jerry

- > The whole idea of being sober is being happy. You should read the big book. All the answers are in there. Try some meetings and twelve step programs. It works wonderful for me.

Joshua

- > Good for you. I had hit a pretty rocky "bottom" so a lot of "the worst" had already happened: financially and situationally. Weirdest thing was that even though it was pretty materially

devastating, as well as powerfully ego-deflating, there was this sweet sense of "relief." So I worked on finding a practical way to do steps 2 and 11 that had a lot to do with the difference in my "spiritual condition." Lara's suggestions were great, coupled with Nancy's about the ongoing service element. IME, this has been a combo that got me through some spells that at the outset I just couldn't comprehend how I was going to continue any further. Many of us know very closely how that feels. I don't know if that helps you, but it sure has helped me.

Kurt

- > Gee, Daniel, after reading what you're up to, I'm feeling a bit wornout myself. Why is it that we expect so bloody much out of ourselves? How come you can tell me - and mean it - to slow down, relax, quit taking things so seriously - but you can't see it for yourself? This AA thing isn't a marathon, Daniel. The one thing time sober has given me is a perspective on this stuff - I don't have to do it all and I don't have to do it all now. Easy does it - breathe in...breathe out...just be.
- > I hear ya, Daniel. I do know that you can come through this, regardless of the financial outcome, and go on to bigger and better things. In retrospect, many of my "losses" have signaled new beginnings. Hugs,

Lara

- > How 'bout - turn off the computer. Go outside. Get some exercise. Eat a balanced diet. Take your vitamins. Work a bit whether you want to or not. Hit a few meetings. Get some more exercise. If you still feel lethargic after a few days. See your family doctor. Helpfully

Leonard

- > Sounds very similar to my experience with quitting drinking. Within two years of getting off the sauce my marriage was in trouble, my job went in the crapper, and I had picked up another addiction.
- > I think someone has a resentment. Time for a Step 10, sweetie. Cheers,
- > Manly men have been known to become addicted to aerobic exercise. They don't think they are addicted, but their wives easily cut through the web of denial. That's what happened to me. I would promise my wife I would only go for a 10K run, and come back three hours later after 25. Or I would promise I would only run at lunchtime, but sneak out after work or on weekends to get my fix. It caused serious damage to my home life. Cheers

Marilyn

- > Surrender to your Higher Power, don't pick up, go to a meeting and read your BB. Sounds easy, but what's easy for me, might not be so easy for you. I know it's hard, especially when finances are

involved. (I've been there, done that episode in life already) But if you hang in there, eventually, you'll reap the blessings entitled to 'ya! I've got you in my prayers sweetheart. I pray that things will turn around just enough to give you a glimpse of bright light instead of the darkness you seem to be surrounded with at the moment. Remember, only one moment at a time. That's all it takes. That's all we have. Hang in there, and keep posting. Cyber Hugs, 5/24/99

- > Sorry to be 3 days late on this. There's simply no excuse for it. ;-) but, in any case....
 {{{CONGRATS MILES ON 12 YEARS!}}} 5/24/99

Miles

- > Thank you Daniel for reminding me just exactly how it was for me when i got sober (12 years ago today) Trust me when I tell you that your fellings of misery wll pass. Above all do not drink, and you will recover.....

Mira

- > What's the solution to your deepening financial crisis? Go to work, one foot in front of the other..the important thing is that you try. If all you want to do is watch waves and sleep.. Make a new wants and needs list... Maybe, one day, the things you need will become the things you want. Dont forget to put "love" on both lists.

Nancy

- > So are you blind yet? Just curious.
- > Ok, I'll do it. I was wrong to take a pot shot atcha. I just couldn't imagine what other addiction a manly man would fall prey too.
- > Watch the waves, sleep, go to meetings and most of all do service no matter how menial but regular and often. This will pass. You will be surprised how that will work. That is a promise.
- > Oh, I getcha, that is too bad that running had to be affected by that addictive disorder. I run but I have to make myself do it and I only run 3 - 3.5 miles a day.

Ronda

- > dear dan,
 Have an assessment anyway! Depression is another of those cunning, and baffling things! There is a HUGE problem! Nicotine was a tougher drug for me to ditch than any of my addictions! I hope that you can continue to have "productive days", one foot in front of the other.....if you have the feeling that you are walking with cement boots on, see someone about it! (and i DON'T mean another 4th step)

Thornton

- > What step are you working? Is it time to move on to the next one, or time to back up and see what you missed in the one before? (but Lara's suggestions sound good too.)
- > Oh. Why do I think the financial state of affairs has something to do with it? Ouch. And even if I'm dead wrong I'll defer to others on the 9th step -- the discrete ones that even made it past my 8th step were pretty easy for me (the overall amending of my ways and thoughts is a different matter...)

Todd

- > How are you Jerry, btw, and welcome, if I didn't meet you before, pull up a chair, leave your horse at the rail, unsling your 6 shooters and take out you baccy, this is gonna be a long night. (guess who was watching the Duke tonite) Cheerio and Godbless
- > Ditto Thornton and Lara.
Daniel, I don't know, but Step 8 is where I 'go' a fair amount of time. Maybe talk about yourself in the third person, as in tell someone about this guy, who gaave you permission to speak about him, and then go on to relate to another, the failings and shortcomings, the hurts and the harms he befell on others, and about how he made amends and made changes and how that 'person' is today. I constantly have to 'be reminded' that I'm just a sick s'o'b trying to get well - not a bad immoral pervert, trying to appear holy. I do remember at some stages I just couldn't 'hold' all this new information about 'me', about living, about the future, about the recent past and still trying to deal with this information. In short, step 8 is just about coming to the time when you've put in the big hard work, and are getting ready for these promises, which you will find are mostly already in place, just not too 'evident'. Hang in there, fwiw, its where you are and there's no measure of where you should be. If I can explain an analogy to you : My life's a jigsaw of X pieces. Before I saw a piece of the puzzle now and again. Never two or more pieces at the same time. Jean would tell you that a good counselor or even a good sponsor, might put two or more pieces together and then something recognisable may form. But today all the pieces are there on the same table, so it 'should be easier' to fit the pieces where they should be, even if by trial and error. You're able to write about this so even that has more likely helped you. No quick fixes for me though, ;-(but I do feel more 'alive' some days. Cheerio and godbless.
- > True Jerry, and I forgot to mention to Daniel, if you read immediately after H I W, (64, I think) it says something to the tune of, having become convinced, you are now ready for step 3. Think about the next paragraphs, they actually, to Todd, are the greatest eye-opener of the whole width of the programme. Just my tuppence worth.

APPENDIX 8-A

Heather A. Kitchin
Department of Sociology
Acadia University
Wolfville, Nova Scotia B0P 1X0
February 19, 2001

Alcoholics Anonymous
P.O. Box 459, Grand Central Station
New York, New York 10163
ATT: Darlene Smith

Dear Ms. Smith,

As instructed during our telephone conversation of February 15, 2001, I submit this letter of request for permission to reproduce a series of Appendices for my Ph.D. dissertation—the Twelve Steps and Twelve Traditions of Alcoholics Anonymous, 44 Questions, Twelve Questions, Questions to Teenagers, and lines 8-14, page 65, in Chapter Five of the AA Big Book.

I respectfully submit this request as a long-standing member of Alcoholics Anonymous with thirteen years of continuous sobriety. My dissertation examines the authoritative reach of Alcoholics Anonymous and a variety of power relations within AA discourse and membership.

I will require permission to reprint by the end of March 2001. Should you require further information, please feel free to contact me by phone <902-585-1210> or by email <heather.kitchin@acadiau.ca>.

I look forward to your reply.

Sincerely,

Heather A. Kitchin

APPENDIX PR-1

Women for Sobriety, Inc.
P.O. Box 618
Quakertown, PA 18951-0618
Voice: 215-536-8026
Fax: 215-538-9026
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Web: www.womenforsobriety.org

Women for Sobriety, Inc.

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Contract with Women for Sobriety, Inc.

Rebecca M. Fenner, Director
WFS Board Member

Date: Feb. 14, 2001

Contract Agreed to by:

(signature)

Date: Feb. 22, 2001

Contract Agreement with: Heather A. Kitchen
ACADIA University
Department of Sociology
Wolfville, Nova Scotia BOP 1X0
CANADA

APPENDIX PR-2

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March 12, 2001

Heather Kitchin
Department of Sociology
Acadia University
Wolfville, Nova Scotia, Canada B0P 1X0

Dear Ms. Kitchin:

Thank you your e-mail in which provided me with additional information regarding your request to reprint A.A. material for use in your dissertation.

A.A. does not object to your reprinting its material provided that you include the following attribution/disclaimer in your publication:

The excerpt from page 65, in the book, *Alcoholics Anonymous* and the Twelve Steps and Twelve Traditions of Alcoholics Anonymous and the material excerpted from the pamphlet "44 Questions" and "A Message to Teenagers..." are reprinted with permission of Alcoholics Anonymous World Services, Inc. (A.A.W.S.). Permission to use this material does not mean that A.A.W.S. has reviewed or approved the contents of this publication, or that A.A.W.S. necessarily agrees with the views expressed herein. A.A. is a program of recovery from alcoholism only – use of this material in connection with programs and activities which are patterned after A.A., but which address other problems or concerns, or in any other non-A.A. context, does not imply otherwise.

If you are in agreement with the above, we have no objection to your reprinting the questions in the pamphlets "44 Questions" and "A Message to Teenagers..." or reprinting the Twelve Steps and the Twelve Traditions and a brief excerpt from the text, *Alcoholics Anonymous*. Thank you in advance for your anticipated cooperation.

Sincerely yours,

A handwritten signature in dark ink, appearing to read 'Darlene G. Smith'.

Darlene G. Smith
Services Assistant
dgs

APPENDIX PR-3

Heather A. Kitchin
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Dear Ms Kitchin,

'Jellenick Curve', *British Journal of Addiction*, 54 (1957), p. 140.

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