telling our stories: narratives for recovery in Alcoholics Anonymous

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the article, and the “co-author”

Dr. Ernest "Ernie" Kurtz
1935 – 2015
books by Dr. Ernie Kurtz

NOT-GOD: A History of Misunderstanding

The Spirituality of Imperfection

EXPERIENCING SPIRITUALITY

to Dawn Farm, and Jess

THANK YOU!
"Tell me a story!"

A natural impulse to narrate

- **Telling stories** about past events seems to be a **universal human activity**, and one of the first forms of discourse that we learn as children (Nelson, 1989).

- It has been said that **humans have a “natural...impulse to narrate”** (White, 1980).

- The **telling of stories**, or narratives, **helps us to organize and make sense of our lives**. This is **particularly true** when coming to terms with **difficult times, or transitions** (Riessman, 1993).
influenced by social contexts

- In addition, life stories are influenced by the social contexts in which they are told, and these play a significant role in the formation of personal identities (Rosenwald & Ochberg, 1992).

- Finally, it is thought that the stories we tell about ourselves can actually shape and change future behaviors, potentially altering who we are, and who we will become.

the telling of stories

- From its beginnings in 1935, AA has been rooted in “the telling and re-telling of stories” (Kurtz, 1979), e.g., Bill W. and Dr. Bob.

- In Not God: A History of Alcoholics Anonymous, Kurtz (1979) wrote, “what made the program work was the telling of their stories by now sober alcoholics.”

- Since the publication of the first edition (1939), more than half of the text of Alcoholics Anonymous, more commonly referred to as “the Big Book,” been made up of personal stories.
personal stories: a narrative analysis

- A few authors have written extensively about the importance of storytelling in AA, mostly as an oral (spoken) tradition.
- For this study, we examined 24 written personal stories as they appeared for the first time in the 4th edition of Alcoholics Anonymous (AAWS, 2001), more commonly referred to as the “Big Book.”
- Using qualitative research methods derived from narrative analysis, we proposed a normative model for personal stories of alcoholism and recovery in AA, focusing on structure, pivotal points or stages in the storyline, and thematic content.

narrative analysis

“Narrative analysis takes as its object of investigation the story itself... The methodological approach examines the informant's story and analyzes how it is put together, the linguistic and cultural resources it draws on, and how it persuades a listener of authenticity. Analysis in narrative studies opens up the forms of telling about experience, not simply the content to which language refers” (Riessman, 1993).
In 1993, Riessman stated, “The precise definition of personal narrative is a subject of debate...For now it refers to talk organized around consequential events.

1. A teller... takes
2. a listener into
3. a past time or ‘world’

and recapitulates what happened then to make a point, often a moral one...Respondents narrativize particular experiences in their lives, often where there has been a breach between ideal and real, self and society.”

The boundaries of personal narratives have since been expanded greatly, and now encompass a broad range of genre (Ochs & Capps, 1996), including written accounts.
data set: 24 personal stories

- Of the 42 personal stories printed in this edition, 24 (57%) were "new."
- Considerable diversity in terms of age, race or ethnicity, gender, sexual orientation, socio-economic status.
- At the time of publication, worldwide membership in AA was estimated at 2 million or more, with over 100,000 groups in 150 different countries.

"prototypic AA story"

- This study builds upon and expands the work of previous authors (e.g., Cain, Humphreys, Jensen, O'Reilley)
- We do subscribe to Cain's (1991) assertion that "over time, the individual learns to tell his [or her] drinking history according to the AA structure, and as the AA identity is internalized the life story narrated comes to resemble the prototypic AA story more and more closely."
- Also referred to as a "community narrative" (Mankowski & Rappaport, 2000), and "master narrative" (O'Reilley, 1997).
narratives are transformed, and transformative, over time

Narratives of past events change over time to better align themselves with personal and social identities, as well as community or master narratives. At the same time, the narrative also changes to increase his or her concordance with the values, ideals, expectations and behaviors associated with the prevailing narrative (Strobb & Kurtz, 2012).

proposed model for personal stories of recovery in AA

- depicts a simplified, normative, idealized, and prescriptive story line for alcoholism and recovery in the context of Alcoholics Anonymous
- draws upon:
  1. clinical experience in the field of addictions
  2. previous exposure to AA literature and speakers
  3. a subset of personal stories in the 4th edition of Alcoholics Anonymous
- identifies and describes five pivotal points or stages in the story line, including thematic content
Model for Personal Stories of Recovery in AA

1. First / Early Drinking
2. Regression
3. Hitting Bottom
4. Progress in the Program
5. Stability in Sobriety

Structural components of the narrative model

- In his treatise, On Poetics, Aristotle described a whole story as “that which has a beginning, a middle, and end.”
- AA stories follow a similar format. In Chapter 5 of “The Big Book,” entitled How it Works, it states, “Our stories disclose in a general way what we used to be like, what happened, and what we are like now.”
vertical and horizontal axes

- Following Gergen and Gergen (1983/1997) and their treatment of temporal forms in "narratives of the self," we avoided assigning absolute, objective values to either axis on the graph.

- Instead, the **y** axis reflects a subjective evaluative function relative to an individualized baseline. Similarly, the **x** axis, denoting time, is neither fixed nor anchored to an external, quantified measure (age of onset, compression or progression of symptoms).

in relation to time

- While **patterns of alcoholism and recovery** can be expected to share certain essential and sequential features, this progression can vary in relation to time.

- In this way, the model can accommodate differences in age of onset (e.g., between adolescents and older adults), and the compression or prolongation of symptoms (e.g., between women and men).

- Keep in mind that a personal narrative necessarily involves telling a story about the past, from the perspective of the present.
### basic types of narratives

- Gergen and Gergen (1997) described **three basic options for types and directions of narratives** in evaluative space:
  - **stable** (horizontal)
  - **regressive** (downward)
  - **progressive** (upward)
- These basic types of story lines can be combined to create “other more complex variants.”

### various poetic forms

- **Tragedy**: a serious drama typically describing a conflict between the protagonist and a superior force (as destiny) and having a sorrowful or disastrous conclusion that elicits pity or terror” (Merriam-Webster, 2004), depicted as a regressive narrative
- **Comedy**: a medieval narrative that ends happily, or a progressive narrative
- **Tragicomedy**: a drama or situation blending tragic and comic elements, also referred to as melodrama, marked first by the decline of a regressive narrative, followed by the ascent of a progressive narrative, creating a V-shaped structure
pivotal points

Our model reveals a **V-shaped structure** at **two main points:**

1. first, in an inverted form during **"first or early drinking,"** marking a change in direction from a progressive to a regressive narrative (tragedy),

2. and again upon **"hitting bottom,“ or reaching a personal nadir, at which point an ascent is initiated (comedy)

**Aristotle** referred to this type of **“change...from one state of things...to its opposite,”** as **peripety**, now more commonly called **peripeteia**. Defined as **“a sudden or unexpected reversal of circumstances** or situation especially in a literary work” (Merriam-Webster, 2004), this convention becomes, both literally and figuratively, **the “point” of the story.**

1. **first or early drinking**

- **Many** of these story-tellers approached life, and alcohol, as if **from a deficit position:** reportedly feeling **“different,”** indicating that they **“didn’t fit in.”** Others described feelings of **“fear,”** of being an **“outcast,”** or an **“outsider.”**

- Each of these 24 personal stories **(100%) mentioned first or early drinking,** and all but one **(96%) attached a positive subjective evaluation** to the event, even though, in a number of cases, the narrator reported blacking out, throwing up, or being hung-over.

- In our model, in order to qualify as a positive subjective experience, the effects of alcohol needed to:
  - elevate a previously negative state
  - induce a predominately positive state
  - or both
a watershed event

- The discovery of alcohol would prove to be a watershed event: “drinking released me from suffocating fear,” “began to make the pain go away.” One woman described her relationship to alcohol as “a love affair.” Some became complete, or whole.

- For others, drinking instilled a sense of power or glory: alcohol produced a very special effect in me. I was transformed.” Yet another considered alcohol a “magic potion... a discovery... a revelation!” “I was transformed.”

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2. alcoholic regression

- In each case, however, this positive subjective evaluation eventually gave way to a decline, and a regressive (downward) narrative, associated with the symptoms and consequences of active alcoholism.

- Tragedy involves a dramatic reversal, from progression to regression.

- The predominate theme in the midst of alcohol decline was loss: loss of control over drinking, time, opportunities, jobs, money, careers, friendships, love, marriages, families, homes, reputations, respect, self-respect, physical, emotional and spiritual health, freedom, hope, and faith.

- This downward slide—or plunge—was often precipitated, compounded and perpetuated by “denial,” that would only be recognized later.

- Stages 1 (first or early drinking) and 2 (alcoholic regression) coincided most closely with the portion of the AA storyline that describes “what we used to be like.”
3. hitting bottom

- For many in AA, the process of “hitting bottom...the sense of really 'being licked' and hopeless” (Kurtz, 1991), is considered a critical first step toward sobriety.

- Bill Wilson, one of the co-founders of Alcoholics Anonymous, suggested that “few people will sincerely try to practice the AA program unless they have hit bottom” (AAWS, 1952).

a working definition

- For our present purposes, we defined hitting bottom as “…a qualitatively distinct and discrete subjective experience with affective, cognitive, behavioral, and often spiritual components, in which an individual suddenly realizes, and then acts upon, a perceived need for profound personal change.”

- Again, the proposed model strives to accommodate variability across individuals through the use of relative values.
themes: hitting bottom

- The **regressive portion of an AA narrative** assumes the same basic trajectory as Dante's Inferno (from *Divine Comedy*, 1315/1952). Many who have endured the pain and suffering of alcoholism have likened it to "hell."
- Nearly half of the personal stories (11/24 or 46%) **described suicidal ideations, plans or attempts, or other thoughts of death.**
- Reflecting the lexicon of AA, **several individuals used the specific term, “bottom,”** in describing their plight.

then, something happened

- At this point in the storyline, something fairly remarkable consistently occurred.
- With acknowledgement of hopelessness, previous defenses crumbled, the alcoholic surrendered, and new possibilities emerged.
- Compare to
  - Baumeister (1994), "crystallization of discontent"
  - James (1902) "conversion experiences"
  - Miller & C'de Baca (2001), "quantum change"
4. progress in the AA program

- The progressive stage of the AA narrative pertained to practical aspects and activities in the program
  - attending meetings
  - getting a sponsor
  - working the steps

- Common and recurrent themes
  - newfound sense of belonging
  - struggles during early recovery
  - importance of remaining sober
  - relationships improved

spirituality, gratitude

- The vast majority of these personal stories (22/24, 92%) made some specific, positive reference to God or a higher power.

- This was coupled with a sense of grace and gratitude, viewing sobriety as a gift, a blessing, or a miracle.

- Generally, Stages 3 (hitting bottom) and 4 (progress in the AA program) describe “what happened” in a personal story of alcoholism and recovery in AA.
5. stable sobriety

- In relation to the general AA story line, this stage corresponds to the phrase, “what we are like now.” This is often the shortest part of a personal story although, chronologically, it may cover many years.

- Stability in sobriety is attained when a progressive narrative surpasses an individually determined evaluative baseline—as well as the period of first or early drinking—and has been maintained for some time thereafter.

- Typically, it represents a compressed picture of the benefits obtained by practicing a spiritual program of recovery in Alcoholics Anonymous.

- An emphasis is placed on “staying sober.” Dramatic tension is retained, because the true “end of the story” has not yet been written.

themes: stable sobriety

- **Change**: Strong contrast between life then and now. “My life has completely changed.” “Everything has turned around.” “Today I am doing things that I never dreamed possible.”

- **Relationships**: Restoration or creation of positive relationships across multiple domains, including self, God or higher power, family, friends, and others, both in and out of the fellowship.

- **Working a Program of Recovery**: Going to meetings, doing service work, having and being a sponsor, working with others. “I was told that to keep it we have to give it away.”
**strengths and limitations**

**Strengths**
- use of a single source and type of data
- The authors enjoyed considerable familiarity with the culture and history of AA, consistent with the qualitative research principle of immersion

**Clinical implications**
- Provides a conceptual framework
- Normalizes certain behaviors
- Helps to "locate" patients in terms of placement and progress

**Limitations**
- The potential for several layers of editing and self-selection bias, calling into question general representativeness of the sample
- Written narratives are inherently subject to greater self-editing
- Authors likely knew or imagined that they might be addressing a more public audience than their immediate AA cohort
- Those selecting stories for publication likely did so with an eye toward prototypical and, perhaps, dramatic examples
- Personal stories examined for this study were limited to the United States

**Physical constraints of the model**
- As a simple, idealized schematic, the model cannot hope, and does not seek to capture the subtleties of each and every personal story
- In reality, trajectories of regressive, progressive, even stable narratives are more seismic than linear, as life stories are constructed of many shorter narratives, each with its own peaks and valleys.

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**concept of the monomyth**

In many respects, a "journey" of recovery resembles other epic tales. The similarities between Campbell's concept of the "monomyth" (1956, cited in Gergen & Gergen, 1997), and personal stories of recovery, are striking.

"The monomyth...concerns the hero who has been able to overcome personal and historical limitations to reach a transcendent understanding of the human condition" (Gergen & Gergen, 1997).

Moreover, structural and directional elements of the monomyth are wholly consistent with the model that has been outlined here in "Narratives for Recovery in Alcoholics Anonymous."

"...we see that the monomyth carries a form similar to that of the comedy-melodrama. That is, negative events (trials, terrors, tribulations) are followed by a positive outcome (enlightenment)" (Gergen & Gergen, 1997).
Model for Personal Stories of Recovery in AA

What we used to be like → What happened → What we are like now

1. First / Early Drinking
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Subjective Evaluation

(Baseline)

Strobbbe & Kurtz, 2012

"Tell me a story!"
questions, answers, discussion