

SARPASHANA SOURCEBOOK

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FORWARD

The use of alcohol is often related with escapism, particularly in the West. This sourcebook will be very helpful for those who abuse alcohol in that way, so I hope that people will study and practice the approach that is outlined here.

We have given the name **Sarpashana** to the group in our community that works with alcoholism. Sarpashana is a Sanskrit word that means “peacock.” In Eastern mythology, the peacock is an animal that can turn poison into medicine. In terms of relating to alcoholism, before the poison can be transmuted, first one has to give it up. At a later, advanced, stage, it is possible that the poison could become medicine.

With blessings,

The Ven. Chögyam Trungpa, Rinpoche
10 June 1985

INTRODUCTION

The name *Sarpashana* (Sar pá sha na), given to the Buddhist Alcohol Study Group (once upon a time known as the Phenomenal World Substance Abuse Group), is Sanskrit and means “poison eater.” The symbol for the Group is the peacock because of an ancient Hindu story about the fact that the peacock derives its brilliant plumage from its consumption of poison. Its ability to transform poison into nourishment gives it both beauty and a proper kind of pride.

The talk contained in this sourcebook entitled “The Essence of the Nyingma Teachings” goes on to explain the symbolism further.

Applied to a Buddhist-oriented educational, counselling, and support network, Sarpashana may be understood to mean that the poison is the disease of alcoholism (or any other addictive tendency). Addiction produces a kind of false pride and we are consumed with ego-arrogance. By consuming our disease, in other words, by recognizing it for what it is, accepting the karma of it, and responding by first educating ourselves; second, taking it personally; and finally, acting on what we now know to be true, we transform ourselves and discover our true nature--symbolized by the magnificent tail of the peacock. Then, with genuine pride in being fearlessly human, at home in the world, we can proclaim the dharma of what we have learned and the dharma of what we have experienced to other sentient beings who suffer in this dark age.

1

*In jungles of poisonous plants strut the peacocks,
Though medicine gardens of beauty lie near.
The masses of peacocks do not find gardens pleasant,
But thrive on the essence of poisonous plants.*

2

*In similar fashion, the brave Bodhisattvas
Remain in the jungle of worldly concern.
No matter how joyful this world's pleasure gardens,
These Brave Ones are never attracted to pleasures,
But thrive in the jungle of suffering and pain.*

3

*We spend our whole life in the search for enjoyment,
Yet tremble with fear at the mere thought of pain;
Thus since we are cowards, we are miserable still.
But the Brave Bodhisattvas accept suffering gladly
And gain from their courage a true lasting joy.*

4

*Now desire is the jungle of poisonous plants here.
Only Brave Ones, like peacocks, can thrive on such fare.
If cowardly beings, like crows, were to try it,
Because they are greedy they might lose their lives.*

5

*How can someone who cherishes self more than others
Take lust and such dangerous poisons for food?
If he tried like a crow to use other delusions,
He would probably forfeit his chance for release.*

6

*And thus Bodhisattvas are likened to peacocks:
They live on delusions - those poisonous plants.
Transforming them into the essence of Practice,
They thrive in the jungle of everyday life.
Whatever is presented they always accept,
While destroying the poison of clinging desire.*

[These are the opening lines from the Wheel of Sharp Weapons: A Mahayana Training of the Mind, a sutra on the nature of karma and the mahamudra, by Dharmaraksita, teacher of Atisha. The work in translation is published by the Library of Tibetan Works and Archives, Dharamsala, India.]

THE PHYSICAL EFFECTS OF ETHYL ALCOHOL

Ethyl alcohol is the type of alcohol that is contained in beer, wines, distilled spirits and liquors, etc. There are varying amounts of ethyl alcohol (hereafter called simply “alcohol”) in each beverage, *but all contain the same type of alcohol.*

Alcohol is absorbed into the bloodstream within 1/2 to 2 hours after being ingested. It is primarily metabolized (burned up) and eliminated through the liver. Alcohol is a depressant drug that acts much like any of the tranquilizers. It is not a stimulant drug. It is classified pharmacologically as a *sedative hypnotic.*

Alcohol affects the tissues of the body in two ways. Directly, it irritates the tissues. Secondly, alcohol sedates the tissues. These effects of alcohol on the tissues are the basis of the medical problems that are a part of alcohol use and abuse. Indirectly, the breakdown products of alcohol also damage the tissues.

The *gastrointestinal tract or digestive system* is primarily affected by the irritant properties of alcohol. Alcohol causes the lining of the esophagus, stomach, and small intestine to become irritated, raw, tender, and painful. There are increased amounts of acid secreted (put out) by the stomach. This increases the irritation of the stomach. The irritation of the esophagus (food pipe) is called *esophagitis*. The irritation and inflammation of the stomach due to alcohol intake is called *alcohol gastritis*. Continued irritation of these parts of the body can cause bleeding. Further irritation can cause ulcers to develop.

Alcohol is quickly delivered to the *liver*, where much work is done for the body. The liver manufactures substances the body needs, and detoxifies (takes the poisons out of) substances we ingest or inhale so that they do not harm our bodies.

Following is a discussion of, first, how alcohol affects the liver itself, and second, how it affects what the liver does.

The first change that occurs in the liver is the build-up of fatty tissue in the liver. This causes it to become enlarged. The fat cells irritate the normal tissues and also interfere with the normal functions of the liver. Symptoms may include fever, liver tenderness and swelling, lack of appetite, jaundice, and a general feeling of tiredness. With abstinence from alcohol, most people will get better, and in time, the liver will repair itself. With repeated attacks of hepatitis, or just general damage, the liver tissue begins to form scar tissue. This is *cirrhosis* of the liver. It is not reversible. Once scar tissue develops, healthy tissue cannot grow again. Cirrhosis definitely interferes with the function of the liver. Factors that help blood to clot are produced in the liver. These, then, cannot be produced in proper amounts, so people with cirrhosis bleed and bruise more easily than is normal. A large amount of blood goes through the liver. When cirrhosis develops, the liver

becomes like a dam and the blood backs up. It builds up primarily in the veins in the lower esophagus. These vessels are under a great deal of pressure. Additionally, there is irritation of those swollen tissues and increased acid secretion from the stomach. The swollen vessels in the esophagus are from the stomach. The swollen vessels in the esophagus are called *esophageal varices*. Rupture and bleeding from these vessels is one of the many possible causes of death in those who abuse alcohol.

Scarring in the liver also interferes with glucose (sugar) production and utilization. Cirrhosis interferes with the protein and albumin production and utilization as well. This is one of the factors contributing to *edema* in the person with liver disease. Edema is a puffy swelling due to a build up of water in the tissues. It occurs primarily in the hands and feet. With cirrhosis, edema also develops in the abdomen. This condition is called *ascites*.

The *pancreas* is an organ that is primarily responsible for the production of amylase, lipase, insulin, and other enzymes. It is often affected by alcohol. Many people who develop *pancreatitis* are heavy drinkers. Pancreatitis is an inflammation of the pancreas. One of the major symptoms is very severe abdominal pain. Repeated episodes of pancreatitis can cause scarring. Scars in the pancreas prohibit normal activity. Secondary diabetes and malabsorption of vitamins and other nutrients can develop due to the loss of the digestive enzymes.

Alcohol affects the *heart* in a variety of ways. Use of alcohol tends to cause damage to the muscles of the heart. There may or may not be changes in the electrocardiogram. There is generally an increase in pulse rate both with drinking alcohol and during withdrawal.

Alcohol is a poison to the *blood system*. There is a combined effect of the alcohol and the malnutrition that generally goes along with alcoholism. Alcohol does damage to the red blood cells, white blood cells, and platelets. Platelets are part of the blood-clot formation system.

Alcohol affects the *nervous system* both centrally (brain and spinal cord) and peripherally (nerves in fingers and arms, feet and legs). In the peripheral system, symptoms can range from numbness and tingling to complete loss of feeling and function. There is much controversy as to whether the damage occurs due to alcohol abuse or the malnutrition that accompanies it. There is damage to brain cells with any amount of alcohol use. With prolonged abuse, there can be permanent, irreversible damage.

Alcohol affects the *genitourinary tract* by its action on the *kidneys*. Sexual dysfunction is a problem with people who abuse alcohol. In males, alcohol may cause testicular atrophy or shrinking. Additionally, there is an increased destruction of the male hormone, testosterone.

GENERAL CLASSIFICATION OF TRADITIONAL ADDICTIVE PATTERNS

1. Alcohol and other drugs
2. Food
3. Gambling
4. Television

For a pattern or relationship to be considered addictive, it must meet the following criteria: 1) tolerance, 2) psychological dependence, 3) physical addiction, and 4) withdrawal symptoms.

PSYCHOACTIVE SUBSTANCE: A chemical which alters how you think and feel.

DEPENDENCE: A psychological state of wanting/needing/craving the substance, situation, relationship, or identity.

ADDICTION: A physiological state of cellular craving--always accompanied by psychological dependence; the body/mind compulsion to secure and maintain habitual patterns.

TOLERANCE: The requiring of more of the substance to achieve the desired effects. After tolerance increases, and then begins to decrease, one may look for physical deterioration, especially in the liver.

CROSS-TOLERANCE: A tolerance for one drug will produce a tolerance for any drug within the same classification, e.g. tolerance for alcohol will produce tolerance for barbiturates, tranquilizers, etc., as these are also depressant drugs.

WITHDRAWAL: The body/mind process of returning to the pre-drug state which, in the case of the depressant drugs, can be fatal if not treated.

DENIAL: Not seeing what is and/or not acting on the insight into what is once it has occurred.

STAGES OF ALCOHOLISM

It is not necessary for all of these things to happen to you, nor is it necessary for them to occur in this particular order. What is important is that if any one of these things has occurred, and particularly if it is continuing or getting worse, and you find that alcohol is so important to you that you continue drinking, despite the knowledge that you are about to receive, that you take a long, honest look at yourself.

An alcoholic is simply any person who, after drinking, cannot accurately predict how much he will drink, when he will stop, or what his behavior will be. He is a person whom alcohol causes to do something he did not want to do, and/or keeps him from doing something he *did* want to do.

In other words, an alcoholic is a person for whom alcohol causes problems in *any* area of his life (physically, emotionally, spiritually, with his family, on the job, with the law, with his finances, with his standing in the community, etc.).

SOCIAL DRINKING

A social drinker encounters little or no problem with alcohol.

EARLY STAGE

But if he is not a social drinker, but is in the early stages of alcoholism, he is apt to notice:

--A lack of trust in others and in life because is beginning to lack trust in himself. Fear begins to take root.

--Gulps drinks.

--Sneaks drinks.

--Blackouts with emotional and mental pain. (Blackout means memory loss, not to be confused with passing out.)

--Hangovers with physical pain.

--Denial.

And each generation, just like each of us, said, “Who *me?* I’m not like that, nor is my family.” And each generation kept right on drinking. But, if a person is in the early stage of alcoholism, and he doesn’t quit drinking completely, he can expect that his alcoholism will progress. Alcoholism is a progressive disease and it can be terminal. The next stage of alcoholism that can be *expected* is:

MIDDLE STAGE

I. LOSS OF CONTROL, AND PAIN, WITH:

- A. Family
- B. Money
- C. Job
- D. Reputation
- E. Health

These become a vicious cycle, and as the pain grows, a fear grows and there begins to be a continuously diminishing self-image with loss of self-respect and self-confidence, and lack of trust in other people grows. As these develop, so does the process of denial.

No one starts drinking, at any age, with the intention of becoming an alcoholic. We are not bad, rotten, or crazy; we are not moral degenerates. We are people who, for a reason science doesn’t fully understand, cannot drink successfully or safely.

II. ALIBIS

- A. “I drink because of the war.”
- B. “I drink because of my husband (or wife).”
- C. “I drink because of my job.”

We find we are always blaming others rather than accepting the responsibility for ourselves. We find *excuses*. Although we find many excuses, there are no *reasons* to drink if we are an alcoholic. To get away from this merry-go-round called denial takes self-honesty, and we need help and support to acquire this.

III. CHRONIC HANGOVER

A. Cold shakes

B. Cold sweats

C. Start drinking in the morning--an “eye opener.” We do this for medicine. We may have to vomit it several times before we can get it down.

IV. WHAT HAPPENS NEXT? This depends on our livelihood.

A. Salesman--not thought of badly. Considered to be “part of his work.”

B. Physician--not acceptable.

C. Minister--not acceptable.

D. Cook--not thought of too badly.

E. Building contractor--not thought of badly.

F. Housewife--not usually thought of, becomes a “hidden” or “invisible” alcoholic. They are at home most of the time, alone, and don’t get detected as quickly. Also, their families tend to hide them because they feel ashamed. The alcoholic housewife usually becomes much sicker.

V. A. We begin to agree with those who say, “You’re no good,” due to guilt, remorse, hurting within, and a more adversely affected self-image. We begin lying more and more to ourselves and say we’ll drink more to “show them.”

B. We try to “change our pattern.” We say, “Get off my back. I’ll change from hard liquor and drink only wine and beer.” This doesn’t work, as wine and beer contain alcohol too. We find ourselves back to being as sick as ever.

C. We change groups, but if we keep drinking, we usually change to more degraded ones. This doesn’t work either.

D. We take “geographical cures,” but we take ourselves and our alcoholism right along with us. As long as we keep drifting, this doesn’t work either.

E. Then we become “antisocial.” This doesn’t mean we do “bad things.” We don’t set fire to buildings. We do build invisible walls around ourselves. We can’t relate to others, or let them relate to us. We can’t *see* things as they really are, or *hear* others when they try to see us. We find ourselves in a prison of our own making--a prison built of

alcohol, where this drug has blocked us from our feelings, from our own selves as we really are, and from life itself.

F. Group therapy and recreational therapy help in this respect. Our tensions start dissolving and we begin to talk about our feelings. We discover that we “belong,” that we are not unique and not alone--there is someone who understands us and cares about us. From this we come to understand, forgive, and accept ourselves. We find that we are better people than we had ever believed. We find we are sensitive and this is an asset. We find we have high standards--so high, in fact, that this is a problem. We find that we are trying to live up to super-human, impossible goals. And we continue to drink.

G. We start looking for medical help. We find doctors with pill prescriptions. Many of us find that we are then saddled with two “monkeys on our backs.” Many of the minor tranquilizers and most sleeping pills are addictive. They are in the same chemical family as the alcohol which has addicted us in the first place. They keep us just as blocked from our feelings; we can’t make any progress.

H. The physical pain and emotional anguish grow. We look for more doctors and more “drying out places.” The pleasure is very small now, if there is any. The pain is very great now because the fear, and lack of trust in ourselves and others is growing at an almost unbearable rate. And yet, drinking has become a way of life. We don’t want to admit that we are alcoholic, so many of us go right on drinking and saying, “I can handle it.” The problems due to alcohol continue to grow.

LAST STAGE

I. A. Benders, bouts--extended periods of drinking beginning early in the morning and going through the evenings. Sometimes, due to alcohol insomnia, it starts again every few hours during the night. It will last from mid-week through the weekend, and sometimes goes on daily and constantly for weeks and even months at a time.

B. Some of us go to bed with a bottle and keep drinking twenty-four hours a day.

C. Sometimes we get admitted into a hospital on a court order because someone wants to save our lives.

D. Some of us are up and out looking for a bottle, and we get arrested for public drunkenness. We become “revolving door” alcoholics--in jail, out, and back in again.

E. Some of us even manage to work in the late stage--work half-days and drink for three or four days, usually.

F. We start protecting our source of supply (sell things or hock things, sell our blood,

write hot checks, prostitution). We go from living to drink to drinking to live.

G. Withdrawal becomes serious. We don't just have blackouts and shakes any more, but we get *delirium tremens* (D.T.s) with visual and/or auditory hallucinations. We may also get the feeling that "something is crawling on our bodies" or we may smell something strange. DTs can include convulsions and death. Twenty percent of untreated DTs result in death. *Ten percent result in death even when treated.*

H. Self-loathing grows. Defensiveness and unreasonable resentments grow. Lack of trust in ourselves and in others becomes rampant. We make enemies that don't exist in order to protect ourselves from contact with other people.

I. Fears are nameless and ever-present. We have found, through long experience, that drinking helps to quiet fears, so we go on drinking, and these things continue to get worse. The basis for these fears, by this time, is that we are going to die before we have really lived.

We are painting a grim picture of alcoholism. It is a grim disease. Alcoholism ranks number three in the U.S. (third only to heart disease and cancer) as a leading cause of death. One out of every ten people in the U.S. who drinks socially *will* become alcoholic.

Alcoholism is a *disease*. It does not mean we are "bad," "weak," or should be "sorry." It does mean we have a disease--for some reason our bodies will not metabolize alcohol. In the beginning there is a "learned behavior," but once alcohol *addiction* has occurred, there is a *physical* side to this disease, as well as the underlying emotional reasons for drinking in the first place. The only safe answer, once this has occurred, is to stop drinking entirely. An addiction is never cured--it can only be arrested through daily abstinence. Then, when you are comfortable with a period of continuous sobriety, go back and deal with the underlying emotional reasons for drinking to the point of abuse in the first place.

COLLAPSE OF THE ALIBI SYSTEM

I. This occurs when we surrender our pride and become willing to admit that alcohol is controlling our lives.

II. What happens next?

A. Alcoholics Anonymous--we start looking honestly at our drinking. We admit we are powerless over alcohol and that our lives have become unmanageable. We attempt to be open-minded about the suggestions we hear and commit ourselves to going to a lot of meetings before we make any rash decisions like, "It's not for me," and quit going. We

become willing to stay sober by not drinking one day at a time.

Or

B. We keep drinking. We might end up on skid row or in a prison. Or we might get brain damage and exist in a state of alcoholic insanity. Or we can die of cirrhosis, DTs, in a car accident or from any of the other complications arising from alcoholism.

C. Perhaps the wisest choice at this point is to enter a hospital for detoxification, education about the nature of our disease, group therapy, and AA. There we will learn to weigh drunken pain against sober pain and how to choose sober pain twenty-four hours at a time. We will learn to cope with the sober pain and go on functioning. And we will learn how to overcome the pain and live comfortably with ourselves and our world. We strongly recommend AA coupled with therapy.

This chart is based on the statistical analysis of the drinking histories of 2,000 male alcoholic addicts and shows the typical sequence in becoming addicted to alcohol. Not all symptoms occur in all cases, and the total time may vary from 7 to 25 years. The average for this group was about 15 years. Thirty women were part of the original study, but their responses were not considered, as they deviated too much from the male response to be included in what Jellinek called “typical.”

The dots in the circle at the left represent men and women who are acquainted with each other and use small amounts of alcoholic beverages. Their use of alcohol is a kind of folkway that carries a small social reward. Most have come from the “normal” population. The drinker suffers from neurotic trends or other personality inadequacies that make alcohol more rewarding to him than to the others, and he may also have an inborn or an acquired liability. In complying with the drinking custom, he experiences considerable relief. So he looks for occasions to drink, and may drink fairly heavily; his drinking is symptomatic of some underlying problem and continues until a new symptom appears--his first blackout.

This marks the beginning of the prodromal phase during which his drinking may still not be conspicuous and is usually limited to evenings and weekends. The crucial phase begins when the individual loses control of his drinking. Now, he can still refrain from *starting to drink, but controlled intake is no longer possible for him*. During the crucial phase, intoxication becomes the rule, but may still be limited to evenings. Solitary drinking begins. The individual becomes more concerned about how his activities will affect his drinking than *visa versa*. In the chronic phase, alcohol dominates his life. There is a decrease in physical tolerance and various psychic and physical symptoms may appear. The individual drinks to control his symptoms, but the drinking produces more symptoms. Rationalizations fail, and the individual may finally admit defeat and seek help. Alternatively, it is understood that alcoholism of this late-phase variety generally results in death.

A THEORY OF BRAIN CHEMISTRY AND ALCOHOLISM

Brain/Mind Bulletin 4/16/84

Why do people abuse alcohol? Can brain chemistry be altered to break this addiction?

People may be driven to drink because of a lack of endorphins in the central nervous system. They may be helped to stop heavy drinking by a recent breakthrough that maintains stable levels of endorphins by inhibiting their breakdown in the brain.

Since finding the naturally occurring opioid peptides, scientists have uncovered many links between alcohol and opiates. When people drink heavily, higher levels of these peptides can be found in the blood. At the same time, beta-endorphin has been found to decrease in the cerebrospinal fluid of alcoholics, revealing a depletion in the central nervous system.

Naloxone, which inhibits the action of opioids, counteracts alcohol effects in animals and human beings. These and other findings have led psychopharmacologist Kenneth Blum of the University of Texas, San Antonio, to propose a new model to explain why people drink too much. "Lower levels of brain endorphin in alcoholics have several possible causes. They may stem from genetic factors, environmental variables, or some combination of the two."

Blum divides alcoholics into three categories with respect to opioid deficiency:

* Type 1 subjects have a desire for alcohol that derives from a genetic deficiency of natural opioids plus stressful environmental conditions, which unmask the deficiency.

* Type 2 alcoholics drink because of stressful environmental conditions, which deplete normal stores of natural opiates.

* Type 3 subjects are those with a combination of stressful conditions and heavy use of alcohol, both of which lead to a reduction in brain opioid levels.

Experimental support for Blum's hypothesis has grown recently. Unpublished studies in Italy have revealed support for Type 1 alcoholism. According to this theory, people born of alcoholic parents should have lower endorphin levels at birth than do others. So when researchers stimulate production of their brain peptides, smaller amounts would be released. On the other hand, when endorphins are stimulated in non-alcoholics, an increase would be apparent.

The Italian investigators tested this theory by using acupuncture to trigger endorphins in people of alcoholic parents. The subjects produced much less compared to people with

no family history of alcoholism or to social drinkers.

Italian researchers also found evidence for Type 3. They measured endorphin levels in the cerebrospinal fluid of 29 alcoholics. The subjects produced three times less endorphin than other people.

At the Max Planck Institute in West Germany, further evidence of Type 3 alcoholism has come to light. In this case, alcohol was seen to act as an opiate, decreasing synthesis of endorphins in the brain.

Compounds known as TIQs are formed as by-products of alcohol when it is broken down in the brain. TIQs bind to neuron receptors normally occupied by opioid peptides. "When the brain sees receptors saturated by TIQs, it stops producing endorphins. It's a Catch-22," Blum said. "The more heavy drinkers drink, the more they need to drink."

Evidence for Type 2: Studies in rats have shown that chronic stress, which increases alcohol consumption when the stress is removed, depletes the opiate enkephalin by 50 percent.

Strains of mice bred to differ in their preference for alcohol also differ in brain levels of enkephalin. Those with a high preference for alcohol have lower levels of enkephalin than strains that avoid alcohol.

So, Blum asked, what intervention would help people maintain normal levels of endorphin, thereby altering heavy drinking patterns?

"Now we can alter the metabolism in people who are genetically deficient or under great stress or long-term drinkers. By inhibiting the enzyme involved in endorphin destruction, we can cut off alcoholics' desire to drink."

Blum has done this successfully in mice bred to drink large quantities of alcohol. "They gained an aversion as strong as those bred to dislike it."

[Kenneth Blum is the author of Abusable drugs, Gardner Press, San Antonio.]

THIRTY QUESTIONS FOR ADULTS

1. Do you require a drink in the morning?
2. Do you prefer (or like) to drink alone?
3. Do you lose time from work due to drinking?
4. Is your drinking harming your family in any way?
5. Do you crave a drink at a definite time daily?
6. Do you get the inner shakes unless you continue drinking?
7. Has drinking made you irritable?
8. Does drinking make you careless of your family's welfare?
9. Have you thought less of your husband or wife since drinking?
10. Has drinking changed your personality?
11. Does drinking cause you bodily complaints?
12. Does drinking cause you to have difficulty in sleeping?
13. Has drinking made you more impulsive?
14. Have you less self-control since drinking?
15. Has your initiative decreased since drinking?
16. Do you drink to obtain social ease?
(In shy, timid, self-conscious individuals)
17. Do you drink for self-encouragement or to relieve marked feelings of inadequacy? (In persons who suffer from feelings of inferiority)
18. Has your ambition decreased since drinking?
19. Has your sexual potency suffered since drinking?

20. Do you show marked dislikes and hatreds since drinking?
21. Has your jealousy, in general, increased since drinking?
22. Do you show marked moodiness as a result of drinking?
23. Has your efficiency decreased since drinking?
24. Are you harder to get along with since drinking?
25. Do you turn to an inferior environment since drinking?
26. Is drinking endangering your health?
27. Is drinking affecting your peace of mind?
28. Is drinking jeopardizing your business?
29. Is drinking clouding your reputation?
30. Have you ever had a complete loss of memory while or after drinking? Blackouts?

1 *YES* answer indicates danger; 2, a high probability;
3, a clear problem.

FIFTEEN QUESTIONS FOR THE FEMALE DRINKER

1. Do you buy liquor at different places so no one will know how much you purchase?
2. Do you hide the empties and dispose of them secretly?
3. Do you plan in advance to “reward” yourself with a little drinking after you’ve worked hard in the house?
4. Are you permissive with your children because you feel guilty about your behavior while drinking?
5. Do you have “blackouts,” periods about which you remember nothing?
6. Do you ever phone the host or hostess of a party the next day and ask if you hurt anyone’s feelings or made a fool of yourself?
7. Do you take an extra drink or two before leaving for a party when you know liquor will be served there?
8. Do you feel wittier and more charming when drinking?
9. Do you feel panicky when faced with nondrinking days, such as a visit to relatives?
10. Do you invent social occasions for drinking, such as inviting friends for lunch, cocktails, or dinner?
11. When others are present, do you avoid reading articles or seeing movies or TV shows about women alcoholics, but read and watch them when no one is around?
12. Do you ever carry liquor in your purse?
13. Do you become defensive when someone mentions your drinking?
14. Do you drink when under pressure or after an argument?
15. Do you drive even though you’ve been drinking, but feel certain you are in complete control of yourself?

EARLY RECOGNITION OF THE "BUD"

Building Up to Drink

First, you must learn the early signs and symptoms of the "BUD." Second, you must learn to have acceptance that you are in a "BUD" situation. Third, you must be willing to take action to alter the situation.

ACTION AGAINST THE "BUD":

1. Talk to someone about the situation.
2. The next best thing is to do something physical in nature, e.g., work in the yard, wash the car, take a walk.
3. What is important is that you do *something*: move, talk, get going.

THOUGHTS THAT CHARACTERIZE THE "BUD" SYNDROME:

1. The thought that you can never drink again.
2. Guilt feelings. You need to drink to ease feelings.
3. Anger.
4. Feelings of inadequacy, apathy, indifference, insecurity.
5. Forced loss of a job.
6. Anxiety and disappointment.

 "Things are pressing down."
 "I'm getting anxious about things."
 "I didn't get the job I wanted."
7. Argumentative, irritable, impetuous behavior; impulsiveness.
8. Idle time; lack of structured time or schedule.
9. Boredom.

10. Feeling of rejection.
11. Feeling depressed, “down,” or “sad.”
12. Too many demands; living up to others’ expectations; feeling of external control--not being able to make own decisions; feeling overly obligated; getting physically over-tired.
13. Loneliness, lonesomeness; feeling that you don’t belong.
14. Sexual inadequacy--male and female; inordinate demands, accommodations.
15. Compulsion to drink.
16. Can’t handle success; need to celebrate.
17. Grief and loss; divorce or separation; loss of child; death of spouse.
18. Worry about “nothing to worry about.”
19. Financial difficulties.
20. Job termination anxieties.
21. Worry about law violations.
22. Worrying about physical illness.
23. Lack of social acceptance.
24. Unresolved religious conflicts, especially during holidays.
25. Marked or abrupt change in behavior.
26. Jealousy; accusations and suspicions.
27. Trying to be a perfectionist.
28. Envy.
29. Can’t cope with losing.
30. Can’t cope with failure.

31. Sober but unhappy--"white knuckling."
32. Feelings of inadequacy due to aging.
33. Any excuse to return to drinking.
34. Resentment, self-pity, wanting to "drink *at*" a person, place or thing--"I'll show him."
35. "Stinkin' thinkin'"--thinking that you can control your drinking.

"Maybe just one..."

"I haven't had a drink in so long, I can't be an alcoholic."

"I know I can handle it now..."

"Maybe he's right, I don't have a problem with booze anymore."

etc. etc. etc.

S. Kowalski has been a student of Trungpa Rinpoche for twelve years. He describes himself as "pretty sophisticated for being so crude."

Q: What are your drinking habits like?

A: Well, generally I don't drink before dinner, but that's not always true. But I usually drink after dinner, and then slowly and steadily until I go to bed. Usually. During the week.

Q: How much would you say you drink in a given evening?

A: It varies. An average would be two to six four-ounce drinks maybe. And a heavy night might make it six. A really heavy night is most of a fifth--so about ten drinks. But that's not particularly usual.

Q: What do you like most about drinking?

A: Umm. Consciousness altering.

Q: How so?

A: It seems to relax my body and...invigorate my mind. The alteration is that it gives me a broader emotional range or something like that.

Q: Do you associate a usual impulse or emotion with beginning to drink?

A: Well, when it's habit, there's not. But as far as an emotion or impulse preceding drinking, it would be anxiety. And the sharper the better.

Q: You enjoy anxiety?

A: The sharper the anxiety, the more I enjoy drinking. If it's dull, I usually quit...until the anxiety gets high again, and then I drink. Until it's sharp enough that I enjoy it again. Cocaine is synthetically induced anxiety. So that's probably why people like to drink and do cocaine. At least that's what I used to do. Until I started wondering why I was inducing anxiety with cocaine when there was so much naturally available.

Q: Has anyone ever told you that your personality changes when you drink?

A: I can't say. Not in so many words. But I have a tendency to be louder.

Q: What are the emotions that you experience in a broader range?

A: Tonglen-type emotions. Empathy. Universal sadness or something.

Q: What's your history with drugs and alcohol?

A: When I left home to be at college, I started drinking. I was just under 18 and drank beer socially with my peers. I quit drinking when I started smoking marijuana a year or so later. I did some LSD for about a year. Then I quit that and just smoked marijuana for two or three years, until I met Rinpoche. Then I started drinking wine with the grass. Then, at RMDC--we're up to 1972 or so--I started drinking hard liquor up there. I worked in restaurants in Boulder for a few years and drinking after work every day. Did

cocaine on weekends for a couple of years off and on. Not every weekend...Quit the restaurant business. I got into construction and drank beer every day after work. When my business got into trouble, I started drinking scotch at the Bustop Bar [a strip club in Boulder] every day. I got back into cocaine socially. Then heavily into cocaine. I started working for a person I really respect and quit cocaine completely, quit going to the Bustop completely. Now I drink scotch at home in the evenings. And drink sake at any Buddhist-related meetings, parties, programs. That's up to date.

Q: Has your drinking affected your relationships with other people?

A: You mean over the long term? Well, in the short term it has. I mean it might lead to more passionate sex, or violence, or any other emotional upheaval that would be amplified by the use of alcohol. Over the long term...not really. The only thing I can think of is...my wife gets worried if I drive drunk. Over a period of time that causes anxiety to her, which obviously doesn't help the relationship.

Q: Does it affect your relationship with your children?

A: They know I drink. And they tend to ignore me when I'm drunk. But that's **part** of the relationship rather than any alteration of my relationship with my children.

Q: Have you ever tried to stop drinking?

A: I never **tried** to stop. I've stopped when I wanted to. In some cases, for extended lengths of time. Seventy days in retreat once. For the first period of Seminary. And on a few other occasions, from two days to two weeks.

Q: What did you notice at those times?

A: When you wake up in the morning, you know that's as good as you're going to feel all day.

Q: What do you like least about drinking?

A: Driving. And hangovers.

Q: Have you ever been stopped on a DUI?

A: I was in a wreck once. When I was driving. I got stopped. I mean arrested...I was already stopped. [Laughs]

Q: Has your drinking had any effect on your practice?

A: Umm. It makes me lazy from a practice point of view.

Q: What image or emotion does the word *alcoholism* provoke for you?

A: Well, it changes from time to time. My personal definition at this point is that alcoholism is metabolic addiction. Someone that doesn't have control...I don't know if I really believe that...

Q: Does it provoke an image or an emotion?

A: No. [Laughs] Just thoughts.

Q: Do you think that Buddhists drink more than other people?

A: No.

Q: What role do you see Sarpashana playing in the Buddhist community?

A: I think Sarpashana can and does provide a peer group that wants to work with neurosis via the alcohol metaphor. And it provides knowledgeable interfacing with alcohol-related crises.

Q: How would you describe your ideal relationship with alcohol?

A: Hey, I've pretty much got it. The only thing I would change is...slightly better judgement about when to quit. But on the average, I probably have one more drink than I really enjoy, and that affects other things--an hour less sleep, or driving drunker than I should be, or not feeling good the next day. Knowing exactly when to stop.

Q: What do you think about people who quit drinking altogether?

A: It depends on the person. I'm not too fond of sober self-righteousness...I don't know, anti-social sobriety.

Q: So some people need to quit more than others, or do it better?

A: [Laughs] I think that for some people, not drinking allows them a greater ability to deal with other confusions. So that's fine. In other cases, not drinking, according to them, leaves them without any confusion, and I think that's a disadvantage, spiritually speaking. In those cases, it's like finding God or something in sobriety.

Q: Why did you agree to do this interview?

A: Why not? You asked.

James D. has been a student of Trungpa Rinpoche for ten years. He describes himself as a "subdued person...on the surface. I have a tendency to be subdued and to keep things in--reflective. But in line with that is a tendency to repress things--the subduedness isn't the fundamental thing. There's a lot of force being subdued, a lot of energy there. I'm earthy. And a somewhat angry person. A mixture of angry and subdued. Intellectual, I guess. And creatively frustrated."

Q: How would you describe your drinking habits?

A: Well, I'm trying to drink as little as possible. I'm trying to be very careful--to drink as little as possible when I do drink. But I drink at least once a week--maybe four to eight glasses during the course of an afternoon and evening. Usually sometime on the weekend. I'm in school, so I can't...I have to be careful. Studying and drinking don't seem to mix very well. I might drink three or four times a week, but very little. These days, it's more like twice a week. During breaks from school, I drink more. If I don't have a study quota I may feel more free to lay around with a hangover. I'm not so pressured. This week I'm on break and I've had drinks three times, got drunk once.

Q: What happens when you get drunk? What changes do you notice?

A: I get very relaxed for one thing. Less self-conscious in a social situation. More willing to display emotions of all kinds--affection, anger--but not to the extreme. I'm not a Jekyll and Hyde type these days. There was a time when I was more so. But much less self-repressive, in other words.

Q: Has anybody ever told you that your personality changes when you drink?

A: Oh, yeah.

Q: What did they notice?

A: There are two historical periods of that. But in the last five years, and because of what I believe is attributable to the maturation of the meditation process, they say that I become much warmer when I drink a lot. I'm a happy drunk. If I weren't practicing, however, I do think that if I weren't practicing, I'd be way off the deep end. And I wouldn't be honest if I didn't say that, from time to time, I do get morose. But I received very different feedback in the past. People would say, "You're out of it. You're obnoxious. You've had too much. You're an asshole." But now they tell me that I come out more with myself.

Q: Have you suffered any ill physical side effects from drinking?

A: Yeah, sure. Aside from regular hangovers? Well, headaches. Tremendous nerve problems. Shattered nerves. Just general physical illness. Feeling ill.

Q: Has a doctor ever said anything to you about your drinking?

A: Yes. They checked out my liver and enzyme levels. It was slightly enlarged. Insomnia was a chronic problem. When I saw the doctor, I was at my wit's end, so to speak, about not sleeping. He advised me to quit drinking.

Q: Did he relate the insomnia to the drinking?

A: Oh, yes. Absolutely. He gave me a medical explanation. It had something to do with alcohol destroying the coverings on the nerve endings--depleting a chemical that coats the nerves so that one can sleep. So that was the reason.

Q: Do you still suffer from that now?

A: If I go on a bender for a couple of days I have the same problem. It might be very severe if I go on a three-day drunk. It will be a full week before I can get full sleep...what they call REM sleep. But there's something that I take to help me to get to sleep. Without it, I think it would be a lot worse. I take an anti-depressant called amyltripoline. I was originally given it to combat severe migraine. It has a mild sedative effect. I sometimes use it to treat insomnia.

Q: Have you ever tried to quit drinking?

A: You mean forever?

Q: For any period.

A: Yeah. For a certain period. But I never set my goals more than tentatively. Although, I have to admit, that during the worst times of being poisoned after a binge, I've told myself that I'd have to quit for good. That I can't live with that.

Q: What happens when you try to quit?

A: It takes a week before I can sleep and before I feel mentally and physically stable. I feel hung over for about a week and experience problems associated with that. That's not to say that that happens every time I want to quit for a while. That kind of week is usually after a few days of drinking on end.

Q: Have you experienced withdrawal symptoms?

A: What do you mean?

Q: Shakes. Auditory or visual hallucinations?

A: No. I can't say that I have. Although, I think in the past...I think...I used to drink a lot more than I do these days. I've been drinking for ten years. The first five were heavier. Then I experienced some of the classic withdrawal...yeah, I did. Shaking...on a couple of occasions.

Q: Does your drinking affect your relationships with other people?

A: Yes. Sure. [Laughs] Hmm. Well, I tend to open up to people when I drink. The problem is that then I can't do that when I'm sober. And that creates problems for the other person as well as for me. Because I'm inconsistent, or I appear to be, or I feel that I am. But, I want to say it lets my guard down at the same time. It allows me to be more simply human with others, on the positive side.

Q: Do you have relationships with nondrinkers?

A: Yeah. Uh-huh.

Q: Do you prefer the companionship of drinkers or nondrinkers?

A: Well, I suppose I feel more comfortable with people who are familiar with drinking. I know more of these people. But, on the other hand, I don't...well...I don't really feel that it makes that much difference. I would be perfectly comfortable in a friendship with someone who is not a drinker at all...maybe.

Q: Do you feel comfortable around nondrinkers in bars?

A: I don't usually run into that situation. I don't mind. I feel more uncomfortable for them.

Q: Why?

A: Well, they're out of place in terms of the energy. If *I'm* not drinking in a bar...drinking soda water or something...*I* feel uncomfortable for the same reason. It doesn't mesh in the

energy.

Q: What are your associations to the word *alcoholic*?

A: It's a highly abused concept. Dangerous concept. I almost never think of myself in those terms. I think of someone who's become noticeably ravaged by alcohol, physically and in all other areas of his life. I've seen people who have really been screwed up by it. I suppose I have a standard image from the cinema--a cliché image, in some sense. I think it's a very tricky term. I think there are a lot of factors involved. I don't think that everyone who abuses alcohol is an alcoholic. I think people indulge in all sorts of things. I don't think that someone who indulges in sex to the point of being neurotic is a sex maniac--to the point of having a real problem. I think that people drink for nonphysical reasons. I think that alcoholism is a physical disease that may be brought on by years of abuse. But a person could be a chronic drunk and not be an alcoholic.

Q: You think that *chronic drunk* might be an emotional phase?

A: Well, it might be a reaction to an emotional phase; a reaction to some emotional problem. Which could last a lifetime. If you don't do anything about it, it could lead to the disease itself. It could be an unwholesome approach to an emotional problem.

Q: Why do you drink?

A: I like the feeling. It feels very expansive. Especially after the first couple of drinks. I don't like being drunk.

Q: What don't you like about it?

A: It's very heavy. It tends to go too much to the other extreme. That is, expanding too much. Whereas sobriety can be somewhat constricting, in my case. Drinking too much can diminish clarity and the crispness of the energy to too great an extent. But drinking in moderation seems to strike a balance. But this is in *my* case. Given the type of person that I am, as I said in the beginning. And there are others like me.

Q: What is your history with drugs and alcohol?

A: When I was 13 I started using marijuana and LSD. I had an aversion to alcohol. I never used it. I didn't like it. It made me sleepy, cranky and depressed. [Laughs] At 17 or 18 I started to have problems with marijuana. It made me nervous; paranoid. Discursive. There seemed to be a split between body and mind. I experimented for a while with barbiturates, which I really liked. There were problems. But what I liked was the relaxation. The discursiveness got put on hold. But it was too dangerous. I felt I was addicted to marijuana, and I wanted to quit more than anything. I felt that life was becoming really bad because of it. So, when I was 19, the age in the state I lived in for beer and wine, I started to drink wine and gave up smoking marijuana.

I became a Buddhist about a year later--began to practice meditation. I began to drink heavier--going from wine to hard liquor--during the next five years. I did menial labor, which incited me to drink more. It was a very depressing situation. I was drinking a *lot*,

every day.

When I became a vajrayana student, I decided to go to college at the same time. My whole attitude changed. Along with the fact that I'd developed problems with the alcohol, physical and otherwise. I decided to pull in the reins on it. So, for the past five years I've been drinking more carefully. Partially because my attitude toward life is less reckless and despondent. So there is less desire to escape, which was the principle reason for drinking. It wasn't the only reason. I would say that I try to be very careful these days. I can't handle it like I used to.

Q: Has your drinking affected your Buddhist practice?

A: Umm. In some ways it's been very helpful, and in some ways it's been problematic.

Q: What do you envision as your ideal relationship with alcohol?

A: Well, you know...[laughs]. If it weren't for hangovers, I'd drink all the time. If it weren't for the problems it causes. I find the side effects very debilitating.

Ideal? I would drink very moderately, but as often as I'd like, and without feeling the need to reach another level of satiation. Along with that...I'm not really a Spartan. I have a tendency to indulge in pleasurable things. Food, also. Whatever happens to be pleasurable. That's important for me to say about my situation.

Q: Do you use any other drugs besides alcohol?

A: None other than the anti-depressant when I have migraines or can't sleep. I don't use any illegal substances.

Q: Why did you agree to do this interview?

A: Well, I thought it might be helpful. I'd read the last Sarpashana source book and there didn't seem to be any voices included of people who were aware of problems with alcohol and were still active drinkers. When I read the source book, I felt that I was having a problem with alcohol at that time. But I felt it was less than helpful because the prevalent attitude was that of quitting altogether. The people who were interviewed were people who had quit. I'd have found it more helpful if there had been someone in there who still drank.

Q: Is there anything you'd like to add?

A: Well, yeah. I think that in a lot of cases with people who drink, there's a spiritual need that's not being met. Which includes the emotions and the whole state of mind. And I think that the desire to drink, or to use substances of all kinds, is sometimes an initially healthy and understandable reaction to a feeling of spiritual impoverishment. Not just as regards the individual, but as regards societal neurosis in general. So, I think it's important not to condemn oneself or other drinkers for their drinking. It's important not to label oneself as a drunkard or an alcoholic with any kind of moral connotation. But, at the same time, it's important to find the answer to that sense of spiritual impoverishment within oneself, and to avoid, at all costs, using alcohol as purely an escape from the point

of view of hopelessness that goes along with that feeling of impoverishment. I think alcohol can be used properly. It's very difficult, but it can be done.

Dr. Hyde is a student of Trungpa Rinpoche and describes himself as "sensitive but ambitious, a warm and generous person who strives to be successful in the business world at this point in time. I may sometimes be overly concerned about others...I hear the baby crying."

Q: How would you describe your drinking habits?

A: First of all, I've been drinking for a long time. Since I was about 15. That was interrupted by five to seven years in which I didn't drink, but smoked a lot of pot. So, since about... Well, in the last several years I've come to think that I have a definite drinking problem. Which started out by getting drunk at parties, social events. I started to hit the bars and used to drink by myself there. Right now I'm not going out much. I usually drink at home...fairly regularly. About four times a week. I never drink before 4:30 p.m. Out of the four times I would say I lose my mind, or blackout, two times. And when I drink these days, I think I'm not as aggressive as I used to be.

Q: What do you drink, and how much would you say you drink in a week?

A: My preference is beer and vodka. I would say...it might be two bottles of vodka a week, and maybe six six-packs of beer.

Q: Has anyone ever told you that your personality changes after you've had a few drinks?

A: Yes. I personally call it the Dr. Jekyll and Mr. Hyde effect. So I tend to turn from being a nice person into a devious one.

Q: Devious?

A: I become very aggressive and take up a lot of space.

Q: What do you like most about drinking?

A: I would say the sense of relaxation.

Q: Do you drink out of any particular impulse or is it more like a habit?

A: More like habitual impulse. It's when I get really thirsty...I notice that, if I go past my favorite bar, I think it's time for a drink. Sometimes I can suppress it, and sometimes I can't, or don't want to.

Q: Is the impulse ever a response to an emotion?

A: Probably. I don't know. I've never thought about it. I guess that if I like it because it relaxes me, it must have an emotional background.

Q: What do you expect will be the effect of having drinks?

A: Well, to a certain point, it actually relaxes me. If I go beyond that point, it has

different effects. Like going to jail. [Laughter] Usually beyond that point, I'm getting into some kind of trouble, if I go...hit the black hole.

Q: Black hole?

A: I become completely mindless. In other words, I'm fully there, but the next day I can't remember what happened. It's blackout. I don't know these expressions.

Q: Has your drinking ever affected your relationships with other people?

A: Yes. I think they've...well. There are quite a few people who started to become afraid of being around me while I'm drinking. And consider me to be like a madman. I think that they don't like to invite me to parties and such because of that. Hmm. Sometimes my relationship to my wife becomes stressed. Since I'm not drinking during the day, it doesn't affect family life that much. Although my daughter is very concerned about whether I'm drinking or not. Sometimes she calls me at the office at 5:00 or so and says, "Don't go to the bar." Fortunately, I have a very loving and understanding wife. And I also love her and my children very much, which I think, in general, provides a good family situation.

Q: What are your associations to the word *alcoholic*?

A: When I first heard it, I thought it would be very bad to consider myself an alcoholic. But after I went through some DUI classes, I got a much broader sense of the word. And found it very helpful...if one faces the truth, and considers oneself to be alcoholic.

Q: What does the word mean to you now?

A: It means a person who has a drinking problem, and who goes, in the course of drinking, through personality changes. A person... let's put it this way: a person whose practice of relating with his environment and with the world is through the practice of getting intoxicated.

Q: Has drinking ever affected your Buddhist practice?

A: Yes. I think I'm substituting the practice of mindfulness and awareness with the practice of mindlessness and unawareness. That practice is something that is much more familiar to me, having done it for many more years than the practice of meditation. I think that if I practiced more, I would have better control over my mindfulness, or my mind, while I'm drinking. In effect, I have some experience of that.

Q: What do you mean by *control*?

A: By that I mean the creation of more space to watch over my thought process.

Q: How do you picture your ideal relationship with alcohol?

A: Well, as I've already mentioned, I think that if it's combined with the practice of meditation, it might make it easier not to black out, which I truly hate. I think I see it as mindful drinking, which might include a couple of glasses--until a sense of relaxation is achieved--and to be satisfied with that state of mind.

Q: Have you ever employed that practice successfully?

A: Hmm...I've been able to do it several times. And it felt really good.

Q: Have you ever considered stopping drinking altogether?

A: Yes.

Q: Why?

A: Basically, because I became very disgusted with myself, and because of the effects that my drinking had on my family and on other human beings.

Q: How do you imagine life would be without alcohol?

A: I think...well. Since I have lived without alcohol for periods of two to three months, I've experienced that. I started to look at it as brighter and more cheerful. Although there was a sense of lacking something that was so much a part of myself. What I mean by that is that the habit of drinking provides me with a corner into which I can retreat, and where I don't have to care about others, but where I can rather hang out very comfortably in the familiar smell of my own socks and underwear.

Life without alcohol is a very challenging situation for me. It made me give up a sense of privacy that drinking provides. Yet, I found the experience to be very rewarding at the time that I had lived with that challenge. But also, at times, it was very frightening.

Q: What do you think the effect would be if you were to quit drinking again?

A: I guess I would just stop drinking...I don't know. I would probably be quite irritable for some period of time. I'm at a very stressful period in my life.

Q: Does drinking relieve, or alleviate, the stress?

A: I think it alleviates it right now. But if I hit a blackout--I haven't had a blackout for a long time--but especially because of my behavior during those times, the stress is actually added on during the next days.

Q: What's your history with drugs and alcohol?

A: I started to drink when I was, maybe, 14. It was a big social thing at that time to be a member of a youth club, a sailing club. They went out on the weekend and hit the bottle, you know? Then I went to a boarding school where it was not allowed to drink. But since it was not allowed, and I was drinking already, it added to my prestige, or whatever you want to call it. So I continued drinking until I was about 21. After I left school, most of my friends were ten years older than I was, and we used to listen to jazz and get drunk.

Then dope came into my life, and I discontinued drinking almost completely...completely, actually. Until I came to the USA. Where I connected with Buddhist sangha. And drinking there was very widespread. Within a period of about six months, I turned into a heavy drinker. This has continued since then. That was 1977--

eight years ago.

Since then, there have been short periods of interruption. I never went on so-called binges though. As I mentioned, I only drink in the evening, and mostly every other day.

Q: You mentioned that you had been stopped for DUI?

A: Three times. Oh, and some in Europe. Probably...six times now. I'd like to mention that I'm so scared of driving under the influence by now that I take every precaution possible to avoid it. I leave my car at home when I go out. And this has proven to be very helpful.

Q: Does your experience with alcohol have any effect on the way you feel about yourself?

A: What I experience after a blackout is usually a tremendous sense of guilt. And shame. Which occasionally even turns into suicidal ideas on the negative side, or sobriety on the positive side. In other words, the after-effects of being intoxicated are that there is very little space that I allow for myself and for other people.

Q: And that's different when you're not drinking?

A: Yes. When I'm not drinking, space can also be very threatening. But my experience is that this threat has no background and disappears naturally after a while. If I respond to the threat by drinking, it disappears instantaneously, but usually reappears three-fold. If I'm drinking, I like myself for a short while. I like my outgoingness. I have a more relaxed sense of humor. And since I forget the day-to-day worries, I'm more cheerful and communicative.

Q: And when you're really stoned?

A: Well, the outrageousness. Not in the Shambhala sense. It's more the feeling that I can drive through a wall [laughter] and come out of it *great!*

Q: Why did you agree to do this interview?

A: Because I hope that by reading it, other people can be helped. And also I find it to be a good way to further look at my own problem.

Q: Is there anything else you'd like to add?

A: I think that what is really very important is to be very honest with oneself. For example, I was denying that I was an alcoholic until very recently, which didn't give me any possibility to look at myself and the way I affected others while drinking. Since I have become aware that I am an alcoholic, I actually realize a sense of relaxation, giving me the possibility to work with my problem. It also gives other people a possibility to help me.

Bradford B. has been practicing meditation in the Buddhist tradition for about two years,

and with Yogananda for about seven prior to that. He describes himself as “an arrogant, compulsive wiseacre with humanitarian overtones.”

Q: What makes you think you have a problem with alcohol?

A: Do you want a flip answer? ...My parents...my brothers... my friends...yeah. Almost every aspect of drinking that confronts me seems somewhat opaque. I need more understanding.

Q: What are your drinking habits like?

A: I drink, in an average week, a bottle of cognac and eight to ten beers.

Q: What's your style when you become drunk?

A: Generally, I become more quiet--I was going to say content, but that isn't the word...slower and less worried. And probably, my judgement deteriorates.

Q: What does that mean?

A: Well, like whether it's smart to stay up all night, or to drive in that condition, or to ride with somebody who's driving in that condition.

Q: How do you see the relationship between practice and drinking?

A: Well, I work at a halfway house for felons. My work is a better ground for practice than my drinking is. I can relate to work and practice, but I don't know about drinking. With drinking, there's a certain boldness and zesty take that I can sometimes incorporate into my practice, but more usually, it's just sub-mediocre perceptions.

Q: It doesn't sound like you *like* to drink.

A: Well, that's a good question. I'm not sure I do...but I'm beginning to feel that sometimes I need to...

Q: How do you *want* to relate to it?

A: With as much honesty as possible. I would like to confront the effects it has on me and on the others around me. Which leads to the matter of the enabling process--my work and family situations brought that to my attention. And AA and Al-Anon and now Sarpashana has put the cap on...I mean it's not up to me to tell people that they're enabling. I'm just one of the instruments in the orchestra. But I think that boundaries are an issue that this community needs to work with. We need to look at the notion of utility. Utility, meaning whether or not something is productive or counter-productive. I mean, is the way we drink a short-term gain for a long-term loss? Or is it an insignificant gain?

I'm moving on the path...maybe a joint would make me feel mellow--with controversial consequences later on. In terms of boundaries, what questions do we ask ourselves? What questions do we ask other people? ...I don't know... Is this skillful drinking? Is this practice-related drinking? Is it social drinking? Habitual? Problematic?

Chronic? Why is this drink necessary? I'd like to see those questions raised. Gently.

Q: What do you see as a sane relationship with alcohol for you?

A: I don't know if it means no drinking, or an occasional drink. I think, for right now, it's the middle path--an occasional one drink.

Q: What's your history with drugs and alcohol?

A: I was strung out...let's see, it was thirteen years ago. I was strung out in steadfast, indiscriminate drug use. Do I need to go into it? Well, from psychedelics to heroin, to speed, to heroin...I was sentenced by the courts to a year in drug rehabilitation. I spent the entire year there denying that I had a problem by simply shifting my focus to yoga and addicting myself to new-wave health. Immediately after I got out of the program, I "slipped" and saw myself...my pattern of drug use escalating. I got scared. I moved home. My father was getting involved in AA, and some of his friends coerced me into attending meetings, which in retrospect...actually, I was just waiting for those guys to leave so I could kill myself...but they kept hassling me, asking if I wanted to go to a meeting, asking what was wrong...I attended AA groups for one summer, and abstained pretty much from drugs for...let's say, nine years. Nine years ago, I started drinking with meals, and while dancing in Quebec at night. I've continued with that style ever since. I also--after I started drinking again--started experimenting with some drugs. Marijuana and cocaine. I found that, especially in the case of marijuana, I have no control over myself whatsoever. It's just impossible. In the case of coke, I really can't afford the cheap thrill--primarily in terms of practice. It just has this prolonged hangover effect.

Q: What is your experience with Sarpashana?

A: I feel that I can fit in there. AA is too hard-line. There's an openness in Sarpashana that I just can't find in AA.

Q: What direction would you like to see Sarpashana take?

A: I'd like to see what kind of vehicle it can be to till the soil in the community for a fresh perspective on drinking. And how it relates to practice. I live in a large practice house, and there are either a lot of accomplished skillful drinkers, or a lot of potential problem drinkers there. There has been, until recently, a lot of focus on...well, it's been kind of falling apart. The collective attention given to the drinkers has been only an acknowledgement that no denial exists. It came up at a house meeting. I asked if anyone thought there was a problem in the house behind drinking, besides me. You could have heard a pin drop. Then the new kid on the block said, "Well, obviously there's a problem. Nobody's saying anything!" Then all hell broke loose. One woman started crying. People were pointing fingers, but not naming names. It was incredible.

Q: So you see a conflict between people's drinking habits and living in a practice house?

A: Yeah. It may only be one of degree, but it's a question of honesty. I think that denial is a lack of openness--a pernicious lack of openness--that could be potential ground for practice. But this is a very *certain* kind of denial. There seems to be a tacit social

agreement that it's taboo to analyze this aspect of our lives. And therefore, it's all the more insidious. There's a kind of universal acceptance, even approval of this kind of denial. In the community, the problem is camouflaged with practice issues, and in the larger community, more frequently with sexual issues.

Q: Is there anything you'd like to add?

A: I'm very grateful for what's happening...grateful and enthused about finding in these past few weeks, through Al-Anon and AA and Sarpashana, what I think, regarding drinking. I can see clearly now that it's an ecology, as finely tuned as any soil ecology. I'm finding myself somewhere in the midst of all of this with a lot of information about myself being revealed to me. What my relationship with my family really was and is. What my relationship with peers really is. I'm getting some real insight into what honesty is. That it's...for me, more a function of the heart than of the mind. And after thirty-five years, that's a pretty big-deal discovery for me.

Zeke Z. is a student of Trungpa Rinpoche and describes himself as "feeling like I'm always a beginner; finding myself becoming middle-aged that way."

Q: How would you describe your drinking habits?

A: I drink every evening. Except during football season--then I start around 2:00 on Saturdays. Usually I start after work. It's nice to have a few before dinner. I don't drink right after dinner. All that food absorbing the alcohol is a definite problem.

Q: How much would you say you drink in a week?

A: I think...in a week it's hard to say. Five or six drinks in an evening...unless I'm having a long-distance conversation on the phone, in which case, I drink a lot more. So what's that? Seven times six? 42? A six-ounce glass of sake per drink...42 times six...260 ounces! So about seven or eight liters a week, or its equivalent in scotch...That's a rough estimate.

Q: Has anyone ever told you that your personality changes after you've had a few drinks?

A: No. Actually, my wife finds it difficult to tell. Although my own perception is that it does.

Q: What do you notice?

A: I become more exuberant, more convivial, more emotional.

Q: If you thought about it, would you say that there is an identifiable or usual impulse before you start to drink, or is it just habit?

A: Both. It usually corresponds to feeling very tired and wiped out after the day. Drinking is energizing that way. But also, when I'm alone, rather than with my family, my drinking habits change. I drink less in new situations. But it seems extremely habitual.

Q: Do you associate any emotion, besides tiredness, with the desire to drink?

A: Mostly it's tiredness. There might be some...I'm just guessing, but...in a stressful situation with a lot of emotion, I might want to drink to cut the unpleasant experience. But it is based on wanting to cut the basic flow of the day, to change it into something else.

Q: And what do you expect will happen?

A: First, get drunk. Then I'll crave more to get drunker. At some point it'll level out, then I'll stop. When I get very drunk, merely the taste of alcohol is the reward of drinking.

Q: Is there ever any variation in what it does?

A: There's variation depending on the social situation, but mostly it's quite similar. I'll drink more if I'm at a party or if I have company.

Q: So you expect that it will enhance relating to people?

A: Well, at the beginning that's the impulse, but then the other thing takes over and becomes merely quenching that craving with the taste of alcohol.

Q: Has it ever interfered with your relationships with other people?

A: To the extent that I get angrier than I would if I weren't drunk. And more emotional. I can be somewhat bizarre...relative to my usual...laid back...[laughter].

Q: What are your associations with the word *alcoholic*?

A. Someone who uses alcohol excessively, and whose body and relationships are destroyed by that use. Bums on the street, people in jail, difficulty with jobs.

Q: What do you think would change in your life if you didn't use alcohol?

A: I'd use my evenings for something, presumably, for something other than being smashed. Possibly study more, possibly practice more, and possibly do more creative, rather than consumptive, types of behavior.

Q: Can you actually picture your life without alcohol?

A: I can *imagine* it, but I can't really picture what I'd do. The habit is extremely ingrained.

Q: That question provoked more thoughts?

A: It seems that having five or six extra hours in the day to do what I feel bad about not doing might be positive. Again, practicing, doing what I'm working towards, developing other interests...besides having long, drunken conversations and watching TV.

Q: It's starting to sound like you don't really enjoy drinking.

A: Oh, I do! What I'd actually like is some kind of alcohol that didn't last as long.

Q: What do you enjoy most about drinking?

A: Being drunk.

Q: What do you like least about it?

A: Wasting time, damaging my body, hangovers, and the feeling that it's probably diminishing my capacity in general...capacity to concentrate...more.

Q: Does drinking affect your relationship with your children?

A: I think I tend to be more violent. Also friendlier.

Q: When did you start drinking? What's your history with it?

A: Let's see. I started in my senior year of high school, or so. A little during my freshman year of college. Then I stopped using alcohol and started using marijuana and psychedelics and amphetamines. Amphetamines mostly for finals. I started using alcohol again several years later, along with marijuana. Then stopped using marijuana and continued drinking pretty much steadily since 1970...so that's...I was 23 or 24.

Q: And you don't smoke marijuana any more?

A: No, I do.

Q: How frequently?

A: Daily. I usually smoke a little marijuana to stop drinking. That'll be the end of the evening's consuming.

Q: And that also true of the last 14 years?

A: No, that's only in the past few years.

Q: Do you think that the Buddhist community in Boulder uses more alcohol than other people?

A: Hmm. I don't know. Given the same age groups elsewhere. I would say no.

Q: Has your drinking affected your Buddhist practice?

A: Yes. Since I spend all my evenings drinking, I don't spend them in practice or study. And since it's such an invariable habit, I feel that if I weren't drunk, my chances of spending one or two evenings a week practicing would increase.

Q: Has practice ever affected your drinking?

A: Yes. I found that I was getting into a habit, especially with prostrations and dathuns, of drinking *immediately* after stopping practice. It was quite something. I was unemployed while I was doing prostrations, so I'd finish at about 1:00 in the afternoon and go down and have some martinis. It was summertime. I'd just hang out around the kitchen table and greet people as they came and went.

Q: Have you ever seriously considered that you might have a drinking problem?

A: Yes.

Q: Aside from getting up to make more tea, how does that question make you react?

A: Well, I'm trying to think of where I'd define that problem. To the extent that drinking makes the performance of my job worse, and the fact that I spend *years* getting older and going toward death, it seems like speeding up the process of dying. And there's some rejection of the evenness or continuity of life. To be drinking is to be changing my mind in some way. It seems to be an aggressive, or cowardly, way to be dealing with one moment following the next. It's a way of avoiding that discomfort, or of getting out of that discomfort and filling up the space.

Q: What would you ideally do to change your relationship with alcohol to make it more pleasurable?

A: To me, the ideal situation would be to vary the fixed habit. And for me, that seems to involve the critical time of around sundown, about 5:00. To get through that period from time to time would be the preferable way, as far as I'm concerned.

Q: Have you ever tried to do that?

A: Yes. I stopped for about a week, a few months ago. A week or two. It was surprising how difficult it was. I also don't drink when I'm on retreat. But that's so different from my normal situation...

Q: Why did you agree to do this interview?

A: I'm interested in examining my habit.

Q: Is there anything else you'd like to add?

A: Well, I've noticed that the act of stopping drinking, or stopping smoking, seems to be dependent on some kind of energy build-up that I'm not in control of at all. Sometimes, I'll just bounce through some pattern of behavior without having to marshal the energy to change it. Somehow the energy to change it just kind of occurs. So I've stopped smoking dozens of times that way. It's provocative that way. I feel that it's desirable to change one's patterns--to act the way one would like, rather than being a purely habitual creature.

With drugs, in some ways, I expect things will get worse before I make large changes in that habit. But I'm...I mean... I don't know.

Andrew F. is an alcoholism counselor who works in the Boulder area. He is a student of Trungpa Rinpoche who describes himself as "energetic and resourceful, and looking for new fields to explore."

Q: How did you get into alcohol counselling?

A: After graduating from Naropa Institute's M.A. program, I was both a crisis worker and an attendant counselor in detox at the ARC. I worked into a counseling job. Actually, I went from volunteer to on-call to counselor. I did the whole stint.

Q: Did you think that you'd be doing this kind of work while you were going to school?

A: No. Not at all. I knew I wanted to work with people. I find that working with alcoholism is stimulating because addiction highlights habitual neurosis to such a degree that it gets real palpable...you know...obvious. There's a clear decision that an alcoholic has to make: whether to be sober and confront unknown areas in his or her life...usually unknown emotional areas...or to keep drinking and ignore the suffering, which only creates further suffering.

Part of my work is to help people break through their denial of their situation, and to make an accurate assessment of the way that they use drugs and alcohol in their lives. Secondly, and the most exciting part, my job is to work with people who have made a decision to give up drugs and alcohol--a decision to recognize that they have a physiological addiction, and who then decide to move beyond to begin to deal with the whole range of emotional, self-image, self-identity type questions.

Q: How long have you been working in this field?

A: Two years...and now five months.

Q: Do you notice a difference between the Buddhists and the non-Buddhists who come here for detox and therapy?

A: Yes. In two ways. First, the denial of the severity of their drinking problem is so complex and self-justified. The other side is that Buddhists have much more willingness to take a look at their mental experiences and make much better therapy clients, precisely because the teachings--Buddhist teachings--stress so heavily paying attention to your own experience. And I know this is to be infectious for the other clients.

Another way in which Buddhists are different is that the Buddhist community, in its unawareness of the disease of alcoholism, contributes to the denial of problem drinking. Most people do not have access to a belief system that serves this denial so well.

Q: What's denial?

A: Almost exactly the opposite of taking a look at your experience. The refusal to recognize the extent to which you have fallen into ignorance. And it takes a rather aggressive form of defense to maintain it.

Q: How is Buddhist denial more complex than other people's?

A: Well, I think there exists a challenge in Buddhist meditation and awareness practice to stay with a mind of clarity. And that's such an exciting challenge, a consuming challenge, that people who have a physiological addiction to alcohol are basically playing with fire. I think that this sangha promotes the use of alcohol as a tool to strengthen or

challenge one's mindfulness/awareness capacity. It's an interesting practice but for people who have an extremely strong karmic attraction/addiction...it becomes unworkable.

So the denial comes from certain messages from the sangha that say, "You're failing because you're not adept at this practice." Consequently, that person has a strong desire to participate, along with non-alcoholics, to be accepted socially within sangha activities, and one doesn't want to give that up.

Q: How does it actually manifest in behavior?

A: It manifests in the non-recognition of the severity of their disease. I think there's a lot of arrogance. There's a certain, "I know my disease, I'm friends with it" or "We get along," or something. The real difficulty is that they tend to shun any kind of genuine contact. And most Buddhist alcoholics--this is a pretty sweeping statement--the ones I've worked with anyway, have this arrogance that they have more knowledge about life than do the people who are staffing the facility. It's as though their Buddhism clouds their connectedness with the people around them.

Q: And yet they're good therapy clients?

A: Well, because I think they present the challenge. They ask a lot of penetrating questions about not only alcoholism, but about habit patterns and meaning in life. So most non-Buddhist therapists, from my experience in Boulder County--and this is especially true at the ARC--enjoy working with them.

Q: Is there any way in particular that the sangha contributes to denial?

A: I think it's mostly ignorance about the disease of alcoholism. Sangha behavior, both individual and collective, unwittingly enables the alcoholic to keep drinking.

Q: What do you think alcoholism is?

A: I think alcoholism can be broken down into two components. First, is the physiological aspect, i.e., some people process alcohol in their bodies in such a way that they develop an allergy/addiction that defies their ability to simply stop drinking. The second is that because of that addiction, which usually has a long history of progression, certain behaviors are constellated around the dependency on alcohol. Alcoholism, I believe and am supported by the research, is a genetic trait. Certain people are predisposed to having the disease. But individuals can also become alcoholic by long and steady abuse of alcohol. This is getting long-winded, but another part of this: in the final picture, we see the physical addiction intertwined with a dysfunctional emotional life brought on by years of not confronting one's realities.

Q: What's your own history with drugs and alcohol?

A: Ah...the schizoid personality comes out. [Laughter] I never had a problem with alcohol. I only moderately enjoy drinking. But I have done many different drugs, especially hallucinogens and marijuana, but never fell into dependency with hallucinogens. Marijuana is a more seductive drug. My personal attitude is that I use

drugs to challenge my awareness and to play the fine line between distraction and insight.

Q: Do you think that there's any difference between alcoholic and non-alcoholic counselors, in terms of relating with clients?

A: I think there's an immediate rapport among alcoholics. And a non-alcoholic counselor has to create a different relationship, one that takes longer. The pros and cons of this issue are that, for some people recovering--in the early stages--they perceive that the counselor doesn't know the depth of their dilemma. On the other hand, there is less chance that the non-alcoholic counselor will burn out due to a heavy emotional involvement that goes awry if treatment is not effective.

Q: Do you think that there is more alcoholism in the Buddhist community than in the community at large?

A: No. I think that alcoholism is, to those who are trained or knowledgeable, quite visible in the community, but one has to paint that against the backdrop of the huge numbers of alcoholics in this country. I think the Buddhist community is a microcosm, to a large extent, at least in the area of drugs and alcohol, of the larger society.

Q: Has your training or experience as a counselor affected your Buddhist practice?

A: Ah, yes. I'm always in touch with people's depression and confusion and sadness, which alerts me to the suffering that's all around. It's a virtual practice to come in to work and to know that you're going to be dealing with people's pain and discomfort. Also, working in a helping profession along with other co-workers, one needs to be able to contribute to the general well-being of the environment. And that takes a lot of positive energy and maitri. I've also learned to trust in my insight, and to help people...and myself, to experience moments of emptiness and to live through the fear of not being in control of one's life.

Q: Do you have anything you'd like to add?

A: Well, I think the most painful thing about recovery from alcoholism is the sense of having to go back to the beginning and start over. And for a practitioner on the path, there's always some aggression about having to return to unfinished business. One must be very humble and kind to oneself in taking care of oneself.

I think the most important thing is being able to forgive oneself and to make friends with that "dark side" that is actually very intelligent. As long as one refuses to get to know that drunk person, the healing can't really take place. And as long as that person continues to drink, it's impossible for the process of getting to know that person to take place.

So, I would say to stick with it. Keep your eyes, ears, and heart open.

Charles K. is an alcohol counselor who works in the Boulder area. He is a student of Trungpa Rinpoche.

Q: How did you come to be an alcohol counselor?

A: I had been curious about alcohol and drugs for a long time. In fact, I was fascinated with them as a kid. My whole family was full of alcoholism on my dad's side, and many of my close friends over the years were alcoholic. Also, I had a dependent relationship with alcohol and drugs, that, at one point, changed abruptly and I never knew why. Alcohol has always been a part of my life and I wanted to know more about why friends and family had killed themselves drinking, and also why I had abused it the way I did.

Q: Would you say something about your history with drugs and alcohol?

A: I used them a lot. I was going through a period in my life in which the foundation of what I'd been basing my adult identity on was falling apart. It was very painful, and I realized that drugs and alcohol relieved the pain. Or they helped me to ignore it anyway. That kept up for about six years. I was using primarily pot, hash, and amphetamines, and alcohol, and gradually got to where I was using mushrooms and coke heavily...but mostly pot and booze. It broke when...my life was coming to a peak in terms of unworkability in how I'd structured it. Then I had to become honest with myself. When I finally started to get in touch with my energy, chronically getting stoned and drunk went away.

When I came out of that, I found myself in a situation in which most of my friends had drug and alcohol abusive patterns. When I went to Alaska, it got really crazy. Almost everyone I got close to had really severe problems with alcohol and drugs. So, I got to wondering what was going on.

Once in Boulder, I started making friends with alcoholics again...before I knew they were...they were just my friends. I never thought of working in the field until I got my B.A. from Naropa. The first job connection I made, through coincidence, was at the Alcohol Recovery Center. I didn't really go out looking for a job in the alcohol rehab field.

Q: How long have you been working there?

A: Ten months.

Q: Have you noticed any difference between Buddhist and non-Buddhist clients?

A: Some differences, but more similarities. For Buddhists, it's still--heavy patterns of avoidance that allow one to tune out the vividness of being alive. Obviously, the damage to relationships, as well as to one's body, is the same. Buddhists don't like to look at their drinking as being problematic, or out of control, any more than anyone else. And they have a more sophisticated rationale, or system of denial, for their alcoholism. The fact that they are "working with their minds" around the abuse can tend to create stronger barriers--arrogance--against a counseling situation. Another difference is that, because they *are* working with their minds, when gaps occur in the drinking pattern, the insight and sense of inherent health shine through more vividly.

My relationship to Buddhists coming through detox is different too. I don't usually allow non-Buddhist clients as much space around sobriety issues. Sobriety is a process, of course. If you drink yourself into alcoholic depression, or are using it to ignore a painful aspect of your life--and when that aspect disappears, you quit drinking--it's still workable. But if it's chronic, when you take your first drink it's like putting on an old, comfortable shoe. Karmically speaking, it's not so workable. To say, of course, that Buddhism will take care of chronic alcoholism is further support of the denial system, but I usually talk more with non-Buddhists about getting off and staying off. But if a Buddhist client is unable to work with his situation in an ongoing way, they may really need to recognize some boundaries.

Q: How is that different from anybody else?

A: It's really not. I think that I get trapped in the same place as a counselor that Buddhist alcoholics get stuck in, and that is in regarding alcoholism as a much more workable thing for them. In general, I have more trust that Buddhists will not solidify their patterns so much, but with alcohol, by the time I see them, it's already pretty solid. And it's occurring on the body level. It's a tremendous obstacle to synchronizing body, speech, and mind.

Q: Do you think that there are many alcoholics in the sangha?

A: Well, maybe. But they haven't killed themselves yet. A lot of it is due to the ignorance in the sangha about alcoholism, and about what a person might need to wake them up. In other words, there's a lot of enabling in the sangha, and unconscious drinking that tends to help a person with a problem to keep going. At the same time, I'm not trying to make a gloomy statement about what I've seen with drinking in the sangha. I've seen some individuals put a lot of effort into sobering up and have it work out for them. And people around these alcoholics are starting to understand how they can *really* be compassionate toward the whole thing.

Q: What's the worst thing about your job?

A: Having expectations, and opinions about what people should be doing regarding recovery, and getting invested in that. And seeing how that doesn't work. But I see a very narrow band of the spectrum--the detox phase of the illness, when they're really sick.

Q: What's the most rewarding thing about it?

A: Seeing movement in people's lives. That they actually are learning that their lives are workable, and that this particular habit pattern, although a very strong one, is workable.

Q: What do you think alcoholism is?

A: It's usually defined by the symptoms: use of alcohol to the point that it's creating problems in your life, and then its use to counter the problems that its use has created. But I think that it is just a really heavy style of avoiding who we are and what is going on. Alcohol's pretty effective that way. The immediate karmic consequences are stronger than with most habitual patterns, which is the beauty of it. It highlights itself.

Q: Do you have anything to say about the idea that alcoholism is a disease?

A: Hmm. I don't know much about the research that's been done on that, but my feeling is that to try to separate the biological predisposition from the mental predisposition is not an accurate way of looking at it. But that's my hit. If a person has a strong body connection to alcohol, as some people seem to have, I think that they have such a karmic connection, and such a mental capacity, that upon first encounter--in disease terms--they are almost chronic right away.

Q: I've heard it said that there is a high rate of alcoholism among alcohol counselors. Does your job make you want to drink? Or avoid drinking?

A: Practice makes me want to drink! My experience with counselors is that they don't appear to be drinking excessively. Of course, I haven't been doing this for that long, but at the ARC that doesn't seem to be the case. As for me, having been around chronic alcoholism with friends and with clients, drinking sometimes takes on a repulsive quality. But, for the most part, where I used to worry about my consumption--not knowing why my abusive patterns changed--now I feel I have a lot more awareness around my own drinking. And it neither scares nor worries me. I seldom feel like drinking any more. It isn't an issue for me. Now food? That's where I can actually relate to addiction the most.

Q: Do you plan to stay in the field?

A: I don't know. I want a strong grounding with this, because I feel that I'll always run into it. It's so pervasive in our culture. To do any kind of therapy, one needs to recognize and understand alcohol and drug abuse.

Q: Is there anything you'd like to add?

A: Where would I start? I guess this is along the lines of what I was saying about relating with Buddhists differently in treatment--I feel that, as a habit pattern, alcoholism is no more or less respectable than anything else, but people tend to lay a lot of trips on themselves about it. Obviously, alcoholism will kill you before you've lived what we consider to be a normal lifespan. And it reduces the integrity that we are capable of in relating to our lives in general. But we're all going to die anyway, and maybe this is what a person needs to work out in this lifetime. At the same time, we have a precious human birth, and by relating to our fortunate circumstances--hearing the dharma, having a guru--I think we can work out our karma more consciously and not just act it out in a self-destructive manner. People are actually very fortunate to have such a situation as alcoholism to wake them up. It brings things quickly to a head. It's not as subtle as some ways that we use to ignore the world. I don't want to be trite, but the notion of alcoholism as blessing is as old as the hills.

Phil W. is a member of Sarpashana. He lives in Boulder, and is a student of Trungpa Rinpoche. He describes himself as "a guy who's looking for things in life, not being satisfied with my life as it is; earthy, and somewhat quiet and low-key."

Q: What makes you think that you have a problem with alcohol?

A: Because I would use alcohol to relax nine times out of ten, and the tenth time I'd use it to blot out my existence. Or the world. And in doing that, I'd get into trouble.

Q: What kind of trouble?

A: Usually anger would come out. I'd get hostile. And also find myself having trouble with the law, involved usually with my car and driving.

Q: You're looking at a legal hassle involving driving now?

A: In the last eight years, I've gotten numerous traffic tickets, and four of those were verified as alcohol related. With the stiff laws in Colorado these days, that means a lot of trouble. Right now I'm facing anywhere from a few months to a year in jail.

Q: When did you have your last drink?

A: October 30th which makes it about three months ago.

Q: What's your history like with drugs and alcohol?

A: The first time I drank, at 18, I had a blackout. I would have blackouts maybe once a year after that. Then I got into marijuana and psychedelics in the late '60s. I became psychologically addicted to marijuana and smoked every day for at least five years. I took a lot of psychedelics, which created something of a breakthrough. I thought it was quite beneficial. But then, toward the mid '70s, there was no more to be gained from those drugs at all. I was finally able to quit marijuana altogether in the mid '70s. I moved to Boulder, and alcohol became the drug of choice. I continued my pattern of controlled drinking, with occasional outbursts, which went from happening once every three months to once every three weeks.

Two years ago, with encouragement from a DUI therapy class, I started taking Antabuse, and continued that for about seven months. I found it helpful as a way to stop drinking, but after I quit doing it, I felt that I had the power to control my drinking, and found myself in the same patterns again, with more legal problems.

This time I've quit without taking Antabuse, and something feels more down to earth about it this time. I definitely know that I can't handle alcohol. I just can't handle alcohol.

Q: How much were you drinking at 18?

A: I didn't drink very often--you know, too often--but sometimes I'd drink a half pint--something like that.

Q: And how much were you drinking when you quit for the first time?

A: One or two beers a day, and then maybe twelve beers on a heavy night.

Q: Have you found any relationship between your recovery and your Buddhist practice?

A: Buddhist practice? Like specific practices? Or sangha? Or Sarpashana?

Q: How about Buddhist teachings?

A: The Buddhist teachings, as I experience them in this sangha, are confusing. The main source of help that I've gotten is from the Boulder sangha, especially Sarpashana. I feel that a support group is essential for my sobriety, and that was the reason that I couldn't keep it up in the past.

Q: Have you gotten any sangha support aside from Sarpashana?

A: Yes. I think that the times have changed in the sangha. In the past I've felt that the support was almost completely negative support. The sangha has, for me, unbelievable resiliency as far as not giving up on a person is concerned. Basically, people have had very good and helpful intentions.

Q: You live in a practice house. How is that around being sober?

A: A few years ago I thought it was very difficult--extra difficult. But now people are much more mindful of their drinking and aren't laying trips on people who try to quit drinking.

Q: What did you like most about drinking?

A: Two things: usually I would go for the immediate euphoric quality of drinking. But at other times, when I wanted to blot things out, I would use it as anesthesia.

Q: What do you like most about being sober?

A: How can I put it in words...? The interesting qualities of life--just leading my life, dealing with things as they come up. Not trying to bide my time until the next drink. The feeling is that...I like better working with my life honestly. It's kind of new to me.

Q: Did your drinking affect the quality of your relationships with other people?

A: My relationships are strange. [Laughter] Frankly, I don't feel like I have...I mean I have friends...but I don't have strong relationships. Well, I haven't at least in the last year and a half. When I was drinking, I would drink alone...when I really wanted to drink. Now I find myself talking much more emotions. I still don't have any really strong relationships with people...I don't know. I think I have a lot of Buddha family quality, the way my mind works. Everything comes up out of vast empty space... [Laughter]

Q: How about your relationship with your parents?

A: That's been good. Although our differences are so great, there are a great many areas in which we have a truce. We try not to bring up certain things that are only inflammatory. Still, we have great love for each other.

Q: Is your drinking one of those inflammatory issues?

A: They don't know about my drinking problems at all.

Q: Do you feel a change in the way you relate to people now?

A: In the way I've viewed myself, I'd always felt that I was a nice, interesting person--I mean I was in my mind. So maybe now those ways of being are coming out. I'm definitely not getting into crazy rages and creating a lot of problems around that.

Q: Gee, and that usually magnetizes people so much...

A: Yeah, it does. It does. That was one of the reasons for doing it, I guess.

Q: In what direction would you like to see Sarpashana go?

A: I think the best way it could go would be toward somewhat the way AA is...in that it's a good reinforcement not to drink, and a completely open forum to voice emotional, honest feelings that come up. Feelings that are considered maybe taboo in the greater sangha.

Q: What are you thinking of?

A: Well, it seems like I was thinking about... I've had to be such a closet case all my life that I can't be anything else. It's that idea...working with emotions is very helpful to me where I am right now. The AA-type approach works with that very well. But through the dharma I know that there's more than that. So, it's a combination of working with emotions and dealing with thoughts...working with paramitas, slogans, exchanging self for others, and working with a way of transmuting emotions, not to mention creating and living in sacred world.

First, it's taboo to think that you can't drink. That makes me very confused. Another is...I don't know...this is a problem that I have, which is that I view hierarchy...I want to say that I don't have any gut-level relationship to the life-style of the Vajracharya or the Vajra Regent. On some levels I do, but on a practical level, we're in two different worlds. It's confusing to me because I don't know whether that's a scapegoat for my anger, or if it's something that I really don't know anything about, and that's what makes me angry. And the taboo is about talking about it.

The last time I got drunk was at a Naropa [Institute] dance. I just felt so repulsed by the bullshit in the sangha that I went out and got blasted. I've always felt that I was trying to get in on the way of being accepted on higher levels, but deep down in my heart, in my guts, what I wanted wasn't there.

Q: Do you think that Sarpashana can have any impact on all that?

A: Yeah. I definitely think it can. Maybe it's about going back and getting into the hinayana fully and honestly. And also...Well, it can do a couple of things at least. It can be a support group for those people, 10% or whatever, who are alcoholic. And that's real. It seems that in AA, through thirty years of creating a situation, an atmosphere is created in meetings that is wide open. It's not intellectual, and there's not a lot of dogma. People there honestly have problems that they want to work through. An open situation is created and they can do that. I think Sarpashana can do what AA does, as well as use all of the rich resources of the lineage, to help people--where they're at right now. And it can

also help create more awareness about the problems of addictions and the skillful means to deal with them throughout the whole sangha.

Susan E. is a Boulder resident. She has been practicing meditation since 1975. She is a Sarpashana member who describes herself as “a hermetic philosopher on the Buddhist path with a sense of humor, some arrogance, and some gentleness.”

Q: What makes you think you have a problem with alcohol?

A: When I quit drinking in 1980, I was physically addicted to alcohol. I couldn't control it. Once I started drinking, that was it. No stopping. No sleeping. No eating. Drunk driving, and pretending I was going to crash or kill someone--I was practicing suicide. Friends tried to tell me what was happening, but of course I told them to handle their own problems. In the end quitting had to be my own decision. Later, I was very grateful to all the people who had tried to help me. They were friends.

Q: How did your friends try to convince you that you had a problem?

A: They kept harping on about alcoholism. “But I don't have a problem. Not me. My father did, but not me.” One day I saw the real pain on the face of my lover, and it dawned on me that this drinking was causing pain and harm. That shocked me and I said, “Hey, drinking isn't all that important to me.” I quit. For three years.

Q: What is your history with drugs and alcohol?

A: My father was an alcoholic and his drinking caused havoc in our family. Ultimately, he quit, but the time of his drinking was always lurking around. I thought I would never be like that. When I was a teenager, I tried drinking and gulped some vodka the way I thought characters in Russian novels did. In my twenties, I was a very controlled, sober person. In grad school, friends would invite me to drink to loosen me up. It worked. Five years later I quit because my lover said that I was ruining our relationship. After three years of sobriety, a teacher/friend said to me that I should be able to pick up alcohol and put it down. No attachment. Since I didn't understand alcoholism, I took her advice and started drinking again. At that time I didn't know that alcoholism is a progressive disease. By the time I quit the second time, I was aware of addiction, and I was much more of a wreck, physically and emotionally.

Q: What was your experience when you quit the second time?

A: It was much more difficult to quit. It took me a year of constant pleading with myself and the gods to make the break with this demon that demanded a drink NOW. It was a psychodrama. The warrior kept harping, “Do you want me to live or die?” The drinker would say, “Hey, relax, what's a little drinkie-poo? And you're so tired or nervous or whatever.” I never thought of AA--I didn't have time to figure out their trip. It's not my style either. I had to do it myself. Finally, the demon cord snapped and I've been sober ever since that moment. When Sarpashana started, I was thrilled to have fellow practitioners to relate with about this process. Part of sobering up meant extending to

others and sharing my inner and secret torments and successes.

Q: Do you see practice and recovery as working together?

A: If you make the commitment to a sane, enlightened world, you have to put your money where your mouth is. [Laughs] Practice makes you stronger, more connected to your humanness, your vulnerability. If basic goodness is so, then maitri--loving kindness to yourself--begins to manifest. This basic goodness, like drinking, is bigger than our conceptions of ourselves. Practice leads you to discover how to find your way. I would never conclude that drinkers *have* to quit drinking. If I had met up with Sarpashana earlier, I might have dealt with drinking in another way than I did. However, my way is to quit cold turkey. For another, it might be some other way. As practitioners, we have to discover that for ourselves.

Also, you can't take the example of the teacher as an excuse for drinking. Rinpoche, his entourage, the guards, the vajra world--this is his context for working it through. Because of who he is, he has enormous help and also enormous challenge. We are not at that level at all. However, his fearlessness in working with his world is an example that we might also be fearless in working with ours. There are no closet drinkers in this crowd.

Another effect of practice is to connect us to a larger picture of ourselves and our world. Practice heightens the contrast between the self-destructive quality of excessive drinking and the possibility of true connection with other human beings. Seeing that warms you up a bit. Drinkers are notoriously warm, melancholy, sad heartthrobs. There is a lot of emotionalism in drinking. We secretly believe that people will never really love each other. That we can't love either. Practice opens the options for dealing with emotions. Drinking can't remain the crutch it once was. Emotions don't go away with the next drink.

Q: You've been sober for about five years? How would you describe life without alcohol?

A: After resigning from the Alcohol Profession, I suddenly had all the time in the world. It's amazing to realize how much time is spent planning the lifestyle of Drink. Shopping at the Liquor Mart, going to a party, drinking, getting drunk, up too late, hung over in the morning, etc., etc., etc. When I first quit, the point was to survive, to see if I could live in the world as it is. It was tenuous for a while because I felt vulnerable and frail. However, I also started to get back into life, doing things I had wanted to do but didn't have the energy or the courage to do before. I had to learn how to socialize all over again, to be as I was in social settings--nervous, boring, at ease, whatever--without escaping the awkwardness.

Quitting meant that life was going to be different. New friends, new courage, new strength, new challenge. Without a doubt it is totally amazing to be sober twenty-four hours a day. I tried psychedelics briefly as a reward for sobriety, but that didn't last long.

I was sober through the entire 1981 Seminary, which was a powerful experience or Being There all the time. At this point, the sharpness of sober perceptions and the precision of the environment *as it is* feels like advanced training.

Q: What about emotions?

A: I knew that if I wanted to remain sober, I would have to deal with them. Without doubt it was emotional confusion that led me to drink as a way to escape from pain. If I was going to stay sober, I would have to relate with this “dark” side of my nature. How to do that I didn’t know, but I promised myself I would. When feelings came up, I would take the time to feel them. When I got angry, I would *be* angry. Or sad. Or joyous. Drinking had blocked the entire continuum of emotion.

Q: Do alcoholics have to quit drinking?

A: Quitting this time was more conscious, in terms of alcoholism. I knew now that it is a progressive condition. Between the time I had begun to drink again and the time I quit about a year and a half later, I had experienced advanced stages of that condition. Loss of appetite, insomnia, craving that dominated my life, weird, intense, quasi-suicidal behavior, loss of health. Women are affected by drinking much faster than men are. That was a surprise. Our bodies are more sensitive, not geared to such excess. There was renewed admiration for AA for having helped so many people. There was an awareness that we are terribly under-informed about alcohol in our culture. That drinking in our society is not a sacred activity at all, but fundamentally a barbaric pastime.

It is also clear that alcohol itself isn’t the problem. Alcohol in the proper environment is a fantastic gift to us. We open more, we respond to each other more, we celebrate our lives. This, however, was not the context in which I discovered alcohol.

As far as quitting goes, you know when you’re handling yourself properly. If you’re addicted and your life revolves around alcohol, take a good look at that.

Q: What has been your relationship with Sarpashana?

A: What was astounding to me at first was to be in a room of people who understood every nuance of the drinker’s game, of drinker’s “logic.” This common understanding taught me I wasn’t all alone in inventing this pattern of drinking life up in one gulp. Joining Sarpashana opened my eyes to the damage alcohol causes. Lost families, careers, health, emotional madness. There were people in the group who took drinking beyond what seemed humanly possible. I’m a baby, a “high bottom” alcoholic. Also, I didn’t like the feeling of being addicted to something that could run my life against my conscious wishes. Some people drink *for* that reason. They don’t want to take responsibility for their pain, their behavior. In some cases, you are so far gone, you can’t even get to first base in terms of taking responsibility. On the other hand, no matter how much someone drank, the pattern of escape was there for all of us. Sarpashana meant a lot to me in terms of sharing with others who *understood* the ways of alcohol--the emotional panic, the manipulation, the desperation, the self-hate. At some point, the group became dogmatic, and everyone was supposed to quit drinking. I didn’t feel comfortable with this. Self-

righteousness doesn't belong in the Vajrayana. Moreover, I knew that not every drinker quits. Some postpone it until death is staring them in the face. Others might go about it in different ways. Quitting completely means that you're ready to face the bottom line of your life. That's a big decision and one that takes time and preparation.

The joke on the drinker is that quitting is the easy part. The alcohol is a symptom of underlying beliefs and values that don't even surface until you are sober. The longer I'm sober, the more the layers of confusion appear. So far, I have dealt with them by facing them as directly and honestly as possible. Of course, they're still some squirming tricks. Now I fill my day up with things to do until I am completely exhausted, i.e., Hung Over. After all these years, I am still gulping life.

Sarpashana taught me that everyone is unique, everyone has a particular path and way of going about their lives. I was touched by the group's willingness to deal with alcohol at all. It was a way for me to go more deeply into what it means to have a sangha. It was also painful since I feel inadequate to the task of helping another drinker. On some level, being sober and living my life as a conscious human being is my sole contribution. I made a choice to live, not self-destruct. That choice is remade again and again as the undertow pulls at me to succumb to despair and cynicism. Then I notice that it's spring again and my mind is dried out and my heart is beating. Life enchants. A drinker dances on this edge always--drunk or sober. Sober is kinder.

Roger D. has been practicing under Trungpa Rinpoche since 1979. He is a graduate of the M.A. Psychology Program at Naropa Institute. He is a member of Sarpashana and describes himself as "a dark-eyed, angry young man about town." We had lunch together and it rained.

Q: Why do you think you're an alcoholic?

A: Because I think it's my path to have to work through. It's one of my major teachers. I subscribe to *all* the theories: genetic, biological, karmic--all those takes. Some people get their legs cut off. I've got alcoholism. And all the storylines around it. It's fundamental to who I am, but I don't like it. Some people call themselves "grateful alcoholics." I can say that without anger. It's my opportunity to get sane.

Q: What is it in your drinking that disturbs you?

A: When I do drink, it's always for self-serving reasons. I lose control over the amount I drink, and over what I do. I have blackouts. I start buying in to incredible self-deception. My drinking leads to solidification rather than to expansiveness. I'll drink in spite of all evidence that it's harmful to my body, my speech, and my mind.

Q: When did you last drink?

A: Three weeks ago today.

Q: Can you describe your last drink?

A: I can't remember my last *drink*. I can remember my last *drunk*. On Saturday night I was lonely and horny, and decided to remedy that situation in Denver. And within...let's see, I left Boulder at 9:30 and by 2:30 in the morning I was in jail. I probably had six, maybe eight, beers. I wasn't that drunk. Huge consequences from little actions.

Q: Why were you in jail?

A: Drinking and driving. It was very clean. I was on a deserted road to Castle Rock, heading in the wrong direction to get home. When I realized it, I turned around in an intersection. A hidden cop watched me do it. It was a fluke. But I just don't have the kind of room to play any more. The phenomenal world comes in like thunder. After jail, I got my car and went back to Denver to a little watering hole of mine, and proceeded to drink for about ten hours straight. That was in response to getting busted. Oblivion mentality. The only way I could deal with the pain. I managed to lose the car, which was lucky because I couldn't have driven it. Monday, I went to AA, and that was my first day of not drinking or drugging. I'll abuse anything. It always leads to something bigger. It was a hit of speed that got me going on this one.

Q: Have you tried to quit before?

A: During the last three years, which is when I've been drinking on and off, there's been a lot of sobriety. In three weeks I've gotten some perspective back. You know, I'd be sober a month, three weeks, three months. But since I've made a commitment this time, I've gotten a load of how sick I *am*. It didn't look sick to me. Even while dry, the alcoholic mentality was functioning. I didn't know how bad it was getting. But the feedback is loud and constant. I was derailing precious human birth. Throwing it away.

Q: What's your history with drugs and alcohol?

A: I started drinking when I was 15. I'd had sips of this and that since I was a kid, but this time I got drunk and passed out. It was evident that there was some kind of powerful reaction to alcohol. As it does for most people, it got heavy along with relating to my sexuality. The two were wound up together. Essentially, it was the standard thing--drank through high school, heavier in college, nervous breakdowns, tried to kill myself, psychiatrists--standard. LSD stopped the drinking for about a year. I went the way of all hippies and did everything.

At twenty-eight, I bottomed out. I was lucky because I had a strong support system. My parents and friends kept me from becoming a street drunk. But it was drinks at 8:00 in the morning, jails, detox, DUIs. In July of '78 I went into treatment, and the spiritual shift which seems to be necessary to recovery happened. For four and a half years, I didn't drink. In the last two years of that, there was a little pot, a little of everything, but nothing to excess. I was an alcohol counselor.

It was like that until 1979 when I enrolled at Naropa. The psych program knocked me out of the god realm. It took something powerful to do that, and I'm grateful. But with it

went all the things that kept me sober. One and a half years later, I was drinking again. Once every couple of months at first. I wouldn't drink in Boulder, around people who knew me, because I was an alcohol counselor who didn't drink. But from the end of '80 until now, it was easy controlled drinking and heavy bottoms. More DUIs, more loss--financial, emotional disaster.

It was important to get drunk again. The sobriety wasn't deep enough, real enough. I had to get the clarity that the bottom brings--if it doesn't kill you.

In the process of the struggle, I had hepatitis three times, with lots of liver damage. I can't drink that way. I'm only thirty-six. I should have a few years left.

Somewhere in the Buddhism and the alcohol the spiritual transformation that made it a joy to be sober was lost. I'm struggling to get back to sanity rather than to self-serving destruction. Okay. After the last fiasco, I know that that practice doesn't help the dead. Maybe it does on some level, but I need to be alive and well to *do* it. I bought the confusion, but I had to pull back. I bought the denial, the lack of information, the idiot compassion from the sangha that is keeping a lot of us sick. I had to take responsibility for my own health, which meant backing away from the community. I am not a vajrayana practitioner--but I trust my intelligence and my experience. And I think I can be a sober person *and* a Buddhist. Now that I'm putting together some real sobriety--rather than just a switch of allegiance, I'm willing not to drink. As my energy clears I'm finding myself, through AA--a spiritual program involving prayer and meditation--reconnecting with sitting practice in a way that I haven't done in a long time. I'm really happy about that. Now, through AA and staying sober one day at a time, I can take the Bodhisattva Vow each day and connect with it, because it's saying the same thing.

For me, working with alcoholism is no different than the battle of ego. Period. Maybe that will change. I don't know. I'm not there. I'm here. I would like to think that alcohol can be amrita for me. But thus far, it's proven to be only poison. I *always* drank to connect with sacred world. But it was perverted. It was my own eternity that I was concerned about.

Q: What's the quality of your sobriety *now*?

A: Well, one thing is that I'm taking "one day at a time" seriously. And personally. It's not just a good *idea*. With it comes a lot of clarity. It's scary and painful--but I don't have to use alcohol to get away from it. There are elements of real peace, serenity--all those words starting to creep in. The thing between *me* and *it* has more gap now. Like with shamatha/vipashyana. The longer I stay sober, the more irritating it gets. I get a chance to learn by seeing it. I'm learning about maitri, finally. My god--since 1979 I've been trying to be kind to myself. *This* is kindness. When I go to bed, I think whatever there is out there to thank that I *know* I'm going to bed, and not blown out on some chemical--even a third of a joint or a couple of drinks. Mindfulness. It's clear. I can't understand people who are working with mindfulness while they're altering their consciousness completely

with chemicals. The only way *I* can acknowledge dharma is in a straight line. I've been trying to get the magic--but there was no growth. It wasn't working.

Q: Can you say that now it's working?

A: I'm still real scared. I'm getting a hit of real egolessness. Groundlessness. When I'm not trying to defend myself, it works. I think that between me and the sky, there's nothing. When I'm not denying the groundlessness. I don't know. The more sober I get, the more I love my teacher. I don't have to worry about crossing a lot of bridges to get to him. I don't think anybody wants me to hurt myself. People need to understand that ignorance can hurt people in ways they can't understand. This is a practice of twenty-four hour awareness. It's the only continuity I've ever had.

Jane S. is a student of Trungpa Rinpoche and a member of Sarpashana. She has been practicing meditation for ten years and describes herself as "feeling almost like I'm invisible sometimes. I'm an energetic, creative middle-aged woman. I've a good sense of humor and I'm fairly attractive. I have a young mind."

Q: What makes you think you have a problem with alcohol?

A: Once I got started, I found that it was a good way to get away from wherever I was. And it gave me a buzz. It made me more sociable, and I thought it made my life more interesting, until I realized that it just made everything more boring. Because I didn't have the energy to do anything except drink.

My daughter brought it to my attention that I was an alcoholic many years before it got to be a really heavy habit. Her husband was an alcoholic and she knew all the symptoms. But for a long time I didn't care. I'd built my life around alcohol, and I didn't realize that I couldn't do anything else because I was so enmeshed in my drinking. So I drank every day. And I didn't go out much. Because I didn't care. About myself. What I cared about was my vodka. It was a great crutch while it lasted.

Q: How long ago did you have your last drink?

A: About two and a half years ago. Just after my fiftieth birthday. My daughter was visiting me and I drank myself unconscious and went to bed at 8:00. The next day, she really got on my case. She asked me if I was going to drink myself to death like my father did. And her son wouldn't even get to know me. Later, she was taking me some place in the car and I heard myself say, "I don't know what I would do with myself if I didn't drink every day."

So I called Pilar and asked her about Sarpashana. She told me that everybody she knew who had really stopped drinking had gone to AA. So she took me to a meeting. I had a bottle of sake that someone had given me on my birthday. I intended to have a few drinks before the meeting, but I didn't have time. [Laughs] I never did drink that bottle of sake. I gave it away after a week or two.

Q: What did you like most about drinking?

A: The buzz. I didn't bother to drink beer or wine. I always drank something like vodka. Straight. And it had nothing to do with sociability. I did most of my drinking alone.

Q: What did you like least about it?

A: Nothing, really. I quit drinking early enough in the evening so I could be sober when I went to sleep. I hated being dizzy when I went to sleep. I never had a hangover. I might have had a couple in five years, but not enough to bother me. The only time I'd get really drunk was when I was around other people. I'd get excited and not watch how much I was drinking.

Q: Why did you quit drinking?

A: I guess I'd had enough. I learned what I needed to about being an alcoholic. I have to try everything. Except heroin. [Laughs] I never had any incentive to try heroin.

Q: What's your history with drugs and alcohol?

A: I used tranquilizers for years when I was married. I used sleeping pills sometimes. I had smoked dope since 1967. I used psychedelic drugs for two or three years: '69-'71. And I had periods, after '71, when I didn't use any drugs at all. I didn't feel like it. I wasn't drinking either. I wasn't interested in it. It wasn't until I got involved with Buddhism that I really started drinking. Everybody drank. Some more than others. And that was very acceptable. But at Karne-Choling I really got into it on an every day basis. All I had to do was to ask for another bottle, and they went and got it for me. One day, when someone asked me if I was an alcoholic--when I had asked for a bottle and he thought he might not be able to get it *that instant*--I said, "Yes." So he got it.

It never occurred to me that there was anything disgusting or degraded about being an alcoholic, or that it impaired me either. I didn't really realize anything about alcoholism until I quit drinking. I guess I wasn't interested while I was drinking. [Laughter]

Q: You drank for five years?

A: Yeah. Approximately.

Q: If you compare the first drink with the last one, what do you notice?

A: It was a lot more fun at first. It was special. And at the end, it was just what I was doing all the time.

Q: Did your drinking affect your relationships with other people?

A: Well, I suppose it did. Especially with men. The women I got to know when I was drinking weren't drinkers, and they liked me. But the men I got to know were always alcoholics, and I got sick of them pretty quick. Alcoholics don't seem to have any backbone. They may think they're crazy about you, but the only thing they really care about is drinking. And who needs it? They never had any money. They never wanted to

go anywhere because they were always drunk. And the conversation was really boring. So I spent most of my time with women. I don't seem to be attracted to men unless they *are* alcoholics, like good old Daddy. And I'm very conscious of it now. But it doesn't make non-alcoholic men any more attractive. [Laughs] I never felt that the men were interested in me, the way the women were. They weren't interested in my history, or in movies, or books, or politics, or anything. I like to go out. And the women would go out with me and the men wouldn't. And I'm still in contact with the women. Probably always will be. But the men just sort of drift away. They weren't friends. They were just lovers.

Before I quit, I had an affair with an alcoholic man. He was so nasty when he was drunk. He was mean. And he'd carry on all night and not let me go to sleep. I realized that if I wanted to have a relationship with a non-alcoholic man, then I would have to be a non-alcoholic, [laughs] I mean a non-drinking woman. He scared the shit out of me. I don't like being scared.

Q: Has your recovery had any effect on your relationship with the sangha?

A: Umm. Well, it's made it possible for me to *relate* to the sangha instead of just being drunk. I make more effort than I did when I was drinking. I don't go to any sangha parties though. I don't get invited for one thing. And I'm not interested in hanging out with people who are just getting drunk anyway. As I recall, parties are to get drunk. I used to go to them drunk anyway, in case they didn't have enough vodka to help me out. I never went anywhere unless I was drunk.

People now, still, offer me drinks. Nobody seems to remember that I don't drink.

I don't find the community particularly friendly anyway. So I don't think it matters if I drink or don't drink in terms of relating to them. Everyone I know drinks, except for the people in Sarpashana. And when my friends who drink start drinking heavily, I clear out. As far as practice is concerned, it doesn't have any relevance to me whether I'm drinking or not. But when we have Sun of Wisdom sadhana, and everybody has some amrita, and I taste it, I think, "Oh, this is alcohol." But that's not a drinking situation. It's a spoonful in my hand. I use it ceremonially.

Q: Had anyone ever told you that you had a drinking problem, besides your daughter?

A: Nope.

Q: Do you think that the Buddhist community drinks more than the society-at-large?

A: I don't have the slightest idea. I don't have anything to do with the non-Buddhist community most of the time. I have a friend who drinks--she knows she's an alcoholic but she doesn't want to do anything about it--she doesn't drink around me.

Q: Did your drinking affect your Buddhist practice?

A: Well, it affected how I felt when I was practicing, that's for sure. And I've heard an awful lot of talks while inebriated that I couldn't remember a word of afterwards. But I

have a bad memory. I used to sit drunk at my Dharma Study Group before I came to Boulder, and I used to nod off a lot. By the time the three hours were over, I was pretty sober.

Q: Has your practice affected your recovery?

A: I suppose it has made me more aware of myself--what I'm thinking and doing--than I would have been otherwise.

Q: Have you continued to attend AA?

A: No. I did go into group therapy for six months though. Everybody there went to AA.

Q: Why don't you attend?

A: Because I don't feel that drinking is a problem any more. And it bores me.

Q: What has been your involvement with Sarpashana?

A: I started going to Sarpashana after group therapy, because I felt that I had something uplifting to offer. I thought you could use my energy.

Q: Has Sarpashana been helpful to you?

A: It has made me feel a certain kinship with other Buddhists who don't drink any more. It's almost like group therapy. And it seemed that I should be more active in the community. That's one place where I can click in with some meaning.

Q: Is there anything you'd like to add?

A: Well, it seemed to me, as a Buddhist--with my vows to help other people and beginning by helping myself--that I should try to get my act together. And obviously drinking myself was not getting my act together. [Laughs] I'm glad I'm an alcoholic because it gives me more insight into the problems that people have with alcohol. It's a very American neurosis. Now that I'm on the other side of it, I want to make myself available to people who want to work with not drinking.

Beverly E. has been practicing meditation under Trungpa Rinpoche since 1972. He is a member of Sarpashana and describes himself as "very bright and wonderful."

Q: What makes you think you have a problem with alcohol?

A: Because every time I drink, I get into trouble--especially with myself. I don't really need to get depressed doing this to myself any more. Depression is always the first symptom, or expression, or experience--falling asleep. From there on in, it's just yucchh. Down-the-tubes stuff. Of course, there are other things going on. I'm finding out about how to generate intoxicated states *sober*, and those states are very wonderful! Very earthy...

Q: What's your history with drugs and alcohol?

A: I started drinking with my father at home. Drinking was a part of his life, and it was an acceptable thing to do. There was no reason *not* to drink. I continued to do so from the age of fourteen until I detoxed at forty-two.

Q: What's your style when you're drunk?

A: There are a lot of them. Usually it's insular at first, then flamboyant, then resentful and sloppy, and falling asleep.

Q: What was the experience that led you to detox?

A: It was a message from the teacher--the Vajra Regent.

Q: Would you talk about it? It might be helpful to other people.

A: I'd been drinking steadily in one fashion or another since the summer of 1979. Constantly flirting with--and testing--feeling cut off from other people. Basically trying to find confirmation that I *was* cut off from other people. Lots of drinking. In the summer of 1982, I got a DUI--right in front of Dorje Dzong [laughs] and through all the misery of that particular experience, the message from the Vajra Regent--to be very careful while drinking--broke through. That was what started my actual thinking about stopping drinking.

Q: How long since you had a drink?

A: What's today? Halloween? Since September 12th, so about a month and a half.

Q: And you'd been sober a while before that?

A: Well, I detoxed in September, 1982. I got drunk once in the late spring of '83. But basically I'd been setting myself up since then. I mean, the drinks in the spring were while I was alone, and I don't usually do that. Drinking alone, for me, is a sign that it's going to go down the tubes. During the weekend of this past September 12th, I had convinced myself that I wasn't *drunk* because I was around people, doing a lot of physical work, and things were happening.

Q: How would you describe your sobriety now?

A: Definitely I learned something. This time it has the quality of dropping all warfare. I'm just looking, and looking, and looking at all the patterns--habitual and otherwise. This time, it's characterized by a lot of expansion, a lot of very direct talk with people, and no schmoozing around. But I'm definitely celebrating.

Q: What has been your relationship with Sarpashana?

A: Well, I haven't really been active until recently. I didn't call anybody from group when I got drunk on the 12th. But, *now*, if there was anything coming up that would--I'd call. I feel able to communicate with other people in Sarpashana, in group.

Q: What do you see is the relationship between recovery and practice?

A: Generally, you're not practicing if you're drinking. [Laughs] The other side may be

true also--I'm practicing so much more and practice is definitely supporting and expanding sobriety.

Q: So you don't see any conflict, per se, between sobriety and tantric practice?

A: Oh, come on, that's loaded--if you'll excuse the pun. But, no. I don't. Because I'm intoxicated all the time--sober--the more I practice. The experiences, the people, the quality of life--it's just what I'm looking for. And I feel that it's just beginning, or constantly beginning, and I'm delighted to say so.

Q: In what direction would you like to see Sarpashana go?

A: I'd like to see it become more inviting to more people. Sangha and non-sangha. Especially to people who have doubts about whether they are alcoholic, or have a drinking problem. That they could see that it's not a second-rate situation. That we're not the scabs and drunks of the sangha--really! That more people would come. That Sarpashana is about practice, and your life, and not just about *not drinking*. And possibly, the generous effort of showing up could help them, and therefore others. There are other commitments that people have, I realize. So--you have to attend Lady Rich, or do a Kasung shift...there's all that, rather than coming to group. Maybe there'll always be that "stain" on the situation...that people want to avoid us. They'll go to a therapist, but...The first step is opening up to a *no-credential* situation.. As square one, it's completely workable. You don't have to crash to genuinely deal with whatever is torturing you.

Q: What do you think *alcoholism* is?

A: I don't know how to answer that. It's a real pain in the neck. After much thought and deliberation, I can say *that*, at least.

Q: You're going into jail on Monday to serve five days for the September DUI. How do you feel about that?

A: I don't feel any social guilt, or, you know, self-deprecation about it. Actually, the experience around getting sentenced was quite good, so five days isn't a problem. It was good because I had the opportunity at the trial to actually *talk* to the judge about alcoholism in general, and about what the courts can do. That could not have happened without a year of support work through the Alcohol Research Group in Boulder, and more recently, Sarpashana.

Q: Is there anything else you'd like to add?

A: Yeah. I'd like to request that people be a little kinder to themselves, and to others. If there's any relationship between that and one's alcohol use, I think it's becoming pretty obvious that there's something one can do about it. My experience is that there is incredible kindness in this situation. When I detoxed, the first impression that I got from the people involved--professional, friends, relatives--was that they were incredibly kind and gentle to me. Relating to *that* is one of the first steps. If kindness can happen in any painful, or threatening, or challenging situation--alcohol-related or not--there's a better chance of keeping your sense of humor [laughing]. Really. I think that's the first step in

creating a genuine sense of humor and delight.

Phyllis K. is a member of Sarpashana. She has been practicing for fourteen years and describes herself as “Dharma Torch of Faith and Boundless Fearlessness. Working with those names as inspiration.”

Q: How are you?

A: I’m fine. I’m studying about bodhichitta--making me feel the preciousness of human birth, and also scummy, but I can’t appreciate that.

Q: What makes you think you have a problem with alcohol?

A: Well, I think of it as a way to get out of responsibility or to get out of being who I am, and every time I’ve used it for that I’ve made a big mess. Hurt me and others, and gotten very depressed. I can’t “mindful drink”--I’ve tried that. I can’t drink mindfully.

Q: What’s your style when you’re drinking?

A: It begins with warmth and insight and opening up. Then it turns usually. It’s different in different situations. It can turn into aggression. It’s very energetic. I’m not a quiet person when I’m drinking--very talkative, excitable. When I was drinking, too, there was a lot of paranoia. Pretending I was not drunk.

Q: What’s your style when you’re not drinking?

A: The same. [Laughter] Well, I’m more even and down to earth. Although there really are ups and downs. I can say that I feel...I don’t know...that I’m just beginning to discover my style. I don’t know who I am. When I’m drunk I’m not discovering anything. I mean I have a style and all that, but...I guess I’m vulnerable.

Q: What’s your history with drugs and alcohol?

A: Well, my parents always drank. I grew up in a drinking culture. Everybody drank. It was civilized. And I didn’t like it when I was young. I wanted my parents to stop. So I was aware of it. My mother would give me sips at cocktail parties.

I started at about eighteen. It made me feel good. I remember that when I did drink, I drank a lot. I never threw up or passed out or anything, or rarely anyway. I noticed that I drank a lot in the spring. There was a seasonal thing. And I’d stop without forcing it. But I remember that when I was drinking a lot I worried about being an alcoholic.

Q: When did you have your last drink?

A: June 27th--so that’s six and a half months ago.

Q: What was that like?

A: It was on the plane to Boulder. It was nice. It was just one glass of wine. It felt good at first. Then it stirred things up and I knew I wanted more. So it was not very pleasant after

all.

Q: Did you have an experience that led you to look for help?

A: Not really. It was a culmination of things. A relative who has seen me at a wedding wrote me a letter. She's actually going to AA now. And my mother-in-law said something. It was more the way I acted...

Q: What's the quality of your sobriety now?

A: Well, there's a lot of commitment. I'm not in the same place as when I was having slips. It's gone beyond just the drinking issue. There's still intoxication. I feel myself being drunk with my emotions. I rarely want to drink. I don't see that as a solution to anything. But I realize that I could forget that at any moment. I want to be in touch--I'm an alcoholic, you know? I want to wake up. Not be deluded. I see more and more commitment to my practice, and everything as a way to wake up. Sobriety isn't just not drinking. It's getting deeper.

Q: Do you see a relationship between your recovery and your Buddhist practice?

A: Well, now I can practice. It has more meaning at this point. I'm really there. And when I'm not there, I know I'm not there. Now I *can* be there. So it can actually develop. I think that my practice actually ripened my karma to the point where it bottomed out. The shit really hit the fan and I had to--I missed a year of practice in there. But I did the ngondro--I was practicing through all that drinking. But I did have some deluded views about it. I thought that I could drink like Rinpoche. I thought that I was *supposed* to. I had to find out that I couldn't. But I tried. I tried.

Q: What has been your relationship to Sarpashana?

A: I came to it in the early days when it was just beginning. When I was drinking. I didn't like it. I never liked it. And then when I got into AA--I always liked AA--but when I really got into it, I eventually committed myself to Sarpashana and realized that it's still growing. If I don't like things about it, I'm part of it and I can do something about it. I think it's very valuable.

Q: In what direction would you like to see Sarpashana go?

A: Well, I like what's happening with slogan practice, slogan talks. That makes it more Buddhist. And I think it's going along really well. It's timely. And I do wonder: Is this the way it was before? I'd like to see it getting stronger. In the past I know it flopped around. I don't want to see that happen again.

Q: Did you find that your drinking affected your relationships?

A: Yes. Yes indeed. I guess it wrecked my marriage. You know, I do think of the present rather than the past. Things are so different. Now I'm very vulnerable with people. I want to be real. I feel that I was always conning or something in those drinking days. I was alternately seducing somebody or isolating myself. Now I'll have different relationships. I don't have many right now. I'm protecting myself. This is hard to answer.

Friendship is a big one. I want to say that in AA I feel real warmth in a good way. When I was drinking, relationships didn't have that quality. I want to develop this real warmth that isn't just clinging to one person, or expecting everything from one person. But sobering up I'm cautious about relationships with men. I don't feel ready to relate in that way. It's like drinking to me. It feels like it would be destructive. I feel that I'm just developing trust in myself by relating with my sponsor and my husband. We're separated but he's going to AA...

Q: You're an artist. Have you noticed any difference in your pursuit of your art?

A: It seems that when I got this further commitment to being sober, I really shut down a lot of activity...any creative thing wouldn't be coming from anywhere. I feel empty. I want to start painting, but I'm just sobering up. I feel that I can't. Something else is going on now. In the past I could have forced it. I would paint, and I would enjoy it, but I'd force it until it stopped. It wouldn't have any base. But like with relationships, I'm not ready. It would be superficial to jump into anything. I'm just trying to find out who I am.

Q: What did you like most about drinking?

A: First thought is the warmth and letting go. The excitement.

Q: What do you like most about being sober?

A: That things are real. I feel real things, whether it's sad or happy, and I feel this movement happening--life. And I feel a humbleness. And arrogance. The humbleness is good. Humbleness is the dwelling place of the forefathers. I like that one. I do feel humble in being sober. If arrogance comes in, it causes pain, and I need to get rid of it.

Q: Is there anything else you'd like to add?

A: I'd like to see other Buddhists in the community who have drinking problems realize that they do. I come to Sarpashana and I'd like to see more of them there. Because in my experience I knew it was hard to realize it. The Buddhist thing seems to be that it's okay to drink. It might not be. I guess also it would be nice if more non-Buddhists came to Sarpashana and got turned on to the dharma. I don't have that arrogance about non-Buddhists any more. It would be nice if Sarpashana could reach more people. And if the Buddhists would come. Maybe this is my isolation trip, but I sort of misinterpreted and thought that I had to do everything by myself. When Jamgon Kongtrul was here he answered a question about getting help. He said that in this culture we're afraid to get help or to give it. In the East, people are not afraid to ask for help. I'd like to see that happening with us. When I asked for help, it helped. It changed everything.

Bob S. is a member of Sarpashana. He has been practicing with Trungpa Rinpoche since 1971, and describes himself as "overly critical with a lack of patience and a lot of insight."

Q: What makes you think you have a problem with alcohol?

A: Well, I guess I figured I had a problem when all I wanted to do from the time I opened my eyes to the time I went to bed at night was drink alcohol. A beer first thing in the morning. Even before my coffee. And I had tendencies to sneak booze at every occasion. Being sure I had at least as much as everyone else and probably more. At the same time trying to hide the consumption.

Q: What was your style when you were drunk?

A: Most of the time, toward the end, it was very agitated, irritated, and aggressive. A tendency to escape--wanting to be left alone. Not wanting people to see how much I was actually drinking.

Q: How much were you drinking?

A: Towards the last eight months or so, about a case of beer and a quart of whisky a day--on a good day. On a bad day, maybe two quarts of whisky. That was usually on weekends when I didn't have to work. I'd allow myself to have a bad day.

Q: What's your history with drugs and alcohol?

A: Well, I was raised in an alcoholic family. My father, and my uncle who lived at the house, were alcoholics. I had three older brothers who drank the whole time I can remember. I started drinking probably by the time I could walk, maybe before. It used to be a joke--they'd give me enough beer to make me stumble around and make a fool of myself.

I didn't start drinking on my own until I was fourteen or so. That was when we moved from the country to a town, a much larger town. I would hang out with my brother on street corners. Purchasing booze. Frequenting bars quite a bit. It was also around that time that I started getting involved with drugs. Not on a large scale. They weren't that easy to come by, but uppers and downers were around. I started sniffing glue--as an in-thing--with the other guys. When I was sixteen my father threw me out of the house. I was actually happy about that because it enabled me to do as much drinking and drugging as I wanted without having Mom and Dad to answer to.

Then I got into trouble with the law. Spent some time in a boy's reformatory. Got out of there and joined the army. I was seventeen. That was mainly to get away--away from home, from that town, from everything. I was pretty fed up.

In the army I got involved with alcohol on a larger scale. That was in the first year. In the second year I was more into drugs. Marijuana was popular. I was in France and it was easy to get. I did LSD for the first time and had my first experience with heroin. Toward the end of the army time, in the third year, I got in trouble. They put me in the stockade for six months. When I got out of the stockade they discharged me.

I came back to Baltimore, which was my home town, and got more involved with

drugs. It was more drugs than alcohol at that time. Within six months I became a full-fledged heroin addict. Dealing drugs to support my habit. Both were actually pretty big-time--dealing on a large scale and a large-scale heroin addiction.

In '69 I went back to Europe for the purpose of smuggling hashish from Lebanon. I successfully got the hash and made it as far back as the airport at Baltimore, where I was busted. I was out on bail waiting trial for six months. By the time I went to trial, the heroin habit was enormous. I started ripping people off and stealing to support it. I went to court and was sentenced to six years in a federal penitentiary, which forced me to cold-turkey the heroin habit. During the time I was in prison, I swore I'd never revert to heroin again. I thought that it was what had caused the problems in my life. But other drugs were readily available in prison. I stayed pretty screwed up on pot and LSD.

That was when I started to get an interest in Buddhism. I spent two and a half years in prison and was released on parole back to Baltimore. I did some drugs. Some heroin, but not much. I had gotten married to the woman I was living with before I went to jail. The marriage was brief. It never worked. About six months after I got back to Baltimore, she died of an OD, and I moved to what was then Tail of the Tiger in Vermont with the idea that maybe I would stop drinking. I thought living at a Buddhist retreat center would curtail my drinking and drug use. It curtailed my drug use, but it escalated my drinking.

At that time I thought drinking was okay because everybody else was drinking and it was acceptable. I stayed there for approximately two years, and then moved to Colorado, to Boulder, in '74.

The period from '74 to '80 is kind of a blur. A lot of drinking. Occasional stints with drugs, mostly pot. But sometimes cocaine for maybe six weeks at a time or so. Always drinking. I went to Seminary for the second time in '80, where I was drinking a lot. I wasn't able to abstain during the practice periods when you weren't supposed to drink. When I left Seminary, I stopped practicing altogether for about two and a half years. It was interfering with my drinking which had become continuous.

In '83 I got my fourth arrest for DUI. That wasn't enough to convince me that I should stop drinking, but my conscience started feeling so guilty--that I was calling myself a Buddhist, but never attending lectures, or seminars, or practicing. So my spiritual life was in big conflict with my alcoholism. I kept telling myself I'd quit. But I was never able to do it on my own.

In March of '84 I checked into the ARC. I dried out, had some counseling, and made an appointment for treatment at Bridge House in Grand Junction. I was a little scared about staying sober--or dry at least--during the fourteen days that I had to wait between the ARC and Bridge House. I went to Bridge House on April Fool's Day and spent three weeks there. The main focus there was on what was wrong with me, not on what was wrong with booze.

When I left Bridge House, I attended AA meetings regularly and started getting more involved with the dharma. Attending lectures, and getting involved with the Sarpashana group.

Q: How long has it been since you had your last drink?

A: It'll be ten months tomorrow.

Q: Do you see any relationship between your Buddhist practice and your recovery from alcoholism and drug abuse?

A: Well, recovery from alcoholism and Buddhist practice are ongoing, in that I'll always be recovering and I'll always be practicing. Sobriety enables me to have a clearer understanding of the importance of spiritual practice.

Q: What has been your relationship with Sarpashana?

A: That's a rather vague question. For me it presents a place and an atmosphere in which I can talk about the difficulties in life situations that come about due to the abuse of alcohol and drugs; to be able to see more clearly the obstacles they present in realizing some form of sanity.

Q: Have you found AA to be helpful?

A: Extremely. AA was the one vehicle that allowed me to not pick up that one drink during the time when I was waiting to go into treatment, and it kept me from picking up that drink after treatment. I am still involved with AA, and probably will be for the remaining years of my life. The principles set forth are not in conflict with any teachings of the dharma as we know it in Buddhism. It's merely a way for lay people to relate to sobriety and to incorporate some spirituality in their lives--be it Buddhism, Taoism, Christianity, what have you.

Q: Has your recovery affected your relationships with other people?

A: My recovery is in direct relationship with my relationship with the world. In order for me to relate at all with other people, I have to be honest with myself, which I wasn't able to do during my drinking and drug abuse. It's allowed me more genuine relationship with myself and with other people. That's something that is as ongoing as the sobriety itself, as recovery, as Buddhist practice, as any practice.

Q: How have people reacted to your sobriety?

A: It's been mixed. A lot of people have been amazed. A lot of people are threatened. And other people just don't believe it.

Q: Is anybody giving you any support besides Sarpashana and AA?

A: Most of my support comes from people who were genuine friends, who still choose to relate with me as a friend. My brother, my father.

Q: Is there anything else you'd like to add?

A: I would like to stress to the readers, whoever might be reading this book, that it's really not okay to continue on a self-destructive path such as alcohol and drug addiction, simply because it's been accepted by certain peers and by society as a whole. One could actually be more appreciative of oneself.

E.S.P. is a member of Sarpashana and has been a student of Trungpa Rinpoche since 1974. She describes herself as "thirty years old, a career woman; energetic and outgoing. I can go from being extremely cheerful to depressed in a very short period of time."

Q: What makes you think you have a drinking problem?

A: Well, when I started drinking in my early twenties, I found that after a short time I was able to handle a great quantity of alcohol. I drank a *lot* for many, many years. I began to realize that I drank every day. I never wanted to run out of alcohol. Then in '82, I was in a car accident—alcohol related—which was my fault, and it took me three weeks to realize that it was my fault. At that point, I began to realize how deeply into denial I was.

Q: What's denial?

A: Pretending that you can handle all of your problems *and* drink. When I was going to Sarpashana early on, I could see everybody else's denial, but I couldn't see my own. I didn't realize that I would have to stop drinking. It took me two and a half years to realize that I was going to die if I didn't quit. I was finding it more and more difficult to deal with my problems behind alcohol. I guess you could say that things became unmanageable. I think denial is just not copping to the fact that you have a problem, whatever it is.

Q: Have you attended AA?

A: I've been to a few meetings.

Q: Did you find it helpful?

A: I found it helpful in that I met other people with the same problem. But I never went to enough meetings to follow the AA path or anything like that.

Q: How long ago did you have your last drink?

A: August 9, 1984, which makes it seven months and one week.

Q: Do you miss it?

A: [Laughter] Oh, yes. I miss it a lot. But the times when I really want to drink are when I've had a really stressful day—something really heavy has happened to me or my family. I miss sake especially. I miss the taste of it. I associate it with a lot of things—practice, celebration. I associate it with the teachings, to be honest. For so many years it was part of the ritual that went along with my practice. I have not been able to figure out how to deal with that one yet.

Q: What did you like most about drinking?

A: I could immediately relax. It would immediately change my state of mind. I could feel more clarity. Just noticing the contrast of *not* drinking—nothing can give me the same state of mind that alcohol did. I can't describe it.

Q: What state of mind?

A: Well, it was always different depending on how I felt or what was going on. I think you could just call it intoxication. It was easier to have a sense of humor about my problems. I like to celebrate, and alcohol was a way to celebrate—continuously—daily.

Q: Do you have other ways to celebrate now?

A: Oh, yeah. I don't need alcohol to help me celebrate. Not right now, anyway.

Q: Do you see your sobriety as a temporary thing?

A: No. Not at all. It's been so positive, such a positive change in my life. I just can't imagine going back to my old way of life. Being in the bars every afternoon and having my life focus around alcohol isn't what I want to do any more.

Q: What did you like least about drinking?

A: Well, I guess from my sober point of view—when I was drinking I wouldn't have said this, but it really created a lot of problems with communication, with my home and family life. What else? I also get very heavy when I drink. I don't like that too much. I gained a lot of weight. Heavy. I did not like being hung over, or being still drunk when I got up for work the next day.

Q: How did your drinking affect communication and your relationships?

A: Well, when I'd get really drunk, I'd talk a lot and think I was saying a lot. I think the electrolytes went out in my brain and it would become a one-way conversation. I wouldn't receive any feedback that people might be putting out at the time. A lot of misunderstanding came from that. You can't get very far with a one-way conversation. Relationships? It interfered because I would often project things when I was drunk. Things would be different than the way I saw them. And that would create problems in relationships. It still happens sometimes, but certainly not as intensely as when I'm drunk. Now I have the chance to catch it on the spot. Before, I would just drown it in alcohol.

Q: Did it affect your relationship with your child?

A: Yeah. I think it created a lot of problems. It was easy to avoid the problems with him when I was drinking. Or it was harder to find solutions to those problems, shall we say.

Q: How old is he now?

A: Thirteen.

Q: Did your drinking affect your Buddhist practice?

A: Umm. I don't know. I haven't been practicing since I quit drinking.

Q: Because of drinking at feasts?

A: It's really a question that I'm not ready to talk about right now.

Q: What is your history with drugs and alcohol?

A: Well, I started doing drugs when I was about twelve. I started drinking heavily when I was twenty. And pretty much all of my teenage and early adult life was involved with one kind of mind-altering substance or another—marijuana, LSD, mushrooms, alcohol. I went through a period when I was addicted to speed for about two years. Another when I was addicted to cocaine for about a year. I pretty much did whatever I could get my hands on.

I never went to high school. I left home when I was fourteen and did a lot of drugs until I became pregnant, at sixteen, with my son. I stopped during pregnancy and started again afterward. I wasn't doing a lot. At seventeen, I met my husband. I didn't do a whole lot of drugs and alcohol for about five years. Except for one summer, when I did acid for about three months. That was just before I came to Boulder in '74.

Starting in about '75 or '76, I started to drink a lot. Like I'd never drunk before. I'd never felt that I had a problem before that. I drank a lot and every day.

We came to Boulder because we wanted to meet Trungpa Rinpoche. My husband was into Zen, and in the two years I was with him in San Francisco I'd never connected with a teacher. So we came here to meet Rinpoche.

I don't remember much of the years in between. I think it was bad in '79. And I think it was really bad in early '84. There were a lot of blackouts, and freakouts throughout that whole period. I don't know...

Q: When did you start going to Sarpashana group meetings?

A: I started in the summer of '81.

Q: There was a car accident in '82?

A: Right.

Q: DUI?

A: DWAI. The one less than DUI.

Q: How did that affect you?

A: It really scared me. It took me three weeks to realize that somebody could have been killed. I was in shock for three weeks. I never drank and drove again. It still bugs me that my friends have to experience that—DUI or jail experience—first hand before they will

look at their drinking.

Q: You continued to drink for two years?

A: Two and a half years.

Q: Did you quit because of something in particular, or was it just generally time to quit?

A: During those two and a half years I was taking a look at my drinking. I had periods of sobriety, but they were never very long. The longest was three months. Toward the end I was having really severe reactions—like driving to work while still feeling intoxicated, which scared me even though it was morning—four to six hours after I'd had a drink. So I guess I *was* drinking and driving. It was scary. I was experiencing severe tremors—shaking. DTs at work during the last couple of weeks of drinking. The day I quit was about the worst experience I've ever had in my life, trying to make it through a day. I was shaking so badly I couldn't type or sign checks or write. It was *extremely* difficult—and embarrassing. That day I called an alcohol counselor-friend at the ARC and turned myself over to him—asked for help. He put me on Antabuse which I did small amounts of for a while. Five months. Drinking was really affecting my work situation.

Q: Did they know about it at work?

A: They knew I was having a hard time. I work for pretty understanding people. I have lots of responsibility in my job and I was able to see that I wasn't going to be able to do it for long. Combined with the problems I had at home, my life was completely unmanageable.

Q: Did you talk with anybody about it?

A: Oh, yeah. Everybody knew I had a problem with alcohol. But nobody was telling me to quit. At work or at home. I think we put ourselves in situations that make it easy for us to drink. I think that almost to the end I was able to cover up that it was a problem.

Q: Do you want to drink again?

A: I always want to drink again. It's too dangerous to say "forever," but at this point, I like my sobriety. I feel that it's going to take me years to feel healthy again—whatever "again" is.

Q: Is there anything you'd like to add?

A: Well, I really feel that it's really important for anybody who wants to look at his or her drinking problem to find a support group. Without the help of other people, I don't think I'd have been able to find the strength to quit drinking on my own.

John S. is a member of Sarpashana and a student of Trungpa Rinpoche. He describes himself "for the purposes of this document, a recovering alcoholic and general substance abuser with an addictive personality that goes back to early childhood; highly intelligent, intuitive, and compulsive."

Q: What makes you think you have a problem with alcohol?

A: Umm. Increasing aggression and violence when I drink. The sheer quantity of spirits, averaging a little less than a fifth a day for ten years. To quote someone else (but I liked it), "I had a more than decade-long love affair with a bottle." I loved alcohol, and alcohol loved me.

Q: When did you begin to suspect that it had stopped loving you?

A: Well, when the pacifying effects lasted fifteen minutes and the aggression and confusion went on for eight to ten hours.

Q: When did you have your last drink?

A: Six months ago, I think.

Q: What was that like?

A: Having been sober for about a year before that, I pretty much knew what it would be like. So... You can't go home again. The fifteen minutes of relaxation, hours of aggression, etc., ran at its usual course. At this point I should say that, like most alcoholics, after a couple of days of drinking in the fashion that one always drank, i.e., quantity, taking a year's sobriety into no account at all, it's very difficult to stop, no matter the confusion. Suddenly alcohol turns into a heavy stimulant, and paradoxically, only alcohol can "water" it down.

Q: What was the impulse that lead to drinking after a year?

A: Specifically, a hypersensitivity to seeming injustice, shared by another group that I belong to, namely Vietnam veterans. Also, I had set myself up for a drink.

Q: So it was a reaction?

A: Somewhat. A reaction and an attempt to lean on an old ally for yet one more hand out of liquid peace to soothe my troubled spirit.

Q: Did you think that somehow it might be different than other times?

A: Not particularly. But I knew it would be more familiar and apparently direct than what was really bothering me.

Q: What do you think *alcoholism* is?

A: It's kind of a magician's thing. To wit, alcohol and other drugs have the ability to alter an already insubstantial play of reality and give the manipulator a sense of power and control. This immediately brings up the fact that the magician has always been plagued with a sense of powerlessness and of being out of control. We commonly, now, call alcoholism a disease. And this is true. There are biological and chemical underpinnings that support it. But something else comes into play which is entirely psychological and spiritual. We drink and drug out of fear of our own emotions, but soon the source of the fear is stimulated by the old cure. Then we jump when the telephone rings and at our own sodden shadow.

Q: What's your history with drugs and alcohol?

A: I started, I think, as a defensive drinker at about age thirteen or fourteen to keep up with my mother's prodigious habit. And to help absorb my world living with a violent drunk. Then, on my own, from fifteen to eighteen, I drank infrequently—but straight vodka when I did—and would read behind it. It had a nice effect. Then the Aquarian Age hit and I was drafted and sent to Vietnam, a veritable garden of marijuana. I would drink four or five times a year but smoked marijuana constantly. It pretty much stayed that way until age twenty-three when I found myself back in Vietnam as a journalist.

I started smoking opium seriously in Vietnam, Cambodia, and Laos, and eventually smoked heroin daily. It was portable; you didn't need the elaborate pipe-tea-ballet of opium, not to mention the inconvenience of having to indulge the habit in often militarily insecure parts of the cities. After approximately a year and a half of these combined opiate addictions, I, upon withdrawing, like 99% of all narcotics users, almost instantly became an alcoholic.

There is some conjecture nowadays about endorphins and enkophelins and other brain opiates that get established during the narcotic period leading to this situation. It seems likely that this is true. But, not being a scientist, I think I'll leave that line of answer for someone else.

Since my hard drug addictions have been almost exclusively in Southeast Asia, alcoholism was the home grown product and problem. Now we're stateside—I've said it was ten years of a fifth a day and truly it was. Relationships suffered. And there are, doubtless, heaps of missed opportunities. But I want to say that I'm [laughs] potentially glad about all of it. I'm glad to have been a wet alcoholic. I'm glad now to be a recovering alcoholic. In a special way, nothing seems to be *that* out of place. I was born with a strong constitution, and the physical ravages of all abuse styles have left me just about even. Umm...I don't mean to imply anything about punishments and rewards. I appreciate myself, as I appreciate other alcoholics. It is a coterie of extremely sensitive people. And at the center of an obvious paralysis is a hidden courage that is hard to deal with and face. There is, in fact, an argument, in my mind, that facing the intense heat of this courage is one of the alcoholic's biggest problems. Somewhat like the peacock that Sarpashana is named for, the alcoholic seems prepared to eat all manner of shit rather than crane its neck around and admire the spectacular plumage of his breed. I don't think it's a question of tantra. Transmuting poisonous substances is beyond any self-admitted alcoholic. In another way, alcoholics and poets are perhaps more like locusts who gobble up *everything*, leaving a barren landscape, so great is our lust for all phenomena regardless of flavor.

Q: How did relationships suffer?

A: Oh. Well, there are two, no (as Monty Python would say) three sides to how any relationship suffers. One is the alcoholic's side. One is the co-alcoholic's. And the third

is the recovering alcoholic's. I guess you could say four and include the recovering co-alcoholic as well.

During the alcoholic phase, my relationships suffered as I discovered the theme in my partners of not being willing to keep going one step further or to hang out on the outside of the envelope, as they say in test lying. Instead of backing off, given the obvious reluctance of my partners, my own megalomania would create situations in which just being around me took that extra something. No matter *how* reluctant. I think, like most people, my friends and my wife wanted a sense of security from their mate. "Gee, what's gonna happen next?" doesn't quite make it. Especially when they found out! [Laughter] As a recovering alcoholic, I am much more sensitive to what I must have been like. Particularly when I'm around crazed wet drunks in some unknown car. Disregard turns into disrespect from both sides toward the center and... pfsst! Before you know it, that relationship is over, quite properly, and you move on to the next. Or you begin to investigate your relationship with yourself and alcohol, which is more difficult than tagging other people for their motives or character defects. Then it's really one-on-one. You and you. And it's interesting that the pattern, however grotesque, naturally repeats itself and you try to find the solution through your own motives and character defects. If it helps, you stop drinking. And if it's a crisis, it really doesn't matter what makes you stop. I don't think it's the last word on recovery, but we could talk about that more ten years from now.

Q: Has your health suffered due to drinking?

A: Yes. I developed cirrhosis at the tender age of thirty-five. Now, I discover that there was an underlying genetic disorder that would have given me this disease whether I had drunk or not. But there is no question that my alcoholism kicked off this malfunction about fifteen years before nature would have. Then, of course, I bear the night-wounds of fist fights and car accidents and the general misadventures that alcoholics grow and cultivate like shitaki mushrooms.

Q: What has been your involvement with Sarpashana?

A: I started with Sarpashana close to its beginnings near the end of '81. I remained a drinker throughout my early involvement, like many others. The meetings were interesting as we began to explore our personal relationships with alcohol, but the conversation inevitably made me thirsty, and I would go from the meetings to the bar for two or three shooters of scotch before I'd go home to think about what had been discussed. The way Sarpashana was set up, and remains to some extent, there was no blame in this sort of behavior. As long as we were able to be somewhat *aware* of our dedication to being as *unaware* as possible through our drug of choice. Attending or not attending meetings was the proof of this curious loyalty. Then, after falling down one too many staircases, and pulling concealed weapons, and the like, I committed myself to a month-long out-patient treatment program. Like dying cloth and then sun-bleaching it, this gave me my first grounding in sobriety. But it has taken three or four more dippings and bleachings before my situation has become anything like color-fast. I'm not sure it's

over *yet*. I have no great interest in drinking at present, though I sense what commonly passes for self-destructive tendencies bubbling not so far under the surface. After two 28-day programs and travelling around the world with my family for a year, I pretty much put my work in groups into the hands of professionals—like the Rome branch of AA [laughs] and a men’s group here in Boulder, which is dedicated to sobriety and not drinking and not even playing around with the idea. Imagining that Sarpashana had remained ambiguous, I did not attend until about seven months ago. The group has changed considerably. The vast majority is sober and so the issues discussed are generally deeper than the old long-winded raps about fluid ounces, filtered through the subtle delight of denial. Also, Sarpashana seems less impoverished—attempting to translate AA into Sanskrit and back again. For instance, slogan practice now exists firmly in its own right, as does the AA step program. We know that now. And both are exploited for their own good and common sense.

Q: In what direction would you like to see Sarpashana go?

A: Since alcoholism is widespread, and acknowledging the inherent problems is becoming downright *chic*, I think we ought to take advantage of this fashion craze by having Sarpashana-like groups in all of the dharmadhatus that feel the need. For that matter, I think there should be men’s groups and women’s groups too. And do whatever we can to clean up what really amounts to minor impediments to transplanting true buddhadharma in the West. A lot of that amounts to a basic lack of consideration—in the Oxford as well as in the Emily Post sense of the word. We are inconsiderate of each other and of ourselves. And, again, I think if we can deal with this basic lack of courtesy, which includes taking our own and other people’s real feelings into consideration, it might be sufficient so that the grandchildren might flourish in the dharma.

Q: Did your drinking affect your Buddhist practice?

A: Yes. I spent a great deal of time looking at my watch in group meditation, full of concern about the transcendental realities of “last call” at my local bar. Also, my thinking-thinking was drunk and diffuse, and as a road map gave only my alcoholism as a landmark, not to mention fumigating the practice of those around me. There is a kind of defeatism that goes along with alcoholism which is intrinsically opposed to a warrior’s path or even general good cheer. And finally, ngöndrö practice could *never* have been invented by somebody with a hangover.

Q: Has your Buddhist practice influenced your recovery?

A: Yes. As somebody once said at a Sarpashana meeting, “I never really understood maitri until I sobered up.” Body, speech and mind are vague, sort of automotive buzz words—like in Detroit [laughter]—which only have life in their relationship to one another when they aren’t all telling war stories to each other in a bar. I think purifying body, speech, and mind for the guru’s examination is a process which is intensely personal, and might even include alcohol. However, for the alcoholic, this is highly suspect and unlikely. As the Venerable Chögyam Trungpa Rinpoche once said, “I drink sake and turn it to water. I suggest you drink water and turn it to sake.”

Otto K. is a member of Sarpashana and has been a student of Trungpa Rinpoche since 1970. He describes himself as “highly involved in my mind, and looking for certainty of some kind. I like involvement with people—as an open-ended question, that’s not easy to answer...involved. [Laughs]

Q: What makes you think you have a problem with alcohol?

A: Originally, I *didn't* think that I had a problem with alcohol. I thought alcohol was tangential to just a basic sense of problem. I've often said that if someone had asked me to stop drinking because it would be good for me, I would have put that on the same level as brushing my teeth every day. It might be a good idea, but it wouldn't have a real high priority. The suggestion wouldn't have had much impact. You know, people tell you to brush your teeth. Although I was aware of the problematic nature of my drinking, it wasn't until I stopped that I took it seriously.

Q: What prompted you to stop?

A: My wife going into the Alcohol Recovery Center was the main initial catalyst. It was a real shock to my system.

Q: And what did that have to do with you?

A: Well, first it was the shock of my wife being...you know I was actually at the ARC, and I was leaving her there. Then there were various meetings with counselors and I got into the idea of not drinking. But my wife and I did drink sporadically from that May until the following January after that experience. I decided, after that, that regardless of my wife's drinking behavior, I would not drink, I think I said for a year.

Q: How long ago did you last drink?

A: Two years in January—so two years and two months.

Q: What were your drinking habits like?

A: I never could keep track of them! [Laughs] But it was the rule to have at least two or three drinks every day, and to get solidly drunk four or five days in a row was not unusual. When I worked playing music, my idea of sobriety was two shots of whisky and two beers. At least until I stopped playing. And then maybe a shot or two more for the road—unless I wanted to get drunk.

Q: What did you like most about drinking?

A: It was a quality of anticipation. If I looked forward to a party, I would subconsciously feel that drinking would make it better somehow. In a way, it's not really clear to me. And it was reflexive, habitual. Like cigarette smoking. I'd get into certain situations, and my arm would just go for a glass.

Q: Do you remember an emotion or an identifiable impulse associated with starting to drink?

A: Mostly it was anticipated excitement. I don't remember consciously thinking that at the time, but I think it was like...well, for example, "I'll go to the Midsummer's Day Festival with my wife," and by some mysterious accident I'd get there and screw somebody else under a picnic table. But the idea of drinking was that it would add something to whatever was present at the time. Compulsively *adding* something. "If I get drunk, then I'll *really* have a good time." And it would cause a partial deadening of self-consciousness. I'd still be self-conscious but I'd *talk* more, or just anything *more*. It was like a frustrated search for communication with people.

Q: Why frustrated?

A: Because there was always self consciousness there. Like when I played the piano, I didn't feel that I played any better. I actually played worse. And sometimes it would turn into, "Fuck it, who cares?" Sometimes there was real pain in my drunkenness. I might tell great jokes, or be very witty, but not really know what was going on. I'd forget the basic context of my life. I think drinking both heightened my ignorance and my sharpness. When I actually think, "What *was* going on?" I can only remember the highlights.

Q: What's your history with drugs and alcohol?

A: I experimented with alcohol in the ninth or tenth grade. Got really drunk once or twice. Then, as a junior in high school, I started both drinking and using drugs, mostly marijuana. I smoked it moderately—when I could get it—moderately and extensively, through my first year of college. Then I stopped because it made me paranoid. Throughout that same period, I used alcohol, and that just got to be more and more until I stopped drinking two years ago.

Q: What happened when you quit?

A: Well, I didn't DT I'd probably gotten to the beginning stages of serious alcoholism. It was physically very easy for me to stop. Moderate or controlled drinking didn't work for me. For example, once at a feast, my thinking went something like this, for an hour and a half before the "drinking portion": "I'll have just one glass of sake." Then later, "No, two." Then, "Maybe I won't have any. No, maybe just one"... That went on for an hour and a half! I had two glasses and left immediately. As I drove home, crossing the intersection at Ninth and Mapleton, looking out at the town below, I found myself thinking, "God, I want to get drunk!" And the expression "my blood's on fire" came into my mind. I didn't get drunk. A few minutes later, the feeling was gone. It was easier for me just to quit.

Q: What effect did quitting have on your relationship with your wife?

A: There were myriad effects. But some of the big ones were that I became more aware of my own difficulties, as opposed to the ones she caused me. This realization came over a long period of time—it's almost three years since she went into detox. Throughout that time I've been to innumerable Al-Anon, AA and Sarpashana meetings, and talked to a lot of people. We were together for about sixteen years, and now we're separated. There is a lot more of a sense now of how I create my own world, rather than feeling that I am a

pawn to alien circumstances. [Laughs] I realized how much I depended on her as a ground. I think I really learned something about my relationship with my wife. I used to think that the way I related with her was written in stone—and buried way down deep inside my head. Such that I wasn't even aware of how I did it. There was the way we used to fight—I've thought the relationship was fine and didn't need to be worked on, even though we were both in a lot of unnecessary pain.

Q: Has sobriety had any effect on your Buddhist practice?

A: In some ways my practice is worse, and in some ways it's better. But I feel less "holy" about it, and maybe more real. I'm a human being, and sometimes I don't know what I'm doing. And even though we give up our enlightenment until all sentient beings have attained enlightenment, my practice is also for *me*. I feel that sobriety—and I don't mean just not drinking: I don't think that's worth much at all—has really enriched my relationship to my *life*, which includes practice, and *visa versa*. I feel like I have a naturally drunken mind. [Laughs] And not drinking at feasts doesn't bother me for the most part. Sometimes I feel some minor difficulty with people's fascination about Buddhism and drinking being real close together—it's irritating. I feel that Buddhism is about acceptance and openness, so in some cases, why not *not* drink? But I don't think about all that much any more.

Q: What has been your involvement with Sarpashana?

A: My relationship lately has been somewhat peripheral—largely due to circumstances of my schedule. But I think Sarpashana is wonderful.

Q: In what direction would you like to see it go?

A: That's like asking in what direction would I like to see the sun go—it's a brilliant, open situation, and I can't control it. There are a lot of gritty little details that have to be worked through. But I'd just like the sun to keep on shining. [Laughs]

Q: Is there anything you'd like to add?

A: Yes. I'd like to say that, if you can find a way to work with it, neurosis is a wonderful gift. I feel that I am developing, and have developed, a new relationship with pain and with pleasure. I like what someone said in an AA meeting, an older man who was missing some teeth. He said, "If you're gettin' sober, hang on to your ass with both hands, cause you're in for a helluva ride!"

Molly N. is a member of Sarpashana. She has been practicing meditation for fourteen years, and describes herself as "a person with lots of good qualities but lack of self-worth and beginning to revise the self-worth part."

Q: What makes you think you have a problem with alcohol?

A: I don't have any question about that. Alcohol consumption has interfered with every aspect of my life.

Q: What aspects?

A: Just in the general way in which I live. Not being able to engage in any situation without it having some relationship to alcohol, either in the positive or in the negative sense. Meaning, I might go ahead and do something knowing that it will keep me from drinking—the hot tubs, aerobics, go to a dharma program (ha ha). And there are other situations I know I won't be able to handle without alcohol. In those, it's how to maintain a comfortable high without blowing it—impossible.

Q: What kind of history do you have with drugs and alcohol?

A: Starting in the ninth grade I took speed in one form or another. So, starting at thirteen or fourteen, I took speed regularly—every day, until I was eighteen or so—mostly in the form of diet pills. Or straight speed, or whatever. In college there were lots of pills around. I may have shot speed up once or twice—snorted it. I must have been twenty when I decided to stop.

At about nineteen I was living with a friend. In the morning we would smoke what we called a conastoga, a cigar-sized joint, made out of maybe fifteen papers, and take a 25-milligram Dexedrine tablet. Purple and yellow. I don't remember the name of it. It was basically speed but it had some mellowing trip in it.

So, we'd go to our classes well primed. Mostly art classes. Then in the afternoon we'd start to drink. And maybe smoke more dope. That was a typical day.

I decided to stop taking speed, I think at about twenty, after I had an experience trying to write a paper. I had taken so much speed that I couldn't—literally could not move. So I decided that night never to take speed again and I never did. I just stuck to alcohol, and other pharmaceutical downers, occasional LSD trips, and infrequent use of cocaine. I remember shooting up pharmaceutical morphine. It was a very sophisticated drug environment. People got very clean pharmaceutical drugs, not off the street. But alcohol was definitely my drug.

Q: When did you realize that alcohol was a problem for you?

A: That's hard to say. In retrospect, I can say that in the first or second year of my drinking it was a problem. But it didn't seem like it at all at the time. I think the first time I realized that I was out of control was after the 1974 Seminary. My first seminary. I went on a group prostration retreat at RMDC, and after the morning prostration session, I'd have to have a beer, even though I really didn't want one. During that summer, my drinking escalated. I was living with another alcoholic, and we drank all the time.

I decided to go into the ARC. I stayed there for three days and spent the rest of that summer, and most of the fall, sober. But there was definitely no support for sobriety in the scene at that time. And I really wanted to be able to drink rather than to stay sober. I was very unhappy sober. Over the next nine years I continued to drink, and well, I drank

in such a way as to enable myself to continue to drink, let's put it that way. With just enough control to not have to commit myself to treatment again.

In the last three years of very heavy drinking, I started experimenting with token sobriety—two days, three days a week. I wanted to learn to live my life without drinking. So I started going to Sarpashana and to alcohol counselors. I read all the available literature. I went to an acupuncturist—the idea there was that I told him alcohol was my basic problem. Even though I wasn't ready to quit drinking, my intention was to get to the place where I could. By constant infiltration of my alcoholism. In the summer of '84 I decided, at the Encampment, that I had enough going for me that I didn't need alcohol any more. That I had worn out its uses—to say the least. So I proceeded to go out with a bang. I drank fiendishly, knowing that when I left Encampment I was going to sign into the ARC willingly.

I continue to have binges now. They are very devastating, and I don't want to imply that I "have" sobriety. But I am working towards it.

Q: When did you have your last drink?

A: Eight days ago.

Q: And what was that like?

A: Pretty gross. I drink to get drunk. I revert to habitual patterns. I am trying to learn to overcome that. It's very hard.

Q: Is there any consistency in the impulse when you decide to drink?

A: Yeah. You could say that the impulse is a schizophrenic one. It's because I feel good and want to feel better, and it's also associated with a self-destructive desire for oblivion. There is a willful failure to remember foremost that I am an alcoholic. Every time I decide to get drunk, the more I realize that it is actually willful. It's self-deception and denial operating at so many levels. As far as the whole thing of deciding to drink and getting drunk—it's based on speed.

Q: I know that you attend AA meetings. Has that been helpful?

A: I think it's a remarkable fellowship. Of any factor, it has been the most helpful in terms of maintaining sobriety when I have it. It's similar to the kind of support you get in the sangha, which is that there are other people doing this extremely difficult thing, and who share your understanding of the difficulties and of the great things that come with learning to live your life in a new way.

Q: Do you find any relationship between recovery and your Buddhist practice?

A: Recovery involves overcoming habitual patterns and learning to live with awareness. What more can I say. Therefore, for the alcoholic, recovery is a very direct path.

Q: In what direction would you like to see Sarpashana go?

A: Lately the direction seems to be very powerful. I don't have any recommendations. It's really great to have non-Buddhists come. I mean they're so sharp about what we're talking about. That woman saying that "Drive all blames into one" means to call your sponsor! That was great!

Q: Do you think that you'd like to start a group in Halifax?

A: I think that would depend entirely on what's happening in Halifax—how many people are interested. Depending on interest, I think it would be good. But I don't see myself in a place to pull an empty chariot right now.

Q: Do you intend to continue going to AA in Canada?

A: Absolutely. I'll want to find as much support as possible. As far as continuing to work on sobriety, that's the basic thing in my life right now.

Q: Is there anything you'd like to add?

A: I'd like to say that as Liz L. coined in one meeting—there's maitri and there's your tree. Recovery and the desire to recover is unique to every individual. I feel that, in my case, every single attempt to put myself into an atmosphere conducive to sobriety was the result of wholesome mental content, as well as the producer of further wholesome mental contents. The possibilities of sobriety and increased periods of actual sobriety have infiltrated my active alcoholism. My point in saying this is that even people who say that they don't want to quit drinking, and show up in a place (psychologically or physically like AA or Sarpashana) that belies that statement, should be encouraged in every possible way. Because underneath they want to do something about their drinking or they wouldn't be there.

Some people decide that they're going to get sober and they do. And some people feel that they can't or don't want to yet. For me, all those years have been steps toward gaining sobriety ultimately. Intention, being as it is a mental content, is very important not to overlook.

To regret the years of my drinking would be to deny my past. There are probably lots of things that I would not have been able to touch, and certainly many places I would not have gone, psychological and physical, without the use of alcohol. Therefore, I have accumulated a lot of experience which would not have been available to me, particularly in the realm of pain and humiliation. However, as I said before, alcohol is no longer educational for me in this respect.

I don't think that we should quickly cast off the history of our alcoholic years and deny its existence. Because we would never have chosen to drink had it not done something for us. In any case, it brought us to where we are. And we should have respect and gratitude.

Gil P. is a member of Sarpashana. He is a student of Zen Buddhism and has practiced for twenty-one years under Yasutani Roshi, Aitken Roshi, Katagiri Roshi, Suzuki Roshi, and his main teacher, Jakusho Kwong Roshi. He describes himself as a “blue-collar intellectual hipneck.”

Q: What makes you think you have a problem with alcohol?

A: My experience with my inability to deal with it in a socially relevant way. Alcohol completely puts me out of touch with other humans. And it doesn't stop, you know? I get further and further away. It dead-ends into catatonia or suicide. It's not a viable path for me.

Q: What's your history with drugs and alcohol?

A: I was a teenage drunk. I used to hold my nose and chug vodka to get high. Regularly. I was a classic college student drunk to the extreme. When I got into psychedelics I stopped drinking for a time. Then I got into meditation and ceased doing psychedelics. There was a good long period of drug-free meditation exploration. Then I moved to the country and became a new-age hillbilly. Part of that mystique is drinking, among the males anyway, and that's when the drinking increased and increased. That was fifteen years ago. It was very regular. Of course, I was living in dope-growing country. Dope was like going to the movies, but drinking was a pretty consistent thing.

I have a problem when “normies” ask about this. They assume that heavy drinking is a reaction to emotional problems, and so I have no way of explaining the progression of my alcoholism to them, because at a certain point, maybe ten years ago, I had extreme emotional problems in a family breakdown. There was no drug that would ease my mind but scotch. I went into it so I could sleep. Get eight hours free of this turmoil, panic. I increased my drinking dramatically at that point and just topped out. I don't know how.

By that time I was also a coke-head, which increased my drinking capacity. So the drinking increased beyond a normal capacity. I was taking my bottle to work, hiding it in my locker. I'd drink all day, not just at night. Twenty-four hours a day. First thing in the morning, last thing at night.

This is what—1985? About five years ago both the coke and the drinking were doing full tilt boogie around the clock. Justified by a sense of insanity caused by the outside world. I quit my job. Parenthetically, before that I was working and meditating every day. But that hadn't seemed to affect my ability to drink.

After I quit the job, the toot and the drinking maxed out. One morning, behind a night of panic and anxiety, I ended up on the plains, asleep at the wheel of my car. I couldn't see the Rocky Mountains. Money in my wallet, all my possessions in my car, a pint of rum left, and a full tank of gas.

So after the first flash of wondering where I am—lost, literally lost and completely spaced out—I had a flash of complete joy and freedom because of aforementioned fat

wallet, pint of rum, all my stuff with me and full tank of gas. I took off down the road for who knows where—not even knowing the direction. Shortly thereafter, I came upon a road sign that said, “Gill”—which is my name. Enter more extreme happiness and joy.

But about an hour later I started to come down and checked into a motel to try to rest through it. I had about three or four hours of panic—terror. I was actually moaning for the Lord to help me. It was in the last hour there that I decided to get help. And I went to my daughter, who was about twelve then, and crawled into her bed. A couple of hours later, Jose and Pilar came over to say everything will be all right, Gilly Boy, just get some rest.

The next day I went to the ARC ready to stay. I had a long discussion with the guy there. He told me I’d detoxed myself in that twenty-four hours, and besides there was no room at the inn that day. But he gave me the confidence that I needed to get straight.

I started going to the Sarpashana group and to AA. So that was two meetings a week—Sarpashana on Tuesday or Wednesday, I don’t remember, and AA on Fridays.

At my first AA meeting I completely broke down and cried. I was totally flabbergasted and amazed that people could be so honest, that they really wanted to help me, that they were so kind. It took me three months after that to actually stop drinking. I had a little help besides my higher power. I did a little time with a woman who’d been straight for a year. That was pretty crucial. I no longer visited my old friends who were dopers and drinkers.

Q: How long has it been since you had your last drink?

A: I quit drinking about three years ago. I did have a drink a month ago. There was no craving attached to it. It was totally social. A year ago I would have said it was totally impossible to have a social drink, but it didn’t bother me.

Q: But you don’t drink regularly?

A: No, I have no interest in it. That was a weird one—I don’t know why, but it doesn’t scare me. Although, a good friend of ours came by a couple of days ago, who used to practice a lot of controlled drinking. He’s been drinking since New Year’s. I don’t think it’s possible for me, or him, to do controlled drinking as a program.

Q: Have you continued to attend AA?

A: No.

Q: Is there a reason for that?

A: Mostly it’s that EyEy—I’m so damn tired when I get home, I just don’t feel like going to meetings. I did have an interesting experience last year when I was living with the woman I just moved away from. She was under the impression that consciously not drinking was some kind of phoney suppression. Last year she bought me a beer. And I drank it. I think I was trying to prove to her that I wasn’t afraid of alcohol, and I wasn’t suppressing it. I think probably the bottom line was that I resented being considered

abnormal. And I can fully understand why some people return to drinking to appear normal.

Q: Do you think that you can ever be a normal drinker?

A: No. No...no.

Q: Do you experience any relationship between your Buddhist practice and your recovery from alcoholism?

A: Well, I can't separate my Buddhist practice from sangha. It's an intimate thing. Sangha has helped me to get more sane. Part of my practice is to eliminate individual confusion which drinking simply helped to foster. So, for me anyway, not drinking means less confusion—whatever the term is these days—the confusion-ignorance-anger cycle.

Q: What direction would you like to see Sarpashana go in?

A: Straight ahead.

Q: Is there anything else you'd like to add?

A: It's absolutely crucial to maintain our mahayana sense of helping other people to develop confusionlessness, which I think is an approach to sanity. Because we also have angerlessness, and ignorancelessness [laughter]—but those are another story.

The hardest thing for me now in sobriety is relating to it with “normies.” I feel that alcoholics have a sense of it, but “normies” don't understand because they don't have it. Just like I don't understand what diabetics live with every day. Sometimes it gets lonely when other people don't understand. I'd like to figure out some better way of explaining what I'm doing. That's what seems to be most important for me right now. I don't like to have to explain. It's awkward and uncomfortable trying to explain what they don't have any experience of. That's all.

Pilar B. is a Boulder resident. She has been practicing meditation for nine years, and is a member of Sarpashana. She describes herself as “people loving but people pleasing.” She was in a twenty-eight day rehabilitation program at the time of this interview.

Q: What makes you think that you have a problem with alcohol?

A: Because every time I drink, within two hours to two weeks, my life becomes unmanageable in some way. Unmanageability means that I'm hurting myself or hurting others. That's how I know.

Q: What's your history with drugs and alcohol?

A: It began when I was sixteen. I was living in Europe. Every time I drank a beer, I got drunk. So did everybody else around me. I don't think that an alcoholic should separate drugs from alcohol, but until I came to Boulder and joined the sangha, I drank about once

a year. And always got drunk. Until then, I considered beer and wine as beverages that went with food. I used them about once a week. The hippie commune days were the start of my pot use. By the time I got to Boulder I was a daily pot smoker. I followed the guidelines of the Vajracharya regarding pot smoking—that it's not as grounding as drinking and that if abused, the feedback was not as sharp as with alcohol. So I started drinking. I was a social drinker, along with the rest of the sangha, which meant regular, and eventually, daily use.

Eventually I started using it to avoid the pain of a bad relationship and became totally physically addicted. I detoxed myself, or was put into detox by sangha, countless times. It wouldn't be an exaggeration to say that I've detoxed myself once a month for two years, and in the Alcohol Recovery Center eight times, maybe.

After '82 Seminary, I was shanghaied to a treatment center in Grand Junction, that actually was a program for real low-bottom drunks. It was a holding tank. They were just getting well enough to go out and drink again. For me, it didn't constitute treatment. But it kept me dry long enough to see the severity of my problem. Because I was a patient along with the kind of people I had nursed as the superintendent of nursing at the Boulder County Jail.

But shock value is only enough to get us to the first step in this disease, which is getting over denial. From there, you have to begin a long road to recovery, and I quickly slipped back into, "Thank you, I can do it myself" thinking. So I was on a roller coaster, after that, of controlled drinking, abusive drinking, sobering up, wearing myself out like that. Every alcoholic who recovers has to reach his or her bottom, and that is as individual as each alcoholic.

My last binge was precipitated by Berndt Ladendorff's death and funeral. I had always felt a kinship with him because I could see the unmanageability of his life behind drugs and alcohol. Although I've made serious suicide attempts, when I found out he was dead I knew that, untreated, my disease was going to put me there too. It took me a few more days of drinking after the funeral to do it, but for the first time I committed myself—without numerous friends and sangha—to treatment. I even forgot to leave a note for my son as to where I was going until later that day. Treatment has helped me to see that I was always an alcoholic, long before I became a drunk. I had alcoholic thinking.

Q: What is *alcoholic thinking*?

A: Alcoholic thinking is, "I want more" of anything that anesthetizes my pain, my suffering. It's the "more, more" syndrome. I handle work addictively, relationships, food, drugs. My anesthesia of choice, and where I got my comeuppance, just happens to be alcohol.

Q: How do you see the relationship between your recovery and your practice?

A: My intuition is: Alcohol is especially powerful because of the amrita/poison—whatever

that is. It's an especially powerful addiction because of the two aspects of it. I actually think that if I totally understood my addiction, I would be enlightened. At this point, that addiction is *part* of my practice—just like sitting, just like sadhana. The practice of being a recovering alcoholic has its hinayana and mahayana aspects. The hinayana aspect is staying sober and looking at your pain without abusing *things* to cover it up. Just as with sitting, the world starts to get sharper, every time I've worked with sobriety. After that, there's an experience of expanding out and appreciating my sober world. The mahayana aspect was well recognized by AA in their twelfth step in which an alcoholic's recovery depends on working with "other."

In terms of my recovery, being in treatment is intensive hinayana-mahayana practice. You're put into an environment free from alcohol, and you interact quite intensely and intimately with fellow patients in treatment. It's a very luxurious way to work on recovery. Like Seminary. In this case, it's one month of intensive practice with one's disease. Just going to AA meetings is like sitting daily nyinthun compared with a dathun or a Seminary.

The vajrayana aspect of recovery is truly yet for me to discover. If I said anything about vajrayana now, I think it would not be coming from experience. It would be trumped up and dishonest. And dishonesty, for an alcoholic *or* for a vajrayana student, is fatal.

Q: What has been your involvement with Sarpashana?

A: Well, there was a period when my house was used for meetings. I participated at the level of development that it was at, at that time. By the time Sarpashana came into being, I was in a pretty advanced stage of alcoholism, and Sarpashana was in a pretty early stage of discovery and self-examination of individual and sangha drinking. I consider myself a lifetime peacock, but I never regarded it, to this point, as helpful in my recovery.

Q: What direction would you like to see it take?

A: We don't need a Buddhist AA. I have found that the AA Twelve Steps work. They have an organic progression. It's no different from the fact that you get pregnant and nine months later you have a baby. If you work the steps, you will be a *recovering* alcoholic. The steps are not necessarily theistic, in spite of the word "God" that appears. I don't see any necessity to translate the Steps, nor did I find the translation to be a useful tool.

Personally, I would like to see Sarpashana become, in the immediate future, a group that can help the sangha to see that there is a lot of excessive alcohol use in the name of social drinking. That there are a lot of domestic problems and a lot of financial unmanageability secondary to alcohol use. That we could bring the sangha to look at that. I would also hope that, for vajrayana students, we can work on our relationship to the amrita/poison aspects together. Sarpashana is growing and changing, and our sangha's relationship with alcohol is growing and changing. So my expectations are somewhat open-ended.

Q: You were in AA before treatment. Do you feel that you were working the Steps? Or was the Buddhist-AA split preventing you?

A: That's an artificial split. When I have seen that split as an aspect of my denial, I have worked the steps, gone to meetings, and my disease has gone into remission. My Buddhist practice has been enhanced. The Buddhist translation of the Steps only gives fuel to that idea of a split. It justifies thinking that there is a conflict.

Q: What are you going to do when you leave here?

A: I'll continue out-patient treatment for six months. Then I'll attend as many AA meetings a week as I see necessary to help me with my recovery. The point of treatment is to know when you need to go to a meeting. It's just like sitting practice in that way. Also in that you go without any expectation of result, and even when you *think* that you don't need to go, something happens. An alcoholic without a regular support system is like a diabetic without insulin. It's only a matter of time.

Q: Is there anything else you'd like to add?

A: Well, part of my recovery will be going to Sarpashana meetings. I've discussed that with my counselor already. And my twelfth Step is more than likely going to involve working with alcoholics in the sangha. I'd like to say that one of the wonderful things about being an alcoholic and being in treatment is that it has opened up the possibility of spiritual relationships with people outside the sangha. Like my nursing career, this has provided a wonderful opportunity to expand out and be a Shambhala person. My way is not to be involved necessarily in teaching and aiding in formal programs, but in working with alcoholics, the mentally ill, and with dying people. From that point of view, I'm very grateful to be an alcoholic.

Jose A. is a Boulder resident and student of Trungpa Rinpoche since 1971. He is a co-founder of Sarpashana and describes himself as a "practicing visionary."

Q: What makes you think you have a problem with alcohol?

A: At this point, I know in my guts that I could not comfortably sit down with others, much less by myself, and have a beer or a glass of sake. Not that I wouldn't enjoy it, but I couldn't do it right now. The discomfort is so high.

Q: Why is your discomfort so high?

A: Because if I did have a beer, or whatever, I know that it would set in motion the psychological mechanism that says, "Hey, I can do this. No problem." And I know from previous experiences that that would set me on the roller coaster. Down. The last time I quit drinking, and thought that I could start again, it took me two weeks to get to the abysmal level I had been at before I quit.

Q: Did you consider two weeks to be a long time or a short time?

A: Well, I don't know. It was a period of great effort. Mind you, I had a family and the whole social situation. It was a great effort to go through "peaceful" dinners with a glass of wine. In a week I was saying, "Oh, I'll get the drinks." There was a door between the kitchen and the living room, and I'd slosh down three for every one I poured. That was back in 1979.

Q: When was the last time you drank?

A: It ended December 27, 1980.

Q: What was that day like?

A: That was a situation in which I knew...that was a hunted stag situation. I knew that I wasn't going to go on. I had been sober for close to a year. I had separated from my wife, and the social situation had fallen apart. It was the end of a six-week binge. I turned myself in to the Alcohol Recovery Center. I had nowhere to live. It was desperate. The anger, frustration, bitterness, resentment. And a domestic situation that, after thirteen years, had proved to be unworkable.

Q: What's your history with drugs and alcohol?

A: My father's alcoholic. I was aware of that from about age six. I knew that wine did bad things to him. I started drinking in high school. I kind of said, "Okay, now *I'm* going to start drinking." Like the role was already made. The shoes were ready. Only these were lead shoes. [Laughs] By the time I was a sophomore, I had a reputation along with my twin brother. That continued into college. Wild, wild drinking. When I married for the first time, at twenty-three, it had been going for seven or eight years. It was getting scary.

I was just lying there, and I called up AA. Some people came out, just like in the movies—real sweet and kind and Christian. I started going to AA meetings. I was twenty-three or twenty-four. I managed to stay sober for a while—through graduate school. I didn't like it, but I knew that if I managed to stay sober, I could get through school.

In 1965 I had a grant to go to Europe. I broke up the marriage and went. I had been sober for about two years, I guess. Did some experimenting with drugs—LSD and French downers [laughs], and started drinking heavily in Paris. Drank for about eight months or so, and then quit on August 1, 1966. I remember that because I had some type of gratuitous mystical experience. Then from August '66 through maybe early '68, I stayed sober again. But I did LSD on a really regular basis. I wasn't an especially heavy user. I had always thought of it as a transformational learning tool. Maybe once every two or three weeks. I used marijuana regularly. It helped me to keep off the booze. I saw how much more of an enhanced state of mind LSD produced than the booze.

Then there was the period of time between '68 and '72 when I drank. It was the best time of my drinking. There were some bad times. But my main drug was marijuana. It moderated the bad effects of the alcohol. I received meditation instruction from

Rinpoche, and I told him that I liked to use marijuana. I was as hooked on marijuana as I had been on alcohol. He advised me to stop. That was in 1972. By '73 I was way over my head again in the booze. Then, between '73 and '77, I really struggled with it. I didn't go back to AA. I was really involved with Buddhism, and AA hardly crossed my mind. Not only did I get no support from Buddhists, but they thought there was something *wrong* with me for not drinking. So I was very confused. I knew that my drinking was very devastating. I think people thought it was disgusting that one of *their* friends could be an alcoholic. That wasn't an idea that people could entertain. Not to mention the old, "Come on! You're in the vajrayana now! You can drink!"

So I drank and drank and drank. And I'd say that by the time I was really fucking myself up—going to emergency, stitches in my face for the accident in May of '79—I felt like I'd been pickled for six months. The drinking was continuous. I wasn't ever really sober at all. Rinpoche suggested that I see a therapist. I did that, and after three or four months, I said that I could drink again. That was the period when it took me two weeks to get blotto. At Thanksgiving, 1979, I had everyone freaked out. And I was real suicidal. I knew that, if only for my sake and no one else's, I had to *do* something about it.

I had a conversation with a guy named Jay Lippman. He had worked at the ARC. He was the first person—certainly the first Buddhist—I had talked to that made any sense. Aside from the stuff about looking at it as a disease, etc., he said, "Some people have their legs amputated. *You* have alcoholism." He said, "I doubt that alcoholism is going to prevent you from becoming a crazy yogi." And it made a lot of sense to me.

So I went to the ARC, took their education classes, and saw a counselor. That was early in '80. The counselor said that I really should be bringing my wife in. But I didn't really understand or appreciate the whole thing about co-dependency and the enabler. I tried to get her to come, but she wasn't particularly interested. I would say that my drinking contributed greatly to the deterioration of that relationship.

I had real resolve. I didn't understand co-dependency and neither did my wife, and when I thought that I would be accepted back into the family, the opposite happened. I realized that our marriage had been over for longer than I had thought. That was very painful. So the last binge was that one, in 1980. I ended up in the ARC on January 2nd. I had planned to go into retreat, but Rinpoche thought that I should be in a more supervised situation—not be too hard on myself. Smart of him—as usual. I ended up at RMDC doing an in-house retreat. It was a most illuminating experience.

In that summer, when I was still married, Jerry G. and I got together and started what is now Sarpashana. There were four of us. After that ten-day retreat, I knew that my energy had to go into seeing that the Buddhist Alcohol Study Group got off the ground. Jerry had been in Seattle. That's when I connected with Roger and Lynda. It seemed not only natural, but a karmic imperative.

So, I've been sober since then. And not only have I not craved a drink—I think I burned that out—but I've been in some *really* heavy, bummed-out and neurotic spaces, and always remembered the old condition that precludes even *considering* drinking as an option. I can't say about tomorrow. I can't say that, just because I haven't felt the urge in three years, that I'm immune. In other words, it's nothing to be proud of.

Q: What is the quality of your sobriety now?

A: There was a quality of experience that I had from being at the ARC through to being at RMDC that I have continued to nurture. That is an experience of real tender-heartedness. What I call “a heart made of dawn.” I've tried to work with *that*. I know something's off when I forget that experience. And when it's off, I try to sit until that experience comes back. So that's the principle quality.

Around that is interwoven all kinds of experiences. It hasn't been an easy time at all. Losing my job, divorce, etc. Down-and-outism. Frustrations of all kinds. But I think I'm lucky that I've had those kinds of “relative failure” situations. I did start smoking marijuana again about eight or so months into sobriety, and I can see how that can again become an addiction. So I let my family know. Actually, I ask them beforehand and keep track of when I smoke so that I can detect any changes in consumption. I don't smoke that often. When I get into “bad” states, confusion or aggression, I reject the option of *any* substance. When I'm neurotic, I'm able to reject substances. That's very important for me. And I did have two wonderful acid trips in the past two years.

But I really enjoy *this* simplicity and clarity of mind. Really being able to work with my own energy, which has taken all sorts of different directions. A lot of creativity. I really enjoy that. Being able to develop relationships—based on nothing more than who I am—with people. I know that there is a lot of the quality of warriorship that I have never genuinely felt when I was “in my cups.” It's very direct and has very little use for playing all of those old games.

Q: What direction would you like to see Sarpashana take?

A: Basically, I'd like to see it continue doing what it's doing. I like the weekly format. It's really healthy for people to be there who want to explore. And I'd like it to become more educational. Letting people know this is real. It's not bad, and we can help each other with it. And of course, I'd like to see the famous half-way house. We need some kind of facility where we can take care of people in an environment that's simple and uplifted. I think simplicity is the most important thing. I really do. And also to take more steps in the direction of the larger non-Buddhist community. There are people there who can teach us more.

Q: Is there anything you'd like to add?

A: Well, along with the simplicity, I think that, reflecting on my own experience and having worked closely with others, particularly in the last three years, humility is also very important. In the sense of not being arrogant. That's really the key.

Horatio H. has been a meditator for about twenty years, the first ten of which was spent as a student of Suzuki Roshi and the last ten with Trungpa Rinpoche. He describes himself as “an old dog, content to sit by the fire and whisk up a cup of powdered green tea for a guest.”

Q: How long ago did you meet your wife?

A: Thirteen years ago.

Q: Were you aware that she had a problem with alcohol?

A: No.

Q: Are you aware of one now?

A: No.

Q: Does she feel that she has a problem with it?

A: Uh huh.

Q: But you don't?

A: No. I've known hard-core alcoholics. She hardly fits in with that group of people.

Q: How would you describe *hard core*?

A: A person who finds alcohol at the center of their life/existence to the point at which they are actually dependent: living between the shakes when sober and incoherence when inebriated.

Q: And what constitutes *no problem*?

A: Well, you know—life is always a problem. I mean, that might start with peanut butter. Or overeating. Some form of passion that's gotten out of hand. Alcohol, of course, may take years to get into one's control, but if I may offer an opinion—I don't like to hold opinions, but—the problem may be boredom, or lack of confidence, or terror rather than the alcohol itself. I tend to see things in cycles of seven. For me, the cycle between twenty-one and twenty-eight was one of confusion that was aided and abetted by alcohol to the point where I actually developed several personalities. And when the Beatnik movement of alternatives came along, I put down alcohol in favor of marijuana. At that time, I was definitely a weekend alcoholic—starting Friday night and ending Sunday night. With great gusto. It was a very “in” thing with my social set. But when Monday came, the hangover was treated and there was no bingeing until the next weekend. I had friends, however, who didn't stop on Monday, but kept drinking throughout the day and more heavily into the night. In the college scene, these people washed out sooner or later.

Q: So your situation constituted *no problem* but theirs didn't?

A: It wasn't seen as a problem.

Q: By whom?

A: By my peers or my parents. My mother and father were children of the Temperance Movement. Our favorite songs when taking trips together were Temperance songs that they'd learned in Sunday School. They were sung in derision and self-congratulation as to what progress had been made since the death of Prohibition. My parents were average in their consumption of alcohol: two stiff drinks before dinner during the week, and more on weekends. In the suburb where I lived, this was the norm. So when I began drinking regularly on the weekends, at sixteen, nothing was said. In fact, my father would buy me beer to keep me out of the liquor supply. Someone within me loves to get loaded. It took years for another part of me to grow up and develop the discipline to handle alcohol properly.

Q: But you didn't think it was a problem at that time?

A: No. [Laughs] I was not aware of any problem other than hangovers. In fact, it was considered one's social duty, and one with great merit, to come back after a fraternity party to kill the keg.

Q: Was your wife's drinking in some way different?

A: I would say that, for her age, her drinking was very similar, but certainly not as heavy as mine was!

Q: Do you still drink?

A: Yes. There was a period of over ten years when I virtually abstained. This was while I was practicing with Suzuki Roshi at San Francisco Zen Center. It was a monastic-oriented life style. After my teacher died, my life style went through a transition. I had an opportunity to visit the Karma Dzong Buddhist community in Boulder. I was shocked to find that people could drink and still be Buddhists. I was shocked out of my self-righteousness. Right after that, I met my wife-to-be. Drinking was something we liked to share together. And when we came to Boulder, I learned to drink beer, and sake as well.

Q: How does your wife feel about your drinking?

A: She tolerates it. No problem. But she doesn't appreciate it if I have sake around as it is a painful temptation for her. Astrologically, she's going through her Saturn return, and I think she realizes that discipline is coming up for her. Discipline in terms of getting her life together as an adult, as a warrior. At this point, she feels that she needs to refrain from drinking.

Q: Do you notice any changes in her?

A: Well, yes. First of all, she's finally lost the weight that she's been struggling to lose. And she looks marvelous! Our social life has changed. We hardly ever go out to the bars now. And the weekend drinking parties that we were so attracted to while she was drinking are now repulsive to her. I must admit that if one is not drinking, it is rather boring to spend an evening with a group of hard drinkers. We used to leave parties because she was getting too loaded. Now we leave early because she's not into it. She's

easier to be around since she quit. She would get rather brash and clunky when she was drunk.

Q: Clunky?

A: Yeah. Sloppy, you know, banging around, running into things. Once or twice she stepped on me getting into bed. And she had an auto accident—a real shocker. These situations are few and far between. And I'd give her feedback about it. But I didn't think her drinking was all that heavy or frequent. In act, I was jealous because she didn't get hangovers.

Q: Did the morning after her drinking have any effect on you?

A: She'd get up bright-eyed and bushy-tailed! I couldn't believe it. But, you know, now that we're talking about it, things are coming back to me and I'm remembering scenes—like her and her drinking buddies downstairs drinking to all hours. Especially if they were also enjoying pot and toot. It would get really raucous. Maybe I'd join them for a while and maybe I wouldn't. That would happen every weekend, if we didn't go out to a party or a bar—sometimes during the week. She kept saying that she intended to stop—"but not yet."

Q: Do you feel any effects from what she perceives to be her alcoholism?

A: I believe she considers herself to be a problem drinker, not an alcoholic. Well, of course we're co-dependent. Whatever we do affects those around us. Our home life has been dominated (until recently) by her heavy-duty teenage son. It was like living with a furnace that was about to blow up—constant complaining, deception, verbal abuse, threats, and thrashing about. She'd have a drink to cheer herself up and to relax. Then I guess it was hard for her to stop once she got rolling. When she'd been drinking, it was hard for her to react to him properly, and he'd heap on further abuse. Interestingly enough, his mental problems got worse *after* she'd stopped drinking. Could it be that he was dependent on her drinking problem?

Q: And how did all of that make you feel?

A: Well, now we seem to be at the crux of it—I felt uncomfortable that so much of her time was spent drinking. Suzuki Roshi once said that if you start putting sauce on your rice, you might start going for the sauce and forget about the rice. The glass of sake that accompanied evening leisure began to be the main activity. My hope is that during this dry period she'll discover other interests—other than being high, relieved after the working day—that the creativity in her will somehow blossom.

Q: So you feel uncomfortable and hopeful?

A: I hope that this will be a period in which she'll discover the latent artist within her. That she'll allow herself that chance.

Q: If that happens for her, how do you imagine that will affect you?

A: Well—I pray every day that her confusion will dawn as wisdom. I don't mean to be patronizing. I've seen this happen to other people. I've seen them cut themselves off from

any opportunity. They have to realize it themselves. You can't tell them. You just have to support them. Sometimes I think, "Maybe *I'm* a problem for her. Maybe she has to escape into her booze because *I'm* difficult." There's always that thought.

Q: Do you really think that you're the problem?

A: No. That's part of the fear. We all have hopes and fears. "Maybe *I'm* the obstacle."

Q: Do you talk about how you feel with her?

A: We have recently entered into a dialogue that seemed to have been impossible while she was drinking. If I started to make suggestions, she'd say I was lecturing her. So, you know...In fact, it's very recent that we have been able to talk about this, but we have!
[Laughs]

Q: Have you talked with any other people about your feelings during these past months?

A: Well, one friend and I have had an ongoing dialogue for ten years. He feels that she has no drinking problem. Again, we're distinguishing between a person who likes to get drunk once in a while and a substance-dependent personality. You get into the fine line there between celebration, and I guess, despair.

Q: Has she used Antabuse to get sober before?

A: I don't know. She used it when she first started not to drink. She's stopped once before, but she didn't use Antabuse then.

Q: Do you prefer to be with her when she's sober or when she's drinking?

A: Well, either way. I just like being with her. We're very fond of each other. But when she's not drinking, there's no feeling of impending doom [laughs] around the next corner.

Q: What image does the word *alcoholism* provoke for you?

A: Nihilism.

Q: Does it provoke an emotion?

A: Anxiety.

Q: Do you think that those are pretty common responses in the Buddhist community?

A: I have no idea. I don't feel that it's well understood. I am, just at this moment, beginning to realize how naive I am about many problems. Like with her child: Many sangha members offered their suggestions about the problems he was having, meaning to be helpful. But as the situation developed, I could see that their compassion was extremely naive—only because I had been through it. I had *shared* their opinions before it happened. "Well, I'll take care of him." All these good intentions, based on *their* perception, came from left field. I think it's the same with alcoholism—easy solutions: "Easily worked with, more practice." It appears that even enlightened teachers are not immune to the problem of alcohol.

Q: Have you attempted to educate yourself on the subject?

A: Yes.

Q: How?

A: Well, I read the Sarpashana Sourcebook—the last one—and I'm keeping my eyes wide open. I've had experience with alcoholics. Not in my family, but good friends of the family turned into clowns and then became pathetic. I've never attended classes or read books, and so forth.

Q: Do you have anything you'd like to add?

A: Well, I see this as a problem of ignoring the problem. And that...hmm...perhaps I was naive when I said that there was no problem—because as we talked about it, I could definitely see that there *is* a problem. But just not drinking does nothing but put the problem into the refrigerator. And if it's taken out and allowed to warm up, it's going to again reoccur. I think that there has to be some willingness for the drinker to be open to alternatives that allow one to become a warrior, to be creative. And for me—each moment has its alternatives. There are things to be done—so many things. We have become a society of observers, an audience to our own lives. But unless someone is ready to participate in their own life, you can suggest how to do it. But you can't do it for them.

Nancy and M. both have been students of Trungpa Rinpoche for about ten years. Nancy is married to a recovering alcoholic and has been attending Al-Anon for about three years. M. is married to a drinking alcoholic and has been attending Al-Anon for one year.

Q: How would you describe yourselves?

M: I'm a working mother, a wife; harried, intelligent, very much seduced by and preoccupied with the details of daily life and not much given to introspection any more.

N: I, on the other hand, have plenty of time for introspection. [Laughter] In spite of also being a working mother, working overtime trying not to replicate the errors of my parents with my children, I have the luxury to be able to spend more time in my inner world. I'm interested in the world despite its pitfalls, and I'm trying to enjoy my life for possibly the first time. I'm also a dedicated Kagyu practitioner.

Q: What makes you think your husbands have an alcohol problem?

M: Well, it's easy for us to identify the problem. My husband exhibits virtually all symptoms of fairly serious alcoholism. He has blackouts; he drinks enormous amounts of alcohol; can't stop drinking when he starts drinking; he has personality changes when he's drinking as opposed to when he's not; he makes himself physically ill.

N: Same things. Personality changes, aggression, confusion, a lot of craziness—finally becoming too much to live with.

Q: Did those traits, or related traits, have anything to do with your initial attraction to them?

N: For me, absolutely. My mother was an alcoholic. All the major people in my life have been alcoholic: my employers, two husbands, even my guru. If you put me in a room with alcoholics and non-alcoholics, the alcoholics and I will gravitate toward each other. I found them charming, sensitive, and wild and crazy at the same time. I was habituated to the ensuing abuse when things got out of hand. I didn't know there was another way to live.

M: For me, I didn't have any alcoholism in my background. Certainly none of the things I just mentioned in answer to your other question attracted me to him, but there are qualities that I now connect with his drinking that attracted me. A certain kind of craziness, the positive side of it, which appeared to be fun and special—outrageous.

Q: What happened to make you feel that the outrageousness had become problematic?

N: It stopped being so entertaining and got scary.

M: When you live with it, the same incident takes on a different quality. Acquaintances at the same party may be describing it as an amusing anecdote, but living with it has a very different flavor. You know that person doesn't really enjoy being seen as a maniac, and also, you are the one who picks up the pieces afterwards. The thing which has always been the hardest for me—it isn't the drinking behavior, which I don't see much of because he doesn't do it at home—is the long detoxification, which has gone from being a day, to three or four, and closer to a week, after a binge. The irritability and the twist, the opposite of straightforwardness. The preoccupation with alcohol puts up an enormous barrier to any communication between you.

N: I think the sensing of these incidents as amusing anecdotes is an important point for dealing with the situation in the early stages of dropping our denial of the problem as co-dependents. When I expressed discomfort about the bizarre behavior, friends would say, "But your husband is so charming, so entertaining." One even said that her favorite memories of him were when he was shooting cocaine. Never mind that he was killing himself! Or that my family was living in extreme pain and confusion.

Q: Do you find that your husbands are different during long periods of sobriety?

M: It's like living with a different person. It's great. During short periods of sobriety, he was very much on his good behavior. And that, although it's preferable, is fishy too. But when he quit drinking for a long time, he wasn't constantly struggling to penetrate through his alcoholic haze, so he had a lot more energy to do things. He was more grounded, dependable; we could talk.

N: All the sweetness and nobility comes out—which is covered when they're controlled-drinking or solid-drinking.

M: They're putting all of their energy into not getting out of control, and usually don't do it very well.

Q: I get the feeling, M., that there's a certain amount of white-knuckling going on for him then.

M: What's *white-knuckling*?

Q: Like when you're driving a car, when you're so afraid of losing control of it that your knuckles are white on the steering wheel. When it's that hard to stay sober.

M: I didn't see him that way at the time.

Q: He was genuinely experiencing some joy in not drinking?

M: Yeah, I think he was really happy to have quit. I think he started thinking that he could drink because he went for so long without drinking.

Q: What were the changes that you noticed in yourself when he started to sober up?

N: Initially, I thought all the problems were going to be erased. In Al-Anon, they call it the "Pink Cloud." That lasted for a while, and then I discovered that some of the problems weren't going away, and because there was no bottle, I couldn't blame it on it or on him any more. There are whole new issues to deal with which are almost as stressful in a relationship as the booze. Learning how to communicate properly for the first time instead of habitually reacting. Getting in touch with my feelings—they'd been stuffed inside, in order to survive as a co-dependent, since childhood. And he's doing the same thing: figuring out how to relate to feelings that he'd never had to deal with as long as he could reach for the bottle. I felt like we were both children, having to learn a whole new way of being. And I had to accept the fact that a lot of my attitudes were the source of his misery, whereas before I could conveniently think of him as the source. That kind of thinking is a major part of the co-dependent disease. We're so used to pointing the finger, used to judging the alcoholic's behavior. That keeps the focus off of ourselves.

That plays right into the addiction to the relationship. It's a real come-down—copping to the fact that the source of my problems is really inside myself and to learn to work with my habitual patters. But as I became stronger and learned how to ride out the devastating pain of that realization, I learned to keep the focus on myself. What did *I* want? What feels good for *me*? I was so used to being the nurse, the nurturer. And our society enforces those traits in women, so I was also experiencing a lot of role reversal. Co's stay at home and think they can control everything that way. Or they go out, and think they can control everything by going out *with* the alcoholic. I spent so much time trying to manipulate our life so that he wouldn't drink, or trying to get him to behave the way I wanted him to. Once you face yourself head-on, you get the freedom to go off by yourself. You start to break your addiction to the alcoholic.

As I started to "live and let live" and to get into things I wanted to do, I lost him as a reference point. And that's another pressure on the relationship. I found a whole new

circle of friends that didn't drink; that were into the same degree of mental and physical health that I wanted for myself and my children. And that's very threatening. I've often heard it said in Al-Anon that the early stages of sobriety can be just as problematic as the drinking.

Q: Do you think that there are a greater number of women co-alcoholics than there are men? The statistics are that 90% of women married to alcoholic men stay, and only 10% of the men married to alcoholic women do. And do you think that the process of recovery for the co-dependent man is different from a woman's?

N: I hadn't heard the statistics. The men I've talked with in Al-Anon describe the process as being the same. Although for a man, the tendency seems to be one of controlling his wife's behavior with more aggression than a woman might use. So there is perhaps more controlling than recognizable dependency. That's acceptable in our society.

One co-dependent man I know used to structure his wife's daily schedule. He'd leave her a list of things that he wanted her to do everyday. Of course, her way of dealing with that was to drink and blow the whole thing off. He said he was experiencing the same role reversal that I described in their recovery. He's letting go of the control as she begins to assert herself. He's assuming more of the responsibility for the very things he used to put on her list. I think the traits of the disease are the same for both sexes, and the path of recovery is similar too.

Q: What are the symptoms of co-dependency?

M: Rage, anger, panic. It's an intolerable situation, and one over which you have no control. And yet, you feel somehow responsible. That you should be doing something. There's a lack of understanding about what the alcoholic is going through. It's very hard to understand why someone would keep doing something that hurts themselves and the people they supposedly love. Co's are angry with themselves for not being able to do the right thing that's going to make things better. Controlling and dependency—all those things they talk about in Al-Anon—they manifest themselves in so many different ways. Like Nancy was saying, controlling can be manifested by the woman who stays home and straightlaced, or by the person who goes out and tries to keep up. I think dependency is the main thing that defines co-alcoholism, and lack of self-esteem is at the root of it. You feel somehow that you deserve it, or you brought it on yourself, or you couldn't do any better in any relationship, and those are things that the alcoholic tends to reinforce as a way of keeping a hold on.

Q: Do you think there's a mutual dependency of the alcoholic on the co-alcoholic?

N: Most alcoholics I know come from alcoholic families. So they started out as Co's. They say in Al-Anon that the only difference between us is the smell of our breath. When our buttons get pushed, our minds go on a roll that is similar to being drunk. I know when I was at the height of my disease, the smallest thing could set me off, and I would freak out and become as unmanageable as if I were drunk. That's the source of the intermeshing of the relationship. What the co-dependent faces in recovery is de-meshing,

detaching. That's the main responsibility. I was addicted to him, he was addicted to the bottle, but also to my presence.

M: I think the alcoholic is very dependent on the co-alcoholic for many reasons. Co-alcoholics often pick up the pieces and cover for the alcoholic in ways which allow the alcoholic to be irresponsible. They do more than their share, make excuses to people. They also often act as a "foil" for the alcoholic by nagging, punishing, ridiculing, which gives the alcoholic something to react to, in anger, or spite, or self-pity. That becomes an excuse to drink. One of the most important things for the recovering co-alcoholic is to learn to stop doing those things, to detach from the alcoholic, to learn that you can care about someone without trying to live their lives for them.

Q: What do you have to say about alcoholism being a family disease in terms of how it affects the children?

M: Clearly the children are very much affected. When the drinking is going on in the home and there's violence and scary things happening, it's terrifying for a small child. To see their father take something and throw it, or break something, or hit their mother. The other things that affects them is the hangover. My son was describing his father, "When things are going fine," (meaning during the periods when he's sober) "Dad's sort of like an Ewok. He's doing things in the garden and busy. But when he's bad, he's like Jabba the Hutt. He just lies on the couch" radiating bad vibes. There you have a nine-year-old's perception. Today he said, "Where's Dad?" Dad hasn't been home all weekend. I said, "It beats me. I don't know where he is." He said, "How come, if I'm a half hour late from school, Dad yells at me and says he was worried. Doesn't he think we worry about him when he doesn't call? All he has to do is call."

So, they're not getting the kind of modelling they expect from their parents. They see the parent as acting like a jerk and they know it. It's hard to understand and it's hard to forgive. And it's hard for me as a co-alcoholic to talk about it in any kind of sane way. Because I'm struggling desperately with myself not to be angry and crazy, and then on top of that to have to deal with my children's anger and craziness is almost unbearable, and I usually end up saying, "I can't talk about it."

Q: So you, M., are in a situation in which you're living with a wet alcoholic and over the course of this weekend (it's now Sunday) you're wondering where he is, and at the same time trying to maintain detachment from the situation? How does that make you feel?

M: Well, I'm getting pretty good at it. I've had a lot of practice. The Al-Anon program has really helped. So I can genuinely enjoy the weekend now, and that took a long time. I've been in Al-Anon not quite a year and Nancy has been in for three. I sensed early on that the only way I was going to survive was to act as if I didn't care. But I went through two or three years of being frantically on the phone, trying to track him down, trying to find out what he'd been doing and with whom and all that stuff. Then at some point I just realized, before getting into the program or anything like that, that it was totally a waste of time. So I just tried to act like a normal person and to do things a normal person would

do on the weekends.

Q: Did you catch yourself asking, “What would a normal person do?”

M: That’s right! [Laughter]

N: Normal people don’t pick up the phone every three seconds!

M: It’s only recently that I think I don’t have to pretend any more because in the meantime, I was horribly depressed. I was nervous and would easily lose control with the kids. Now, I actually can enjoy the weekend and have a sense of what I want to be doing—and that’s the best kind of detachment. Not just pretending I have things that I want to do that are separate from the alcoholic, but I actually do have things, and I can do them just as well, whether he’s there or not. But you do start to question why you’re married, if essentially you’re functioning completely separately from him, which you’re required pretty much to do.

Q: But you feel that this kind of separation and detachment will ultimately lead to a greater togetherness?

M: No, not necessarily. It’s what I have to do for my own well being and for my children. And hopefully it will do him some good, but I don’t care.

Q: Nancy, you live with a recovering alcoholic. I’ve heard that a lot of people feel that that is in some ways even more painful than living with a wet alcoholic. I’m wondering if that’s the case with your children?

N: That groundlessness that comes from the loss of reference point and role reversal that I mentioned go on in the early stages of recovery, which often make as little sense as the drinking years, eventually subside. As long as the communication is refined. Both alcoholics and co-alcoholics are drastically out of touch with their feelings. When I got clear, one of the biggest areas we had to cover was helping the children to be aware of the dynamics of the situation. We were raising two co-dependents with a statistical 100% chance of either becoming addictive or marrying addicts or people with similar compulsions. They have an alcoholic father and stepfather. That’s scary. As a child raised in an alcoholic home, I learned to walk on eggshells just to keep things nice. In order to survive, I had to deny all my feelings of rage and hurt and betrayal which came out later in me as an adult.

So I know children develop these weird skills—tiptoeing around—and we had to spend a lot of time nudging the children, asking them, “How do you feel? It’s okay to feel things around here now.” Letting them know that nothing would come flying across the room, no dark clouds from either parent. The biggest priority in our family now is feelings. It’s become a standing joke. Which is great. It’s a fantastic tool to send any kid out into the world with—the ability to access and process their emotions. There are many positive things to be said about alcoholic relationships. When I first attended Al-Anon, I would hear these old timers talk about being married to recovering alcoholics and

working their programs together like it was the Eighth Wonder of the World. I was appalled. How could anything so unbearable resolve itself into sanity?

Q: You're a grateful co-alcoholic?

N: I really am! I don't feel that sobriety is as problematic as drinking any more. My self-pity is dissolving. My whole outlook on life has brightened. I'm no longer running on fear. And my intuition and self-confidence have grown enormously. We are reaching subtleties of communication I never dreamed possible, and now that I look back, I think the whole relationship has brought me to a greater understanding of myself and where I came from even before I met my alcoholic. If you've got two people who are honestly working their programs, you've got dynamite.

Q: I know that both of you are very much involved in educating yourselves and the people around you about alcoholism and its effects. Do you feel that the Buddhist community in Boulder has more collective denial than does the non-Buddhist community? What do you think the Buddhist relationship to alcohol denial is?

M: I think the level of denial in society in general is pretty high. It's hard for me to say. I came from a very sheltered upbringing in which nobody drank at all, into my marriage to an alcoholic and the Buddhist community. Drinking is so much a part of American life. And the line between acceptable and non-acceptable drinking is so hard to draw. It's not something people like to think about very much. In the community we have a particular problem in that we have a teacher who drinks a lot. And, so, there has developed a very elaborate rationale for drinking to excess. One of the things that struck me about *Under the Influence* was the way they describe the alcoholic in the early and middle stages as a person who goes home and quietly polishes off a fifth every night and feels that that's okay. In our community, it's acceptable for people to get drunk and act crazy. There's not such a thing as holding your liquor or keeping it together. So I think that just makes it harder for people to come to terms with it when drinking has become a problem.

N: I think another problem is that Buddhists tend to treat each other's feelings as dismissable. For years, when someone would express a feeling, the sangha would say, "Oh, that's *just* a feeling. Go sit. Why don't you meditate. It'll go away. Don't feed it." Discussing feelings was often seen as feeding neurosis. There are certain things about living with an alcoholic that don't go away by meditating.

Q: Like alcoholism? [Laughter]

N: There's very little support when you're trying to sort out your life and make some sense out of what's going on. Very little understanding of the whole dynamic, which comes in part from a lack of education and an ignorance-is-bliss kind of denial. It's very confusing for me to compute why there is so much importance put on the enlightening qualities of sake in a community in which pain is an acknowledged truth. We're taught that there is no escape from pain, and yet there's almost an encouragement to alter our minds with a substance that numbs pain. The aspect of alcohol as a social lubricant is extolled, it's benefit for composing spontaneous poetry, etc. I've heard people who are

stuck in depression being urged to take a drink to change their perception.

And there's little understanding in the community of the ways of treating the disease. I think it's changing now that Sarpashana is educating groups, like the Dorje Kasung. For instance, when I used to go for intervention—under the guidance of my husband's alcohol counselors—I got called a ball cutter. “Why doesn't she just leave him instead of persecuting him?” A Buddhist lawyer my husband had hired for a treat-and-hold situation kept taking him aside during the court proceeding and asking why he didn't leave me. He was bingeing with cirrhosis. I was being encouraged by professional counselors to try to save my husband's life, and people would dismiss it by saying, “Well, Nancy, you always go a little crazy when he drinks. Why don't you work with the situation a little longer?” As though intervention or calling the police wasn't working with it!

M: Most co-alcoholics are struggling with a tremendous amount of confusion, and I think that being Buddhist doesn't help—because we don't have the traditional, obvious notions of what is acceptable and what is not acceptable. We've thrown all of that out. So, if you wake up and your husband is lying next to you in a pool of vomit, you think...

N: Now that's real tantra.

M: Right. It's not necessarily the *most* disgusting thing I've seen in my life, it's just...

Q: Art in everyday life.

M: And every time you have an angry or panicky thought, if someone isn't doing it to you then you're telling yourself, “Well, that's just my mind and if I were practicing more then I could get right through this.” So, for a long time, it was really paralyzing, that kind of thinking.

Q: Are you saying it's all right to ask for help?

N: Absolutely. And the thing, for me, about going outside of the community to Al-Anon, was how incredibly supportive it was to have someone say, “Why, that's unacceptable behavior.” They don't have any notion of charnel ground. They just say, “Why do you put up with that?” The first hit of that was when a policeman asked me how I could live as I was, while looking up at the bullet holes in my ceiling from “target practice.” I felt blown away. I was so confused, and in the throes of my own masochism, that I didn't think I could even ask that question.

M: I didn't really have a problem with the vomit. I knew it was disgusting. But for somebody to disappear for days on end, that was much harder for me. Wasn't that just my problem? That I wanted my nice little husband, and our nice little house, and our nice little weekends so he could mow the lawn? And wasn't that a neurotic, clinging trip? I used to tell myself that it was no different from having a husband who went away on business trips. But, of course, it is. The not calling, the fear of arrest, injury or death

make it different. It took me a long time to realize that those fears, and the pain they cause, are more than *just* feelings—that they are valid. Just as it's valid to feel hurt, or angry, when you cook a meal for someone who doesn't come home to eat it. Or when you plan an engagement as a couple and you have to go alone. I definitely think that, while practice may ultimately solve all of our problems, in the meantime it's very helpful to have some kind of structure, a framework that is specifically designed to address a particular samsaric glop that you happen to be stuck in.

N: The Al-Anon program helped me so much. I could be with a group of people who had the same brand of neurosis I had—not just the vague, “we're all neurotic” style, but people with whom I shared a specific pattern. That helped me see where I was coming from. And within the group process, these niggly things that I tended to hold inside—because how could anyone know these things and still like me?—opening up in a group of people who are going through the same process of exposing their niggly little secrets, you all start flashing and saying, “That's me! *I'm* like that!” And you get feedback, like, “Oh, you do that too? You panic? That bothers you?” That was extremely helpful and it didn't come from the Buddhist sangha at all. It came from women who'd been in the program for a while, and mostly Christian.

Q: Have you, since you began educating yourselves on the subject, found support within the Buddhist sangha if you look for it?

N: I've gotten much support and nurturing. I haven't needed to look for it. M. is the only Buddhist co with whom I have close contact. We go to the same Al-Anon group. I'm not ready to re-expose myself to the uneducated over these issues. I lost sangha friendships during the time I started my program. They were either alcoholics or enablers in denial, and they were threatened by the things I did. Like intervention, or detachment, and there was a lot of mutual reaction. As a co, I had to acknowledge my responsibility there—I was addicted to sick people and sick situations. I was habituated to forming relationships with people who weren't really capable of true friendships because of their own compulsions or addictions and lack of maitri. I learned to replace those destructive relationships with nurturing friends who were on a similar path of breaking compulsive behaviors. It caused a lot of confusion and pain, however, until I saw where the old friends were coming from and where I was going. You can't get support from people who are in denial. A lot of our friends seemed to want my husband to remain the buffoon, the court jester, or even the object of pity because he kept them from facing their own problems and pain. That hurt. As long as they could focus on his antics, they didn't have to address their wives' blackouts or their own excesses.

Q: What do you think the attitude toward getting sober is in the community now? Or toward getting aware of co-dependency? What kind of feedback do you get?

M: I don't talk about it that much within the community. My fear is that it will be perceived as somehow off base—in terms of the teachings. My impression is that there isn't yet a very widespread understanding of alcoholism. Maybe within the small group that's directly involved with it, but I don't think that the community-at-large thinks of

alcoholism as a disease, or accepts the concept that an alcoholic should not take a drink. When I say things like that to the few Buddhists I'm close to, I know they think I'm being silly. That I'm on a moralistic trip. It's even harder for co-alcoholic problems to be understood than alcoholic problems. At some point alcoholics are so sick, so crazy, that people can recognize that a problem exists. But a co-alcoholic is struggling with emotions, and there is nothing remotely tangible, like alcohol, to be able to say *that* is the problem. So why can't we just get beyond it? Isn't that what our practice trains us to do? The only answer I have to that comes from Drew's *Getting Them Sober*. She repeatedly says, "Living with an alcoholic is too much for most people." That's very true. Unless you've experienced it, you don't have any idea what it's like. It's like living with someone who has a terminal illness. It *is* living with someone with a terminal illness. You watch them going down, and there's no end to your grief.

N: I also notice a kind of reverse snobbery among alcoholics toward non-alcoholics. We couldn't possibly have any understanding of the subtleties or the delights of drinking. We're the bad, uptight guys with no soul, outsiders to the secrecies of addictive behavior. People need to understand that the behavior of the addict and the co are *both* rooted in self-abuse. Coming from my past, I could have just as easily become alcoholic. Being Co's doesn't mean we have less street smarts or less magic. I don't drink now, because I stay away from anything that makes me unmanageable, not because I'm a teetotaler. But there's nothing like living with a cirrhotic to make you wary of alcohol!

Q: Do you think it's possible for Sarpashana to put a dent in those attitudes?

M: If anything can do it, Sarpashana will. But people don't want to think about it if it doesn't directly affect their lives. If it does, they tend to be, at some point, in denial. Most of the people we're friendly with, as is Nancy, may not be alcoholics, but they're problem drinkers, so they have a vested interest in thinking about alcoholism in a certain way.

Q: Is there anything you'd like to add for the purposes of the Source Book?

N: I think that one of the reasons that people don't want the education about alcoholism or co-dependency is—who knows what you'll find out? It's scary. And that's part of the denial.

M: And you find out the worst possible things—like that the alcoholic will die if he or she doesn't quit. I'd like to add the idea from Al-Anon for co-alcoholics: "Remember that you didn't cause his drinking, you can't control it, and you can't cure it." Another consequence of Buddhist thinking, perhaps more common than in the typical co-alcoholic, is that you tend to feel responsible. Some version of "Drive all blames into one." And alcoholics are very good at pushing that button. Pointing out to you in vivid detail all of the manifestations of your neurotic mind, implying that if you weren't so messed up, they wouldn't be driven to drink.

N: The last point we wanted to mention was that it seems difficult for Buddhists to relate

to the apparent theism of the Al-Anon program. I was in so much pain that I was *compelled* to bust through the translation from program jargon to Buddhist buzz words, so it worked for me. But I've seen a dozen Buddhists come into Al-Anon and drop out because they can't relate to terms like "higher power," or "God-as-you-understand-him." M. and I have been discussing the need for a women's group within the sangha to address the specific issues of co-alcoholics. We're not solid about the structure—that is, how much Sarpashana's guidelines would help, or how much Al-Anon program to use—but we know there's a need for such a group. And for some kind of structure, lest it turn into a bitch-session, which can be depressing.

Sangha women need to feel that they have a place to turn, to ask questions, to get educated. The co-dependent women I know, the ones who are venturing out of the closet and daring to ask for feedback on their perceptions, always say, "I don't think he's an alcoholic, but his drinking every night makes me uncomfortable. He doesn't really participate in the family or in the relationship. It's like there's no one home." And I tell them what the first policeman I ever called, ten years ago on a Christmas Eve, said to me. "Lady, if your husband's drinking causes you problems, then he's got a drinking problem."

RECOVERY AND THE FOUR POWERS OF CONFESSION

Ane Tsultrim Palmo
November 29, 1992
Karma Dzong, Boulder

[Ane Palmo is a Kagyu nun. She is a recovering alcoholic and a friend to many of us in the Boulder Buddhist community. Her generosity, as fully displayed in the following talk, has touched us, moved us, and helped us powerfully. Thank you, Ane-la.]

ANE TSULTRIM PALMO: I'm so nervous. I want to tell you that I'm so grateful that you've asked me to do this. In the last few days, I went through my past life which I didn't want to look at. It was like a past life that is not important. But it is important. And I realize that I am more nervous that I usually am when I give a dharma talk. And today it dawned on me that I am still ashamed, and it's hard to talk about it. I have not overcome it, which, of course is good to know.

I'm planning tonight to talk about breaking habitual patterns using the four powers of confession. When I look at the four powers, I see that I'm not through. There is still fear, fear of this particular pattern which I have.

I think I would be very grateful if you would please say your names and why you are here.

LIZ L: My name is Liz and I'm here usually on Thursday nights as a member of this group, but especially to hear you talk tonight.

ANE P: Why are you in this particular group?

LIZ L: Because I'm a Buddhist and I'm an alcoholic, and this seems to be the place for me to come. Just because it puts alcoholism, recovery from alcoholism and Buddhist practice all in the same room at the same time.

ANE P: Do you still drink?

LIZ L: No.

LINDA B.: I'm Linda, and all those reasons. I'm an alcoholic and I don't drink. I quit within about a week of when Liz quit actually. It's been over two years. The twelfth step sticks, which is "having had a spiritual awakening" – I mean, we don't necessarily claim that in the way that a Christian might, but with that – to carry the truth of what's been found in one's sobriety to others...in other words, to work with other alcoholics. I have to do that, because I am one, but also because my father died of it. It's been in my life. It's

in my life now. My roommates, I'm going to need help with them.

ERIC S: My name is Eric. I'm still very queasy about saying that I'm an alcoholic. Probably I could. But I feel tense about that. So, I think I'm here because I don't think I'm practicing the path. I think I'm finding some real ways of practicing my ego. And I can't do it. It's getting to where I can't do it any more. And alcohol scares me.

ANE P: Do you drink every day?

ERIC S: Not recently. I didn't drink today.

JOHN C: I'm John. It's nice to see you. I guess I have a fairly consistent problem with marijuana, for about fifteen years now. And in the last few months, alcohol seems to... I never was interested in it before and now I am.

ANE P: *You* are nervous!! [Laughter]

ELAINE S: I'm Elaine, a member of Sarpashana. I've been a problem drinker for about eight years. I quit drinking about four months ago. This is my support group.

PHIL W: I'm Phil, and I've been a problem drinker and I come here for support. Today makes one month! [General clapping and laughing]

ANE P: How does that feel?

PHIL W: It feels very good. It feels better than it's ever felt before. It feels relaxed.

ANE P: Did you stop for such a long time before?

PHIL W: Yeah, I stopped for several months, but I was taking Antibus at the time.

ANE P: Um-hmm. That helps.

PHIL W: It does, and it doesn't. Yeah. So now I'm not.

OTTO K: I'm Otto.

ANE P: Why are you here?

OTTO K: That's a good question. [Laughter] Which is why I'm here.

ANE P: He came to support me.

OTTO K: Well, it is sort of a question anyway. Well, I come here for support. How to

operate properly.

ANE P: You have big holes in your sleeve.

OTTO K: Huh? Oh, holes. [Laughter]

JOSE A: I'm Jose, and I'm multi-holic. My alcoholic past—It's been four years since I drank, and when you ask, I think I'm here because it's very difficult for me to separate what happens here from the whole of my life. That's why I'm here.

ANE P: Which is?

JOSE A: My home, my ground base. And what happens to people who come here is part of my life. So I come for sharing.

ANE P: What did you mean, "multi?"

JOSE A: Oh, multi. I think that we all have different kinds of addictions to varying degrees, and some of them are more destructive than others. So it's an interesting situation to deal with.

ANE P: Do you have some other addiction?

JOSE A: Oh, coffee, tea. Caffeine. Espresso at bedtime. I was giving a seminar at Karmê-Chöling and they all thought, "Oh, this would be good for him!" So they went out and got bags and bags of coffee beans! So we went from sake to coffee beans.

BOB S: I'm here because I've had a lot of problems with alcohol and I've decided to stop drinking. I go to a lot of AA meetings. AA's pretty good. But I want to do something different as well, to have support elsewhere as well. And this seems to be a good place for it. Plus there are a lot of my friends who are alcoholic, and I'd like to be able to help them in some way, if possible. And I thought that maybe the best way that I could help them is by coming here.

ANE P: Are you a Buddhist?

BOB S: Yes. I hope that maybe they can see that I can do it, so maybe they can do it.

ANE P: So you are teaching by example.

BOB S: Sort of. It hasn't worked yet, but— [laughter] —but I don't give up. But I like it here. I probably share more here than I do at AA meetings.

POPPY K: I'm Poppy.

ANE P: That's a beautiful color on you.

POPPY K: Oh, thank you. I'm here because I'm an alcoholic and I'm a Buddhist, and—that's it.

ANE P: Do you feel uncomfortable because your husband is here?

POPPY K: No. No. [Laughter]

ANE P: Well, as I was saying, I'm not an authority. I came in to the community room, I was waiting for a lift, and read the Sarpashana Book. I was so intimidated! I thought, "I'm not coming. I'm not coming here!" It is so scientific. I'm absolutely not prepared. So, whatever generalization I make, it's my own fault. There is no authority behind it. When I say it, it is just me and my own experience. So, please, whatever I say, I am fully responsible for it. There is no authority behind it.

How I planned it was to go through the Four Powers of Confession, which are one of the ways in which the Buddhist teachings say that we can break our habitual patterns, and to illustrate with my life – from a drunk, an alcoholic, to a Buddhist nun. And please interrupt me to ask questions when ever you like. And then I want to tell you how alcohol is considered by Lord Buddha – in his teachings to the sangha, which in his time was monks and nuns. And that's what I want to do.

Maybe also in the beginning I could draw on a few situations from my experience. For me I drank because I didn't want to face the pain, or even discomfort. My particular neurosis is poverty mentality: "I can't do it. I'm a schmuck." I was the worst drinker, or the *best* drinker, in the sangha. I was really drinking to the bottom. Fortunately, there is some spark of intelligence. So I was just putting myself into situations. In a moment I decided, "That's it. I don't want to do it." I was just putting myself in a situation where I *couldn't* do it. And these Four Powers of Confession, which I find very illuminating and helpful – they're not solid stages.

The word *confession* is funny, especially or people in this religion in this country. It is used like *paramita*. Also the word *sin* is different. *Sin* means all neurotic crimes. In Buddhism, [we understand that] it comes back to you. It never was [inaudible] it was always psychological. And all neurosis is considered a form of frivolity. And frivolity means activity.

So confession is not of sin in the usual sense, but being tired – tired of one's neurosis. And that is the First Power of Confession, the crucial one, the important one.

Total embarrassment. I think in AA, or somewhere else, it is called *hitting bottom*. Well, for me personally, I didn't have any *one* experience which was – like sometimes

you have to lose your child or something to hit the bottom. I just had – because I was drinking for so long and so hard, I hit many, many bottoms. And all the embarrassing things that you’ve heard in AA, and everywhere else, I lived through. I *couldn't* budge without alcohol. And in the morning – then came the sobs, about how disgusting it is. Now just to function *physically* I drank again. And it was turning [thicker and thicker and thicker]. And I don’t know when the question “Why?” – maybe it was my training as a Gestalt therapist, but I’ve never believed that we can know the answer to the question “Why?”. “Why did this happen?” It’s just an accumulation. And I decided to do something about it.

So, I went on antibuse several times. And I blessed it. I blessed it. Fortunately for me, one tablet lasted ten days so it gave me at least ten days in which I could look, reflect on my drinking. I was *forced* to look at it. And it was on and off, and on and off.

Also I went on retreats. And I was very cheerful there, but still I didn’t have the quality of proper embarrassment and disgust. There was still hope that it would give me some pleasure, and fear that I couldn’t cope without it. So it was up and down, and up and down.

I went to see the Vajracharya in 1975 complaining about it. He told me, “Alcohol is not your enemy, it’s your friend.” [Long sigh] [Laughter] I asked him if I could use antibuse. He said, “No.” He asked me, “Do you drink in the morning?” I said that I did. He said, “Don’t.”

So, it was interrupted by this thing that I forced on myself.

Why don’t I just tell you all the stages of the Four Powers of Confession, so I don’t get mixed up. I think it’s wonderful. The First Power is to be disgusted with what you have done. The Second is refraining from that particular thing. And you might think that’s the end. No, it’s the beginning. [Laughs] The Third is taking refuge in the Three Jewels. So, I think what you said about AA – maybe *they* can in their minds, because they are people who need it, at this point, take their strength in God. Well, we don’t do it. It’s a very different philosophical approach. And *Forgiveness*? It’s nothing. Because, who can forgive?

So we take refuge in the Three Jewels of the outer: the Buddha as example; the teachings; and the sangha. And also as an inner: That we hold the Buddha in the palm of our hand, that we *know* the teachings, and that we are *worthy* to be a member of the sangha.

In my experience this point was very important. Because no matter how drunk I was, I always practiced. Amazingly enough. [Laughter] I would leave the shrine room to drink and still come back. So there was a spark of intelligence. I knew that there was something very profound in the practice.

Another autobiographical thing: j In 1974, I came to Brazil from touring around the world, and it seemed like I had everything. Everything. I had a red Mercedes-Benz, made to my specifications. I had a loving husband who was a good person. I had a house and a swimming pool. And I was deeply, deeply, deeply unhappy.

So I opened my eyes. I was a person coming from Poland who wanted all the goodies. When I got all the goodies, I still wasn't happy. Nothing made any sense. At this point, I was starting to look or spirituality. By accident, or something, I got this slip from *East West Journal*, one of my husband's magazines, with a list of meditation centers. So, I'm a Canadian. I wrote to Indian affairs, to Zen Centers, so on and so forth. I got a letter from Karmê-Chöling saying, "Yes, you can come." And so *somehow* I connected with this. With some antitoxin in my stomach I went to Stowe, Vermont and did two weeks of Hinayana sitting. I didn't know what meditation was. Then dathun, then two weeks of Mahayana. And I was hooked. It was my first trip, and I was hooked.

So, no matter how degraded I was, I always – this was keeping me alive, just *alive*, when I was thinking, "It's too much suffering, I don't want to live any more." There was *something* –telling me to trust in that, in the teachers.

During one of my long retreats – it was a three-month prostration retreat – I discovered, to my amazement, that I had never before experienced such a feeling of well-being in my whole life. When I was in the worst hut at Dorje Khyung Dzong, Garuda! Doing prostrations! It was something I couldn't believe. But it was true. I was absolutely silly! I was waking up and kissing my hands. "Good morning!" [Laughter] "Another day of practice!" Absolutely silly. But I discovered that practice is something which suits me psychologically. [Laughs]

And I went to Pema Chodron (another nun) and I asked her, "What *is* it?" She said, "It must be something karmic." So there was some attraction to it, in the midst of these disgusting things I was doing – drinking and being promiscuous – there was a *longing* for some purity.

And then I saw His Holiness [Karmapa]. I fell in love with him. I went to the Vajracharya and asked him if I could become a nun. He said, "No. The community is not ready. Finish your ngöndrö."

So at the moment in which I decided to ask him again, when I had finished the ngöndrö, I went to New York to see Kalu Rinpoche and did the Kalachakra and realized that it was an opportunity. Because it was not like he just said, "No! You cannot do it!..." It was more like, if I wanted to do it, not to be afraid. He was at Karmê-Chöling at that time, while I was there in retreat. I wrote a letter and on the same day I got an answer. "Go ahead. Wonderful."

At this point – like when I was thinking about how it *will* be when I become a nun – the question of alcohol didn't come into my mind. It was like I was wearing it out through that antibuse. I was drinking at feasts, two glasses of sake, and drinking probably more – cooking – but I wasn't drinking outside.

I don't know how it happens. Gradually. Somehow, gradually. Or maybe I was so low every time. I don't know. I wore it out, or something.

So it was, at this point, not the problem at all. The problem was, "Could I change my name? How would I support myself? But alcohol was not a problem then.

And this is my first opportunity, thank you, for me to talk about it. Because as I mentioned, I was avoiding talking about it. About being a drunk, an alcoholic. I *still* feel like if somebody, maybe at a feast, makes a sarcastic remark, I was in *tears* – I thought, "It's all over." I'm still very sensitive. [Ane Palmo is crying]

So. Supposedly that's how it works. According to the Buddhist scriptures. And somehow, that's how it worked with me. First disgust with what you are doing. Stop doing it. Take refuge and practice.

The Fourth Confession is to be beyond hope and fear. Don't hope and don't fear it. This is how every habitual pattern – and I consider drinking to be a habitual pattern – works.

So. Now I will quote the Vinaya.

QUESTION: You don't have a problem any more at feasts? You don't crave more alcohol after you've had a couple of glasses?

ANE PALMO: No. But I was thinking, "I don't want to go to afternoon feasts." To finish in the afternoon, I don't want to do it. I don't know, maybe I should try. But the thought is, "No. I don't want to be tipsy during the day." At night you can just go to sleep.

Q: And you don't have a problem during the two weeks in between?

AP: No, none whatsoever.

Q: Do you get off on the two glasses?

A: Do I get tipsy? I don't feel too good, to tell you the truth. It makes me feel – not high, clumsy.

Q: Why do you drink two full glasses of sake?

AP: I'm supposed to.

Q: Supposed to?

AP: The Vajracharya told us we are to drink at least one glass.

Q: In the conversation that I had with Rinpoche on that same matter, he said that it wasn't necessary. He said that just the two sips during the liturgy was sufficient.

AP: Um-hmm.

Q: Maybe you have different instructions.

AP: At 1979 Seminary, when I was drunk, he was concerned about my health. I was not eating. So I was eating at his table. I would have a cocktail with my dinner and two glasses of wine with my dinner. So he was still treating me as a reasonable person, which I wasn't. But every day I had a glass of sake *or* a cocktail.

Q: So there was a gradual weaning process?

AP: No, I asked permission from him for Antibus because I couldn't handle it the way he wanted it...

Q: So he gave you permission because you couldn't handle it?

AP: I moved to Boulder in 1979 and drank until Seminary. And drank my way through the Hinayana section and through the Mahayana section. The Vajrayana section stopped me. There was that spark of intelligence. Before I went to Seminary, I wrote to Canada – Seminary was in Canada, and Canadians have free health care. I wrote to the Donwood Clinic in Toronto. With the Vajracharya's permission I went there. So the Vajrayana was the moment when I seriously stopped. I went back to Donwood four or five times. They were very nice people there. Quite enlightened. My pal, Johnny Meyer, told me it wouldn't work because it has to be with vomiting. But they didn't believe it. Dr. Bell – he's very dedicated about this thing. They were marvelous people. I was involved in group therapy there. After that, without Antibus, I stayed sober for two months.

For two years I kept writing to them. I was on and off for a while. When I went back on Antibus I could take a quarter or a half. I was very susceptible.

Q: Some people in the community are familiar with your history.

AP: Many.

Q: And I'm wondering if people approach you with their concerns about their own habitual patterns. And how do you work with that?

AP: Well, some people come to me because they think it's so unusual that you could go from one extreme to another. But it's just my psychological makeup. I was very fully into drinking...

What the danger is, as probably all of you know: usually people who drank, or drink, and want to talk about it, have a quality of openness. But there is a danger of being righteous. "I did it! You just do it! Don't talk about it, just do it!" And being smug. "I did it!" It's very dangerous. This will never work. It can push people deeper and deeper.

Every person who drinks has some *underdog*. People *know* that they're not doing the right thing at some point. So it should be an absolute no-no.

Q: You're the only person I've ever met who said you'd drop it. The Vajracharya told you to stop and you stopped just like that!

A: Well, I didn't do it like that. He told me not to drink, and I came back drunk. Practice was the only lifesaver. I had three husbands, two children; I had everything. There was *nothing* but the dharma for me. For *me*.

Q: You said that you had thoughts about not wanting to live any more in Brazil, with the Mercedes and the swimming pool. Did you have thoughts like that again after you connected with the dharma? Were there still mornings like that?

AP: Yes. Hangover mornings. Even after I was in the dharma.

Q: And did you fall back on the Three Jewels of refuge then, or how did you...?

AP: I don't remember how I did it. Probably it was an accumulation of three or four hangovers, and then I did something like—got to a place like that. When I stopped drinking, I would be fine. I would be enlightened for a while.

Q: Well, you're unique in that! [Laughter]

Q: Yeah. I think all of us have felt that. "Well, I'm a drunk! If I quit drinking, I'd be fine!" I *never* had a purse this small! I took a bottle in it to therapy at the ARC! I always had it!

AP: Yes. But the question is, how can telling stories like that help? I don't think much. I think that each of us has to go our own way. We h\can be open here. It's extremely hard to be open to other people who've never gone through such an experience. It's a question of openness.

Q: That feeling that you were describing in your retreat – sometimes I get that feeling in AA when I hear people talk. And I don't know why that's so, but it's real. And then I go about my life and don't feel that way. That feeling doesn't last forever, but it's an inspiration. And I think, "Do I have to go back? Maybe I should practice more..."

AP: Or, "It's up to me."

Q: Yeah, whatever. Something.

AP: Well, it's this moment that keeps us going.

Q: You said that it's not worthwhile to tell stories. For us or for the person who's listening?

AP: Both. Because it can tend to be just interesting stories. I mean gossipy and nice. [Laughter] But horrible. First we hear what we want to hear, and secondly, each of us is unique and has to find our very unique path.

Q: In AA there used to be a lot of story telling. But that was, almost officially, softened about five years ago. For the same reasons. Now it's so much people telling drunkalogues.

[End of transcribed material.]

HOW IT WORKS

(From the AA Big Book)

Rarely have we seen a person fail who has thoroughly followed our path. Those who do not recover are people who cannot or will not completely give themselves to this simple program, usually men and women who are constitutionally incapable of being honest with themselves. There are such unfortunates. They are not at fault; they seem to have been born that way. They are naturally incapable of grasping and developing a manner of living which demands rigorous honesty. Their chances are less than average. There are those, too, who suffer from grave emotional and mental disorders, but many of them do recover if they have the capacity to be honest.

Our stories disclose in a general way what we used to be like, what happened, and what we are like now. If you have decided you want what we have and are willing to go to any length to get it—then you are ready to take certain steps.

At some of these we balked. We thought we could find an easier, softer way. But we could not. With all the earnestness at our command, we beg of you to be fearless and thorough from the very start. Some of us have tried to hold on to our old ideas and the result was nil until we let go absolutely. Remember that we deal with alcohol—cunning, baffling, powerful! Without help it is too much for us. But there is One who has all power—that One is God. May you find him now!

Half measures availed us nothing.

We stood at the turning point.

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 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 conscious contact with God *as we understood Him*, praying only for knowledge of His will 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.

[As found in *Twelve Steps and Twelve Traditions*. Underlined in the original.]

FROM A CONVERSATION WITH AN AA SPONSOR

I see the purpose of this discussion as an overview of the Twelve Steps Program of AA. People, in reality, have the most problems with the first seven, so that's what we'll go over. Anyway, if you don't have experience of those, what difference do the others make?

This may be a unique viewpoint. It is being presented in the light of being a *method*. The intention is not to present it as being *the* method. Obviously, in any program, way, or path, the method is only a tool. It's the outcome, the result, that is significant. It would be pointless to engage in a program without being real clear about the intended result. And right there you've got a lot of different interpretations. So you say you're going to get this, or you're going to get that. But the steps themselves state what the result is. The last step says it. Spiritual awakening. You awaken to a condition in your life that has really been ongoing, but you weren't aware of it. Maybe like awakening unto the fact that you're a Buddhist: You didn't make it all up at once. You are.

So, spiritual awakening is—transformation, enlightenment—I don't like any of those words. I like “contextual shift.” It makes more sense. Nothing changes as far as life itself is concerned. The *content* remains the same. If you're a bricklayer or a nurse before you experience a contextual shift, you'll still be one afterwards. If your rent was \$175, it'll still be \$175. If your car was broken, it will still be broken. A contextual shift is really a shift in the paradigm in which we *hold* life. It's not that we break out of one and into a larger one or something. It's a transmutation of the paradigm.

The wisdom of the whole thing is: If a contextual shift occurs in your life, your own history shows that you wouldn't do anything to alter that condition. You're free of all that stuff that you used to try to manage the whole thing with; free of the need for evidence of *rightness*, the investment in being right; free of the necessity to domineer and invalidate other people.

The results don't have anything to do with new cars or new houses. If you start the program out of a desire to stop drinking, evidence shows that if one is honest and thorough about working the steps, eventually in the process of working through them, drinking stops being an issue. The first step is, after all, the only one that mentions the word *alcohol*. We're placed in a position of neutrality about it. The wheel stops. We're neither trying to get drunk, or to resist a drink. That's been confirmed by thousands of people who've worked the steps.

Of course, I just made all of this up. When it's written down like this, it *seems* to hold more sway. But nobody stops to think that the guy just made it up. I mean, reality is reality, and what I just said is what I just said. They don't necessarily have anything to do with each other.

People want to know, “What validation can you give me? What’s your source?” You know, the guy who sells toasters can put a slice of bread in and show you that it works. But in this case, I made it up. And what’s worse, I made it up out of thin air. Before I worked the steps, I made the method up. And as far as *reality* is concerned, it’s pointless for me to tell you that this toaster is going to toast bread.

Anytime you’re confronted with anything, see if it rings true. We never need to come from any insufficiency. We tend to think that a teacher is going to tell us something *new*. But he or she can only teach us what validates what we already know to be true. It’s silly to take on somebody else’s beliefs. Especially about a malady like alcoholism. People will believe all sorts of things, most of which will kill us. I’m making it up, and I refuse to offer any “evidence” to validate it. That would assume that I take responsibility in the lives of people that I’ll never see, and I’m not going to do that. The responsibility to attain enlightenment, or to stop drinking, has to be with the beings themselves.

Somewhere in working the steps, the goal occurs. It doesn’t occur in the same place for everybody. For some, it’s during the fourth step; for some, it’s after the sixth; for some, in the middle of seven. For me, it was at the beginning of the third step. Contextual shift has nothing to do with sequence in the method.

If we admitted we were powerless over alcohol and that our lives had become unmanageable—that’s really the foundation on which the whole thing is built. And that step is easy to understand and to validate in our own experience. We have our evidence and our reaction to it. There’s not much to be said about it. It’s food, sex, the spouse, and all kinds of other things that we’re powerless over. It doesn’t have to be alcohol. The first step is the only one that mentions alcohol. And from that, you can tell that we’re not *just* dealing with booze. Because in the realm of transformation, the *content* is never at issue.

The second part of the step usually presents the problem. When people look at their experience, they see that they *have* managed. The management system is in place and it works. It’s difficult to say, “My life’s unmanageable.” The way I see it is: There’s a distinction between what we *do achieve* and our *goals*. Most people want to be happy and secure. I know it’s simplistic, but—let’s see if our management system produces those results. I contend that it doesn’t. But it does produce *something*.

Why do we have this management system? What’s the reason for mind? To perpetuate the person and that which is important to that person—like “my position.” The mind does that real well. It does it so well that it does it to the exclusion of all else. If I consider my car to be important to the way in which I perceive my life, and I left it parked on a hill—as I walk away, it starts to roll—my mind will throw my body in front of the car! Somewhere along the line, I thought *I* was my *mind*. Then it’s survival of mind and what mind thinks is important. Most people fail to notice that their mind is talking *to* someone.

Mind is really a friend. (*Now* what is this guy saying?) If you didn't have a mind, you wouldn't be able to find the door. It certainly has utility. You put your hand on a hot stove, and you don't have to do *that* any more. Because you have a mind. If you climb a tall tree, and you fall and break your leg, you'll evolve some system of management for "tall trees." Like, "Stay out of tall trees," or "Be careful in tall trees." We evolve some system of management in life if only from the standpoint of survival.

What does survival have to do with happiness and security? Seems like it has something to do with security—but not really. And it has very little to do with happiness.

So, the management system ends up looking like this: "In order to survive, I must be right about *that*. In order to survive with other people, I need to dominate them to avoid *their* domination. I need to validate my existence, and in order to do that, I must invalidate them." I mean, did you ever meet anybody who wasn't always right? The only time we're wrong is when, after all the evidence is in and it proves us to be wrong, then we're willing to concede to the rightness of being wrong. So we *still* get to be right. We're into being right at the exclusion of all else.

In order to achieve the goal of being right, the management system sells off life itself. It trades it off. You know how *right* you feel when you blast someone who just flipped you the bird in traffic? Boy, are we right! It's a good case to point out. You go looking for happiness and security in *that* situation—there ain't none.

In a long-winded kind of way what I'm saying is: The management system excludes the goals of life—happiness and security. It manages to its own ends and excludes the goals. That's unmanageability. That also is why it looks like we *can* manage. But within that system, we can't manage to our goals and dreams in life. Yes, we have a management system. No, it will never achieve the desired result.

Step Two says, "Came to believe that a Power greater than ourselves could restore us to sanity."

There are two influences there: believing in a power, and sanity. Or insanity. However you look at that inference.

One thing about the management system that needs to be acknowledged is that it's not born out of reality. It's born out of thought. We thought it up. We made it up out of thin air. So, pretty much, when we operate out of our management system, we're operating right out of our mind.

In the second step, we need to look at what insanity is—operating in a reality other than the one that's real. They haul some people off for picking bugs off the wall that aren't there. We get a lot of agreement about what insanity is there. But we all operate out of our thoughts, judgements, and evaluations *about* life, and very little in the realm of

what's so. The distinction needs to be drawn between reality and the rest of this stuff. Just for simplicity's sake, reality takes place at the level of tables and chairs, automobiles, cardboard boxes, and the like. I know that a physicist could prove that they're not "real" either—that they're just a whirl of protons and electrons, etc.—but we'll keep it simple.

We're talking at the level of utility. If you step in dogshit, the fact that it's just protons and electrons really pales into insignificance in the light of the fact that it stinks and you can't get it off your shoe.

You have thoughts, judgements, and evaluations about what's on your shoe, too. The process we're talking about, beginning in the second step, is making the distinction between what's on your shoe and your thoughts *about* it. What's crazy would be to think, "That's not dogshit, it's peanut butter." You take that into the world and argue that it's peanut butter, and people will say, "You're crazy. There's dogshit on your shoe." The process is drawing the distinction between what we think, and what's real. Because when we begin to do that, we begin to move toward sanity. When we begin to work these steps, that's precisely what we begin to do.

The other problem words there are: "came to believe." There's so much baggage attached to the word *believe*. We have so much evidence that we've been conned—so many times—it's hard for us to believe anything. It sounds, also, like we're being asked to believe in something that we have no experience of. We have some experience of something greater than *I*. If the word is not a problem for you, set it aside. It's a moot point. But if you do, substitute the word *acknowledge*. It retains the spirit and removes the obstacle. "Came to acknowledge that my life is getting better in spite of what I think." I don't mean "getting better" from a standpoint of future projection. I mean getting better by looking at life *in this moment*. Experience life in this moment. Can't you see that *this* one is better than the last one? But only if we're willing to give up the storyline in an effort to be honest. If we look at *this* moment honestly—I've never looked at this moment and found that I had a better one.

If you really *look*, it gets so brilliant—it's stimulating. I mean it. Look at this moment.

[The telephone rings]

Yeah. [Laughs] The story about how rotten life is? Set it aside. It ain't too bad. If you look at life on life's terms (and if you're dealing with alcoholism, you are), life's getting better.

I mean, my life used to be really *painful*. I didn't even know it. If I had been able to acknowledge that, I might have been able to move toward something else. But I was just in *pain*. And I stood there telling stories. By the time I got into the second step, there had been a radical change—in spite of my best efforts to screw up my life.

If you're not able to acknowledge that it's getting better despite your best efforts, then hang out until the evidence comes in. No step says, "I am willing to work this program."

So Step Three is easy then. If you can acknowledge that life is indeed getting better in spite of what you do, Step Three just asks that we leave well enough alone. It'll turn out and it doesn't need any manipulation and management. At best, manipulation and management just postpone our experience of life itself.

Most of the problems and incompletenesses in life stem from some predispositional thought that we have about the next moment. It seems that we say, "Whenever the next moment shows up, then I get to judge and evaluate." Rather than just calling a spade a spade. Rather than seeing that we have a choice. We say, "*This* can't be next!" Or, "No way in hell am I going to do *that*..." We say that the natural order is off. The way things should be is the way we *want* them to be. We are people who take the past and throw it over our shoulders into the future, and we wonder why nothing ever changes. We try to live in the next moment as though what we said was so.

More often than not, our experience is of someone who has just run up against a brick wall—and we don't understand how come life's so tough. When we run up against it, instead of looking into the reality—to just looksee what's there—we say that the reason we can't see that this is peanut butter is because we don't have enough *information*. If we had enough, then we could *prove* that it's peanut butter. And we really *believe* that. The net result is that we get to eat a lot of dogshit sandwiches. Because life's tough. We actually enroll other people into the societal agreement. Tell anybody that life's tough, and you'll get agreement. "Life's tough and I gotta be tough." We're eating dogshit sandwiches and we're dying. And the pain is almost unbearable. And we don't understand, when we try so hard, why it always works out that way. And for some reason, the answer—"if we were only appropriate for the next moment"—that our lives would work, is too trite an answer for such a significant question. That's okay. We don't often have the courage to ask the question anyway.

You know, whose position would be violated if you were to walk into the next moment fresh? Knowing that the way it is *is* the way you have it, and that it's perfect? That it's brand new and fully furnished—you don't have to supply anything—requiring no choice, judgement, or evaluation, and that truly the way it is *is* the only way it could possibly work?

Step Three is the decision to do just that. We may or may not have it be that way by a mere decision. It depends on how we make it up. But Step Three is asking us to decide to make it be that way.

So, an overview: If we can look at our lives and see that it's only this way because

we've lived our lives in a reality other than the one that's real; that the pain and sadness in life is simply born out of our commitment to living life out of our positions *about* it and not out of the way it *is*; if we're willing to admit that the quality of life is improving, despite whatever else we may have going on about it; and that we may or may not have an explanation for why or why not that's so; if we're willing to walk into the next moment naked, without all of our survival systems in tow—then we're at Step Four.

When we get to Step four, at least we have a glimmer of the overall problem that we're faced with. The only reason that life has never been new is because we have this investment that it be the same. We've been living our life out of some basic assumptions that we made up about life. And all we've been interested in doing is gathering evidence that attests to the rightness of our assumptions.

Step Four is an honest and thorough list of those items of behavior that act on the mind. It's all the stuff that's recallable. It's a list of facts. So, again, we're invited to draw the distinction between our thoughts and reality. It's a fact-finding, fact-facing process. Nowhere in that is any judgement involved.

If you were to write down everything in your mind that has a relationship to an exact time, form, place, and event, what you'd have in the end is an exact record of those things that have not as yet contributed to your moving forward in life. One thing that most of us have found when reading over such a document is that we haven't operated as spontaneously as we would have thought. For the most part, we've done the same things over and over again. Or the same kinds of things. And as we read further, it became real clear that some definite patterns emerged. That we were, in fact, living our lives out of some predetermined considerations that we had about life itself. We had learned that if we operated in life with those thoughts and assumptions that our position would survive.

These "basic considerations" of ours fall into six categories. If alcohol is a problem for us, then we certainly have one about alcohol. The others are sex, self-esteem, relationship, and material/emotional security. What we've wound up operating our lives out of is basically somewhere between four and seven basic considerations distributed over these six categories. We may have one organizing principle for each, or we may have combined one or another to be organized by a single principle.

Already, we're half way into Step Five.

If you go to the dictionary and look up at the words *exact* and *nature*, you'd find that *exact nature* means "specific origin." So, what we admit to God, to ourselves, and to another human being in Step Five is these specific, and in most cases erroneous, considerations about life that we have lived our lives *out of*.

If you had a basic consideration that said that people are not to be trusted, you'd have very little to go on in the area of relationship. And certainly all of the wrongs, or problems, or perpetrations that you have in your life in the way of personal relationship

would really be born out of that idea, that basic consideration.

One might think, “Now that I’ve done Step Five, I have enough information. I won’t have to do that stuff any more.” So Step Six is taking that information and going out into the world with it, and learning that “more information enabling me to manage better” is an absolute disability. At least part of Step Six is learning that we can go out into the world, *knowing* that we don’t trust anybody, and we can find out what to do with that. We can resist it. We can be conscious of it. However we want to do it.

At this point, we have to get to the same point that we got to with our alcoholism. Go out there and try to drop it. Try it more than once. Leave it on the bar and walk away abruptly. What it boils down to is: Try not to operate out of that basic consideration for even one minute. If you can do it, then I guess you’d be enlightened and you wouldn’t need the Steps any more.

I’ve never met anybody who could drop their character defects and walk away. We have too much invested in them. They help us to manage. If we could just drop our alcoholism—“So what, you don’t trust anybody? Is that going to kill you?” No. But 97% of the population is going to get on their deathbeds wishing they had it to do all over again—or for the first time...

The point is that given who you are and what your basic considerations are, without recognizing your basic assumptions about reality, you may pluck out the alcoholism, but you *will* generate it again. Like a starfish generating lost arms. You grew in your little basic consideration garden an assumption that says that you need alcohol to survive. And that’s the one that will kill you. The thing about alcoholism is that it’s 100% fatal. If you die of alcoholism, you won’t ever find out if you can have a relationship. There’s a good chance that you won’t live long enough.

Hell, if what you’re up to is enlightenment, you can’t live your life out of hoo-ha anyway. It’s a double edge.

So we need to be willing to get to the place where we’re willing to talk about all of this, to communicate it. Communication ultimately leads to disappearance. Disappearance of the system that has enabled our position to survive. Disappearance of what you might call ego. And, of course, it looks like we’re not going to get to survive this one.

You’d have to be in a coma to not be a little apprehensive at this point. There’s no way to figure it out. “If I drop this, then how am I going to live?” I’m not going to tell you. I could be a smart-ass and say that you just do. But that’s not going to work. If we’ve really tried to do something about these “character defects” in Step Six, we’ve experienced something very humiliating. It would not be overboard to say the ultimate humiliation. We are who we are, and there’s nothing we can do about it. Even though we know all about it.

Step Seven requires that we be ultimately humiliated in terms of our ability to manage. It's the same thing we got into with alcohol. "Every time you drink, you drink like a drunk. Every time *you* drink, you can't control your behavior. And you can't *not* drink no matter *how* much information you've got." Resisting drinking is like holding in a fart, you know? The more you try, the more you increase the likelihood that when it comes out, it's going to be a big one. So, the seventh step is gaining an experience of disappearance. And through that, learning how to operate in life as who we are and with what we have, and not out of all those other trips.

This side of the seventh step we begin to operate in life out of responsibility and integrity. Ultimate integrity is being true to one's ideals and to what one is. All the stuff that goes on in life? We're responsible for it. That's basically what enlightenment is anyway—responsibility and integrity. I can't prove that. I mean, I could say that enlightenment was dogshit, and if you were enlightened, you'd know what I meant. And if you weren't enlightened, you'd try to figure it out. You can't *think* your way into enlightenment. It's all experiential.

So here we are, and somebody who's read it may think that they understood it. And, in fact, they may. But the only way to experience the Steps is to *experience* the experience. Because whatever you think about it, that's not it.

We haven't even scratched the surface here on any of this stuff. But people at least need to look at the way that they do it, and see that it doesn't work. They need to see that they can't afford the arrogance of not knowing something—that if they knew—would change the context of their life. If they knew this stuff—had this experience—they'd have a spiritual awakening, be transformed, be enlightened. Can you afford the arrogance of saying that you don't need that?

COMFORT
Malcolm Lowry

You are not the first man to have the shakes,
the wheels, the horrors, to wear the scarlet
snowshoe, nor yet the invincible harlot
dogged by eyes like fishnets. Leaning, aches
the iron face with agate eyes, and wakes
the guardian angel, sees the past
a parthenon of possibilities...
You are not the first man to be caught lying,
nor to be told that you are dying.

SURRENDER AND RECOVERY

This article is an excerpt from "AA and the Medical Profession."

Many psychiatrists have commented on the help they have received from their observations of the AA program and their contacts with AA members. In turn, many members of AA owe their continuing sobriety, in large measure, to workers in the field of psychiatry who introduced them to Alcoholics Anonymous.

Few doctors have made a longer or more intensive study of AA therapy in action than the late Dr. Harry M. Tiebout, of Greenwich, Connecticut. His paper, "Therapeutic Mechanisms of Alcoholics Anonymous," originally prepared for the 143 meeting of the American Psychiatric Association, marked a milestone in growing medical understanding of AA and has been distributed throughout the world. Dr. Tiebout's later writings consistently contributed to increased appreciation of the part that medicine, religion, and AA can play in rehabilitating alcoholics.

As a psychiatrist, Dr. Tiebout had been particularly interested in two elements of the AA program: 1) the fact that alcoholics who hope to recover must "surrender," without reservation, their desire to "run things," to dominate events and people; 2) the process of "spiritual awakening" through which recovering alcoholics achieve a new sense of harmony and serenity in relation to the world around them and to what has been described as "that intangible power which all mankind recognizes, whether he acknowledges it or not."

Dr. Tiebout's observation convinced him that "compliance" with the AA program is not always enough for the alcoholic. He must be willing to admit total defeat before he can move toward recovery.

One fact must be kept in mind, namely, the need to distinguish between submission and surrender. In submission, an individual accepts reality consciously but not unconsciously. He accepts it as a practical fact that he cannot at that moment control, but lurking in his unconscious is the feeling, "There will come a day," which implies no real acceptance and demonstrates conclusively that the struggle is still going on. With submission, which at best is a superficial yielding, tension continues. When, on the other hand, the ability to accept reality functions on the unconscious level, there is no residual battle: relaxation ensues, with freedom from strain and conflict. In fact, it is perfectly possible to ascertain to what extent the acceptance of reality is on the unconscious level by the degree of relaxation which develops.

Dr. Tiebout applied this basic concept to alcoholics in these terms:

An alcoholic, at the termination of a long and painful spree, decides that he has had

enough. This decision is announced loudly and vehemently to all who will listen. His sincerity cannot be questioned. He means every word of it. Yet he knows, and so do those who hear him, that he will be singing another tune before many weeks have elapsed. For the moment, he seems to have accepted his alcoholism, but it is only with skin-deep assurance. He will certainly revert to drinking. What we see here is compliance in action. During the time when his memory of the suffering entailed by a spree is acute and painful, he agrees to anything and everything. But deep inside, in his unconscious, the best he can do is to comply—which means that, when the reality of his drinking problem becomes undeniable, he no longer argues with incontrovertible facts. The fight, so to speak, has been knocked out of him. As time passes and the memory of his suffering weakens, the need for compliance lessens. As the need diminishes, the half of compliance which never really accepted begins to stir once more and soon resumes its sway.

The need for accepting the illness of alcoholism is ignored because, after all, he really did not mean it. Of course, consciously, the victim of all this is completely in the dark. What he gets is messages from below which slowly bring about a change in his conscious attitudes. For a while, drink was anathema, but now he begins to toy with the idea of one drink, and so on, until finally, as the noncooperative element in compliance takes over, he has his first drink. The other half of compliance has won out; the alcoholic is the unwitting victim of his own unconscious inclinations.

It is only when a real surrender occurs that compliance is knocked out of the picture, freeing the individual for a series of wholehearted responses—including, in the alcoholic, his acceptance of his illness and of his need to do something constructive about it.

In Dr. Tiebout's view, surrender, rather than mere compliance, paves the way for the "spiritual awakening" to which many AA members refer:

A religious or spiritual awakening is the act of giving up one's reliance on one's omnipotence. The defiant individual no longer defies, but accepts help, guidance, and control from outside. As the individual relinquishes his negative, aggressive feelings toward himself and toward his life, he finds himself overwhelmed by strongly positive ones such as love, friendliness, peacefulness, and pervading contentment, which state is the exact antithesis of the former restlessness and irritability. And the significant fact is that with this new mental state the individual is no longer literally "driven to drink."

The doctor pointed out that "present day psychiatry is properly wary of purely emotional cures." Until any change is firmly linked up with the mind and the intellect, the cure is considered suspect.

The emphasis today is on analysis, which relies upon the mind to ferret out the causes of the failure to achieve a state of synthesis, which is actually an emotional condition of feeling free from conflict and strain. It is presumed that, as the blocking of the emotions are uncovered and freed through analysis, positive synthetic ones will appear instead. It

is just as logical, though, to change emotions by using emotions and then, after the change has been brought about, to bring the mind and intellect into play to anchor the new set of emotions into the structure of the personality. In a sense, this is what occurs in Alcoholics Anonymous.

The therapeutic value of the AA approach arises from its use of spiritual force to attack the fundamental narcissism of the alcoholic. In other words, AA relies upon an emotional force, spirituality, to achieve an emotional result, namely, the overthrowing of the negative, hostile set of emotions and supplanting them with a positive set in which the individual no longer need maintain his defiant individuality, but instead can live in peace and harmony with and in his world, sharing and participating freely.

Dr. Tiebout emphasized that there is “all the difference in the world” between a true spiritual motivation and a vague, groping, skeptical intellectual belief which passes as a religious feeling in the minds of many people:

Regardless of his final conception of that power, unless the individual attains in the course of time a sense of the reality and nearness of a higher power, his egocentric nature will reassert itself with undiminished intensity, and drinking will again enter into the picture. Most of the individuals who finally reach the necessary spiritual state do so merely by following the Alcoholics Anonymous program and without ever consciously experiencing any sudden access of spiritual feeling. Instead, they grow slowly but surely into a state of mind which, after it has been present for a time, they may suddenly recognize is greatly different from the one they formerly had. To their surprise, they discover that their point of view and outlook have taken on a very real spiritual coloring.

The late Dr. Foster Kennedy, eminent neurologist, also suggested to the American Psychiatric Association that doctors can benefit from increased understanding of AA:

I have no doubt that a man who has cured himself of the lust for alcohol has a far greater power for “curing” alcoholism than has the doctor who has never been afflicted with the same curse.

The following is excerpted from the essay "Cybernetics of 'Self': A Theory of Alcoholism" included in Steps to an Ecology of Mind by Gregory Bateson.

The "logic" of alcohol addiction has puzzled psychiatrists no less than the "logic" of the strenuous spiritual regime whereby the organization of Alcoholics Anonymous is able to counteract the addiction. In the present essay it is suggested: (1) that an entirely new epistemology must come out of cybernetics and systems theory, involving a new understanding of mind, self, and power; (2) that the addicted alcoholic is operating, when sober, in terms of an epistemology which is conventional in Occidental culture but which is not acceptable to systems theory; (3) that surrender to alcoholic intoxication provides a partial and subjective short cut to a more correct state of mind; and (4) that the theology of Alcoholics Anonymous coincides closely with an epistemology of cybernetics.

The present essay is based upon ideas which are, perhaps all of them, familiar either to psychiatrists who have had dealings with alcoholics, or to philosophers who have thought about the implications of cybernetics and systems theory. The only novelty which can be claimed for the thesis offered derives from treating these ideas seriously as premises of an argument and from the bringing together of commonplace ideas from two separate fields of thought.

In its first conception, this essay was planned to be a systems-theoretic study of alcohol addiction, in which I would use data from the publications of Alcoholics Anonymous, which has the only outstanding record of success in dealing with alcoholics. It soon became evident, however, that the religious views and organizational structure of AA presented points of great interest to systems theory, and that the correct scope of my study should include not only the premises of alcoholism but the premises of AA organization.

My debt to AA will be evident throughout—also, I hope my respect for that organization and especially for the extraordinary wisdom of its co-founders, Bill W. and Dr. Bob.

In addition, I have to acknowledge a debt to a small sample of alcoholic patients with whom I worked intensively for about two years in 1949-1952, in the Veterans Administration Hospital, Palo Alto, California. These men, it should be mentioned, carried other diagnosis—mostly of "schizophrenia"—in addition to the pains of alcoholism. Several were members of AA. I fear that I helped them not at all.

THE PROBLEM

It is rather generally believed that "causes" or "reasons" for alcoholism are to be looked for in the sober life of the alcoholic. Alcoholics, in their sober manifestations, are commonly dubbed "immature," "maternally fixated," "oral," "homosexual," "passive-

aggressive,” “fearful of success,” “oversensitive,” “proud,” “affable,” or simply “weak.” But the logical implications of this belief are usually not examined.

(1) If the sober life of the alcoholic somehow drives him to drink or proposes the first step toward intoxication, it is not to be expected that any procedure which reinforces his particular style of sobriety will reduce or control his alcoholism.

(2) If his style of sobriety drives him to drink, then that style must contain error or pathology; and intoxication must provide some—at least subjective—correction of this error. In other words, compared with his sobriety, which is in some way “wrong,” his intoxication must be in some way “right.” The old tag *in vino veritas* may contain a truth more profound than is usually attributed to it.

(3) An alternative hypothesis would suggest that when sober, the alcoholic is somehow more sane than the people around him, and that this situation is intolerable. I have heard alcoholics argue in favor of this possibility, but I shall ignore it in this essay. I think that Bernard Smith, the non-alcoholic legal representative of AA, came close to the mark when he said, “The [AA] member was never enslaved by alcohol. Alcohol simply served as an escape from personal enslavement to the false ideals of a materialistic society. (#1) It is not a matter of revolt against insane ideals around him but of escaping from his own insane premises, which are continually reinforced by the surrounding society. It is possible, however, that the alcoholic is in some way more vulnerable or sensitive than the normal to the fact that his insane (but conventional) premises lead to unsatisfying results.

(4) The present theory of alcoholism, therefore, will provide a *converse matching* between the sobriety and the intoxication, such that the latter may be seen as an appropriate subjective correlation for the former.

(5) There are, of course, many instances in which people resort to alcohol and even to extreme intoxication as an anesthetic giving relief from ordinary grief, resentment, or physical pain. It might be argued that the anesthetic action of alcohol provides a sufficient converse matching for our theoretical purposes. I shall, however, specifically exclude these cases from consideration as being not relevant to this problem of addictive or repetitive alcoholism; and this in spite of the undoubted fact that “grief,” “resentment,” and “irritation” are commonly used by addicted alcoholics as *excuses* for drinking.

I shall demand, therefore, a converse matching between sobriety and intoxication more specific than that provided by mere anesthesia.

SOBRIETY

The friends and relatives of the alcoholic commonly urge him to be “strong,” and to “resist temptation.” What they mean by this is not very clear, but it is significant that the alcoholic himself—while sober—commonly agrees with their views of his “problem.” He

believes that he could be, or, at least, ought to be “the captain of his soul.” But it is a cliché of alcoholism that after “that first drink,” the motivation to stop drinking is zero. Typically the whole matter is phrased overtly as a battle between “self” and John Barleycorn. Covertly the alcoholic may be planning, or even secretly laying in supplies for, the next binge, but it is almost impossible (in the hospital setting) to get the sober alcoholic to plan his next binge in an overt manner. He cannot, seemingly, be the “captain of his own soul” and overtly will or command his own drunkenness. The “captain” can only command sobriety—and then not be obeyed.

Bill W., the co-founder of Alcoholics Anonymous, himself an alcoholic, cut through all this mythology of conflict in the very first of the famous “Twelve Steps” of AA. The first step demands that the alcoholic agree that he is powerless over alcohol. This step is usually regarded as a “surrender” and many alcoholics are either unable to achieve it or achieve it only briefly during the period of remorse following a binge. AA does not regard these cases as promising; they have not yet “hit bottom”; their despair is inadequate and after a more or less brief spell of sobriety they will again attempt to use “self-control” to fight the “temptation.” They will not or cannot accept the premise that, drunk or sober, the total personality of an alcoholic is an alcoholic personality which cannot conceivably fight alcoholism. As an AA pamphlet put it, “trying to use will power is like trying to lift yourself by your bootstraps.”

The first two steps of AA are as follows:

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.

Implicit in the combination of these two steps is an extraordinary—and I believe correct—idea: The experience of defeat not only serves to convince the alcoholic that change is necessary; it *is* the first step in that change. To be defeated by the bottle and to know it is the first “spiritual experience.” The myth of self-power is thereby broken by the demonstration of a greater power.

In sum, I shall argue that the “sobriety” of the alcoholic is characterized by an unusually disastrous variant of the Cartesian dualism, the division between Mind and Matter, or, in this case, between conscious will, or “self,” and the remainder of the personality. Bill W.’s stroke of genius was to break up with Step 1 the structuring of this dualism.

Philosophically viewed, the first step is not a surrender; it is simply a change in epistemology, a change in how to know about the personality-in-the-world. And, notably, the change is from an incorrect to a more correct epistemology.

...if we exclude the unconscious processes from the “self” and call them “ego-alien,”

then these processes take on the subjective coloring of “urges” and “forces”: and this pseudodynamic quality is then extended to the conscious “self” which attempts to “resist” the “forces” of the unconscious. The “self” thereby becomes itself an organization of seeming “forces.” The popular notion which would equate “self” with consciousness thus leads into the notion that ideas are “forces”; and this fallacy is in turn supported by saying that the axiom carries “impulses.” To find a way out of this mess is by no means easy.

We shall proceed by first examining the structure of the alcoholic’s polarization. In the epistemologically unsound resolution, “I will fight the bottle,” what is supposedly lined up against what?

ALCOHOLIC PRIDE

Alcoholics are philosophers in that universal sense in which all human beings (and all mammals) are guided by highly abstract principles of which they are either quite unconscious, or unaware that the principle governing their perception and action is philosophic. A common misnomer for such principles is “feelings.” (#2)

The misnomer arises naturally from the Anglo-Saxon epistemological tendency to reify or attribute to the body all mental phenomena which are peripheral to consciousness. And the misnomer is, no doubt, supported by the fact that the exercise and/or frustration of these principles is often accompanied by visceral and other bodily sensations. I believe, however, that Pascal was correct when he said, “The heart has its *reasons* which the reason does not at all perceive.”

But the reader must not expect the alcoholic to present a consistent picture. When the underlying epistemology is full of error, derivations from it are inevitably either self-contradictory or extremely restricted in scope. A consistent corpus of theorems cannot be derived from an inconsistent body of axioms. In such cases, the attempt to be consistent leads either to the great proliferation of complexity characteristic of psychoanalytic theory and Christian theology or to the extremely narrow view characteristic of contemporary behavior.

I shall therefore proceed to examine the “pride” which is characteristic of alcoholics to show that this principle of their behavior is derived from the strange dualistic epistemology characteristic of Occidental civilization.

A convenient way of describing such principles as “pride,” “dependency,” “fatalism,” and so forth, is to examine the principle as if it were a result of deuterio learning (fitting of behavior to context that makes it difficult or impossible to determine whether a principle of behavior was genetically determined or learned in that context) and to ask what contexts of learning might understandably inculcate this principle.

(1) It is clear that the principle of alcoholic life which AA calls “pride” is not contextually structured around past achievement. They do not use the word to mean pride in something accomplished. The emphasis is not upon “I succeeded,” but rather upon “I can...” It is an obsessive acceptance of a challenge, a repudiation of the proposition “I cannot.”

(2) After the alcoholic has begun to suffer from—or be blamed for—alcoholism, this principle of “pride” is mobilized behind the proposition “I can stay sober.” But, noticeably, success in this achievement destroys the “challenge.” The alcoholic becomes “cocksure,” as AA says. He relaxes his determination, risks a drink, and finds himself on a binge. We say that the contextual structure of sobriety changes with its achievement. Sobriety, at this point, is no longer the appropriate contextual setting for “pride.” It is the risk of the drink that now is challenging and calls out the fatal “I can...”

(3) AA does its best to insist that this change in contextual structure shall never occur. They restructure the whole context by asserting over and over again that “Once an alcoholic, always an alcoholic.” They try to have the alcoholic place alcoholism within the self, such as a Jungian analyst tries to have the patient discover his “psychological type” and to learn to live with the strengths and weaknesses of that type. In contrast, the contextual structure of alcoholic “pride” places the alcoholism outside the self; “I can resist drinking.”

(4) The challenge component of alcoholic “pride” is linked with *risk-taking*. The principle might be put in words: “I can do something where success is improbable and failure would be disastrous.” Clearly this principle will never serve to maintain continued sobriety. As success begins to appear probable, the alcoholic must challenge the risk of a drink. The element of “bad luck” or “probability of failure” places failure beyond the limits of the self. “If failure occurs, it is not *mine*.” Alcoholic “pride” progressively narrows the concept of “self,” placing what happens outside its scope.

(5) The principle of pride-in-risk is ultimately almost suicidal. It is all very well to test once whether the universe is on your side, but to do so again and again, with increasing stringency of proof, is to set out on a project which can only prove that the universe hates you. But, still and all, the AA narratives show repeatedly that, at the very bottom of despair, *pride* sometimes prevents suicide. The final quietus must not be delivered by the “self.” (#3)

PRIDE AND SYMMETRY

The so-called pride of the alcoholic always presumes a real or fictitious “other,” and its complete contextual definition therefore demands that we characterize the real or imagined relationship to this “other.” A first step in this task is to classify the relationship as either “symmetrical” or “complementary.” (#4) To do this is not entirely simple when

the “other” is a creation of the unconscious, but we shall see that the indications for such a classification are clear.

An explanatory digression is, however, necessary. The primary criteria is simple:

If, in a binary relationship, the behavior of A and B are regarded (by A and B) as *similar* and are linked so that more of the given behavior by A stimulates more of it in B, and vice versa, then the relationship is “symmetrical” in regard to these behaviors.

If, conversely, the behaviors of A and B are *dissimilar* but mutually fit together (as, for example, spectatorship fits exhibitionism), and the behaviors are linked so that more of A’s behavior stimulates more of B’s fitting behavior, then the relationship is “complementary” in regard to these behaviors.

Common examples of simple symmetrical relationships are armaments races, keeping up with the Joneses, athletic emulation, boxing matches, and the like. Common examples of complementary relationships are dominance-submission, sadism-masochism, nurturance-dependency, spectatorship-exhibitionism, and the like.

More complex considerations arise when higher logical typing is present. For example: A and B may compete in gift-giving, thus superimposing a larger symmetrical frame upon primarily complementary behaviors. Or, conversely, a therapist might engage in competition with a patient in some sort of play therapy, placing a complementary nurturant frame around the primarily symmetrical transactions of the game.

Various sorts of “double binds” are generated when A and B perceive the premises of their relationship in different terms—A might regard B’s behavior as competitive when B thought he was helping A. And so on.

With these complexities we are not here concerned, because the imaginary “other” or “counterpart” in the “pride” of the alcoholic does not, I believe, play the complex games which are characteristic of the “voices” of the schizophrenic...

...[It is] possible that the two antithetical codes—symmetrical and complementary—may be psychologically represented by contrasting states of the central nervous system. The progressive changes of schismogenesis (#5) may reach climactic discontinuities and sudden reversals. Symmetrical rage may suddenly turn to grief; the retreating animal with its tail between its legs may suddenly “turn at bay” in a desperate battle of symmetry to the death. The bully may suddenly become the coward when challenged, and the wolf who is beaten in a symmetrical conflict may suddenly give “surrender” signals which prevent further attack.

The last example is of special interest. If the struggle between the wolves is symmetrical—that is, if wolf A is stimulated to more aggressive behavior by the aggressive behavior of B—then if B suddenly exhibits what we may call “negative

aggression,” A will not be able to continue to fight unless he can quickly switch over to that complementary state of mind in which B’s weakness would be a stimulus for his aggression...

Human beings who possess language can apply the label “aggression” to all attempts to damage the other, regardless of whether the attempt is prompted by the other’s strength or weakness: but at that prelinguistic mammalian level these two sorts of “aggression” must appear totally different. We are told that from the lion’s point of view, an “attack” on a zebra is totally different from an “attack” on another lion. (#6)

Enough has been said so that the question can be posed: Is alcoholic pride contextually structured in symmetrical or complementary form?

First, there is a very strong tendency toward symmetry in the normal drinking habits of Occidental culture. Quite apart from addictive alcoholism, two men drinking together are compelled by convention to match each other, drink for drink. At this stage, the “other” is still real and the symmetry, or rivalry, between the pair is friendly.

As the alcoholic becomes addicted and tries to resist drinking, he begins to find it difficult to resist the social context in which he should match his friends in their drinking. AA says, “Heaven knows, we have tried hard enough and long enough to drink like other people...”

As things get worse, the alcoholic is likely to become a solitary drinker and to exhibit the whole spectrum of response to challenge. His wife and his friends begin to suggest that his drinking is a *weakness*, and he may respond, with symmetry, both by resenting them and by asserting his strength to resist the bottle. But, as is characteristic of symmetrical responses, a brief period of successful struggle weakens his motivation and he falls off the wagon. Symmetrical effort requires continual opposition from the opponent.

Gradually the focus of the battle changes, and the alcoholic finds himself committed to a new and more deadly type of symmetrical conflict. He must now prove that the bottle cannot kill him. His head is “bloody but unbowed.” He is still the “captain of his soul”—for what it’s worth.

Meanwhile, his relationships with wife and boss and friends have been deteriorating. He never did like the complementary status of his boss as an authority; and now, as he deteriorates, his wife is more and more forced to take a complementary role. She may try to exert authority, or she may become protective, or she shows forbearance, but all those provoke either rage or shame. His symmetrical “pride” can tolerate no complementary role.

In sum, the relationship between the alcoholic and his real or fictitious “other” is

clearly symmetrical and clearly schismogenic. It escalates. We shall see that the religious conversion of the alcoholic when saved by AA can be described as a dramatic shift from this symmetrical habit, or epistemology, to an almost purely complementary view of his relationship with others and to the universe, or God.

PRIDE OR INVERTED PROOF?

Alcoholics may appear to be stiff-necked, but they are not stupid. The part of the mind in which their policy is decided certainly lies too deep for the word “stupidity” to be applicable. These levels of the mind are prelinguistic and the computation which goes on there is coded in primary process.

Both in dream and in mammalian interaction, the only way to achieve a proposition which contains its own negation (“I will not bite you” or “I am not afraid of him”) is by elaborate imagining or acting out of the proposition to be negated, leading to *reductio ad absurdum*. “I will not bite you” is achieved between two mammals by an experimental combat which is “not combat,” sometimes called “play.” It is for this reason that antagonistic behavior commonly evolves into friendly greeting. (#7)

In this sense, the so-called pride of the alcoholic is in some degree ironic. It is a determined effort to test something like “self-control” with an ulterior but unstateable purpose of proving “self-control” is ineffective and absurd. “It simply won’t work.” This ultimate proposition, since it contains a simple negation, is not to be expressed in primary process. Its final expression is in an action—the taking of a drink. The heroic battle with the bottle, that fictitious “other,” ends up in a “kiss and make friends.”

In favor of this hypothesis, there is the undoubted fact that the testing of self-control leads back into drinking. And, as I have argued above, the whole epistemology of self-control which his friends urge on the alcoholic is monstrous. If this be so, then the alcoholic is right in rejecting it. He has achieved a *reductio ad absurdum* of the conventional epistemology.

But this description of achieving a *reductio ad absurdum* verges upon teleology. If the proposition “It won’t work” cannot be entertained within the coding of primary process, how then can the computations of primary process direct the organism to try out those courses of action which will demonstrate that “It won’t work”?

Problems of this general type are frequent in psychiatry and can perhaps only be resolved by a model in which, under certain circumstances, the organism’s discomfort activates a positive feedback loop to *increase* the behavior which preceded the discomfort. Such positive feedback would provide a verification that it was really that particular behavior which brought about the discomfort, and might increase the discomfort to some threshold level at which change might become possible.

In psychotherapy such a positive feedback loop is commonly provided by the therapist who pushes the patient in the direction of his symptoms—a technique which has been called the “therapeutic double bind.” An example of this technique is quoted later in this essay, where the AA member challenges the alcoholic to go and do some “controlled drinking” in order that he may discover for himself that he has no control.

It will be noted that the possible existence of such a positive feedback loop, which will cause a runaway in the direction of increasing discomfort up to some threshold (which might be on the other side of death), is not included in conventional theories of learning. But a tendency to verify the unpleasant by seeking a repeated experience of it is a common human trait. It is perhaps what Freud called the “death instinct.”

THE DRUNKEN STATE

What has been said above about the treadmill of symmetrical pride is only one half of the picture. It is the picture of the state of mind of the alcoholic *battling* with the bottle. Clearly his state is very unpleasant and clearly it is also unrealistic. His “others” are either totally imaginary or are gross distortions of persons on whom he is dependent and whom he may love. He has an alternative to this uncomfortable state—he can get drunk. Or, “at least,” have a drink.

With this complementary surrender, which the alcoholic will often see as an act of spite—a Parthian dart in a symmetrical struggle—his entire epistemology changes. His anxieties and resentments and panic vanish as if by magic. His self-control is lessened but his need to compare himself with others is reduced even further. He feels the physiological warmth of alcohol in his veins and, in many cases, a corresponding psychological warmth toward others. He may be either maudlin or angry, but he has at least become again a part of the human scene...

HITTING BOTTOM

AA attaches great importance to this phenomenon and regards the alcoholic who has not hit bottom as a poor prospect for their help. Conversely, they are inclined to explain their failure by saying that the individual who goes back to his alcoholism had not yet “hit bottom.”

Certainly many sorts of disaster may cause an alcoholic to hit bottom. Various sorts of accidents, an attack of delirium tremens, a patch of drunken time of which he has no memory, rejection by wife (husband), loss of job, hopeless diagnosis, and so on—any of these may have the required effect. AA says that “bottom” is different for different people and some may be dead before they reach it.

It is possible that “bottom” is reached many times by any given individual; that “bottom” is a spell of panic which provides a favorable moment for change, but not a

moment at which change is inevitable. Friends and relatives and even therapists may pull the alcoholic out of his panic, either with drugs or reassurance, so that he “recovers” and goes back to his “pride” and alcoholism—only to hit a more disastrous “bottom” at a later time, when he will again be ripe for a change. The attempt to change an alcoholic in a period *between* such moments of panic are unlikely to succeed.

The nature of panic is made clear by the following description of a “test.”

We do not like to pronounce any individual as alcoholic but you can quickly diagnose yourself. Step over to the nearest barroom and try some controlled drinking. Try to drink and stop abruptly. Try it more than once. It will not take long for you to decide, if you are honest with yourself about it. It may be worth a bad case of the jitters if you get a full knowledge of your condition. (#8)

We might compare the test quoted above to commanding a driver to brake suddenly when travelling on a slippery road: he will discover that his control is limited. (The metaphor “skid row” for alcoholic sections of towns is not inappropriate.)

The panic of the alcoholic who has hit bottom is the panic of the man who thought he had control over a vehicle but suddenly finds that the vehicle can run away with him. Suddenly, pressure on what he knows is the brake seems to make the vehicle go faster. It is the panic of discovering that *it* (the system, self plus vehicle) is bigger than he is.

In terms of the theory here presented, we may say that hitting bottom exemplifies systems theory at three levels:

(1) The alcoholic works on the discomforts of sobriety to a threshold point at which he has bankrupted the epistemology of “self-control.” He then gets drunk—because the “system” is bigger than he is—and he may as well surrender to it.

(2) He works repeatedly at getting drunk until he proves that there is a still larger system. He then encounters the panic of “hitting bottom.”

(3) If friends and therapists reassure him, he may achieve a further unstable adjustment—becoming addicted to their help—until he demonstrates that this system won’t work, and “hits bottom” again but at a lower level. In this, as in all cybernetic systems, the sign (plus or minus) of the effect of any intrusion upon the system depends upon timing.

(4) Lastly, the phenomenon of hitting bottom is completely related to the experience of double bind. Bill W. narrates that he hit bottom when diagnosed as a hopeless alcoholic by Dr. William D. Silkworth in 1939, and this event is regarded as the beginning of AA history. Dr. Silkworth also “supplied us with the tools with which to puncture the toughest alcoholic ego, those shattering phrases by which he described our

illness: the obsession of the mind that compels us to drink and the allergy of the body that condemns us to go mad or die.” (#9)

This is a double bind correctly founded upon the alcoholic’s dichotomous epistemology of mind versus body. He is forced by these words back and back to the point at which only an involuntary change in deep unconscious epistemology—a spiritual experience—will make the lethal description irrelevant.

THE THEOLOGY OF ALCOHOLICS ANONYMOUS

Some outstanding points of the theology of AA are:

(1) *There is a power greater than the self.* Cybernetics would go further and recognize that the “self” as ordinarily understood is only a small part of a much larger trial-and-error system which does the thinking, acting, and deciding. This system includes all the informational pathways which are relevant at any given moment to any given decision. The “self” is a false reification of an improperly delimited part of this much larger field of interlocking processes. Cybernetics also recognizes that two or more persons—any group of persons—may together form such a thinking and acting system.

(2) This Power is felt to be personal and to be intimately linked with each person. It is “God as *you* understand him to be.”

Cybernetically speaking, “my” relation to any larger system around me and including other things and persons will be different from “your” relation to some similar system around you. The relation “part of” will be different for every person. (#10) This difference will be especially important in systems containing more than one person. The system or “power” must necessarily appear different from where each person sits. Moreover, it is expectable that such systems, when they encounter each other, will recognize each other as systems in this sense. The “beauty” of the woods through which I walk is my recognition both of the individual trees and of the total ecology of the woods as *systems*. A similar aesthetic recognition is still more striking when I talk with another person.

(3) A favorable relationship with this Power is discovered through “hitting bottom” and “surrender.”

(4) By resisting this Power, men and especially alcoholics, bring disaster upon themselves. the materialistic philosophy which sees “man” as pitted against his environment is rapidly breaking down as technological man becomes more and more able to oppose the largest systems. Every battle that he wins brings a threat of disaster. The unit of survival—either in ethics or in evolution—is not the organism or the species but the largest system or “power” within which the creature lives. If the creature destroys its environment, it destroys itself.

(5) But—and this is important—the Power does not reward and punish. It does not have “power” in that sense. In the biblical phrase, “All things work together for good to them that love God.” And, conversely, to them that do not. The idea of power in the sense of unilateral control is foreign to AA. Their organization is strictly “democratic” (their word), and even their deity is bound by what we might call a systemic determinism. The same limitation applies both to the relationship between the AA sponsor and the drunk whom he hopes to help and to the relationship between AA central office and every local group.

(6) The first two steps of Alcoholics Anonymous taken together identify the addiction as a manifestation of this Power.

(7) The healthy relation between each person and this Power is complementary. It is in precise contrast to the “pride” of the alcoholic, which is predicated upon a symmetrical relationship to an imagined “other.” The schisomogenesis is always more powerful than the participants in it.

(8) The quality and content of each person’s relation to the Power is indicated or reflected in the social structure of AA. The secular aspect of this system—its governance—is delineated in “Twelve Traditions” which supplement the “Twelve Steps,” the latter developing man’s relationship with the Power. The two documents overlap in the Twelfth Step, which enjoins aid to other alcoholics as a necessary spiritual exercise without which the member is likely to relapse...In sum, the relationship of each individual to the Power is best defined in the words, “*is part of.*”

(9) Anonymity. It must be understood that anonymity means much more in AA thinking and theology than the mere protection of members from exposure and shame. With increasing fame and success of the organization as a whole, it has become a temptation for members to use the fact of their membership as a positive asset in public relations, politics, education, and many other fields. Bill W. sees that any grabbing of the spotlight must be a personal and spiritual danger to the member, who cannot afford such self-seeking; and beyond this that it would be fatal for the organization as a whole to become involved in politics, religious controversy, and social reform. He states clearly that the errors of the alcoholic are the same as the “forces which are today ripping the world apart at its seams,” but that it is not the business of AA to save the world. Its single purpose is “to carry the AA message to the sick alcoholic who wants it.” (#11) He concludes that anonymity is “the greatest symbol of self-sacrifice that we know.” Elsewhere, the twelfth of the Twelve Traditions states that “anonymity is the spiritual foundation of our traditions, ever reminding us to place principles above personalities.”

(10) Prayer. The AA use of prayer similarly affirms the complementarity of part-whole relationship by the very simple technique of asking for that relationship. They ask for those personal characteristics, such as humility, which are in fact exercised in the very

act of prayer. If the act of prayer be sincere (which is not so easy), God cannot but grant the request. And this is particularly true of “God *as you understand him*.” This self-affirmed tautology, which contains its own beauty, is precisely the balm required after the anguish of the double binds which went with hitting bottom.

Somewhat more complex is the famous “Serenity Prayer:” God grant us the serenity to accept the things we cannot change, courage to change the things we can, and the wisdom to know the difference.”

If double binds cause anguish and despair and destroy personal epistemological premises at some deep level, then it follows, conversely, that for the healing of these wounds and the growth of a new epistemology, some converse of the double bind will be appropriate. The double bind leads to the conclusion of despair. “There are no alternatives.” The Serenity Prayer explicitly frees the worshipper from these maddening bonds.

(11) In one characteristic, AA differs profoundly from such natural mental systems as the family and the redwood forest. It has a *single* purpose—“to carry the AA message to the sick alcoholic who wants it”—and the organization is dedicated to the maximization of that purpose. In this respect, AA is no more sophisticated than General Motors or an Occidental nation. But biological systems, other than those premised upon Occidental ideas (and especially money), are multi-purposed. There is no single variable in the redwood forest of which we can say that the whole system is oriented to maximizing that variable and all other variables are subsidiary to it; and, indeed, the redwood forest works toward *optima*, not *maxima*. Its needs are satiable, and too much of anything is toxic.

There is, however, this: that the single purpose of AA is directed outward and is aimed at a noncompetitive relationship to the larger world. The variable to be maximized is a complementarity and is of the nature of “service” rather than dominance...

LIMITATIONS OF THE HYPOTHESIS

Finally, the above analysis is subject to the following limitations and implications:

(1) It is not asserted that all alcoholics operate according to the logic which is here outlined. It is very possible that other types of alcoholics exist and almost certain that alcoholic addiction in other cultures will follow other lines.

(2) It is not asserted that the way of Alcoholics Anonymous is the *only* way to live correctly or that their theology is the only correct derivation from the epistemology of cybernetics and systems theory.

3) It is not asserted that all transactions between human beings ought to be complementary, though it is clear that the relation between the individual and the larger

system of which he is a part must necessarily be so. Relations between persons will (I hope) always be complex.

4) It is, however, asserted that the nonalcoholic world has many lessons which it might learn from the epistemology of systems theory and from the ways of AA. If we continue to operate in terms of a Cartesian dualism of mind versus matter, we shall probably also continue to see the world in terms of God versus man; elite versus people; chosen race versus others; nation versus nation; and man versus environment. It is doubtful whether a species having *both* an advanced technology *and* this strange way of looking at its world can endure. (#12)

- #1. Alcoholics Anonymous Comes of Age. (N.Y.: Harper, 1957), p. 279.
- #2. G. Bateson AA Social Scientist Views the Emotions: Expression of the Emotions in Man. P. Knapp, International Univ. Press 1963
- #3. See "Bill's Story" in Alcoholics Anonymous (the Big Book)
- #4. G. Bateson Naven, Cambridge University Press, 1936
- #5. Ibid
- #6. K.Z. Lorenz On Aggression. Harcourt, Brace and World, 1966
- #7. G. Bateson "Metalogue: What is an Instinct?" The Hague, Mouton, 1966.
- #8. Alcoholics Anonymous (the Big Book) p. 43
- #9. Alcoholics Anonymous Comes of Age p. vii
- #10. This diversity of styles of integration could account for the fact that some persons become alcoholic while others do not. (Bateson's footnote)
- #11. Alcoholics Anonymous Comes of Age
- #12. For further information of cybernetics and systems theory see the original essay (and anything else written by Gregory Bateson, et. al.)

STOPPING WINE

T'ao Ch'ien

Dwelling stopped, living in town
Lazy hazy, natural leisure, stopped
Sitting stopped, below high shade
Walking, stopped behind a wicker gate
Good taste stops with garden mallows
Great joy stops with children
Lifelong, no stopping wine
Stopping wine: feelings without pleasure
Evening stopping, no peaceful sleep
Morning stopping, no power to get up
Day by day, wanting to stop it
Tue pulse: stopping: irregular
Only knowing stopping's no fun
Not yet knowing stopping will profit me
First realizing stopping is good
This morning, really stopping
From this stopping on
I'll stop on the Dawn-tree Shore
Clear complexion, stopped at a former face
Will it stop in a thousand ten-thousand years?

The following is excerpted from a talk given at Naropa Institute on July 24, 1976, by His Holiness Dudjom Rinpoche entitled, "The Essence of the Nyingma Teachings."

The dharma is very vast in its methods and means and teachings and situations, and very profound as well. If we were to try to go into all the various aspects of dharma, we would never be able to finish. So we could summarize the essence of the dharma, or what it really means to us. We could condense all the various and innumerable teachings of the Buddha, which are as deep and as vast as the ocean, into their essence. As Buddha has summarized it for us, buddhadharma means to do no harm, or no wrong, whatsoever; to do good to perfection, that is, to help and be of benefit to others; and to subjugate or control one's mind totally. That is the specific teaching of the Buddha, or buddhadharma.

To do no harm whatsoever means to do no harm to others, be it through bodily actions, speech or even thoughts. And to do good to perfection means that anything that is of benefit and help to other beings can be considered as good and as buddhadharma. But the root, or cause, of both harm and good lies in our minds. The mind is the very cause of harming others: by directing body and speech, the mind inflicts harm to others; and mind, directed in the right way, uses speech and body to help others. So therefore, the cause of both harm and benefit to others lies in this very mind of ours.

And the cause of all our problems is not knowing our mind. As a result of this confusion, of not knowing our own mind and not seeing its true nature, we indulge in both harm and good. That is why it is very important to watch our mind in order that we might see it, and then know it. For instance, the mind is the root of all our passions. Not only anger, but envy, desire, pride, and confusion all are from our mind. First a thought is generated, then it grasps on to the object toward which our thought is directed and clings to it. And we identify ourselves with the object, and thus graspingly and painfully hold onto it and suffer through all the turbulence of anger, envy, desire, confusion, pride, and so forth.

That is why we should gain control of this wild and uncontrolled mind, which is like a wild horse with no bridle. So, it is important for us, through the rein of awareness, to gradually tame the horse of mind inwardly, and slowly learn to calm it more and more in all of its manifestations.

On the other hand, mind is also the very thing that creates the possibility of spiritual development. It is mind itself that first expresses interest for the dharma, that cultivates it and puts it into practice. And gradually one begins to see a spiritual development through taking refuge, or through devotion to the Buddha, dharma, and sangha, and the generation of bodhichitta. All that is the mind.

That is why it is very important to watch our own mind with awareness, and gain control over it, and also calm it. That kind of control over the mind, with awareness and understanding is the essence of all buddhadharma, or the practice of buddhadharma.

Going a little further, even the basis of tantra is the mind.

For those of us who are interested in the buddhadharma, it is very important to, first of all, learn dharma skillfully. If we are able, through skillful means, to learn, see, and understand the dharma, then the spiritual path will be easy, less problematic, and our spiritual attainment will be more quick and more effective. Those of us here are very fortunate not only to have the general teachings of the buddhadharma, but also the special tantric, or mantrayana, teachings, which are in themselves skillful and powerful, and enable one to attain buddhahood, or enlightenment, in one lifetime. These teachings are known as the secret mantrayana because the teachings, or the attitude, or the skillful means, is so subtle and also so deep that it cannot be comprehended by small minds. The special quality, or the noble quality, of the path of the secret mantrayana is skillful means. Less difficulties are involved if you know how to do it properly. It is a path for those who have spiritual maturity; people who can comprehend it easily and immediately. So it is unconfused and wise and deep in its teachings and methods. These are the four noble, or special, qualities of tantra, or the secret mantrayana. The mantrayana is a smoother path and the effect itself is much quicker. That is why it is known as mantra, or the resultant vehicle of the mantra.

We could illustrate the different paths of the teaching of the Buddha with an example. A group of men, finding a poisonous tree in a field, immediately rush to it and cut down the tree because they know that consuming it would be fatal. Not only do they cut it down, but their fear of it is so great that they cast the poisonous tree far away and also uproot it from the very depths so that the poisonous tree will not grow back.

This represents the approach of the hinayana, or the disciple's and Buddha's vehicle. The poison tree is also an allusion to the poisonous passions, or rather the ignorance which is the basis of them. And the people gathered in the field who uproot the poisonous tree and cast it away are the followers of the hinayana.

While the first group of people is engaged in uprooting the tree, there arrives on the scene a braver group of people, or a more clever group of people rather, who see how painfully the earlier group is engaged in cutting down the poisonous tree, casting it into the far distance, and uprooting it. And the second group of people say, "You needn't necessarily go to such lengths to uproot that tree. We understand that the poisonous tree is fatal if consumed, and so we believe in cutting down the tree. But instead of bothering to uproot the tree, you should simply apply the antidote. That is, if you pour very hot water over it, the root will be burnt, and after that, if you apply hot ash, the root will never grow into a tree again."

This second group of people are students of the mahayana, or the bodhisattva path. They do not go to the lengthy and meticulous extent of removing every aspect of our poisonous defilements, but instead apply the antidote for every poisonous act. For instance, anger is counteracted by compassion and love.

At that point, there arrives a doctor who is, in fact, in search of a poisonous tree. He says, “This is the very tree that I have been looking for. In fact, I am trying to make a medicine for which I will require this very poison.”

This is an example of the secret mantrayana, or tantra, in which the effort is not to remove or abandon or dissolve the poisonous defilements, but instead to see that in these poisonous qualities or defilements there is wisdom. These impurities can be transmuted and transformed into wisdom.

And then a beautiful peacock descends into the field. And upon seeing the poisonous tree, immediately consumes it with delight, immediately transforms its poisonous quality into beauty.

Such is that approach of *dzogchen*, or ati yoga: seeing the defilement, immediately recognizing its wisdom quality, consuming it, and transforming it into the grace of realization. Such is the approach of ati yoga.

Although ati yoga, or *dzogchen*, is the highest approach, if it is not followed properly, it can be sort of dangerous. It can be dangerous to eat poison when we are not peacocks. In order to be like this peacock, one should first gain depth in view, and also be able to maintain the continuity of awareness in meditation. In addition, one’s actions themselves should be impeccable. Such is the view of ati yoga, or *dzogchen*.

For those of us who want to approach or follow ati yoga, it is very important to bear in mind the advice of Guru Padmasambhava, the great tantric teacher. First, he says that one should not lose one’s view in action. The view in Buddhism is that everything—all phenomena, all perception—is by nature shunyata, or emptiness. That is the view. Though in this view both samsara and nirvana are dissolved, since we have not realized this view, we are still here. Until we realize this view in actuality, we have to respect all relative aspects of practice and view. If we jump to conclusions, very confidently saying that we have realized the view that everything is emptiness—that there is no good and no bad since everything is empty—and act irresponsibly, that is losing our view in action.

But if we realize this view through the continuation of meditative awareness, thus breaking the bonds of all dualistic confusion, gradually coming to see our own mind, then the view is fully and effectively realized and not lost. That is why Guru Rinpoche said, “My view is as vast and as great and as open as the sky, yet my actions are as minute as atoms.” In other words, he maintained an absolute perspective as spacious as the sky, while at the same time being meticulously respectful to the relative.

That is why, as long as we have dualistic hangups, we still have to very much respect the relative perspective, and not say that we have the absolute view.

On the other hand, we could lose faith in shunyata, saying that the view of emptiness is not sufficient because we still have our dualistic and relative problems. If we forget the view of shunyata, and only concern ourselves with the relative view, then the effect of our actions will not be very great because there's no potency, or the effectiveness in actions is not guided by the absolute view. So we should not lose our actions in view.

If we properly follow the view, we should gain heights like the vulture or garuda. But at the same time, our actions should be attended to with meticulous awareness. It should be like pounding wheat into flour. When we differentiate the grain from the powder, it should be carefully sorted out. We take each and every rough grain out of the flour. That type of meticulous attention should be given to all our actions, making sure that everything is finely ground and pounded and not one big grain is left. That kind of meticulous attention should be focused upon our everyday life.

THE SLOGANS OF ATISHA

The Slogans of Atisha are considered part of the mahayana practice of Buddhism. Each is a reminder for proper attitude and practice and inspiration to go further. We have discovered that they provide an extraordinary tool for promoting the attitude of health and sanity so necessary to the person recovering from the unhealthy and insane habits of substance abuse.

Commentaries on the slogans are available in the 1979 Vajradhatu Seminary Transcripts and in Jamgon Kongtrul's Direct Path to Enlightenment.

The slogans associated with the virtues of *GENEROSITY* and *DISCIPLINE*.

1. All dharmas should be regarded as dreams.
2. Contemplate the nature of unborn insight.
3. Self-liberate the antidote.
4. Rest in the nature of alaya.
5. In the postmeditation experience, one should become a child of illusion.
6. Sending and taking should be practiced alternately. That alternation should be put on the medium of the breath.
7. Three objects, three poisons, and three virtuous seeds.
8. Train with these sayings in all activities: May I receive all evils; may my virtues go to others. Gain and victory to others; loss and blame to myself.
9. The sequence of exchange begins with oneself.

The slogans associated with the virtue of *PATIENCE*.

10. When the world is filled with evil, all mishaps should be transformed into the path of bodhi (wakefulness).
11. Drive all blames into oneself.
12. Be grateful to everyone.
13. Seeing confusion as the four kayas is the supreme shunyata protection.
14. Four applications are the best method:
 - Accumulation of merit
 - Laying down your evil actions
 - Feeding the ghosts
 - Asking the dharmapalas to help you in your practice.
15. In order to inspire unexpected bad circumstances onto the path, whatever you meet should be joined immediately with meditation.

The slogans associated with the virtue of *EXERTION*.

16. The synopsis of the essence instruction is contained in the five strengths:

- Strong determination
- Familiarization
- Seed of virtue
- Reproach
- Aspiration

17. The instruction for how to die in mahayana is the five strengths. Therefore, one should practice them.

The slogans associated with the virtue of *MEDITATION*.

- 18. All dharma agrees at one point.
- 19. Of the two judges, hold the principle one.
- 20. Continuously apply only a joyful mind.
- 21. You are well trained if you can practice even when distracted.

The slogans associated with the virtue of *PRAJNA*.

- 22. Practice the three basic principles.
- 23. Change your attitude and relax as it is.
- 24. Do not proclaim about injured limbs.
- 25. Work through the greater defilements first.
- 26. Give up any possibilities of fruition.
- 27. Refrain from poisonous food.
- 28. Don't be predictable and guileless.
- 29. Do not disparage people.
- 30. Don't wait in ambush.
- 31. Don't bring things to a painful point.
- 32. Don't transfer the ox's load to the cow.
- 33. Don't sharpen your competitiveness.
- 34. Don't act with a twist.
- 35. Don't bring down gods into demons.
- 36. Don't seek others' pain as the limbs of one's own happiness.

The slogans that are the *GUIDELINES OF MIND TRAINING*.

- 37. All activities should be done with one attitude.
- 38. All suppression of perversion should be done with one attitude.
- 39. Two activities: one at the beginning, one at the end.
- 40. Whichever of the two occurs, it should be resolved into patience.

41. Observe these two, even at the risk of your life.
42. Practice the three difficulties.
43. Practice the three leading points of cause.
44. Practice the three minds that won't diminish.
45. One should have the three inseparables.
46. Train impartially in all areas. Always do this thoroughly—pervading everywhere.
47. Always meditate, especially on your sore points.
48. You should not depend on external conditions.
49. This time, practice the main point.
50. Don't misinterpret.
51. Don't fluctuate.
52. Train wholeheartedly.
53. You should liberate yourself by examining and studying.
54. Don't wallow in self-pity.
55. Don't be jealous.
56. Don't act with fickleness.
57. Don't expect more.

REMEMBERING THE PRESENT MOMENT

Susan Sontag wrote that memory is a social responsibility. Without memory of things past, the most tragic events in a society's story may be repeated endlessly, without recourse to calling upon the testimony of consequences already suffered. Endlessly.

I want to remember the odious consequences of my own forgetfulness, the experiences that have led to the emergence of a more responsible form of remembering.

I drank during the period between the ages of eleven and twenty-four. With Daddy, friends, allies, enemies, strangers, and finally, alone. I don't remember ever thinking that drinking had any connection with the pain that I felt about myself. I knew that drinking was a good and soulful way to discover what lay beneath the mask. It gave, not only freedom from self-consciousness and self-hatred, it opened the gates to greater spontaneity and genuineness. It wasn't until later that drinking became the mask.

I remember the first instance in which I was given my first clue to the possibility that the magic was waning. My sister called from the East Coast. We commiserated about the sad state of our relationships—with me, parents, ourselves, and each other. She complained that she could not trust her moods. They were swinging fast, and more violently than ever before. Did I think it had anything to do with the booze? Well, she was drinking her quota in martinis now...like matinee movies during the week, martinis were a private symbol of loss of heart, the depth of searching that forced a giving up to nihilism..."I don't think so. I mean, I drink about a fifth of scotch a day. The mood swings are scary, but it's not like we have *booze* to worry about! No, it's the men, the parents, the money."

But her insight had left a tiny scratch. *Not everybody drinks a fifth of scotch a day.* I thought, "No booze for five days. I'll do that much to discover that drinking is irrelevant." And on the fourth day I was shaking too violently to walk, my mind was racing along a Mobius strip of panic, and my head and stomach were on fire. "I can't live like this. I'd better drink. Life without liquor is too painful!"

I knew that ten years down the road I was going to have to deal with it. Maybe then, but not now. I *like* to drink. I don't want to know anything more just yet. I have a lot of drinking, a lot of living to do.

I drank just as heavily for another two years. But things had started to happen to the people around me. My sister tried to suicide by drinking a quart of Jack Daniels in thirty minutes. The doctors in the emergency room had said that five more minutes of delay and she'd have made it. My brother lost his family, his business, his home, and had cut up his wrists in anger at his life, at women, at the cold universe that just didn't understand.

There was a man I hardly knew who listened to me talk, gesticulate, rave. I saw the tears on his face, there because he cared for me more than I did. I told him he was a wimp. If you can't stand the heat, get out of the kitchen. He left. He was the only one, and even he was circumspect and frightened, to tell me that I was drinking myself to death. Until much later. My brother told me that my personality had completely changed with one drink. That was after a Sarpashana meeting as we sat in the Hotel Boulderado in 1980.

By 1981, I was drinking compulsively, and beginning to make connections between alcohol and emotional pain. I remember sitting on the steps of the hotel, crying and crying for no apparent reason that I could muster, when I was told that His Holiness Karmapa had died in Chicago. And I became frightened. Somehow...that meant that I was going to have to change my life.

Sarpashana welcomed anyone who wanted to talk, to explore, to listen. People told me where they had been, or that they were at, the same place where I was standing. I liked them. They made me think. But they were beginning to put a crimp in my drinking.

It didn't get really personal until the Fall of 1981, when Jose Arguellas hosted an intensive practice seminar at RMDC for Sarpashana members. He introduced the idea of sobriety as worthy of our consideration for the first time. Called us "soberphobiacs." And said a few things that sent me running, kicking and screaming, into the eight-day binge that was to be my last. He said that he was sober not just for himself, but for all sentient beings. That hurt. I had always prided myself on my compassion. He said that because all things are empty, when we look at a glass of scotch we think, "That scotch is empty, let's drink it." How about, "Let's *not* drink it?" I didn't like the way that sounded. It turned my head inside out. And he said that we are involved in a meditation practice that encourages and nurtures our unconditional, brilliant, and ordinary mind, and that each time we reached for a drink we were running nine hundred miles an hour in the opposite direction. I realized that it was this last—my unbearable hypocrisy—that meant I had to quit drinking. I started to drink.

And on the last night, after listening to Arc of a Diver (Steve Winwood attained enlightenment during that eight days), afraid to stop, afraid of the loss and uncertainty that living without alcohol would bring, I sat with my newest drinking buddy, and we talked. He was four years older than I. He had been through alcohol treatment four or five times. We drank the vodka and talked about self-deception, about love and heroism, loneliness, sobriety, and AA. And, as I watched, he went into alcoholic convulsions. "Don't worry. This happens all the time. I just have to do this breathing thing..." I was too drunk to stand up—even if I *had* understood what I was seeing, or knew how to help. My heart broke as I listened to the voice that whispered, "It's not ten years down the road. It's here."

During the next seven months, I flashed on a drink every ninety seconds. And when

the vulture that my mind had become—watching thoughts, watching thoughts—occasionally fell asleep, I would go looking for booze. But something always got in my way. Memory usually. Susan’s voice. “Do you want to live? Or do you want to die?” Obnoxious. The bar in the hotel, my living room, my companion, the place where I could always settle in with the anger that I loved, would be closed. A tire would blow out on the car. Once, at Rinpoche’s birthday celebration, I was about to order a drink when a friend nearby, drunk for hours, unprovoked, sunk his teeth into my shoulder.

And there was the man who loved me. “This isn’t you. We’ll just wait until you turn into *you* again. I love you. You don’t *want* to drink. *Remember?*”

At seven months the quality of the experience of not drinking had changed and I started seeing sobriety as a positive journey rather than as a forced loss. After one year, after Seminary in 1983, I hit the wall. My mind went into automatic—driven by fear, loneliness, anger, and a simple wish to drink and stay drunk forever. Pilar, Milarepa, and my roommate got me through the night. And I started going to AA.

At the first meeting, I was cynical. I had already been dry for a year. I had a notch on my gun. And then I heard a sixteen-year-old boy, with tears on his face, say, “I just want to *get out of my own way!*” I decided that I could learn a lot from these people.

But I was Buddhist, and all these people were Christians (or so I thought at the time). When the chairperson, about three months into the mission, went on and on about “by the grace of God...” I lost my mind. I was shaking when she called on me to speak. “I am so *sick* of this cigarette machine God! Steps in—promises out! And it’s too bad...I thought you people could help me...but I don’t belong here. You think someone’s going to save you, and I know it’s not true...”

And she called on a man in the back of the room that I never saw again. Cowboy. Slow talker. He said, “I know a little bit about boodism.” Yeah, sure you do. “I took refooge once.” Uh-oh. “Uh...didn’t it have sumpthin’ to do with uh...non-aggression?” I started to laugh as that bullet passed out of my body. I got a sponsor and started reading slogans—AA’s and Atisha’s again. And I found that I had a meditation instructor who understood my alcoholism, and an AA sponsor who understood my Buddhism. To these, and to the many other dharmapalas and lokapalas who found me then, I am very grateful. It’s now almost four years since my first Sarpashana meeting, three years since my last drink, six months since my last toke of reefer, and there’s nothing *happening* ten years down the road. I am sitting at this typewriter knowing that this is the only moment I’ve got.

Rinpoche said that we are all pining for the present moment. And in AA they say that the person with the most sobriety is the one who got up earliest this morning.

Clarity of the moment cannot be stockpiled for later. This flash of clarity that comes in this moment is my reminder. I am still haunted, at times, by the past. I have not fully

explored memory to find in it the motivation for self-destruction, for this profound sense of worthlessness. But without the present moment, those treasures of my path will seek their dark corners and begin to run the movie that I know so well.

I know that if I drink today, I am running away from the mind of the lineage into self-absorbed defeat. I can't say anything about tomorrow. But I know that I do not have to jump off the cliff to discover that I am standing at its edge. The seed of sanity—the mind that watches the old movie play, beckon, cajole, invite, threaten—and sanity full-grown are present in this moment. Each impulse to abandon despair and confusion, each move toward further wakefulness at the expense of the familiar featherbed of craving, each small recognition of the outbreath and its dissolution are further reminders to go further. I never want to live again in the black hole that was my life...does it sound dramatic? It isn't. There is no way to crack the mask by putting on another one. I would like someday to enter the path fully. And I know that the lineage of my teacher and my teacher's teacher does not want me to die of alcoholism or her sister, suicide, in a last ditch effort to escape what they have taught.

Rinpoche, and indeed all of the teachers who have been so kind as to speak at all, have told us to go further, to explore fully who we are, and to use every tool available to us to do so. We can look beyond the gate of fear as we follow their advice. There are a lot of people in our society who have experience, understanding, and compassion when it comes to cutting the addictive patterns of mind. We have permission to seek them out and hear what they might say.

John Lennon, a personal favorite of mine, once said that life is something that we do while we're making other plans. The only way to prove him wrong is to trust our hearts and jump into the present moment with both feet.

ALCOHOLISM AND MEDITATION: CUTTING THROUGH ADDICTIVE PATTERNS

Because alcoholism is by nature a psychophysical, or psychogenic, disease, it distinguishes itself more acutely from other neuroses which are more purely mental (though they manifest in physical forms of behavior). Meditation is linked with the psychology of mind. Insofar as the cutting of addiction is primarily a psychological decision, meditation has something to say about alcoholism.

Because alcoholism represents an intensified state of “I want,” until the alcoholic has decided to work with his or her addiction, meditation may be of little value. This is not to say that an alcoholic should not be encouraged to sit or practice; by all means, one should sit as much as possible. And while one will inevitably practice while one is intoxicated, this combination should not be encouraged, whatever insights one may feel have or will come of such practice.

The point, however, is that ultimately, until the alcoholic has genuinely decided to confront his or her pattern of addictive behavior, meditation will have little effect in relation to the problems of excessive drinking.

Once there is a commitment to cutting the process of problem drinking, meditation may well prove to be a significant factor in the rehabilitation process as any yet known. Even if the alcoholic is familiar with sitting practice prior to his or her decision to work with addiction, there are several basic points that one would do well to keep in mind. These pertain to the nature of addiction and detoxification, or withdrawal. Once these points are grasped, one can begin to understand how meditation may best function under such conditions. Therefore, let us review the important points in the initiation of the rehabilitation phase.

First of all, since alcoholism is profoundly psychogenic, withdrawal may be accompanied by feelings of great grief, loneliness, and sadness. It is as though one has lost a lover or dear relative—which, in a sense, one has. Loneliness is transformed into confrontation with aloneness.

Secondly, there is the question of maintaining resoluteness. Though one may have attained a sufficient degree of insight to commit oneself to sobriety, the negative patterns of addiction may be such that, without a continuing reminder or reflection of one's addiction, these patterns will reassert themselves.

Thirdly, there is the need to initiate new attitudes and patterns of behavior. Obviously, the feeling of loss generated by alcohol withdrawal, as well as the difficulty of maintaining one's resolution, are bound up with the capacity to initiate new patterns, or to reactivate older healthy patterns that were submerged by the addiction that came to

dominate one's life.

While it would be a grave error to view meditation as a panacea, or cure, the practice of meditation can be a vital exercise in assuring the positive outcome of these initial aspects of rehabilitation. Meditation is not a solution. However, it does provide basic space, warmth, and insight—three qualities which are the foundation of rehabilitation. Without the qualities of space, warmth, and insight, and their interdependence, the rehabilitating individual's resolution toward sobriety may become the replacing of one gold for another. The demon of arrogant intoxication is replaced by the demon of arrogant, self-righteous sobriety. If our goal is indeed the awakening of genuinely compassionate attitudes and behaviors, the double-bind attitude of drunkenness-in-sobriety will not suffice.

For the rehabilitating individual, the practice of meditation allows one to see that while it may be true that sobriety is a necessary decision, sobriety can only be maintained and become fruitful if it is grounded in the simplicity of pure awareness. It is on this ground that one may intelligently, and in the absence of self-deception, encounter oneself. While on the one hand, this encounter may be new, painful, and frightening, if it is experienced wholeheartedly it is also tender, warm, and illuminating. Once this naked experience has been taken to heart—which is the same as letting our basic intelligence speak for itself—there is an accompanying sense of well-being. The relaxation of mind and attitude brought about by well-being creates the right atmosphere for a fresh, spontaneous interaction between the phenomenal world and one's own state of mind.

Since one's state of mind is relaxed and receptive, one is in a unique position to see how one's own patterns of behavior (karma) function, and further, how one may be most effectively brought to a condition of karmic fruition, imprinted by and saturated with emptiness.

Because of this quality of emptiness, one sees fully and completely the nature of one's karmic pattern. And due to the emptiness pervading one's insight, one experiences without bias, and spontaneously intuits how to transform one's patterns into a field of compassionate activity. This is genuine fruition in which dedication to compassionate, selfless behavior is the only intelligent option. To act in any other way than with compassion becomes a virtual impossibility once the experience of emptiness has been genuinely wedded to insight. The warmth and spaciousness that one experiences toward oneself naturally extends itself to the world.

What is important in the act of meditation is that one is fundamentally alone—without props or any recourse to support but the stillness of one's own heart. From this we understand that decisions and modes of behavior arising from the meditation experience are pervaded with the perfume of disciplined resolution which comes about only through a direct encounter with oneself.

When this encounter takes place at a level of non-defensive, non-discursive purity and simplicity of heart, that is the moment when there is no more traffic of the self; the marketplace where ego barter rationalization and argument for a false suit of clothes is closed down by the customs officials of emptiness representing the kingdom of no more selfhood.

The person who had come to believe that the fate dealt him was inseparable from his next drink is no more. Vanquished is the person whose life had become a struggle to avoid the karmic consequences of mindless addiction. In the place of the drunken self is the pristine splendor of reality without comment. It is only when the “alcoholic” has arrived at this place that sobriety may assert itself, not as the negation of drinking, but as the compassionate means for distributing the wealth harvested during the supremely empty moment of one’s karmic fruition.

THE BUDDHIST ALCOHOL MAP

The Buddhist Alcohol Map was drawn up after a meeting with the Vajracharya, the Venerable Chögyam Trungpa Rinpoche and core members of Sarpashana in August, 1982.

According to Trungpa Rinpoche, from a strictly Buddhist perspective which expresses the middle way, everyone who practices Buddhism should be able to drink. Clearly, however, for those reared in the chaotic throes of late industrial civilization, and whose characters were all formed well before entering the dharma, Buddhism and Buddhist practice are no antidote to the possibility of what is now called the disease of alcoholism.

Traditionally, the cure for alcoholism is sobriety. Again, from a strictly Buddhist perspective, sobriety for the rest of one's life could be interpreted either as nihilism—if sobriety is viewed solely in its abstinence/denial aspect—or as eternalism, if viewed from an ego-formation which will protect one from the dangers presented by alcohol. However, given the reality of alcoholism, even amongst Buddhist vajrayana practitioners, it is helpful and necessary to view sobriety from a middle-way perspective as well. It is in this way that we may understand the Buddhist Alcohol Map.

Fundamentally, the map is intended to show the correspondence between the stages of the Buddhist path, the way of Alcoholics Anonymous, and how sobriety may be viewed in the context of recovery from alcoholism.

The line at the left designates the problem drinker. "X" designates the point at which he or she recognizes the need for sobriety—initially as a need for relief from the agonies of alcohol addiction.

At that point, the line (at least on the map) divides. The upper line represents the path of the vajrayana Buddhist problem drinker. The lower line, the path of the alcoholic working with the Alcoholics Anonymous framework. As can be seen, there are definite correspondences between the stages of the two paths of sobriety. Further, it should be noted that there is no essential conflict between AA and the buddhadharma. In fact, AA has proven to be very helpful to many Buddhist practitioners coming to terms with the disease of alcoholism.

The point to grasp here is the notion of sobriety-as-path, and as medicine understood in the broadest sense—as healing and creative power.

As path, sobriety possesses both its hinayana and mahayana aspects. The hinayana aspect emphasizes sobriety-as-discipline, with its concomitant aspect of joy, corresponding to the one-day-at-a-time perspective of AA. This aspect may also be

related very closely to shamatha practice in that every addictive impulse, thought, and emotional construct may be experienced in the cool light of mindfulness and let go of. Sobriety as hinayana discipline also corresponds to the first eleven steps of AA practice. There is a continuous process of examination in these steps—examination without blame—that, when properly adhered to leads to a relaxed and calm state of mind, quite the opposite of the addictive state of mind and its attendant agitations and claustrophobia.

The medicinal or healing aspect of sobriety-as-path in the style of hinayana discipline is found in the restorative and re-creative build-up of healthy energy and increasing familiarity with non-neurotic patterns. It is important to keep in mind that this restorative healing can occur only so long as sobriety is adhered to, i.e., with the same kind of discipline as might be enjoyed sitting a dathun.

The mahayana aspect of sobriety-as-path, corresponding to the AA Twelfth Step, is the vow to work for the benefit of all sentient beings. For the recovering alcoholic this means, in particular, working for others suffering from similar addictive problems. This is a highly potent practice which also possesses its inherent medicine, or healing power. This healing power derives from the continuous abdication of ego-bases in order to reach out, experience, and exchange oneself for others. This activity may be related to vipashyana or insight/awareness practice. It involves continuous readiness for the spontaneous arisings of prajna (insight) and the sharpening of upaya (skillful action).

The spirituality of the path of sobriety cannot be overestimated. Sincerely and genuinely practiced, sobriety for the AA practitioner involves a continuous cutting of ego-arrogance through heeding the call of a higher power. For the Buddhist practitioner, higher power might be shamatha/vipashyana practice, the teacher, the blessings of the lineage, all of the above or other innumerable reference points that the buddhadharma provides for remembering the qualities of awakened mind. In any case, the pith instruction for both AA and Buddhist practitioners is the continuous cutting of arrogance and aggression, the practice of simplicity and humility, and the negation of allegiance to ego by working for others.

Vajrayana Buddhism represents a stage of development with no actual correspondence in the traditional AA approach. It is generally assumed in AA that one remains sober—one day at a time—for life, actualizing a complete mahayana bodhisattva-like attitude as a result of the spiritual awakening that is the result of the Twelve Steps. The vajrayana path of Buddhism, incorporating the hinayana, and the selfless idealism of the mahayana, actually represents a stage of fruition. In this stage, the kleshas—the neurotic hang-ups—as well as all aspects of the phenomenal world, are not only recognized as path, i.e., means to enlightenment, but as being already pure, luminous, awake. This is what is known as sacred world view. For this reason, traditionally, alcohol—certainly not an aspect of the monastic Buddhist path—becomes amrita (poison/medicine), which is an integral feature of vajrayana Buddhism.

It is at this stage that guidelines for the American/Western Buddhist become

essential. First of all, a practitioner who has continued to deny his or her alcoholism, and who receives abhisheka (initiation into advanced tantric practices) has an almost-perfect denial mechanism: the perception that alcohol is amrita and thus its consumption is a basic feature of the path. Nevertheless, Trungpa Rinpoche himself asserted in the 1982 meeting that until one can honestly claim to having attained “one taste” (complete mahayana enlightenment), advanced practice is no immunity to the problems stemming from addictive drinking.

Yet, according to Rinpoche, practices such as the Vajrayogini sadhana do present the opportunity for the practitioner to establish a new relationship with drinking. This re-connection to alcohol occurs at two points in the Vajrayogini liturgy when amrita/alcohol is placed in the hands of the practitioner. These two ritual sips per feast can mark a renewed relationship with alcohol. Yet, the provision set forth is that this may be the *only sane* relationship established to alcohol for the recovering alcoholic, until he or she can state with conviction that the state of one taste—complete enlightenment—has been attained. It is only then that all things become possible without the karmic repercussions of the earlier stages of development.

WITHOUT THE NIGHTED WYVERN

Malcolm Lowry

Notions of freedom are tied up with drink.
Our ideal life contains a tavern
Where man may sit and talk or just think,
All without fear of the nighted wyvern;
Or yet another tavern where it appears
There are no No Trust signs no No Credit
And, apart from the unlimited beers,
We sit unhackled drunk and mad to edit
Tracts of a really better land where man
May drink a finer, ah, an undistilled wine
That subtly intoxicates without pain,
Weaving the vision of the unassimilable inn
Where we may drink forever without owing
With the door open, and the wind blowing.

wyvern: a viper; a fabulous animal usually represented as a two-legged, winged creature resembling a dragon.

From STANZAS FOR A NOVICE MONK

By Nagarjuna with commentary by Lama Mipham (on the Vinaya)

*Constantly maintaining the branches of the tree of discipline, i.e., the six secondary precepts and so forth, (including)

A Sober Mind

The types of drinks to be abandoned:

*Not of concoctions of yeast and grain
Nor of drinks such as barley beer,
Nor of wines prepared from liquid extracts
Of trees, flowers, rice, and the like
Should the vow holder wishing the beneficial partake:
For they are infamous
For causing depraved foolishness.*

The necessity of abandoning these drinks:

*When one drinks alcohol,
Mindfulness decreases
And the ascetic becomes uncontrolled.
Uncontrolled, the discipline crumbles.
Remember the advice of the Master:
Intoxication increases negativity:
So do not even drink that amount
Held on the tip of a blade of grass.*

There is an anecdote of a monk before whom was placed a keg of beer, a sheep, and a woman. The monk was ordered to take his choice between drinking the beer, killing the sheep, or raping the woman. Thinking that drinking was the least of the three evils, he drank the entire keg of beer. So, however, he lost all awareness. He then killed the sheep and raped the woman as well.

It is because of incidents like this that the Buddha said, "A member of my monkhood should not drink or pour for another even the quantity of alcohol that can be held on the tip of a blade of grass. A monk who drinks is not fit to be a practitioner of the Dharma and I would not be his teacher."

CONSCIOUS DRINKING AND THE SEAT OF MAITRI

The following talk was given by Lady Lila Rich on June 21, 1984, to members of the Sarpashana Group and friends. The evening was somewhat informal and conversational in tone. We would, once again, like to thank Lady Rich for the generosity of her teachings.

I thought we'd begin with the question of holding one's seat, regardless of drinking or not drinking, or relationship to any other substance with the power to change one's experience by ingesting it. Or perhaps, with finding one's seat, and with how that issue might apply throughout any circumstances.

I'm inspired by the so-called "drinking lesson" that was conducted by the Vajracharya, for the Vajrayogini ATS, maybe two years ago, at which I was present. We studied, experienced, and evaluated ten sips of sake. It's called the "Ten Sips Talk." As background for that, there was a lot of strong teaching on the notion of finding and holding one's seat. This is in common with both the Buddhist and Shambhala teachings. They teach common principle.

First, I'd like to address the challenge of that teaching at all. Finding one's seat is very difficult to begin with, I think. As a practitioner, and just as a person trying to explore and develop wisdom in general, I've found through cycles of my life, that issue always comes back. And each time it comes back in a more profound way.

I think the important secret is the secret of self-discovering one's own being at an unconditional level. I think the gates to that relationship with unconditioned being that we miss, or that we fear passing through, perhaps are somewhat generalized. The gates that, in some sense, are closest to unconditioned being are pain or suffering, which is an ongoing reality of life; loneliness or aloneness, which one always seems to either pass through or avoid passing through, create either the possibility of or the obstacle to finding one's seat. And also joy is another gate. Joy, depending on one's way of perceiving, might be called brilliance, or tremendous warmth, sympathy, or joy could be called sadness. There are a lot of words for joy. Sometimes it's brilliance, sometimes it's sadness. [Laughter] But I'll just call it joy in general. And that makes at least three gates that I'm aware of, which we all will step through and find our seat. Or that we'll play around the fringes of pursuing entertainment, pursuing companionship, or whatever. And we could talk about another one which is particular to students of the Kagyu and Shambhala paths, known as devotion, which is also a gateway to finding our seat.

Once found, however, it doesn't seem to be once and for all. I think perhaps, that is due to the fact that once we do find and take our seat, then our awareness generally expands into a further field of phenomena or society, and so we have more material to work with. Therefore we have to learn our relationship to that wider field. So we often

tend to take leave of our seat to explore that wider field until we feel that we understand it. Then we settle back to that seat again, and again it will expand and come back and another exploration will take place.

I think that the idea of losing one's seat sounds kind of derogatory. As if, if you really had your mindfulness and awareness and discipline together, you shouldn't lose your seat.

JS: Lady Rich, what about that?

LLR: Well, I'm just going to take it from there, about expansion and confusion, path and settling. There will be a point in the stages of one's journey where the old gates, the old friends of pain and joy and loneliness or aloneness, will reappear as an invitation, in a sense, for one to return to one's seat.

I think it's very difficult in Western culture, actually, for people to really discover the understanding of the journey that is not linear. And therefore it is very difficult for people in Western culture to understand the notion of maitri, how to make friends with themselves. Because if the journey is viewed as linear, we're never getting anywhere, somehow. We're always succeeding or failing, and probably alternating. We never only fail or succeed. So I'm suggesting that the familiar faces of aloneness and suffering and joy, can be regarded as an invitation. We can settle again into unconditioned being with a wider perspective. A vast perspective. That's the opportunity that our life as a human being presents us with. That's why it's called precious human birth.

From that experience of unconditioned being we can successfully learn, according to our particular nature, about our own conditioned nature, our own relative existence which is made up of our karma and our patterns, and so on. From that perspective of unconditioned being and that understanding of journey and maitri, that goes along with it, we can learn to discriminate what is actually helpful, considering our circumstances, and what is harmful to our path. If we don't, then we can never truly discriminate properly, and it will all be speculation of some kind, conjecture. There will be a constant court case in our state of mind. Rather than perceiving what is helpful and harmful, we're cooking up ideas about what is helpful and harmful, and they're being refuted all the time.

So at this point, I think we could talk about a further measure. Discrimination alone between what is helpful and what is harmful, even if it is not a conceptual construct of ours, does not necessarily mean that we will choose what's helpful and not choose what's harmful, because of the force of ignorance. We have to be very patient and kinder yet. Kind enough to use some situation, to create some environment, or engage in some activity, or shall I say, to do whatever sort of thing that appeals to us which will bring us closer to suffering, joy and aloneness.

For myself, I know that aloneness is a very powerful friend. If, in general, in my life,

I feel that I'm lacking maitri and running myself down in one way or another, as a technique, a natural activity, I will go away from other people. I'll take a long walk, or something, actually, with the intention of getting reacquainted with alone. And I won't come back until I have. That one is one of my best friends. We could think of a technique for becoming reacquainted with suffering, or with joy, or sadness, as the case may be, thereby coming back to one's seat in unconditioned being. Then things go wrong in a healthful, healthy manner for a while, a manner akin to well-being, for a time, until it wears out.

Conscious drinking? Well, that's what I've been addressing anyhow. From my own experience, conscious anything is related to that process. Conscious relating, conscious activity, conscious eating, conscious drinking, all relate to that process. I personally have a very alternating experience. Sometimes it's conscious, and sometimes it's not.

I think that's all I can say without your saying something too.

BS: Lady Rich, from my experience, and the experience of other alcoholics as well, the notion of conscious drinking is extremely dangerous. And in fact, there is no such thing as conscious drinking, for me.

LLR: Well, I would agree with you one hundred percent. As I said, this is very subtle, this understanding of maitri, to the depth that there be no ignorance of one's own well being. So, I agree with you. In contemplating the topic of conscious drinking, I thought that the only way to begin to address it, for an alcoholic, is to begin to address the issue of maitri. And the slightly technical or metaphoric way in which it came out may be helpful to some people to have a picture like the one we painted.

LB: There's a slogan in AA: "Get out of the driver's seat." And then there is also, "What is getting out of the driver's seat?" It's a phrase—"Self-will run rampant"—so that you are more open, less solid. That's my experience of your talk. It felt real basic, like the ground of being. Then there's alcoholism. Rinpoche says it's the worst problem in our sangha. But I don't know what to do about that at all.

LLR: Well, that's not other than the way in which it's a problem in our time in general, as far as I know. Is our sangha worse than the rest? [Laughter. Nodding and shaking of heads.]

I don't know. From what I hear, it's a big social issue in this country.

LL: I find it fascinating that the appreciation of our lives as linear is the obstacle to maitri. My experience in my alcoholism is that the gate that I used, both as obstacle and invitation, was pain. Rarely, if ever, joy, except perhaps in its manifestation as sadness, which I think even now is very frequently confused. When you're involved in actively pushing out the edges of your confusion, in this wandering around between seats, from my experience, it becomes very questionable where your seat is when you're using pain as a reference point. With any kind of drug abuse, you can really get out there. You

realize that you feel compelled to find your way back to something, becomes a very shaky issue, for the alcoholic, I think, in particular. In my limited understanding of conscious drinking, it is a way of working with alcohol and with our minds. And I think that we tend to use it both as path and as an excuse for staying on the outer edges of confusion. How do you find your way back? John Lennon said, “How can I move forward when I don’t know which way I’m facing?”

LLR: I hope this isn’t too simple-minded, but I would just stop. When in doubt, stop. If there’s ambiguity with something which has the potential of having such harmful side effects to one’s health and life situation as alcoholism, if it’s ambiguous, stop. It should be a signal. Don’t flirt with it.

NS: Lady Rich, the phrase *conscious drinking* is flirtatious! Your talk was the epitome of AA to me. You’re telling people how to live without mood alterings – how to keep your seat when you want to drink, how to find joy. That’s enough in one day, that’s enough! [Laughter] Why do we have to entertain this notion of *conscious drinking*? Where does it come from? Does it come from Rinpoche?

LL: From what I understand, it originally comes from Gurdjieff’s school. And that he drank with his students in much the same way that Rinpoche has drunk with his students. I don’t think conscious drinking was addressed to alcoholism, per se.

NS: Does Sarpashana have a stand on conscious drinking?

LL: Sarpashana is working with as many points of view and directions as it seems possible to look at, for how to establish a sane relationship between one’s practice, use of a substance or abuse of a substance and one’s mind. Some of us abstain from alcohol altogether, some of us don’t. Some of us only come here when we are in a flip-out situation, some of us don’t.

NS: I just see everything that Lady Rich said about it’s sacred world, it’s higher power, and keeping your seat that’s in the Steps of AA. I don’t understand why there’s this constant translation and search for more.

LB: No, no Nancy, we just wanted Lady Rich to come and talk with us.

NS: Well, why did you give her that topic?

BS: Maybe Lady Rich’s coming tonight will lend some support to the group. Maybe other people will start coming on a regular basis and actually form a situation in which people who do not wish to drink, or who cannot control their drinking have a format to come to each week to find some support.

LL: I also found your discussion of conscious drinking to be the first clarification of it

that I've heard in the eight years of my experience that this expression has been tossed around. It was presented originally to the sadhakas, and I'm not a sadhaka.

JS: It was actually presented originally in a wine magazine published on the East Coast, about nine years ago. Rinpoche was invited to write something, because it was assumed that he liked grapes. And he told an interesting mahasiddha story about a particular fellow who became enlightened while drunk, the story went on about two or three pages, and then he went on to talk about conscious drinking and amrita as your medicine or your poison.

LLR: Over the years, in teaching situations with sadhakas, the Vajracharya has conducted drinking lessons for the very purpose as the one that I addressed. Maitri and awareness. For the purpose of improving people's relationships with substances.

NS: Well, I would like to know how many people in this room think that a clinically defined alcoholic can consciously drink? Is there a hope?

LB: Not in my experience, Nancy. That is not to say that there's no such thing as conscious drinking. It's just that alcoholics don't do it! [Laughter]

LL: That seems to be the point.

NS: So to give a drinking lesson to a bunch of sadhakas is great, but there should be a little clause. [Laughter]

LLR: Well, the Vajracharya himself addressed this group. As I recall, I wasn't there, but as I remember, it was a very energetic exchange. Perhaps you people could share that.

JA: See "The Buddhist Alcohol Map" in the Sarpashana Source Book. This map was produced from the meeting we had.

LL: I would be interested to hear what people think *alcoholism* is. Do you have any takes, Lady Rich?

LLR: I don't know that there's been a conclusive definition apart from one's own personal realization that they are an alcoholic. I've heard different types of definitions such as physical disease, emotional or social. Perhaps an alcoholic has also some insight as to whether its something in his body chemistry that transmutes alcohol into poison. And because body and mind are not two separate things, therefore state of mind becomes also very confused, I don't know if everyone feels that that is what's going on with their alcoholism, or something else. I don't know if AA or AMA or whoever, has the last word on alcoholism, or if anybody does at this point.

JS: It is like a lawyer saying that what separates us from the animals is that we have only

one hair growing out of each pore. [Laughter] But, you know, if you get stopped for drunk driving, they throw one of these incredibly banal questionnaires at you. They can find out in a second whether you're an alcoholic or not. And you find alcoholics who try to bullshit it through, but they find them. So, regardless of definitions, it's very revealing, and quickly so.

LL: Jose Arguellas gave a talk here last week on creativity and substance abuse. I'd like to hear a little about the transcendent quality of drinking. We didn't drink because we hated it. It does take us beyond ourselves, at least in the beginning. And we all practice meditation in one form or another. How does transcendence come into play with alcohol?

LLR: Is the quality of meditation the same as that of being intoxicated?

LL: My experience is that it's not the same. Transcendence comes into play with both. I prefer the quality of practice to being inebriated. But I think that both are associated with getting beyond claustrophobia. But with alcohol, the escape is short lived, and ego has a much greater investment in getting beyond itself with alcohol, than it does with practice. With alcohol it becomes very confusing.

NS: What practice do you mean?

LL: I'm thinking of shamatha/vipashyana primarily. I've found that my practice of sobriety and my practice of the ngöndrö are very closely related. They both have to do with some kind of confrontation with mind in a different way than shamatha, or for that matter, my active alcoholism had enabled me to do thus.

LLR: Apart from what is probably an accurate evaluation of ego's stance in being inebriated, and both being a way out of claustrophobia, your evaluative statement—that it is short lived and ego can keep its hold better—but what about texture? Just experientially, without an evaluation? Because people can also get confused due to meditative experiences. We have worked with a number of people whose egos have latched on to that. It's much, much, much more difficult to work with than alcoholism. The spiritual trip-out, it's a bitch, it's the hardest thing I've ever had to work with.

LL: You can get strung out on sobriety too. I don't remember the texture. I've experienced a lot of lucidity being very drunk. But for the most part, I wasn't paying attention to texture. I was much more interested in my aggression, or my passion, or my ignorance, than I was in the context in which those things were occurring.

JS: Also the life of an alcoholic includes hangovers. And regret. "I didn't mean to throw that cat through your plate glass window." There's a lot of texture there. And then there is dealing with the fact that you jump every time the phone rings because, it's "Oh my god, what did I do?"

LB: But there's an undercurrent when you're drinking, in the beginning, like the ocean. Especially if you're alcoholic. It's really something texturally. It feels wonderful. Better than anything. And you think, "Oh, this is nice. I wonder if other people get this." I remember. It was what was available in order to experience a different state of consciousness at all. Alcohol showed me that. I don't drink it, but I respect it.

JS: All sentient beings share a common experience of birth and death, but alcoholics actually do have a profile that is prepubescent, or from their family, or where they came from. They have high sensitivities, are very aware.

LL: What you were just saying also reminded me, that the search for any kind of alteration of consciousness is fairly common and is actually universal in human beings. Children will bang their head against the wall to produce that effect, they'll put a bag over their head to produce that effect, and generally there is some kind of trade off going on.

LLR: We can explore the cultural framework also. Is that so, you say it's universal? On the other hand, we have been educated through the generations moving in the realms of materialism in the West, on how to be, from the beginning, and to view any kind of pain or pleasure as a result of some outside circumstances.

JS: I think there is a difference, recently having lived in Nepal, I saw a film about a shaman tribe involved with spirits. No pun intended. One died of cirrhosis of the liver. Also a Tibetan friend's uncle who is just about dead, third stage cirrhosis. But it is different, I think there are differences in the way society treats them. They accept their maitri and their round, non-linear existence of the advanced stages of their disease. This liver will fail in any case. [Laughter] But the way it's perceived and how it's pursued is different.

LLR: And what about the general degree of people abusing alcohol?

JS: Well, there are more liquor stores in Kathmandu than I've ever seen in my life. Every other store sells rum. You do see Nepalese absolutely stone-cold passed-out in the street, and nobody will move them, traffic is moving very fast. I would get off my motorcycle and at least drag them off to the side of the road. Nepalese would think that was kind of silly, extreme. But I did ask a liquor store owner, "Is there a lot of drinking here in Kathmandu? There is certainly a lot of liquor here!" And he said, "Well, it's cold here!" That was his response. That it was cold in the winter, and people might need to drink. Then I met another Indian who was close to taking his vows of purity—not smoking, not drinking.

LLR: Is that the general view, that this problem is increasing?

NS: In the West? It was amazing coming back and getting hit with it again.

JS: In Asia, there's an idea that of you're old enough, you've raised your family, and your children now have children; you could smoke opium, you could drink, you could do anything. You just move out of the center, you're not a burden, but in fact you're respectable, but that's because your job is done.

NS: I think getting back to what strikes me as the core of your talk – you were talking about altering your mood when you went for a walk. When you're not able to reach for a substance to alter your mood ... I think that what I found in Asia was that there is much more of a sense of sacred world there that is lacking in our culture. That's when the thirst begins. AA talks about conscious contact with a higher power. That's sacred world. When that's lost, you begin to thirst. You talked about those gates being an invitation. That's what we all need to hear, not just as alcoholics but as Buddhists. As Buddhists, we are trying to change our consciousness, trying to change our patterns.

LL: The approach that I've taken in working with my abuse of alcohol is sobriety, not drinking at all. A question comes up fairly frequently in our community is whether or not one can abstain from alcohol and practice the dharma in the Kagyu tradition. There seems to be a contradiction in working with a path of sanity as you've discriminated it for yourself and excluding any aspect of the phenomenal world.

JS: Why do you say Kagyu lineage?

LL: That's the only one I know about.

JS: There are thousands of Kagyus who don't drink.

LL: Well, the Vajracharya is my teacher and this is how I experience it.

LLR: What I remember hearing was “not imitating.” One's evolution may not have taken place between the confines of this particular life span. Ultimately, I don't know about the question of not rejecting anything in the phenomenal world. Maybe there is some ultimate important truth in that, for one's complete enlightenment.

LL: Which is not necessarily the issue in my case. [Laughter]

LLR: You have to develop maitri. There's no aspiring even to virtuous things without maitri. It's absolutely useless.

LL: Got any gimmicks?

LLR: Well, practice. We don't need any more gimmicks than we've got. How does it go: “Work on the greater defilements first?” *Greater defilements* doesn't mean your

worst sins. It means work on what is, due to ignorance, creating the most suffering in your experience. Do you need to work with shamatha, taming the mind? Are you equipped to developing bodhichitta and developing compassion? Maitri is not a substance that you can possess. It's a dawning, and something that has to continue to be nourished. That is why we have the three yantras. You can touch on it, you can discover the states of well-being in shamatha/vipashyana. Then you can deepen that through the practice of exchanging self for others. Deepen your trust in that. Deepen your trust in yourself.

I was teaching at a dathun in 1980, just after tonglen had become a regular part of our practice. Because I had been involved with shamatha/vipashyana, and had done the ngöndrö and the vajrayana transmission already, I was completely astonished at the power of tonglen, at the power of creating maitri, which is the seat. That's what becomes compassion. Maitri and compassion are not too different things. I call it the "can opener practice." I thought it was so powerful, like the point of a can opener, which can punch through and fizz the heart's effervescence. Through that practice, I felt so much faith in that approach. You want tricks? That's tricks. Sitting meditation, tonglen, ngöndrö, sangha.

LL: It seems as if this is like a description of the seat that we started out talking about. You spend your whole life looking for it and then find it in the same way that you find consciousness in your activities. Mindfulness and awareness. You leave it and come back to it. I feel that when I stopped drinking, viscerally, and continue to feel, that it was the first act of generosity that I had ever performed on myself. And now I feel some kind of appreciation that I had to push it so far to understand any possibility of what maitri could mean.

LLR: That's the direction. Those are the issues. Not whether or not we have to somehow figure out a way in this lifetime to be able to transmute all substances. [Laughter] That's not the direction.

NOT DRINKING AS PRACTICE

The following account was written by a member of the Boston Sarpashana group.

A few days ago, on the last day of dathun at Karne-Choling, I was participating in the morning liturgy. As a recovering alcoholic with a banquet and party ahead of me, I was looking forward to taking the precept enjoining the abstention from intoxicants. When the time came, however, the only voice the umdze could hear was his own. Everybody laughed. After a minute of laughter, the umdze gave up trying to read the precept. As for me, within a short time mild disappointment turned into resentment which turned into anxiety. My heart began to beat quickly—or it felt that way—and my mind was becoming wild. These I recognized as manifestations of my alcoholism, standard disguises for the desire for a drink of alcohol.

As I was considering various responses, the thought came of going back into the shrine room, when nobody was around, to take the precept by myself. There was something that felt very uncomfortable about doing that; I went back and forth, then decided to do it. I waited nervously until there was nobody around the shrine room area, tore off my sneakers, went to the place where I had been sitting, and removed the gomden. I placed my hands in the anjali position and hurriedly muttered the precept as my hearing focused on somebody just outside the shrineroom. I got up, put my gomden back, and quickly moved toward the door. As I bowed and left the shrine room, I felt that the load I had been carrying was no longer there. I could now resume a normal day. I was stunned that things had changed so quickly.

Just as the next meditation period had just begun, my mind began to race. I had a strong desire to share what I'd learned with other Buddhist practitioners who are sober alcoholics. Our experience and difficulties are so much the same. To restore my own relative peace of mind, and as a possibility to benefit somebody else, I have sequenced and written down some of the thoughts that came to mind that morning.

For an alcoholic, mindful drinking is a chemical impossibility. We have paid dearly to find out that this is the case with us. Regardless of the life-styles of others and any other particulars of our lives, not drinking alcohol remains for us an ongoing expression of our fundamental sanity. As drinking alcohol can be practice for “social drinkers,” not drinking can be practice for sober alcoholics. This is especially so as we participate in ceremonial or social occasions with the sangha. Our alcoholism—if we work with it properly—is not an obstacle but an opportunity to appreciate our lives and to awaken further.

Two basic attitudes are involved:

1. As practitioners amid the larger community of practitioners, behaving like second-class citizens displays the poverty mentality which characterized us during our days of substance abuse. If we cannot work with this properly, it should be cut on the spot.

2. If we were not alcoholic we would still suffer as confused human beings. As alcoholics we have not suffered more than others within samsara. Our personal histories may have more drama, and we may have left a more visible mess behind, but our similarities to others far outweigh our differences from them.

How do we work with situations and with others?

1. *Appreciation of the occasion.* Identifying with the humanness of others, wanting them to be happy, and extending ourselves to contribute to their happiness. An attitude of fearless generosity.

2. *Respect for the ground of our practice.* Being grateful that alcoholism is a condition favorable to our having found the path. We may not have done so without it. We can appreciate our disease for helping us to wake up.

3. *Not seeking display or hiding from others.* This middle way is very difficult to actualize. It requires friendliness toward ourselves and openness with our ostentation. These fly in the face of some of our more stubborn habitual patterns. It is extremely important, as we gain recovery, to extend ourselves properly to those who drink, or who have an interest in our way of life. It is impossible to know who may gain from our example. Our conduct also gives others the opportunity to be generous to us, to accommodate our needs. It can be very powerful and inspirational to notice how others respond when we give them the chance. When we fall short of this idea, as we do and will, we need to be honest and gentle toward ourselves—but persistent.

4. *Manifesting confidence in the validity of our experience and the sanity of our basic outlook.* This is impossible without loving kindness (maitri) toward ourselves.

This last is a distillation of the previous three suggestions.

Some of us participate in the recovery program of Alcoholics Anonymous. As Buddhists and sober alcoholics, we can utilize its suggestions to radiate nontheistic recovery to others. How we handle ourselves may inspire others onto the path of dharma.

How do we work with our states of mind?

Sometimes we find ourselves in the midst of thought patterns which are powerful and persistent. They might follow a sequence, gaining and gaining in energy:

1. We feel superior to others, especially when they are under the influence, and then

let it turn to anger.

2. We feel lonely and sorry for ourselves.

3. We feel resentment that people “don’t understand” or because they can drink.

4. We experience anxiety bordering on panic. Our minds become increasingly wild and we handle ourselves more stiffly or more clumsily.

Our behavioral repertoire is becoming limited and we sense that each passing moment is bringing us closer to our next drink. Some response is called for, and different responses are suited to different people:

1. We take a look at our personal history and at what we have learned about the mental manifestations of our alcoholism. One would have to be an alcoholic to have so much thinking revolve around alcohol. For most alcoholics, the only outcome is becoming drunk. We understand that these thoughts—powerful and persistent as they appear—are manifestations of mind. Through meditation and awareness practice we have become better able to let our minds be, to relax within our confusion, and so to cut at the root of karma. As we recognize our alcoholic thinking and can let our delusion be, we hack away at the rope binding our mental predisposition, our self-centered behavior, and our next drink. We can afford to be gentle and to cheer up, to be grateful that, because of our practice, our minds can remind us of ourselves.

2. We remember that these manifestations of mind reflect the suffering of all sentient beings. When linked to activity our thoughts become fixed patterns of “holding it together,” trying to protect us from the immediacy of life. Sentient beings—limitless as space—suffer from the same pain. Through studying the teachings and examining our own experience we have discovered that we are fundamentally rich; that we have an intrinsic nature, which we cannot possess, which can accommodate anything, which is fearless. We have responsibility to all who do not yet know this.

We use the energy of our thought patterns to take on the aggression, fear and self-centered thinking that torments us to find something to hold onto ourselves. We think of the alcoholic who must still drink, and others who have more varied patterns with which to keep themselves numb. We then send out any insight and accomplishment we have to all beings without exception and without bias.

In this way our illness becomes fuel to awaken our hearts and transport us into a larger world. We can learn to manifest this attitude and inspiration throughout our lives.

3. If our thinking cannot remind us, or if its energy cannot become intelligent compassion, or if we become too fascinated with its power or our powerlessness, we can cut our craziness on the spot—as technique, without a rationale.

4. We examine and become honest about how diligently we are working out our recovery. We ascertain that we're taking on only what we are ready for.

5. We share with another person, especially with another sober alcoholic, what we have experienced. We do this for our sake and for the benefit of the person with whom we are sharing. We open ourselves up to feedback from others. We have a tremendous capacity for self-deception and need to continuously practice vigilance.

For us, the most crucial way to work with our behavior and with our minds is to not drink alcohol. As we continue to not drink alcohol, and we exert ourselves to that end, the world can touch us. We can become more open to ourselves and to our world. Without that exertion, we will become pathetic and closed off. Our lives will become unworkable.

YOUR UBIQUITOUS FRIEND
Chögyam Trungpa Rinpoche

[The following letter was written by the Vajracharya in 1971 on Karma Dzong letterhead. The return address is Salina Star Route, Boulder, Colorado 80302. It was typed, and then there are hand-written changes made in the wording and spelling. It is signed in Rinpoche's handwriting, with two "x"s following his signature.]

December 20, 1971

Dear Friends,

I would like to acknowledge your forbearance and patience in working toward the Rocky Mountain Dharma Center. But at the same time there have been some doubts accompanied by reports that some of our land community members are "passing around" grass. I hope my previous message was clear enough that there is no indulgence in this matter. It is obvious, self-deception does not get us anywhere except it might strike back on us and therefore trusting the lineage or regarding yourself as the "would be" possessor of wisdom does not apply as such – self deception seduces us on the way. There is some lack of compassion as opposed to aggression in this attitude. Self-indulgency could be said to be appreciation of aggression in its self-snug quality. Therefore in order that the students do not end up by being deaf and dumb to hear the teachings or unable to be the spokesman of the teaching to help other people, it is advisable to cool it as much as self-deception allows us. Whereas if there is self-deception demanding your attention better not create a destructive situation for the rest of the community. Needless to say, repetitious display of self-indulgency towards self-deception is regarded as extremely dangerous. There will be little chance of individuals taking part in the wisdom of the lineage if such self-deception continues. That automatically applies. Such self-deception situation is unworthy of working with the lineage. The idea of high on space becomes part of the feedback in terms of reinforcement of ego and confusion.

Hoping that we could work together as friends. Happy New Year with blessings,

Your ubiquitous friend,

[Signed] Chögyam Trungpa xx

ALCOHOLISM AND RECOVERY: UNMASKING THE PROCESS OF EGO

This article is taken from the Naropa Institute Magazine, Volume II, 1985 with permission from Andrew Fitts, the author.

Behind closed doors, a tragedy is taking place. It is both widespread and contagious. This is a tragedy perpetuated by myth and fed by ignorance. It is the disease of alcoholism.

Little is known about the cause of alcoholism. Even its definition is open to dispute. Current definitions range from the simple diagnosis of "life problems stemming from alcohol use" to the more recognizable "compulsion and obsession that places alcohol at the center of an individual's life." Perhaps one reason for this disparity in view is that the onset of alcoholism is so insidious.

In a culture that values the ritual of social drinking, the problems that can emerge from alcohol use tend to be ignored. Once someone is labeled an alcoholic, he or she carries the stigma of being outside of the mainstream and unable to partake in the normalcy of adult life. This conspiracy not only affects the drinker, but those who are close to him or her. Family members are often driven to hide and protect the alcoholic, even at the expense of great pain for everyone involved.

Alcohol acts as a sedative euphoric, and in the earliest stages of abusive drinking effectively masks underlying neuroses. For many this effect is a welcome relief from the pain of worldly existence, whether physical, emotional, or existential. When used as a sedative/euphoric, alcohol dependency often goes by unnoticed. It is only much later, when the dependency evolves into addiction, that it becomes obvious. At what point this dependency-addiction is recognized as a problem depends a great deal on personal insight into habitual patterns--patterns which range from reliance on alcohol to manipulate subtle mood changes to a gross need for alcohol to maintain physical equilibrium. The temptation to deceive oneself about these recurring patterns is strong. The alternative of facing one's dependency is a painful one. Alcohol provides the escape and lubrication which keeps one from confronting reality. In this way the problem builds while remaining in the shadows.

Over the years many fingers have been pointed at alleged causes of alcoholism, and the culprit changes according to the times. It has been looked down upon as a moral weakness and as the unfortunate result of being out of step with social convention. It has been associated with character defect--a more accusing failure of personal origin. A more understanding, though incomplete, view is that alcoholism is a learned habitual pattern which can be unlearned. Lastly, there is the theory which assigns it to a genetically predisposed physical tendency, thus acknowledging an important factor, but ignoring the

environment in which it is nurtured.

Alcoholism is viewed as a progressive disease with observable early, middle, and late stages. Each stage is characterized by both emotional and physical impairment in increasing degrees. Unlike most medical diagnoses, alcoholism carries with it not only a physical but also an emotional, and I would add spiritual, component. Physically, the disease is tracked over the years by an increased frequency and severity of physical disability, marked especially by alcohol withdrawal. Emotionally, the disease is manifested by an arresting of inner growth, an increasing loss of self-esteem, and an inability to cope with life's stresses. Spiritual well-being suffers similarly from loss of self-esteem and a growing inability to reach out to others.

Denial is a major stumbling block to the admission of the problem and therefore to treatment. Even after acknowledging the problem to oneself, the alcoholic rigidly tries to manage his or her problem alone.

When alcoholism is considered a disease, and not a sign of moral or character deficiency, a more compassionate approach to treatment evolves. In 1935 Bill W. and Dr. Bob founded Alcoholics Anonymous and began a program based on spiritual awakening. The famous Twelve Steps lead one from an acceptance of powerlessness over alcohol, to an accountability for past and present actions, to personal revelation of health, and finally to compassion and skillful means in helping other alcoholics. This flourishing community has restored many alcoholics to quality, sober lives.

Concurrently, during the past twenty years new treatment programs have been developed that follow a more traditional therapeutic model. Many of these originated alongside the deinstitutionalization of the mental health field, as community treatment proved more therapeutic and cost-effective than hospital internment. These new programs are both publicly and privately operated and consist of detoxification centers, long-term inpatient treatment facilities, half-way and three quarter-way houses, and outpatient clinics.

While the field of alcohol treatment is expanding rapidly, there is still a great deal of ignorance and social myth which impedes recognition of this nation-wide problem. One of the more persistent myths is that the alcoholic is necessarily a social outcast, a chronic recidivist whose life is marked by repeated failure. Contrary to widespread skepticism, many alcoholics do make a recovery.

Recovery not only involves an alcohol-free life, but also a process of emotional and spiritual maturing. From a contemplative perspective, recovery is a profound opportunity to reappraise one's life. The underlying truths of existence are nowhere more apparent than in the throes of, and recovery from, addiction. The intensity of hope and fear brings the alcoholic in touch with the sense of desperation, cycling through conflicting states of mind, and the futile struggle to manage one's existence, which are, in fact, common to human experience.

Out of the alcoholic's emersion from emotional and physical suffering comes a desire to live more humanly. The restless activity of ego gratification has grown to such monstrous proportions that ordinary life experience is no longer manageable. By surrendering to the sense of helplessness, the ego process becomes visible. The insatiable craving, the need to dominate, the denial of reality, have to be reckoned with. Ego, or the attempt to manipulate experience, has failed. The source of confusion becomes obvious. The degree to which this realization changes an individual's life varies. Some learn to ease up on themselves and become more willing listeners. Others experience a profound change and begin a lasting spiritual journey. In all cases there is an opening, a sense that life can be lived without stranglehold. The suffering does not have to continue. In AA this is spoken of as surrendering to one's higher power. One does not have to continually manage one's world. It is not necessary to feel responsible to keep the world revolving. All there is need for is to keep one's own corner of the universe tidy. This opening up to a vision of health marks the great awakening that comes out of piercing the bubble of addiction. What lies beyond is hard work.

Having known the reality of addiction, it is obvious that there is no sanity in turning back. All the evidence, all the personal experience of tragedy, are perpetual reminders of the pain of addiction. Yet moving forward and stepping into the unknown also involves pain and feelings of unreality. Making one's way in a world without alcohol is a new experience. New skills have to be learned, new emotions felt, new challenges faced. Years of abusive drinking have stagnated emotional maturity and growth pains can no longer be medicated.

The experience of the alcoholic is that of being caught in the middle. If changing one's habitual patterns seems insurmountable, so too does a return to drinking in order to cope with these problems. The experience of being caught is familiar to all alcoholics. It is often referred to as a feeling of insanity. The allegiance to growth, to change, is not merely a willed one but one that is driven by forces seemingly outside oneself. Whether consciously appreciated or not, the recovering alcoholic's disease is a prime motivating source of awakening. A return to drinking would be a gesture of refusing to awaken, a retreat into a pathological, though familiar state of being. The alcoholic as well as the non-alcoholic is always faced with the choice of allegiance to awakening or not. For the recovering alcoholic, however, the decision comes down to a question of life and death.

BOY WITH A PROBLEM

Chris Difford and Elvis Costello

I feel like a boy with a problem
I can't believe what we've forgotten.
And I even slapped your face and made you cry.

It's the last thing I want to do:
Pull the curtains on me and you,
Pull the carpet from under love,
Pull out like young lovers do.

You swore you wouldn't shout--
If it's not your punch, then it's your pout.

Days in silence try my temper.
Nights spent drinking to remember
How memories are always tender.

I crept out last night behind your back.
The little they know might be the pieces I lack.
Came home drunk, talking in circles,
The spirit is willing, but I don't believe in miracles.

I've got a problem, but let's go to bed.
I can roll over and I can play dead.
But here I am in the doghouse instead.

I feel like a boy with a problem.
I can't believe what you've forgotten.
Sleeping with forgiveness in your heart for me.

PROLOGOMENA TO WORD PROCESSING

There are some words which crop up now and then in our discussions which seem to beg for clarification and examination. This is offered in the hope of stimulating further looking into these and other items of our communication among ourselves, and, eventually, others.

The use of the word *control*, for instance, has various meanings in various contexts. Yogic practices often favor *control* of one or several senses, appetites, and attitudes. Some mention the practice of *controlled drinking*. We refer to the panic experienced when some aspect of life goes out of *control*. We even attempt to *control* the panic.

Alcoholic pride has something to do with *controlling* one's life. AA deems this attitude of self-*control* to be useless and hindering to the spiritual life. It is recommended that one give up egotistic self-*control*, and "turn it over," usually to a "higher power of one's own understanding." This loss of *control*, consciously chosen, is different from the lack of *control* the addict or used-user feels in regard to the substance involved.

The first non-*control* is called *surrender*; the second, *addiction*. Through the use of the term *controlled drinking*, the user sees the meaning in a yogic sense somewhat divorced from its *surrender* connotation. This use links up with *alcoholic pride* in that it is something *done* by the subject.

The attitude of *surrender* is accepted in regard to the *teachings* or the *teacher*, but there is still suspicion, warranted or otherwise, toward something so vague and ambiguous as a "higher power." Yet, do not most sangha members acknowledge the *teacher* and/or *teachings* to be in some way a "higher power?"

To me, *sobriety/sanity* is also such a "higher power." It can be felt, just as the unseen wind can be felt. It can be experienced and named. One who *surrenders* to the Three Jewels does not *control* one's own life in the usual sense. This is not a weak position.

The use of *poverty mentality* also seems interesting. Some may consider giving up *control* with the *poverty* connotations. The conventional military considers one who surrenders to be a loser, at least in the *kamikaze* tradition. *Alcoholic pride* is in such *control* that it never *surrenders*, although all the while surrendering to the genie in the bottle. The "higher power" is not to get us high, but to bring us to our knees, to our prayer rugs and practice pads. We must be careful of mixing *wealth mentality* with *alcoholic pride*. "I can handle it myself" is a big handle, and turns us into the world conqueror sometimes.

This leads right into the word *denial*. The alcoholic may *deny* that this is the situation, proclaiming *control*; the Buddhist alcoholic may *deny* that very same *denial*. Some may *deny* being in *control*, pretending to have *surrendered* to something-or-other. Being in

control has rather shravaka-like connotations, with pictures of a guy lying on a bed of nails next to a junkie, so we *deny* the *control* as well as *denying* our *denial*. We need to get out of the negative take on being sober. It is not simply stopping drinking, giving it up, gritting the teeth and stopping. It is not simply an abstinence or fast in the yogic sense. We could see it as going toward the good (sobriety/sanity) rather than as an escape/retreat from the bad (addiction). We need not be embarrassed.

To say, "I'm sick and need some help" is a positive step, not to be laughed off as some *poverty* attitude based on negative dis-ease. We can help get rebirth out of the disease-ridden hospital approach and into the home health. We too can be happily healthy and not feel sheepish about it.

Thank you for your patience and excuse the didactic tendency for the moment. But please continue the investigation at your leisure.

ON ALCOHOLISM AND BUDDHIST PRACTICE

We are people who find ourselves in a context. Alcohol plays a part in our lives and we are interested, by virtue of personal connection, in the opinions, the problems, the information, the gossip, the cure. How big a part it plays, how we work with it, how it affects our practice and our environment and the ones we love are big questions for some of us.

Some of us have found that we have pushed things to a painful point and as a consequence we have felt compelled to change our relationship with alcohol. Some are working with conscious drinking in the sense that we try to use alcohol with mindfulness and awareness, and some have found that any use of alcohol is beyond our control.

Sobriety can come about as an expression of kindness and generosity toward ourselves. Maybe we have to stand back to relieve the vicious cycle. For some of us, the idea of sobriety or abstinence is new, or terrifying, or strange. The idea of sobriety as path is usually not appreciated at all, unless it becomes a necessity for us personally.

The vajrayana tradition of Buddhism gives us plenty to work with in the realm of alcohol use. We've been given the gift of our own neurosis, the gift closest to our hearts, by our teacher and our lineage. That in itself is tremendously helpful. It makes the whole discussion very personal, very open, and very demanding at the same time.

Alcohol use and alcoholism are an environment. Nothing is just black and white, either-or. We can stop pigeon-holing reality and get above the roof-brain chatter. We can begin to realize what's been taught. *Shinjang* means that we are taken in, processed, and have become willing to work with what's here. *Shinjang* is never transcended or abandoned on the path. We have been taught that it is possible to stop perpetuating our neurosis and confusion and to transform it into awakened heart and mind at the beginning, in the middle, and at the end.

There is no real difference between the alcoholic and the normal drinker in the absolute sense. But it's a question of, "How far do I need to go to carry my style to satiation?" The issue might be about the ground floor. Can our drinking patterns be contained by our environment, by the space of our gentleness and genuineness?

Addiction to a substance can expand and dissolve the boundaries of our experience. Abuse allows us to push against the edges of ourselves. It can also provide a new boundary within which we can work and play. We may find that we want to go out and drink again to rediscover the clarity that we experienced in the uncertainty of our addiction. Or we may find that we cannot afford that luxury.

Society is defining some of the boundaries: the job, the car, the marriage, the law. We define the boundaries of ourselves. When we recognize the real nature of the boundaries

we have set, we free the space infinitely. This is renunciation of a profound sort. We are at home in our world, our prison, our space. In renunciation there is no solidity. Having no reference to oneself makes the space of our lives fluid. Then we are genuinely working with loving kindness toward ourselves, emptiness and compassion.

Destructive drinking is still connected with the search for a solid self. Before true renunciation has become our experience, alcohol cannot be transformed into amrita. In order to do that, we must be consumed. We have to realize personally that *we*, our *ego*, is not going to be victorious over *anything*. Drinking or not drinking is not the issue here. Relating with our experience, in its entirety, involves working with our being in its entirety.

At that point, we can talk about extending into the space that we have darkened for ourselves.

Alcohol does not have to be a dead end. It can provide the vehicle of continuity. As practitioners of the dharma, we experience the egolessness of self and the egolessness of other as a mark of existence, not an opinion. Our experience of the dharma could cease to be hit and miss, pain and pleasure, loss and gain, and become a much larger notion of path. Beyond our trivial manipulations of this and that, we have to work.

Before many of us can attempt to undertake any form of conscious drinking, we must have the ability to relate with an experience of something bigger than ego's fixation on itself. If we are relating only to ego's habit and desire to cheer up, to "fix it," we are not relating to the whole space. That partial view is extremely dangerous.

PHENOMENAL WORLD ABUSE AND THE MIDDLE WAY

The following is a summary of talks given by Jose Arguelles at Karmê-Chöling in Barnet, Vermont, November 9-11, 1984 and compiled by Joseph Crane.

I. Overview: Phenomenal World Abuse

Phenomenal world abuse is a universal problem in our culture, one which manifests itself in many different ways, but is most obvious in people who abuse substances. Phenomenal world abuse is a mechanism of neurotic and fixated behavior, in which a pattern of behavior has developed in excess, to the detriment of one's well-being. Depending on an individual's chemistry, abusing substances may become detrimental to one's physical health as well.

Phenomenal world abuse must also be seen as including both the individual and his or her outer world. It is a manifestation of group neurosis that is quite subtle and devious.

Behind phenomenal world abuse is a lack of respect for the free flow of intelligence between oneself and the world. This arises from a lack of respect for reality. We prefer to pay service to certain fixed modes of responding than deal with reality in its own terms. We scramble for the old pattern when a new situation arises, clinging to the illusion that "Plan A" will get us through.

The mechanism of this process begins with the *need to control* when reality comes knocking at the door--it resembles a fight-or-flight response. We need to control to make reality--including our perceptions of reality--conform to what we want it to be. Because reality is impolite, we install "Plan A" to make things more desirable, less obnoxious. Later, we find we don't need reality knocking before we can implement "Plan A: we do it all the time.

We devise sophisticated techniques to prevent incoming reality--like the consequences of our behavior--from interfering. This is where *denial* comes in. Control is a denial of reality, and denial is a means to control reality; it's often difficult to separate the two. Denial takes many forms, most conspicuously, "I'm not trying to control anything." When things get really serious, it's difficult to separate denial from reality from the substance.

The third element of the addictive process is provided by the *enabler*, who plays yet another form of the same control game. We all live in social situations with tacit agreements, social contracts, a "consensus reality" that we agree to, and are not always aware of: we all have symbiotic relationships with our worlds which constitutes some

form of collective mind. Part of phenomenal world abuse is that *everyone* has particular ego-needs which are involved in the perpetuation and maintenance of addictive behavior. By perceiving that some people are worse off than us, we maintain our sense of self-importance. The judging and self-righteousness about the other person's "weakness," in many subtle ways, allows the "weakness" to continue. Indeed, the feeling of self-importance *depends* upon the continuation of the addictive behavior. The abuser, at the same time, is always scouting around for the best enabler, the most enabling situations. Some have a problem; others can shake their heads. This results in symbiotic dances of exotic varieties.

In our culture, alcohol consumption is legitimate, encouraged, and pervasive. We're bombarded with it. If one-tenth of all drinkers have a problem with alcohol (as is suggested by the National Council on Alcoholism), "It's not my problem," and we can carry them off to the health care professionals. This only accentuates the attitude that abuse is solely the addict's problem. With clarity and understanding, everyone can be more sensitive and less hypocritical, or at least we can own up to our own hypocrisy.

The basic issue of neurotic behavior and addiction is that it lacks integrity. We doubt our own integrity, so we cut off the gifts that reality is ready to heap onto us. What we really don't like about reality is that it respects *us*. It is out of respect for our integrity that we may come to an understanding about what we have been doing to ourselves, through it that corrective and creative action becomes possible.

When dealing with incoming reality, there are two possibilities: the habitual one is "Plan A." First, we panic, and then we install the favored control mechanism. The other possibility is surrender, which consists of hard truth to the neurotic or addictive mind. In surrender there is no compromise. Neither incoming reality nor our integrity will tolerate compromise.

In surrender, one sees through the need to control, sees that the controller has been the problem all along. The action of surrender is the marriage of incoming reality and universal intelligence, which has somehow sneaked through the rearguard of neurosis. It is a marriage which serves to *disempower the controller*. This disempowerment is a spontaneous situation that the controller didn't want to see and cannot prevent any longer.

By disempowering the controller, we empower ourselves with the capacity for selfless, self-renewing, inexhaustible, creative behavior. We cast off the controller's dogmatism and narrow focus to open up a wider world. The Middle way of the Buddha, and specifically the practice of meditation from the Buddhist tradition, gives us a context with which to step beyond our small-mindedness. We can see that our behavior is most meaningful when concerned, not with stabilizing personal comfort or talking to God, but with being in the service of others. Meaningfulness is therefore desecrated to the extent that our behavior does not serve others. Unfortunately, most of us learn this simple truth by first inflicting massive pain on ourselves and others.

Through creative action coming from surrender, we can manifest fearless sanity to others. This is especially important when working with a situation which is a group or collective manifestation of neurosis, and not only the simple malaise of an individual.

II. From Addictive Behavior to Creative Involvement

In this section, the perspective of Tibetan medicine is offered by Dr. Trogawa, who is the personal physician of His Holiness Dilgo Khyentse Rinpoche, a renowned Buddhist teacher.

Since substance abuse has been so common throughout history, and so prevalent in our culture, why are substances used in the first place? The Tibetan viewpoint is that we do so to "feed the higher winds." According to Tibetan medicine, our body consists of a hierarchy or strata of elements that constitute our total functioning as psycho-physical organisms. The "higher winds" are at the apex of this hierarchy as very subtle life energies which interpenetrate all phenomena, not just human functioning. "Higher winds" correspond to the Indian *prana*, and the Chinese *ch'i*. In the West, it corresponds to "inspiration," which is a vague term we generally associate with romantic concepts of art, love, and imagination, or with creativity in general. The Tibetan approach is that these subtle energies need to be fed--jazzed up from time to time--and the use of substances is quite helpful in this process.

From alcohol, we get a "good buzz," a loosening of inhibitions so the activity of the higher winds is accelerated, so we can have increased insight and inspiration. In traditional societies, the use of substances was highly regulated and used only for these purposes.

The process of using substances to evoke the higher winds is originally a process of the surrender of the controller, which consequently empowers one for spontaneous creative behavior. Such activity would not be dominated by conceptualized pre-patterned responses, but would be open and fresh. By allowing the rush of the higher winds, universal intelligence can interface with reality, connected through the integrity of our being. By trusting our integrity, our responses have a natural quality of order and discipline to them, both bringing relaxation at the same time. However, by not trusting our integrity, by trying to contain reality, substance use becomes *abuse* and a detriment to the possibility of creative behavior, including the involvement of the higher winds.

This neurotic intoxication occurs within a three-fold process:

1. *Heedlessness*: When one has difficulty, one takes a few drinks. One is heedless of the fact that there's a problem with this.

2. The *rampaging elephant* is the unfocused repetitive drunk. He or she is careless with other's space and vigorously asserts his or her own quite limited point of view, resorting to throwing things, punching people, etc.

3. And the final stage is that of the *corpse*.

How do we work with a person to short-circuit this process? How do we work with ourselves?

In Tibet, the offending substance was weaned off gradually, replaced with other substances – rich foods to invoke the higher winds.

Alcoholics Anonymous has been operating since the '30s and is very effective in maintaining sobriety. By using a strongly spiritual approach, AA helps the individual to develop a code of moral behavior in relationship to alcohol. It provides a way to straighten up and stay that way, as a large family of understanding people to relate to.

Can we go further to address the issue of the "higher winds?" Meetings and sharing and discussion is important, but involves only a narrow band of the total spectrum we're involved with as human beings. Revulsion and staying away from the addictive substance is necessary, but still begs the question of how to deal with the creativity within our psycho-physical make-up; how to reconnect with the circulation of the higher winds. We need to deal with the fact that it was from relating to the higher winds that the destructive process occurred, that new ways need to be introduced to relate to them again.

Creativity is no respecter of any particular media or moment. Because creativity embodies surrender to each moment, each moment can be different from the next.

Creativity is not necessarily artistic in an intentional way, but may begin by taking care of everyday details without getting freaked out. When the higher winds become merged with the simple activities of daily life, the fullness of life can open up in cleaning a stove, in paying the phone bill; one can be filled with simple intensity of feeling, from complete simplicity of heart. When involved with addictive behavior we lose all contact with this simplicity.

We can go further to develop non-verbal channels of communication, with our body's expressive outlets through the use of voice, movement, sound, visual effects. These create a more expansive situation for creativity to emerge.

By having seen that the personal controller is the source of all our selfish, egoistic behavior, and by seeing that behavior as the problem, we find that natural, spontaneous insight is organically facing in the direction of working for the benefit of others, that our creativity can utilize whatever means is available to work to benefit others.

What is unusual about our civilization at this point is the widespread and unprecedented level of alcohol and drug addiction. Why? We live in a degenerative era in which we actually believe that we're creatively unempowered, that we are inherently without resource. Those who find themselves in drug and alcohol rehabilitation programs may be among the most creative people in the whole population. These are highly sensitive people who may not be able to cope with the hard analytical demands of a depersonalized, left-hemispherical society. Our culture does not know how to make use of them, and many of them can be found in rehabilitation programs which don't understand or utilize the higher winds. Therefore, we need to be more daring and adventurous in opening ourselves and others to the possibilities of behavior that do deal with the higher winds.

In general, we have much more intelligence and creative sensibility than we give ourselves credit for. Through the risk-taking of creative involvement, we can arrive from abusing the phenomenal world to appreciating and working with its richness. Previously we have shied away from the brilliance of the environment presented to us. Now, by giving full expression to the integrity of our being, we can learn to ride the winds.

MODERN ATTITUDES TOWARD ALCOHOLISM WITH SPECIAL EMPHASIS ON THE FEMALE ALCOHOLIC

This article is an edited version, for the purpose of this Source Book, of a chapter in Alcoholism and Women by Jan Bauer.

...More than most illnesses, mental or physical, the very term *alcoholism* continues to provoke moral reactions and controversy. It has been officially recognized as an illness by the World Health Organization since 1951. Yet, despite this recognition of alcoholism as an ailment and not a crime, there is still little consensus on exactly what it consists of. There are as many points of view as there are people looking at the problem. The physician and the minister, the psychotherapist and the policeman, the social drinker and the alcoholic, all speak different languages and can offer explanations that make sense from their vantage point.

...These models are abstractions, products of a thinking-type function that describes what a thing is. They simply provide an orderly system, a way to clarify the multiplicity of approaches and attitudes.

There are nine broad categories or models, reflecting different attitudes toward alcoholism:

- The Impaired Model
- The Dry Moral Model
- The Wet Moral Model
- The Alcoholics Anonymous Model
- The Old Medical Model
- The New Medical Model
- New Psychological Models
- The Family Interaction Model

The first three models give some idea of the common attitudes that come to bear upon the alcoholic in our society. The AA model is presented as it began and evolved since its founding in 1935 (and is the basis for much of Ms. Bauer's work in the latter portion of her book). These first four are called the Lay Models.

The Impaired Model

From this point of view, the alcoholic is simply a drunk, sometimes repulsive, sometimes comical, but in any case, irresponsible. Nice people do not really want to associate with such an individual. The cause of his condition is unknown. He just "is that way."

Since the prognosis is negative--that is, once a drunk, always a drunk--treatment consists of charitable care given by kind individuals or such institutions as the Salvation Army or, eventually, state hospitals. The main thing is that the drunk be kept out of sight and out of trouble, whether this be undertaken by society or family.

Comment:

This model presents the classic picture of the alcoholic as a social pariah, a Bowery bum or a derelict under a bridge. It reflects the die-hard Christian attitude toward alcoholism as a sin and the alcoholic as a fallen member of society. He should be pitied by the pious and more virtuous people. In fact, without the presence of such black sheep in society, do-gooders and upstanding citizens would have nothing to measure their own value by, so he plays a scapegoat role in carrying the collective shadow (dark side).

This model of alcoholism as an impairment is the most traditional one in Western culture and to many people it would seem very old-fashioned. Yet, despite the fact that attitudes toward alcoholism have much evolved in recent years, it is surprising how widespread is the equation, alcoholic = derelict, with all the connotations of sin, irresponsibility, and immorality such an image evokes. That this is true among the less educated strata of society might not be surprising, but in fact the reactions of supposedly more sophisticated individuals confronted with alcoholism in their own personal groups--or in themselves--show how much more prevalent the traditional view of impairment is than any more modern approach.

"My husband can't be an alcoholic. He's never missed a day of work or laid a hand on me..."

"I can't be alcoholic. I only drink after five o'clock in the evening and then only the best wines..."

"I'm not alcoholic, I went to the best schools and belong to the most elite intellectual milieu..."

These are some of the spontaneous statements spoken by individuals when the problem threatens too close to home. Anything but an alcoholic. Immediately the age-old picture of the drunken bum, dressed in rags, smelly and incoherent, springs to mind, bringing with it the whole underside of our hygienic, responsible, work-ethic society.

For a woman, identification with this model has even worse consequences than for a man. First, this is due to the higher standards required of women in their social behavior. They may work in a man's world, but they must not lose their femininity and must not lose their ability to fulfill their role as "civilizers." Secondly, a woman is judged all the more severely within this framework because in some ways she is already considered impaired--just because she is female and the feminine is valued less than the masculine in

most cultures. As long as she remained within her allotted role, this innate impairment at least made her eligible for lifelong support by a man. But as a drunk, not only has she fallen further than the man but she has also flaunted the benevolence of masculine protection.

The Dry Moral Model

In this framework, alcoholism is a moral problem that only occurs because drinking occurs. The alcoholic behaves immorally because he drinks, but if there were no alcohol available, the problem would be eliminated. Alcohol itself is the cause but the individual, unlike the drunk in the preceding model, is at least responsible for deciding to drink or not. As very few people can tolerate the effects of alcohol simply because of its intrinsic, mind-changing qualities, it is better to make alcohol unavailable and to make of any drinking a sinful activity.

In the extreme, this is a collective view that aims at changing society--in order to avoid the need to reform individuals. The treatment of alcoholism under this model consists mostly of social and legal measures brought to bear on the individual to make one feel guilty for going against the "right" collective way. (On an individual level it might be treated by the well-meaning person hiding the booze to prevent the alcoholic from making the wrong choice. -Ed.)

Comment:

In our society the teetotalers are rare and the temperance groups are in the minority. The one time the dry moral model prevailed in our culture was during the Roaring Twenties, when Prohibition was in full swing. Unfortunately, the tensions between the two conflicting social norms--the traditional, puritan Victorian standards of the 19th century and the new post-war outbreak of the dark side--was too great for many people. A writer such as F. Scott Fitzgerald, going from the peak of alcoholic glamour and glory to the depths of alcoholic despair is just one of the more well-known examples of what a whole society experienced. And even in the case of Fitzgerald, it is interesting to note that while he is looked upon as a tragic example of a talent succumbing to the dark side, his wife and drinking companion, Zelda, was simply considered crazy and benefitted from little of the romantic aura that the public created around the alcoholism of her husband.

In general today, teetotalism as a way of life continues to provoke its opposite--alcoholism. A good example is that of Dr. Bob, one of the cofounders of AA. He grew up in a small New England town of "intelligent, hard-working, church-going parents" who frowned upon the use of alcohol, as did the other members of the community. Dr. Bob was obliged to attend at least four church services a week and vowed, when old enough to leave home, never to set foot in a church again. This rebellion against such rigid moral standards eventually led him into chronic alcoholism.

The principle difference regarding women is that a rebellion in the form of drinking has even more serious consequences because the woman's role in a dry fundamentalist culture is more rigidly defined by conventional virtues than it is in a more "open" society.

The Wet Moral Model

From this point of view, alcoholics are people who cannot hold their liquor or do not obey the rules of a drinking society. Alcoholism is not a moral failing in itself but rather an unacceptable form of drinking behavior, and alcoholics are guilty of antisocial behavior that often ruins the enjoyment of "good" drinkers. The cause as to why some people act this way is mysterious.

The treatment consists of getting the alcoholic to drink responsibly. It does not consist in getting him to stop altogether, for that would be as antisocial as alcoholism itself. This goal of moderate drinking should be achieved through various rewards and punishments, such as pressure and advice from the family, doctor, and friends, changing jobs, exercise, and different suggestions on how to drink less or "better." The prognosis is considered good if the right rewards and punishments are found, otherwise the prognosis is gloomy, and if the alcoholic cannot learn to drink like a normal person, he may be relegated to the ranks of the impaired. People competent to apply this treatment are all moral members of society.

Comment:

This model of alcoholism is probably the most widespread in our culture. For the person suffering from alcoholism, it is also the most treacherous, for it does not acknowledge the objective possibility that alcohol may in itself be bad for certain individuals. Instead, it puts the blame on the drinker, whose inclusion in normal society depends on him doing exactly that which he cannot do – that is, drink normally.

While in the dry moral model the "good" and "bad" alternatives are clearly stated in terms of opposites that apply to everyone, in this model it is not even recognized that such opposites could exist. As a point of departure, drinking is considered as a good thing for everyone. Thus the opposition that exists within actual drinking patterns--addictive versus moderate drinking--is for the most part denied. As a result, those who are adversely affected by alcohol must find fault with themselves alone, rather than question the validity of a social norm that promotes the use of alcohol for everyone. The situation ends up being just as one-sided as in a dry culture where alcohol is banned for everyone. In neither case is the individual taken into consideration.

In such a culture, forms of acceptable drinking may vary from one social group to another. Among the working class, it is important to drink "like a man," which usually means a large quantity. It is alright, even admired, if the drinker gets exuberant and full

of bravado as long as he continues to function in other areas of his life. "Tying one on" is part of being virile and a man who can't hold his liquor loses in status among his male friends.

In another case, a man should know his wines (and single-malt scotches) and drink like a gentleman. Being drunk is not considered a particular sign of virility. On the contrary, it may reveal a lack of breeding and manly control. But not drinking at all is considered even more antisocial and reveals a lack of education in the "finer things of life."

For the woman this picture changes a bit. Even in the drinking society, women can still not drink and feel less pressure than their male counterparts, for whom alcohol and virility are so closely allied. On the other hand, the woman who drinks too much, or wrongly, is judged more critically. While the alcoholic man may be advised to drink less and be reinforced with all sorts of rewards and punishments to help him achieve this impossible goal, the alcoholic woman usually finds herself being only punished, and more severely than the man. (One statistic reveals that 90% of husbands leave their alcoholic wives, while only 10% of wives leave their alcoholic husbands. -Ed.) For, whatever her class, she should drink "like a lady" and somehow there seems to be universal agreement on what this means. She should not get drunk, not cause trouble, not depart from the image of ideal demure womanhood that has prevailed since the Virgin Mary came to represent all respectable womanhood.

It is quite alright for a woman to be a little tipsy, particularly if she is young and attractive, for that goes along with being a harmless and irresponsible sex object. It is not alright, however, to get aggressive or loud, or in any way conspicuous because that is not ladylike. The assumption, therefore, under the model of our drinking society is that although women may they do not have the right to get drunk. Somehow the same substance, alcohol, should be controlled or directed by the drinkers so that it provokes effects that correspond to their sex and station in life.

The Alcoholics Anonymous Model

The AA model differs from the three preceding in that it addresses only the alcohol problem in itself and does not purport to judge alcoholism from a general cultural standard. It consists of lay people--former alcoholics--whose direct experience of alcoholism gives them a common "expertise" and basis for common recovery.

According to AA, alcoholism is defined as an illness which is both progressive and incurable. The causes are threefold, including a physical, emotional, and spiritual aspect. But while alcohol is considered to be poison to the alcoholic in AA, it is not so for other people. AA has no opinion about alcohol in society at large. The behavior of the alcoholic--loss of control and compulsive drinking--is symptomatic of his illness. The treatment consists of total abstinence and continuing involvement with AA, a fellowship

of recovered alcoholics.

AA members consider themselves to be best qualified to help the alcoholic because they, unlike outsiders (i.e., non-alcoholics), can understand his world and speak his language in a way that supports his efforts while challenging his defense mechanisms from an "inside" position.

In comparison with the other lay models, the AA concept is the only one with any large-scale success in helping alcoholics. Among the reasons for this is first of all the fact that AA is neither fatalistic nor moralistic. It does not consider that drunks have dropped out of the human race and must be treated as hopeless, if pitiful, cases. Nor does it consider them to be wilfully immoral or antisocial. It considers them sick, and by speaking of an illness, it takes away the moral guilt from the individual. It says that alcoholism, like any disease, is ego-alien, something that strikes from outside and that strikes all sorts of individuals regardless of moral virtue or social standing. One may feel unfortunate in having such an illness but there is no point in wasting energy on self-blame. The important thing is to recognize it and assume responsibility for recovery.

In brief, the AA model offers some hope, whereas the other lay models offer only a pessimistic prognosis. AA also restores some dignity to the individual by releasing him or her from the status of moral dependent. Lastly, because it respects the right of other people to drink, it frees the alcoholic from the conflict of having to choose between belonging to society and getting sicker or being abstinent at the price of ostracism.

Comment:

...Even as late as 1960, women in AA were considered pioneers in a man's world. At that time the membership claimed one woman for every six men, statistics that corresponded more or less to those of the public out-patient clinics. Yet doctors and psychiatrists in private practice claimed then, as they still do, that women alcoholics outnumber the men by far.

Today, some 20 years later, women in AA are not such exceptions and there is probably no group that would attempt to bar them. The statement in the AA preamble that "the only requirement for membership is a desire to stop drinking," has become increasingly true. As AA, originally an all-white male group, has embraced alcoholics of other nationalities and other races, so has it opened its doors to women and people of any sexual identity. While social barriers regarding race, sex, and education continue to yield only to the force of law in the outside world, within AA the force of an illness has created a natural democracy.

The Professional Models

The next four models include the psychological-analytical points of view of the

present time. As they exist today, they show fewer successful results but continue to wield more influence in the field than most other forms of treatment. Indeed, the very contrast between the results of a group of "amateurs" such as AA and those of the "experts" is one of the elements that provoked my interest in the subject, together with the fact that, on the whole, professional models tend to maintain the notion that women alcoholics are not only rarer but somehow more insane, if not more hopeless, than men.

The Old Medical Model

According to this model, which has probably existed ever since the first drunk consulted a doctor, alcoholism is a serious and eventually fatal disease. Alcoholics generally destroy their bodies and their lives by drinking so much, and this is a kind of immoral behavior that distinguishes their illness from more "neutral" ones. The cause of their illness is excessive drinking but no one knows why the alcoholic is driven to drink and it seems mostly a question of lack of will power.

Medical treatment of the alcoholic consists first of all in attention to his physical condition, particularly if he is in a toxic state. This demands attention to such problems as dehydration, electrolyte imbalance, nutritional deficiency, and cirrhosis of the liver. Medication should be given to ease withdrawal symptoms. The treatment should also include warnings and scare techniques aimed at frightening the alcoholic enough about his drinking so he does not undo the work of the physician. These techniques should be reinforced by family members and society who have the right and even duty to police and censure the alcoholic's behavior "for his own good."

The goal of successful treatment is to reintegrate the alcoholic into normal society by getting him to drink "normally." Unfortunately, the prognosis, according to the medical point of view, is poor because the alcoholic will not take care of himself and usually cannot grow up enough to manage responsible drinking. On the contrary, the moment he is released from medical vigilance he tends to undo all the doctor's work by drinking again, excessively and self-destructively. If this happens, then the doctor may become so discouraged at seeing his efforts continually sabotaged that he relegates the alcoholic to the ranks of the hopeless and "impaired."

Comment:

This attitude and the treatment that arises from this model are common currency among doctors today, despite the evolution of a new medical model which corresponds better to research in alcoholism over the past thirty years. Although a medical model, it is saturated with moral values that do not belong to the generally admitted domain of medicine.

Within the area of alcoholism, traditionally accepted objectivity gives way to what are basically the attitudes of lay people. Once the immediate medical problems are dealt with, the doctor becomes a representative of ordinary social morality. In trying to get the

alcoholic to drink "normally" he mainly reflects the wet moral model of our culture, rather than staying within his own medical ethic which would admit that, in most major illnesses, recovery is desirable but restoration to the former state of health very often impossible. *The introduction of a non-medical goal, the restoration of social drinking which then cannot be achieved, has tended to demoralize both the doctors who try and the patients who try and fail. (Quoted from Siegler and Osmand.)*

One of the main reasons for the persistence of this strangely ambivalent, half-medical, half-moral model is the simple fact that very few medical schools offer any comprehensive studies on alcoholism. Because there is so much contamination of general social attitudes in their own reactions, they tend, regarding men and women alcoholics, simply to transfer the double standard from outside their field to within it. Thus, women alcoholics are seen as a little bit more immoral, a little bit more hopeless. They are more often given pills to quiet their nerves, sometimes leading to a second addiction. But most often, if they have an alcohol problem, they will hide it from the doctor and he will collude in this denial, for women simply should not be alcoholics and he cannot separate his personal image of womanhood from his medical task to detect and treat an illness.

The New Medical Model

Within this framework, alcoholism is a progressive, often fatal disease. It occurs because alcoholics have a physical intolerance to alcohol that leads to addiction, and most behavior of the alcoholic stems from a need to control withdrawal symptoms originating from such an addiction. There are also extra-medical factors that contribute to tip the scales and make alcoholics out of people who have this sensitivity to alcohol.

Treatment for the alcoholic includes any necessary medical means to help detoxify and restore health as much as possible. It also includes any means, such as Antabuse, which help maintain abstinence from alcohol, for unlike the old medical model, the new one postulates that until an actual cure is discovered, alcoholism can and should be arrested through the only means possible, which is total abstinence. The prognosis for getting over the illness is not very good, for there is as yet no pill or other medical means discovered that takes away the alcoholic's sensitivity to alcohol. But the prognosis for arresting and living with the illness, as people live with but are not cured from diabetes, for example, is good. Meanwhile, research goes on and medical science hopes to provide new information and treatments.

Doctors using this model recognize the need to enlist the help of psychological and social workers in their responsibilities, but they do not give up treating an alcoholic who has had a relapse and "pass the buck" to the custodians of morals and charitable works.

This model emerged officially in 1956 when the American Medical Association recognized alcoholism as a disease. The shift from the ambivalent moralistic medical standpoint to one that is more purely medical, with its emphasis on alcoholism as an

illness and alcoholics as patients, its hope for further cures through research, its realistic acceptance of the need for abstinence--all of these were brought about in part by pressure from AA and in part from a general change in attitudes. It certainly has the advantage over the old model in that it claims within its medical authority to treat the physical problem but does not claim jurisdiction over other aspects, thus freeing the alcoholic to seek medical help without fearing the moral condemnation that society is already all too willing to offer.

Comment:

In principle, the attitude toward women alcoholics would be the same as that toward men drinkers. That is, they each have an illness and gender makes no difference. But one doctor I interviewed, an AA member as well as an enlightened modern physician, could not help admitting with a sheepish smile. "In spite of all I know medically about alcoholism and all I know from my own experience that it is not a moral question, still the one time I saw my wife drunk I found it much more repulsive in her than in any of my old alcoholic men drinking partners."

At least he is aware of his own reactions and in practice he, like many doctors today, seeks first of all to treat the alcoholic like a sick person. In hospitals all over Europe and America, for every physician lecturing on the lack of will power and immoral behavior of alcoholics, there are also others who patiently and repeatedly exert all their medical know-how to relieve the suffering, promote research, and seek the system of support outside of medical authority that will help maintain the alcoholic's sobriety once he is out of the hospital.

The Traditional Psychoanalytic Model

According to this model, alcoholism is simply the symptom of a deep underlying neurosis, and alcoholics are infantile personalities whose behavior expresses symbolically unconscious conflicts which must be analyzed and traced back to early emotional experiences. If these are elucidated then the patient should be able to give up excessive drinking and achieve a more mature attitude toward life. The only people therefore competent to treat alcoholics are trained analysts or psychologists. But the prognosis is poor, since alcoholics are usually so infantile that psychotherapy may be needed for a long time before they grow up.

This model dates from the beginning of work with the unconscious in the latter 19th century. In fact, its actual use has been limited, due to both expense and lack of availability of such expertly trained specialists. Furthermore, when it has been used, it has had a lower success rate in helping alcoholics than any other method, professional or lay.

However, basic psychoanalytic theory has certainly had the most influence on

professional approaches to alcoholism. In various forms it is found reflected in almost every psychological or psychiatric approach.

Comment:

(After much discussion not reproduced in this version...) The old psychological-analytic models fall into the same trap as those doctors who still work with the old medical model. That is, they approach alcoholism with their professional training but quickly get caught in the wider social prejudices that reflect more the lay view of impaired and immoral beings than a professional view of suffering patients. With this unspoken set of values, it is not surprising that their attitude toward women alcoholics is either more judgemental or just plain superficial.

New Psychological Models

...In this approach, it is generally admitted that the best solution is a combination of personal, one-to-one therapy, family discussion, and maintenance through a support group such as AA. Many of the findings of these professionals who have specialized in addiction and alcoholism are, in fact, much closer to the AA and Jungian attitudes, for they emphasize the importance of spirit as a primary aspect of alcoholism and relationship as a prime factor in the cure.

Comment:

...Most professionals agree on certain main points: that alcoholism comes from a combination of personal and environmental factors plus exposure to the liquor; that the personal causes include repression of unacceptable feelings, escape from painful ones, and creation of pleasant ones; that treatment consists first of all of abstinence and then of various psychological and social supports.

The Family Interaction Model

This last model for alcoholism is the most recent. It holds that alcoholism is a kind of family interaction in which one person plays the alcoholic and the others play complementary roles such as the martyred wife, the neglected children, etc. The behavior of the alcoholic never stems from strictly personal or psychological motivations but must always be seen as one in a series of moves in an on-going family "game." As these games are "circular and reinforcing," it makes no sense to ask about the precise play. In general, certain family traits are transmitted from one generation to the next and the roles predetermined so that their distribution is more or less accidental.

Comment:

This model owes its origin largely to the work of Claude Steiner, author of *Games*

Alcoholics Play. Practically speaking, it has had little effect because it has the same handicaps as the old psychological-analytic models: it is expensive and requires very specialized personnel. But its theoretical impact, like that of psychoanalysis, has far outreached its practical application. It has opened the doors to more interest in the total family situation, recognizing that those who live with alcoholics are apt to be as disturbed as the alcoholic and that changes in one must bring about changes in the other.

This conclusion is not entirely new. Al-Anon, the group for relatives of alcoholics in AA, was formed out of just this realization. Jung too, repeatedly emphasized that any individual neurosis or unconscious conflict contaminated other people as well.

Conclusion

Altogether the models presented above cover the general attitudes and ideas about alcoholism in men and women that prevail today. None is absolutely pure. Most draw on others to reinforce their own point of view. For instance, the old medical model uses the morality of the impaired or wet moral model when its own expertise comes to an impasse; the new medical model uses the resources of AA; the psychological-analytic models use AA, the new medical model, and psychological premises belonging to traditional psychoanalytic theory.

What all of the models have in common is a certain attitude toward women alcoholics. As separate entities they are mostly ignored. When their existence is recognized, they are considered more impaired, more immoral, or sicker than the male. While in the worst of cases, a man still has the right to be called an alcoholic and thereby benefits in the very least from a certain pity, a woman who drinks excessively seems more often considered to be bad than sick. Her sex counts against her even more than her problem. The exception to this is found in AA, although as was seen, this has not always been the case. There are also exceptions among professionals who have made it their business to study the problem more openly.

A GUIDE FOR THE FAMILY OF THE ALCOHOLIC

The family's best defense against the emotional impact of alcoholism is gaining knowledge and achieving the emotional maturity and courage needed to put it into effect.

Individuals who may be capable of assisting alcoholics outside the family may become confused, destructive persons if a member of their own family is an active alcoholic. This is especially true if the drinking alcoholic is the husband or wife.

The "next of kin" or person most responsible for the alcoholic may need more assistance and counseling than the alcoholic if an effective recovery program is to be launched. Alcoholism is an illness, but one which has tremendous emotional impact upon the immediate family. Those most affected by the alcoholic are the spouse, parent, sister, brother, and child. The more distorted the emotions of these persons become the less adequate their help will be. The interaction may and often does become destructive rather than helpful.

For example, wives may find themselves blamed for everything that is wrong in an alcoholic marriage. This may reach the point where they may fear this is true. Yet alcoholism is an illness. The wife is no more responsible for alcoholism than she would be for the existence of diabetes or tuberculosis in her husband. No wife ever made her husband an alcoholic, therefore no wife can be held responsible for his recovery. However, by lack of knowledge she may allow the illness to go unnoticed. By lack of adequate understanding and courage she may acquiesce in the development of the disease. For the existence of alcoholism the wife is not responsible, but she can abet the husband avoiding treatment, or take steps which may lead to earlier recovery, though this cannot be absolutely assured.

This same principle holds true for all members of the family, especially the one person upon whom the alcoholic ultimately depends. This primary person in the alcoholic's life can not "treat" the illness. No doctor should treat his own serious illness, and few will ever act as physician for a member of their immediate family, especially spouse, parent or child. As alcoholism progresses relatives become involved emotionally. The best help they can give initially is to seek help and treatment for their own situation so that they will not play into the progressive illness pattern of the alcoholic and thereby contribute to the progress of the illness rather than recovery. The mistakes made by well-meaning family members are almost unbelievable and often make recovery most difficult for the patient.

In the beginning it must be understood that a family may do everything known or thought to be right and the illness might go unchecked. However, if a family is willing to learn the facts about alcoholism and put them into effect the chances of recovery are greatly increased. In fact the best way to help any alcoholic recovery is to remove

ignorance, acquire an adequate attitude based on knowledge and have the courage to practice these principles when dealing with the alcoholic. To begin in the usual manner of attempting to force the alcoholic to stop drinking without first learning and changing one's own self will simply make the matter worse.

Initially we must understand that the problems of alcoholism do not lie in the bottle but in persons. However, recovery does not begin until the alcoholic is able to break away completely from the bottle and practice continued abstinence. Recovery is also similar to the construction of a Gothic arch. There are unseen foundations, many persons may lay various stones in the arch but the keystone must be put in place by the alcoholic or the structure fails. No one can do for the alcoholic what must be done by the alcoholic. You cannot take the patient's medicine and expect the patient to benefit. Choices must be made and action taken by the alcoholic of his/her own volition if recovery is to occur on any permanent basis.

It is appalling how well the alcoholic controls the family, especially the wife, husband, or mother. The alcoholic drinks again and again. The family screams, cries, yells, begs, pleads, prays, threatens, or practices the silent treatment. It also covers up, protects and shields the alcoholic from the consequences of the drinking. If the alcoholic continues to act like a little god it is because the family is inadequate in opposing this attitude and abets the preservation of the illusion of omnipotence.

In the preservation of this omnipotent neurosis the alcoholic has two primary weapons. The family must learn to defend against these two or become virtual slaves to the illness, thereby creating for themselves emotional or mental illness of no small proportion.

The first weapon is the ability to arouse anger or provoke loss of temper. If the family member or friend becomes angry and hostile this person has been completely destroyed insofar as ability to help the alcoholic is concerned. Consciously or unconsciously the alcoholic is projecting an image of self-hatred onto the other person. If it is met by angry, hostile attacks it is thereby verified and the alcoholic in his/her own mind justifies the former drinking and also now has an additional excuse to drink in the future. The gods first make angry those whom they wish to destroy and the alcoholic has a long experience of acting like a little god/goddess. If your temper is lost all chance of help at this time is thrown away, at least for the moment.

The second weapon of the alcoholic is the ability to arouse anxiety on the part of the family. Thereby they are compelled to do for the alcoholic that which can be done only by the alcoholic if the illness is to be arrested and recovery initiated. A "bad check" is a good illustration for this principle. The check may be written before, after, or during the drinking period. The alcoholic does not have money in the bank to redeem the check. When the anxiety of the family members becomes too intense as regards what will happen if the check is not redeemed they secure money and cover the check. This

relieves the anxiety of the family and the alcoholic but it establishes a pattern for the alcoholic in the area of problem solving. The alcoholic now learns that his/her family is not going to let him/her suffer the consequences and may expect this to be done whenever a bad check is written.

More important still, if the family redeems the check the alcoholic cannot redeem it and therefore his failure is made permanent. The alcoholic cannot undo what others have already undone. This in reality increases the alcoholic's sense of failure and guilt, and increases the family's sense of hostility and condemnation of the alcoholic. Thereby the alcoholic is doubly injured. The criticism, scolding, and moralizing add to the alcoholic's guilt and resentment against self and family. The entire situation is thus made worse. The family did not write the "bad check" but in "making it good" they gave a form of approval while they verbally condemned the same act.

Alcoholics are propelled along the progress of the disease when the family is unable to cope with anxiety aroused by the alcoholic. This is in effect part of the illness. Neither the alcoholic nor his/her family is able to face reality. The writing of the bad check and the redemption of it by the family are but two sides of the same problem. The alcoholic can never learn to solve his/her own problems in a responsible way if the anxiety of the family compels the removal of the problem before the alcoholic can be brought to face it and solve it or suffer the consequences. This "home training course" increases the alcoholic's irresponsibility, and thereby increases the hostility, resentment, and tension between the "patient" and the family.

Anger and anxiety must be avoided by the family or the family contributes to the progress of the illness. The family members must first learn to cope with their own problems before any beneficial effects can reach the alcoholic. This requires help just as any serious illness requires help outside the family from doctors, nurses, etc. The alcoholic can continue to deny that he has a drinking problem and that he does not need help as long as the family provides an automatic escape from consequences of drinking.

Help for the alcoholic and for the family should be sought outside the circle of relatives, friends, and neighbors. Preferably it should come from persons trained in this area of work or from experienced members of Alcoholics Anonymous or Al-Anon. Home remedies for alcoholism are notoriously injurious. The illness is so serious it will shorten human lives ten to twenty years if it goes unchecked.

One of the more serious failures in approaching the alcoholic is the inability to understand the meaning of love. The wife/husband has no more right to say, "If you loved me you would not drink," then she/he has the right to say, "If you loved me you would not have tuberculosis." Excessive drinking reveals the existence of the illness. Illness is a condition, not an act. It is not far from the truth that the alcoholic himself/herself feels unloved and unwanted and not without reason. Love cannot exist without the dimension of justice. Love must also have compassion which means to bear

with, or to suffer with, a person. Compassion does not mean to suffer because of the injustice of a person. Yet injustice is often suffered repeatedly by families of alcoholics.

Alcohol is an anesthetic. When the alcoholic drinks he/she anesthetizes the pain. This is the pleasure of alcoholic escape. It is a problem-solving device to relieve unpleasantness, anxiety, tension, and resentment. When the alcoholic drinks pain is avoided for the time being but pain, anxiety, tension, and resentment are increased severely in the family. When the alcoholic sobers up there is little desire to suffer the consequences of drinking. Remorse and guilt now compel the alcoholic to prostrate himself before the family, beg for mercy and promise that it will never happen again. Or the reverse side of the coin may appear, complete unwillingness to discuss what happened. Each attempts to gain the same goal, the avoidance of the consequences of drinking. If the alcoholic succeeds by either means his pain is again avoided and the family again pays the price.

Love cannot continue to exist in this type of action and interaction. The alcoholic uses alcohol to escape pain by drinking and learns how to use the family to escape the pain of the consequences. The family suffers when the alcoholic drinks and then suffers the painful consequences also. If the family bears the brunt of the drinking and absorbs its consequences then compassion cannot exist. Compassion is not suffering because of the unwillingness of the other to suffer. If this condition is allowed to continue by the family, love is gradually destroyed and replaced by fear, resentment, and hatred. The only way love can be retained by family members is by learning not to suffer when drinking is in progress and refusing to undo the consequences of drinking. Anything less than this is not compassion and any relationship without justice and compassion is not love.

Knowledge of the nature of alcoholism as an illness, and the courage to live by this knowledge, are essential if fear is not to replace love in marriage. Unfortunately many families suffer repeatedly from drinking and its consequences, thinking this is required if they love the alcoholic. The tragic result is that alcoholism is thereby encouraged and fear and resentment take over human emotions. This is why family members, especially the next of kin of the alcoholic, need help if the disease is to be arrested and recovery initiated. Otherwise the entire family becomes ill emotionally. This condition is but another symptom of the progression of the disease.

Before leaving this area of discussion it is necessary to state that there are wives who need alcoholic husbands and husbands who need alcoholic wives to gratify their own neurosis. This may be true of parents, or brother and sister as well. The family must always take a close look to be certain this need does not exist. Masochism is the need to suffer in order to find a sense of worth or value in life. It is all too often seen in wives and mothers of alcoholics who use an alcoholic in order to suffer. Some persons are sadistic and must have someone available to punish. An alcoholic serves this purpose well. Others like to dominate and control other people. Alcoholics provide a fit subject for exercising such control and dominance. If any of these three conditions exist then the

non-alcoholic may have a far more serious illness than alcoholism and this must be treated and arrested before it is possible for this person to do other than contribute to the progress of alcoholism.

A wife, husband, or family member needs to take a good look at his/her own involvement with the alcoholic before any steps should be taken to aid in abstinence from alcohol. In most instances a change in the family is necessary before a change in the alcoholic may be anticipated. To do nothing is impossible. As a general rule to do nothing means to give in to the situation, to be run over and exploited and to fight back in quiet, passive, destructive ways. The family always interacts with the alcoholic. The important thing is to learn which interactions are destructive and which might be creative and to then have the courage to attempt a creative approach. The change must begin with the non-alcoholic. The alcoholic will not seek help in recovery as long as the alcoholic needs are met within the family.

A frequent mistake is to attempt to protect the alcoholic from alcohol by bending every effort to keep him/her away from the bottle and the bottle away from him/her. This cannot be achieved short of incarceration or commitment and even under these circumstances some manage to find alcohol. It is hard for the family to learn not to try to prevent the drinking, but any battle they win today over the bottle will be fought again tomorrow. Winning the war against the overall illness is the objective. Motivating the alcoholic to have a desire to stop drinking and to accept help in this effort is far more effective than trying to take the bottle away. The only way this motivation can be accomplished is by allowing the drinking with all its consequences to become so painful in itself that the alcoholic will seek escape from the intolerable pain caused by drinking. This means offering the alcoholic love and understanding in his/her sobriety but not protecting him/her from the bottle or the consequences of drinking. This means suffering, but suffering with him/her in pain of the consequences, not by becoming the means of escape from them. This means the courage to suffer embarrassment, small or great financial deprivation, loss of job, and in some instances temporary separation. We must offer greater joy in sobriety and allow the painful consequences to become acute if we anticipate ultimate long-range sobriety.

Recovery from any serious illness may involve considerable time and on occasions there may be relapses. The world has not come to an end if after a period of sobriety the alcoholic drinks again. If the family does not panic and revert to the former destructive ways of dealing with the problem the "slip" may be used to advantage and become an additional reason for the alcoholic to accept the fact that the first drink must be avoided.

In the process of recovery, it is not reasonable to expect all compulsive action to disappear overnight. The alcoholic may become as engrossed in his/her treatment and recovery as he/she was a short time ago in the drinking. This is especially true if he/she finds and accepts AA. The alcoholic husband or wife may now spend each evening with these recovered alcoholics. The best bet against resentment in this area is for the spouse to join Al-Anon, and attend open AA meetings. Al-Anon, the group for family members

of the alcoholic, is just as vital to the emotional recovery of the family as AA is to the alcoholic. It attempts to provide insight and understanding into the problems of its own members. If a family wishes the drinking member to stop drinking and join AA they might first try Al-Anon and attend open AA meetings themselves. Recovery from alcoholism involves the healing of the emotional illness of all members of the family. If the alcoholic recovers emotionally and the family members do not there may be a serious breach in the family structure. The family must grow up emotionally before, during, and after the alcoholic recovers or serious estrangement may occur. The time for the family to begin working out their own emotional recovery is now.

The place to begin in helping an alcoholic to recover is with self. Learn all you can. Put it into practice, not just into words. This will be far more effective than anything you attempt to do for the alcoholic.

In summation there are several rules of thumb which may be observed:

1. Learn all the facts and put them to work in your own life. Don't start with the alcoholic.
2. Attend AA meetings, Al-Anon meetings, and if possible go to a mental health clinic, alcoholism information center, or to a competent counselor who has had experience in this field.
3. Remember that you are emotionally involved. Changing your attitude and approach to the problem can speed up recovery.
4. Encourage all beneficial activities of the alcoholic and cooperate in making them possible.
5. Learn that love cannot exist without compassion, discipline and justice, and to accept love or give it without these qualities is to destroy it eventually.
6. Don't lecture, moralize, scold, blame, threaten, argue when drunk or sober, pour out liquor, lose your temper or cover up the consequences of drinking. You may feel better but the situation will be worse.
7. Don't lose your temper and thereby destroy yourself and any possibility of help.
8. Don't allow your anxiety to compel you to do what the alcoholic must do for himself/herself.
9. Don't accept promises, for this is just a method of postponing pain. In the same way don't keep switching agreements. If an agreement is made stick to it.
10. Don't allow the alcoholic to lie to you and accept it for the truth, for in doing so

you encourage this process. The truth is often painful, but get at it.

11. Don't let the alcoholic outsmart you for this teaches him/her to avoid responsibility and lose respect for you at the same time.

12. Don't let the alcoholic exploit you or take advantage of you for in doing so you become an accomplice in the evasion of responsibility.

13. Lastly, don't try to follow this as a set of rules. It is simply a "guide" to be used with intelligence and evaluation. If at all possible attend Al-Anon meetings and seek good professional help. You need this therapy as well as the alcoholic.

14. Above all, don't put off facing the reality that alcoholism is a progressive illness that gets increasingly worse as drinking continues. Start now to learn, to understand, and to plan for recovery. To do nothing is the worst choice you can make.

The above is Al-Anon conference approved literature. The original pamphlet and others on the subject are available from:

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ADULT CHILDREN OF ALCOHOLICS

The following is excerpted from Adult Children of Alcoholics by Dr. Tim Cermak of the San Francisco V.A. Hospital.

Who is a Child of an Alcoholic (ACA)?

It is estimated that 28 million Americans have at least one alcoholic parent. The enormity of such a number is hard to comprehend. Perhaps it is easier to think that one out of every eight Americans is a child of an alcoholic, or co-alcoholic (CoA). Although as a CoA you may have felt alone, you are a member of one of the largest groups in this country.

These people are your brothers and sisters. They come from all walks of life. Some are college graduates and have successful careers, while many are alcoholics themselves or have become addicted to other drugs. Some are in jail. The deep bond between CoA's is forged out of sharing the common experience of fearing, loving, needing, and hating the alcoholic. The bond stems from having lived with an alcoholic parent as the center of their lives. If you want to experience that bond, look for it in the eyes of another ACA when you tell each other about your childhood. It is there in the understanding with which your story is greeted. Or it is there in the way another person's eyes have trouble meeting yours without becoming overwhelmed by the old pain. This is one of the common bonds you share.

What is Co-dependency?

Co-dependency should be distinguished from interdependency. When two people (or two nations) become interdependent, each gives the other power over their welfare. On the other hand, when two people become co-dependent, each gives the other power over their self-esteem. When someone fails you in an interdependent relationship, you can suffer from a loss of money, time, etc. However, when someone fails you in a co-dependent relationship, they have not lived up to your expectations, and you suffer a loss of self-esteem.

Co-dependents live according to a set of unspoken rules which validate and legitimize the belief that their sense of self-worth comes from how those close to them behave. In order to feel good about themselves, they direct their energy toward making others happy. They flatter themselves by saying they are loving, caring for, and saving another person. The truth is that they are trying to control other people's lives in an effort to make their own lives more secure. In the process, they give others a great deal of power over themselves.

When we are in a co-dependent relationship with someone who is doing well, it is

hard to imagine that the relationship is anything but a healthy alliance. This kind of situation permits two people, who are unable to feel good within themselves, to capture a sense of self-acceptance through their connection to each other. The cost of building one's own self-worth in this way increases as time goes on. The ties between co-dependents become constraints. Eventually, both partners feel imprisoned by their inability to tolerate rejection, and exhausted by the burden of responsibility for the other's security and happiness. Their intolerance of rejection literally locks them into the co-dependent relationship.

As both members of a co-dependent relationship become increasingly stressed, one usually can no longer continue the role and seeks some kind of relief. This person often finds that alcohol eases the tensions of the co-dependent life-style, making it more tolerable, and thus enabling its continuation. According to this view of co-dependence, all alcoholics are also co-dependent, and co-dependency usually precedes the alcoholism.

Once active alcoholism is established, the non-alcoholic's co-dependency also tends to take a turn for the worse. They find themselves unable to live with, or without, the alcoholic. In an effort to regain some control of their life, they try to beg, barter, or cajole the alcoholic to stop drinking. Their goal is to return to the earlier co-dependent relationship that had the appearance of working well.

Five Signs of Co-dependency

These symptoms, or signs of co-dependency, are discussed in Sharon Wegscheider's book *Another Chance*. The readers can look at themselves for evidence of their own co-dependency as they think of these signs.

Delusions

Co-dependents' lives are based upon a great deal of denial. They screen from their awareness the stress under which they are living, or they deny that it is doing them harm. They believe other people's happiness will lead to their own. They try to achieve security by decreasing their awareness of what threatens them, including the fact that they are living with an alcoholic. Finally, they believe the delusion that their behavior is normal.

Compulsions

A variety of compulsions can be found in co-dependents: compulsive eating, compulsive drinking, compulsive working, compulsive caring for others, and compulsive opposition to others. Whenever you sense that you have no choice about how you behave, you are in the grip of a compulsion. While in this state, you are less open to differing opinions; you are more rigid and certain. A fundamental co-dependent delusion is the denial that compulsions are bad for you.

Frozen Feelings

Whether emotions are repressed anesthetically by drugs or alcohol, or psychologically by blocking one's feelings, they are equally unavailable. Co-dependents deal with the risks and uncertainties of emotions by making them less available in thousands of ways. When emotions threaten to break down the barriers used to keep them under control, co-dependents feel compelled to keep them under an even tighter rein. The spontaneity linked to expression of healthy emotions is sacrificed in the drive for security. The delusion is that no harm is being done to one's heart and spirit by keeping feelings on hold.

Low Self-worth

A sense of one's value is earned by the act of making choices. A life driven by compulsion provides little basis for self-esteem. In order to foster a feeling a self-worth, you must be making choices on a continuous basis. Furthermore, the basis for these choices must be your own needs and feelings. Co-dependents often make their choices on the basis of what they think other people's needs are. They also tend to base their self-esteem on the behavior of an alcoholic, which tends to produce disappointment and a sense of failure.

Medical Complications

Recent surveys by major corporations have confirmed that co-dependents require medical care more often than other identified groups. The problems encountered include the whole range of stress related medical illnesses. It is easy to dismiss our physical ailments, such as hypertension and intestinal problems, as being unrelated to our general style of relating to the world. But, this is another co-dependent delusion. Stress eventually damages the human body, and being in a co-dependent relationship leads to increasing levels of unrecognized stress.

* * * * *

The characteristics of each of the five signs of co-dependency presented here can help you to identify any tendency in yourself to be co-dependent. Perhaps the definition of a co-dependent is best expressed by the saying that, when a co-dependent dies, it is their partner's life that flashes before their eyes.

Can Co-dependency be Overcome?

There is a distorted attitude about willpower that pervades all co-dependent thinking, feeling, and behavior. At the core of co-dependency is an overwhelming devotion to willpower. The idea of being able to overcome life's problems by sheer force of will is the central delusion. Co-dependency cannot be overcome, and only a co-dependent would

persist in such an effort.

The paradoxical nature of willpower has been recognized in the field of alcoholism treatment, at least since the birth of AA in 1935. Since all alcoholics are also co-dependent, it should be expected that recovery from both hinges on the individual's willingness to reassess his or her relationship with willpower.

A youngster was beaten by a huge bully several years his senior while walking home from school. Out of embarrassment, he made a deal with his friends that he would never let this happen again. The next day he ran an errand on the way home, which took him a different route. When he was asked if he beat up the bully that day, the boy explained that they had not met, but if they had, he would have made the bully pay dearly. The next day he stayed late at school, and the bully was nowhere to be seen when he ran home. This time his friends began to doubt that the boy could defeat the bully. They thought, perhaps, that he was really more afraid than he let on. The boy was determined that he would lick the bully or else. As the year went by and the boy continued to avoid meeting up with the bully, even he began to feel weak-willed. Eventually, he forced himself to challenge the bully, and was again soundly beaten.

Evidently, from the experience of the young boy in this story, willpower cannot change every reality. We don't have unlimited power to determine those things over which we have control and those things which we do not. Clearly, alcoholics are involved in trying to change how their bodies react to alcohol, thereby denying the existence of their illness. Diabetics might just as well try to exert willpower to control their blood sugar level, or you and I try to use willpower to counter the force of gravity after stepping off a cliff.

Co-dependents act as though they have the power to bring all manner of things under their control simply by their willing it to be so. Despite the accumulation of overwhelming evidence to the contrary, they continue this behavior. Non-alcoholic co-dependents believe they can get others to stop drinking by saying or doing just the right thing. They also believe that they can put aside their anger, and in doing so the anger will cease to exist. Every time their willpower fails to achieve its goal, their self-esteem falls (as was true for the boy in the parable). The typical co-dependent response to such failure is to redouble their efforts to make the impossible happen.

The co-dependent's efforts are all so noble. There is a song from *Don Quixote* entitled "The Impossible Dream" which could be the co-dependent's anthem. Willpower is revered, even worshipped, as the most laudable avenue toward self-esteem. What alcoholic has not repeatedly demonstrated an inability to control the effect of alcohol on his or her body, and then sought solace in the fact that at least he is locked in mortal combat with his or her problems? Willpower contains the seed of its own destruction when it begins to exceed the boundaries of what is possible. Alcoholics who try to defeat alcoholism by simply avoiding alcohol will eventually feel like the boy who is still

avoiding the bully. Then it becomes a matter of self-esteem to test oneself, usually by taking one drink. The alcoholic uses willpower again and again, to master the impossible, and the failure to do so is interpreted as a sign that one's willpower is still not strong enough.

The first step in recovery for any alcoholic is nicely stated by AA: "We admitted that we were powerless over alcohol and that our lives had become unmanageable." This admission strikes directly at the heart of co-dependency, and must be made in one form or another by every co-dependent interested in entering into recovery. Our powers are limited. We are not God. And the limits of our powers are frequently dictated to us by the world-at-large. We are powerless to determine what shall be in our power and what shall not. We are so very far from being omnipotent that it is frightening. Our lives cannot run smoothly by conscious control, which we use like a traffic cop trying to bring order out of a Mardi Gras crowd. Once the clowns and kings are put in a line, once the feelings and impulses are brought under "proper" control, it is no longer a Mardi Gras crowd. It is no longer life. Life cannot be managed because it is far too rich, too spontaneous, and too rambunctious to be fully understood by our thinking, controlling minds.

Co-dependency cannot be overcome. All efforts to conquer it only add fuel to an already raging fire. But we can free ourselves from being captive to our co-dependent patterns, just as alcoholics can free themselves from being slaves to their disease. This freedom comes only when we are willing to trust that our lives will turn out better when they are no longer managed, controlled, and constantly bullied by our willpower.

Characteristics of ACA's

The characteristics of ACA's are the characteristics of co-dependency. The list describing them is long and wide-ranging. No single person could possibly exhibit all these characteristics. As you browse through them, it is entirely up to you to try each one on to determine how well it fits. Those who are reading it, who are not ACA's, may find that the following descriptions also fit them. This should not be surprising. Co-dependency can occur in many ways; an alcoholic family is only one manifestation of the problem. The bottom line is this: If you feel that your life is described by many of the characteristics listed below, and one of your parents is alcoholic, then you should know that a blueprint exists for recovering your freedom and dignity from the past.

These characteristics should read as descriptions, and not as indictments. Initially, you may view many as deficits and liabilities. However, during recovery, you will learn that they can become assets once you develop the freedom to use them appropriately.

The characteristics of ACA's may include:

* *Fear of losing control.* ACA's maintain control of their feelings, their behavior, and try to control the feelings and behavior of others. They do not do this to hurt either

themselves or others, but out of fear. They fear that their lives will get worse if they let go of their control, and get uncomfortably anxious when control is not possible.

* *Fear of feelings.* ACA's have buried their feelings (especially anger and sadness) from childhood on and have lost the ability to feel or express emotions freely. Eventually, all intense emotions are feared, even pleasurable feelings, such as joy and happiness.

* *Fear of conflict.* ACA's are frightened by people in authority, angry people, and personal criticism. Common assertiveness, displayed by others, is often misinterpreted as anger. As a result of their fear of conflict, ACA's are constantly seeking approval, but they lose their identity in the process. They often end up in a self-imposed state of isolation.

* *An over-developed sense of responsibility.* ACA's are hyper-sensitive to the needs of others. Their self-esteem comes from how others view them, and thus they have a compulsive need to be perfect.

* *Feelings of guilt when they stand up for themselves instead of giving in to others.* ACA's sacrifice their own needs in an effort to be "responsible" and to avoid guilt.

* *An inability to relax, let go, and have fun.* Fun is stressful for ACA's, especially when others are watching. The child inside is terrified, exercising all the control it can muster to be good enough just to survive. Under such rigid control, it's no wonder spontaneity suffers, for spontaneity and control are incompatible.

* *Harsh, even fierce, self-criticism.* ACA's are burdened by a very low sense of self-esteem, no matter how competent they may be in many areas.

* *Living in a world of denial.* Whenever ACA's feel threatened, their tendency toward denial intensifies.

* *Difficulties with intimate relationships.* Intimacy gives ACA's a feeling of being out of control. It requires self-love and comfort with expressing one's own needs. As a result, ACA's frequently have difficulty with sexuality. They repeat relationship patterns without growth.

* *Living life from the viewpoint of a victim.* ACA's may be either aggressive or passive victims, and they are often attracted to other "victims" in their love, friendship, and career relationships.

* *Compulsive behavior.* ACA's may work compulsively, eat compulsively, become addicted to a relationship, or behave in other compulsive ways. Most tragically, ACA's may drink compulsively and become alcoholics themselves.

* *The tendency to be more comfortable with chaos than with security.* ACA's become

addicted to excitement and drama, which can give them their fix of adrenalin and the feeling of power which accompanies it.

* *The tendency to confuse love and pity.* As a result, ACA's often "love" people they can pity or rescue.

* *Fear of abandonment.* ACA's will do anything to hold on to a relationship in order not to experience the pain of abandonment.

* *The tendency to assume a black and white perspective under pressure.* The grey areas of life disappear, and ACA's see themselves facing an endless series of either/or alternatives.

* *A tendency toward physical complaints.* ACA's suffer higher rates of stress-related physical illnesses.

* *Suffering from a backlog of delayed grief.* Losses experienced during childhood were often never grieved for, since the alcoholic family does not tolerate such intensely uncomfortable feelings. Current losses cannot be felt without calling up these past feelings. As a result, ACA's are frequently depressed.

* *A tendency to react rather than to act.* ACA's remain hyper-vigilant, constantly scanning the environment for potential catastrophes.

* *An ability to survive.* If you are reading this, you are a survivor.

* * * * *

Claudia Black, in her book *It Will Never Happen to Me*, summarizes these characteristics in her set of three rules that govern alcoholic families:

Don't talk
Don't trust
Don't feel

Children of alcoholics learn at a very young age that their emotional, and even physical, survival depends on learning and following these rules. That was a reality. They were not imagining things.

As adults, they often fail to recognize that these rules are no longer necessary outside the alcoholic family. Instead, they rarely speak from the wellspring of simple truths within. They don't do anything so foolish or vulnerable as to trust, to really trust, other people, and they blindly maintain a tight rein on their feelings. The rules that once were the means of survival have become a noose that is slowly and inextricably squeezing the

life out of them.

Children naturally tend to develop a co-dependent view of relationships when raised in tense and chaotic circumstances. If you place total blame on your parents for teaching you to be overly responsible, you are still looking at yourself from a co-dependent perspective. Your own survival instincts also led you to discover a distorted view of your responsibilities. Unfortunately, your family intensified these distortions by supplying a model for you which promoted co-dependency as normal adult behavior.

As youngsters, we develop a co-dependent view of the world for the following reasons. Our evolutionary heritage provides us with a repertoire of biological and psychological mechanisms for getting adults to bond tightly to us. Babies are particularly satisfying to suckle and hold. They elicit relatively constant contact with their parents, unless their parents are intoxicated and insensitive to the intimacy the infant needs and might provide them. When a child's efforts to connect with those people, responsible for their safety and care, encounter alcoholic/co-dependent parents, the results are confusing and provoke intense anxiety. One moment the bond feels real; the next moment it is gone. At another time the bond is present, but consists primarily of anger. Often the family will treat the bond as real, even though the parent's thoughts and feelings are not truly present.

As children look out at the world of adults, they see giants and gods who literally have the power of life and death over them. A realistic assessment of the capricious, arbitrary behavior, which such giants demonstrate when intoxicated, is intolerable to a child. It creates such anxiety and hopelessness that further development becomes less possible.

On the other hand, one small distortion on the part of these children has the power to rescue hope and to keep it alive. Built into their developing minds is the omnipotent attitude that they are the primary cause of all the things that happen to them. If their parents treat them inconsistently, or abandon, or mistreat them, they tend to see themselves as causing their parent's behavior. In effect, children of alcoholics have a choice of seeing themselves either as saints in a world of sinners or sinners in a world of saints. If the stark reality of being at the mercy of a dangerous world were clearly understood, a child would have little hope of eventually gaining control of his or her life. On the other hand, those who accept the delusion that they are causing their parent's erratic behavior are left with the belief that they can eventually attain safety. They work hard to improve themselves in hopes of no longer causing their parent's drinking behavior. The hope is that they can live in Eden, if they can only grow up far enough, so they strive forever to eliminate their "badness."

If basic trust is not well-developed, hope becomes an acceptable alternative. However, if both trust and hope are missing, a child is far more likely to become a casualty.

The paradox for ACA's is that the co-dependent illusion of causing one's parent's alcoholism and being responsible for the resulting emotional/physical abandonment is useful during childhood, but it becomes a burden to adults. As a child, co-dependency helps safeguard the normal impulse to mature. However, to enter into full adulthood, the co-dependency stance must eventually be relinquished. The realities of childhood, at least, must be acknowledged. The process of dismantling this co-dependent illusion of omnipotence is called recovery.

In addition to Al-Anon and therapy, a growing body of useful literature is becoming available. A resource guide can be obtained from:

The National Association for Children of Alcoholics
P.O. Box 421691
San Francisco, California 94142

THE FAMILY TRAP

by Sharon Wegscheider

What is Chemical Dependency?

Some people worry about someone they care about who smokes pot. Others worry about someone who is taking prescription pills. Others worry about someone who drinks too much alcohol. The common bond between certain pills, pot, and alcohol is that each substance has the potential to develop a harmful chemical dependency. Chemical dependency can become a physical addiction. Addiction brings "self" destruction to the person who is addicted and "other" destruction to those around the addicted person. The effects on those around a chemically dependent person are negative and emotionally painful. The systems most affected by the dependency are families, work settings, school systems, and friendships. What is said about families in the following pages applies equally well to other systems of people.

This article may help you look at the ways people in these systems tend to react to the behavior of the chemically dependent person.

The Family as an Organism

Our first temptation upon meeting a troubled family is to list all of its problems, pick up more realistically solvable ones, and attack them one at a time. Once we have solved all the individual problems, we figure there would be no complaints. The family would be happy. They would not be troubled any more.

This would be analogous to treating medically all the physical symptoms of a patient and upon completion, considering him healthy. Health is something different from just the absence of illness.

Chemical dependency in one family member is not just one of many problems in this family. *Chemical dependency is a family disease and a primary disease within each family member.* The working of the family has a pathology about it directly related to the sickness of the chemically dependent person. Rather than just listing ingenious ways of erasing the chemical problem from the family, we must look at the dynamics of the whole family system.

The family is affected greatly by the chemically dependent person. His relationship to the mood-altering chemical contributes to the family illness before he goes to treatment. The chemically dependent person, on the other hand, is also greatly affected by the members of his family. To understand the phenomenon of chemical dependency occurring in a family we must look at what a family is in itself.

The family is an organism. Its parts are interdependent. The members of a family operate in a system. A system is a body of parts that work together. They may work together for peace and harmony. They may also work together for destruction. They may work together for survival.

A family resembles a mobile. A mobile is an art form made up of rods and strings upon which are hung various parts. The beauty of the mobile is in its balance and flexibility. The mobile has a way of responding to changing circumstances, such as wind. It changes position but always maintains connections with each part. If I flick one of the suspended parts and give it kinetic energy, the whole system moves to gradually bring itself to equilibrium. The same thing is true of a family. In a family in which there is stress, the whole organism shifts to bring balance, stability, or survival to the type of dynamic each of us entered when we came into a family.

In a chemically dependent family, each of these individual parts is affected by the growing dysfunction of the chemically dependent person. Each family member adapts to the behavior of the chemically dependent person by developing behavior that causes the least amount of personal stress. Just as the chemically dependent person is suffering from self-delusion in regard to the use of the chemical, so are the family members suffering from self-delusion. As the chemical disease progresses, each family member compulsively represents his/her feelings and learns to react with a survival behavior. This behavior serves to build a wall of defenses for protection from pain.

The chemically dependent person develops a unique defense system to protect the painful storehouse of repressed feelings.

The persons living around the dependent are living with both messages coming from the dependent person. There are the internal messages which are the uncomfortable sensations coming from the repressed feelings and the obvious set of defenses which are seen and heard by each family member.

Because of the system balance, each member of the family begins to respond to the dependent from a double-level position. Family members, like the dependent, begin to repress their feelings and also develop a set of defenses to protect them from further pain. Each member finds a survival role. Because the repressed feelings are unavailable to the dependent, there is very little chance that the rest of the family will be any more aware of their feelings. This growing action/reaction of the dependent and family is a self-deluded process. The family grows more out of touch with reality. As the compulsion grows between the dependent and the chemical, so does the compulsion grow between the dependent's behavior and the family's reaction.

The primary compulsion between the dependent and the chemical can be described as

1. primary
2. progressive

3. chronic
4. potentially fatal

What is a secondary compulsion in the family system becomes a primary compulsion for each member of that family. Each family member becomes locked into a set of rigid survival defenses and needs help to become aware of these compulsive behavior patterns.

Survival roles within the system can be characterized as follows:

- * Chief Enabler, Spouse, Parent, Co-worker
- * Family Hero, School Jock, Company Man, Social Nice Guy/Girl
- * Family Scapegoat, School Problem, Company Troublemaker, Social Jerk
- * Family Lost Child, Social Daydreamer, Company Drone, Social Loner
- * Family Mascot, School Clown, Company Joker, Social Cut-up

The Chief Enabler

The chief enabler is often the spouse or the parent of a chemically dependent person. It is the person who is closest and most depended upon by the dependent. As the illness grows, so does the involvement of the enabler. With the growth of the illness comes the increased repression of feelings and the development of a set of survival defenses for the enabler. *The role of the enabler in the system is to provide responsibility.* As the dependent increasingly loses control, the chief enabler makes more choices to compensate for the dependent's lack of power. The feelings of hurt, anger, fear, rejection, guilt, and pain in the enabler are compulsively protected with the wall of defenses composed of fragility, self-pity, manipulation, powerlessness, seriousness, and self-blame -- in short, *the wall of super-responsibility.*

The Family Hero

The family hero is the person who can see and hear more of what is really happening in the family and begins to feel responsible for the family's pain. If only the family would listen. The hero tries hard to make things better for the family and works diligently to improve the situation. Because of the progressive nature of the disease, the hero is always losing ground and feels consistently inadequate. This feeling of inadequacy is well hidden by the obvious success (visible) of the family hero. *The role of the hero is to provide self-worth for the system.* The feelings of loneliness, hurt, inadequacy, confusion, and anger in the hero is protected by a *wall of defenses composed of success, super-responsibility, specialness, working hard for approval, keeping it all together, and developing an independent life away from the family.*

The Family Scapegoat

The scapegoat is the one who is in the family public eye. The scapegoat has already learned in this family that one is not rewarded for who one is, but rather for how one

performs. This person does not want to work as hard as the family hero just to prove himself worthy, so decided to pull away from the family and look for good feelings of belonging elsewhere. Because of the repressed anger in feeling the need for this withdrawal, the scapegoat often gets much attention for the destructive ways in which this withdrawal takes place. Often it is in running away, refusing to be part of the family, getting pregnant, using chemicals, or just being stubborn and withdrawn. *The role of the scapegoat is to provide distraction and focus to the system.* The feelings of anger, hurt, loneliness, fear, and rejection in the scapegoat are compulsively protected by the *wall of defenses composed of chemical use, sullenness, acting out, defiance, withdrawal, and strong peer values.*

The Family Lost Child

The lost child is the one who has learned not to make close connections with the family. This person spends much time being alone or quietly busy. It is the safest role and likely not to cause trouble for self or others. Most people do not notice lost children very easily as they are not usually given much attention, either positive or negative. They are just there. They suffer pain and loneliness. *The role of the lost child is to offer relief.* This is one child the family does not have to worry about. The feelings of loneliness, hurt, inadequacy, and anger in the lost child are compulsively protected by the *wall of defenses composed of distance, quietness, aloofness, withdrawal, rejection, sometimes becoming overweight and super-independent.*

The Family Mascot

The mascot is the family member who brings a little fun into the family. No one takes the mascot too seriously because it is believed that there would be a limited understanding of anything too serious. Mascots are often cute, fun to be around, and able to use charm and humor to survive in this very painful family system. *The role of the mascot is to provide fun and humor.* The feelings of fear, insecurity, confusion, and loneliness in the mascot are compulsively protected by the *wall of defenses composed of humor, hyper-activity, fragility, being super-cute, clowning, and doing anything to get attention.*

Each family member gets locked into these survival patterns. They work well within the family to offer protection from the growing pain.

Because of the self-delusion and the compulsive nature of these behavior patterns, the family member takes this behavior into *every other relationship.* The defense system and repressed feelings become a primary problem for each family member.

Summing up, the chemical dependency is a family disorder and is recognized by the following characteristics:

1. *Systemic* -- each person reacts to another person in the system.

2. *Deluded* -- self-deception, believing what is not true, unaware of the survival role.
3. *Compulsive* -- feeling of being driven to specific behavior.
4. *Individual* -- each family member can be characterized by specific behavior.
5. *Destructive* -- each family member pays a price to survive.

Treatment Goals for the Family

Dependent

Detoxification (if necessary)
Breaking through wall of delusion
Acceptance of the disease
Recognition of feelings
Recovery of whole person

Family Member

Breaking through wall of delusion
Acceptance of the disease
Recognition of feelings
Recovery of whole person

Together

Sharing feelings
Accepting and forgiving
Rebuilding the family system

Summary

The chemically dependent family is a system of related concerned individuals who are hurting and in crisis. Within this family, there is self-delusion, compulsive behavior patterns, and a growing primary disease of chemical dependency. The identified dependent needs primary treatment for the disease of chemical dependency and the family members need treatment for their dysfunctional behavior patterns. Recognition and acceptance and understanding of each member's role in the family disease is necessary for full family recovery.

[For further development of these ideas, please refer to Another Chance: Hope and Help for Alcoholic Families by the same author.]

SANE DRINKING AND THE CARE OF YOUR FRIENDS

The following was written in response to a request made by the directors of Karma Dzong in Boulder to Sarpashana and was approved by their office for publication.

Etiquette is a concept becoming more widely employed in the Karma Dzong community these days, particularly with the wider dissemination of the Shambhala teaching and a broader understanding of what it means to have a good time.

The consumption of alcohol is an area in which the American society in general is lacking an etiquette, i.e., the rules of manners and behavior that meet standards generally accepted by one's own social group. No consensus exists in this country or in this community about the proper ways in which to offer, serve, consume, or abstain from alcoholic beverages.

The Vajracharya, in an audience with Sarpashana in August of 1982, stated that abusive drinking is the largest problem in our community. He feels that we need to be especially careful with parties--to develop a more moderate and modest approach.

We gather at parties to enjoy one another's company, perhaps to honor a friend on his birthday, to share in the world that the Vajracharya's presence has placed us in together. When alcohol consumption becomes the major, or the only, feature of our social gathering, the feeling of celebration, or "good time," is often lost.

Alcohol dependency, the need to have alcohol as a part of every social situation, is a dangerous first step toward alcoholic addiction. Conscious or mindful drinking is our antidote, in general, to crossing that line, but it is not an excuse for drinking at every occasion. Before there can be genuine conscious drinking there must be an awareness *that* one is drinking, when, how much, with whom, and how often.

The following suggestions might be helpful to community members and others who are planning to give or to attend a party at which alcohol will be served. These points of reference are not intended to be implemented in a docile or ritualistic manner, but are provided simply to suggest that it is possible for us to use our native intelligence in creating an etiquette that will be kind and helpful in our attempt to further establish enlightened society in America.

For the Guest

Remember that the purpose of a party is to get together with friends, not simply to indulge in alcoholic behavior. It is not necessary to drink before a party to loosen up. When you arrive intoxicated it is difficult, if not impossible, to fully appreciate the environment that has been arranged for your enjoyment and the people in it.

It is generally easier to talk than to listen. Try to pace conversation so that you can hear what is being said to you, while checking in to see what effects alcohol may be having on your speech.

Notice someone who is alone at a party and who may be drinking just to allay boredom. The host cannot be everywhere at once. You have a responsibility to your host as well as the other way around.

Know your limit. If your experience at parties is that you always get drunk, experiment with fewer drinks and more food.

Be open to the comments that friends may make regarding your level of intoxication. Others may serve as a mirror for us as well. They are frequently accurate.

Be aware of what you are drinking, especially if you plan to drive home. One drink per hour allows for proper metabolism. If you become drunk--despondent, manipulative, abusive, violent, indulgent--whatever your style may be, you may be contributing to an atmosphere of confusion and neurosis rather than one of warmth and celebration.

Accept a drink only when you really want it. Don't drink to relax when what you really need is sleep.

And be aware of what type and how much alcohol you are drinking. Conscious drinking is only possible if you remain conscious.

For the Host

The host who has misgivings about his experience serving alcohol needs to take a fresh look at what a good party really is and what role he needs to play in it. The host first needs to ask himself, why am I having a party? Are we just coming together to drink or is there any other reason? It is up to the host to establish the atmosphere he wishes to prevail at his party. You cannot, and probably would not want to, dictate every aspect of how your friends enjoy themselves, but there are many ways in which you can generate a tone of warmth and conviviality without using alcohol as the only lubricating feature. Generally it is somewhat assumed that a party is *for* drinking unless the drinking is perceived and arranged for as an adjunct to the accompanying social activity.

Be kind to your guests. Do not invite more people than you can seat and provide snacks for. A chair and a coaster can encourage conversation while deleting the necessity for the ever-present glass-in-hand.

Introduce people to one another. If there is someone who you do not know introduce yourself as the host and make them welcome, if that is appropriate. Notice people who are alone and perhaps drinking out of boredom. The chances are good that such a person

is not enjoying himself very much, but his own style will not permit him to join in as easily as others can. Draw him in if you can and help him to feel welcome.

The host who lets the alcohol flow freely, especially at the beginning of a party, is not doing anyone any favor. Actually he is being rude. By assuming that people cannot enjoy themselves without massive doses of alcohol, a host can undermine the dignity of his guests. We are all capable of sharing our world with others without an alcoholic push to do so.

If you plan to have a bartender, hire one who will not put an extra shot in every drink. Ask him to take a break every once in a while so that people have a chance to think about whether they want another drink or if they are just acting out of a reflex to fill a gap. Ask him to notice overtly drunken behavior and to take responsibility for not pouring another drink into it. And ask him to honor your request to close the bar when that time arrives.

Provide food for your guests to eat while they are drinking. If possible, offer a hearty portion after the bar has closed. This helps to allay people's anxiety over what to do when the drinks are gone, allows them a focal point during the process of leaving the party, and gives them a chance to slow the absorption of alcohol into their bloodstreams. Use your imagination. A good host has more to offer than just food and drinks.

Let a glass be empty before you refill it. If you find that conversation is centering around alcohol, take a look at that to provide a fresh start. Alcohol should enhance conversation, not dominate it. When a guest says no thanks, do not insist that he have another drink.

Provide non-alcoholic beverages and serve them with the same grace and dignity with which you serve alcoholic ones. Occasionally there will be children present who would like to be considered part of the celebration as well. And consider the enjoyment of non-drinking adults. Some people like to switch to a non-alcoholic beverage when they feel they have reached their limit, and some do not drink at all. Serve coffee, tea, fruit or vegetable juices, or a non-alcoholic punch in addition to alcoholic cocktails.

When a guest has had too much to drink, you can politely express your concern for him by offering a substitute drink. This is a gentle way of telling your friend that he has reached the limits that you have set for your home. If possible, see that a drunken guest gets home safely. A DUI or an accident is, at best, an unpleasant way to end an evening. It may take some ingenuity and determination to part an intoxicated guest from his car keys. Don't argue with an inebriated guest. The legal complications alone that can result from driving under the influence have become quite extensive. This includes the possibility of the host being held negligent in the event of an accident. When a guest's mindfulness is clearly lacking, do not hesitate to exercise your own.

There is no way to sober up quickly. Coffee and even cold showers do not help to

metabolize alcohol more quickly. You may just end up with a very alert, but just as inebriated, guest. Often the kindest thing you can do is to make him comfortable and let him sleep it off until he can drive home safely. Follow up the next day. If someone has needed to be driven home from your party, call to see how he's doing afterwards. He may be too embarrassed to. Don't hesitate to be kind.

Notice if there are non-drinking adults at your party whose services you might employ to drive another guest home, but do not rely on them as a substitute for the mindfulness of your drinking friends.

Keep in mind that you are the host. You are responsible for the well-being of your guests, and to some degree for their enjoyment of your home. Allow the space of the party to develop as it will but don't lose sight of the boundaries that protect their dignity, awareness, and safety.

Have a previously agreed-upon time at which you will close the bar. If you send out invitations, invite friends by phone, or rely upon word-of-mouth, it is helpful to include an ending time as well as a starting time. When that time arrives, give appropriate signals by word and action that it is time to leave. We have been taught that everything has a beginning, a middle, and an end. Your friends will not object to your respect for that teaching--even at a party.