

# BLITZED

By Joshua Zimmerman

My name is Josh and I'm not an alcoholic. In the past a college student with my drinking habits - a frequent beer or two, a couple of times a year to excess - wouldn't feel compelled to declare this. But when I got ill from drinking last spring at Princeton and was taken to the infirmary, I was told to meet with the school's full-time alcohol counselor. Opening a folder in my name, he began the interview: Do you play drinking games? Have you gotten sick on alcohol before? Do you consume more than fourteen drinks a week? After fifteen minutes of this, he told me that getting sick was "a significant episode" in my "drinking history," that I was teetering on the brink of alcoholism.

Subjection to this type of inquisition is an increasing part of the curriculum on America's campuses: 60 percent of colleges have some sort of substance abuse program. And the idea behind it - that a given level of consumption or a major bender means you're a confirmed lush, or close enough to being one to need treatment - now pervades the \$2 billion alcohol-treatment industry.

Today's treatment theories reflect a far broader neo-temperance trend, which first became evident around 1984, when Mothers Against Drunk Driving succeeded in raising the drinking age to 21. In 1988 then Surgeon General C. Everett Koop called (unsuccessfully) for a ban on happy hours. Last January an award-winning edition of *Little Red Riding Hood* was banned for first-graders in the Empire, California, school

district because Grandma takes a glass of wine after escaping the wolf. Today's puritans lobby for a whole range of prohibitions, from banning alcohol industry sponsorship of sports events and rock concerts to barring convenience stores, gas stations, and supermarkets from selling booze.

The new public awareness about drinking has, of course, helped to reduce the horrendous problems caused by alcohol abuse. Consumption is down, particularly among the young. In 1980, 58 percent of Americans between the ages of 18 and 24 said they drank beer, according to Simmons Market Research. By 1989, only 47 percent did. The number of deaths attributed to drunk driving has fallen, too, from 20,356 in 1982 to 17,849 in 1989 - a 12 percent decline in seven years.

You'd think such a success might moderate the impulse for ever more draconian correctives. But if anything the anti-alcohol severity is increasing. Last summer the Supreme Court found that "the measure of the intrusion on motorists stopped briefly at sobriety checkpoints" is a small price to pay in the effort to reduce the "death and mutilation" caused by drunk drivers. Thirty-nine states now have "dram-shop" liability and twenty-four states have "social host" liability, in which bartenders and hosts can be held partially responsible when someone they serve gets in an accident.

In the treatment industry, the tactics used to intimidate heavy

drinkers have become more coercive. An increasingly popular method of alcoholism treatment these days is "intervention." Invented by Dr. Vernon Johnson, a reformed alcoholic who became famous when he pressured Betty Ford into treatment, the method relies upon a team effort. Family, friends, and co-workers "intervene: by confronting the offender in public - sometimes at work, preferably when he is hung over - with a list of grievances and a series of ultimatums. Johnson's transcript of a typical intervention from his recent book, Chemical Dependence, includes threats from the victim's wife that she'll leave him if he doesn't seek treatment, and from his boss, who says he'll fire him. A car is supposed to wait outside so the victim can be whisked directly to a treatment center.

The Johnson Institute promotes intervention through travelling workshops and a large mail-order business of books, cassettes, and videos. One of Johnson's biggest clients is the national network of Employee Assistance Programs, in-house and regional counselors who specialize in alcohol problems and are currently working with 12,000 corporate government offices across the country. A supervisor, noticing lagging performance or simply suspecting an alcohol problem, can order an employee to meet with an EAP counselor. the counselor, who doesn't have to meet any national training standards, will tell these presumed alcoholics to go on the wagon. If the employee is caught drinking again - whether or not the drinking is affecting his job performance - his boss is encouraged to send him back for more counseling or fire him.

Coercive treatment is essentially an extension of one of the main precepts of Alcoholics Anonymous: alcoholism - a disease

over which the alcoholic has no control - starts with the first drink and leads inexorably to death if the alcoholic does not become perfectly abstinent. It is thus essential to stop alcoholism in its early stages, no matter how scant the evidence. In recent years, however, the disease theory of alcoholism has come under attack. (See "alcohol and Free Will" by Robert Wright, TNR, December 14, 1987.) Studies have shown that even many hard-core drinkers are able to control their drinking. Yet virtually every major alcohol treatment program in the country largely adheres to the A.A. tenets, and now a growing number are using some form of coercion.

Drunk drivers, understandably enough, have come under particularly ferocious scrutiny. District Court Judge Albert Kramer of Quincy Massachusetts, sentences about 470 drunk drivers a year to enroll in Right Turn, a \$725, twenty-six week, out-patient treatment program, and to attend a series of A.A. meetings. "Everyone is assumed to be having a problem by virtue of their DWI conviction," explains Dr. Steve Valle, director of the program. "Social drinkers are really high-risk problem drinkers." As do most treatment programs, Right Turn uses a questionnaire to determine if you're an alcoholic. Right Turn's test is adapted from one by the National Highway Traffic Safety Administration. Out of curiosity, I took it myself. Sure enough, I scored a 30 out of 47, which meant I was in "the final, deteriorative stage of alcoholism, when most alcoholics outwardly appear to be alcoholic." The test was designed in such a way that each symptom on a night of overindulgence was recorded separately, boosting my score.

Across the country convicted

drunk drivers are ordered to begin treatment, usually at an A.A. chapter, or are given a choice between treatment and prison, which is, I suppose, a choice of sorts. But forcing someone to go to A.A. presents another problem: six of A.A.'s "Twelve Steps" to counter alcoholism allude to God. Last year a Maryland drunk driver, John Norfolk, objected to his court-ordered A.A. meetings, saying the government was forcing him to participate in a religion. The state yielded - Norfolk was switched to a non-religious program - before a judgment was rendered, avoiding a precedent and letting Maryland continue with court-ordered A.A. There are now, though, non-spiritual groups for people with drinking problems, which judges are beginning to use as A.A. alternatives in sentencing. In contrast with A.A., one group, called Rational Recovery, believes everyone has the power to overcome alcohol problems - without undergoing lifelong treatment.

The craze for compulsory treatment would make some sense if there were proof that it worked. Yet a 1988 Bureau of Statistics report found that nearly half of all inmates convicted of driving while intoxicated had previously been involved with an alcohol treatment program, and one in eleven was in treatment at the time of arrest. A major report issued last spring by the National Academy of Science's Institute of Medicine cites a study in which sanctions (e.g., suspending licenses) were shown to be more effective against recidivism than alcohol treatment.

Of course, all this might be an elaborate process of self-denial. After several more sessions with my college alcohol adviser, a couple of compulsory sessions with A.A., and an "intervention" organized by TNR interns, maybe I would be forced to admit that, yes, I am an alcoholic. The trouble is, by the time that's all over, I probably will be.

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