

CARE OR CONTROL? A WAY FORWARD

In a follow-up to their article looking at whether 12-step meetings are appropriate for women who have experienced abuse, **Grace and Sarah Galvani** explore the implications for fellowship members and sponsors who support women living with these issues, as well as some broader implications for alcohol and drug professionals

In *Care or control? Part 1* (DDN, 16 November 2009, page 6), we raised concerns about the extent to which some key elements of AA may not be helpful to women who have experienced domestic violence and abuse. This is a difficult and emotive subject to think about, discuss and reflect on, both personally and professionally. The emotions this subject raised were apparent in responses to the article and we want to thank the many people who emailed or commented on the article offering their thoughts and experiences. These ranged from criticism and denial of the issue, to moving emails of gratitude and support from people who were also courageous enough to disclose their own experiences of abuse and who had similar experiences to Grace within AA.

In light of these responses, we are focusing part 2 on messages of good practice that stem from research, specialist domestic abuse practice, personal experiences, and other people's work. We hope they will be of interest to professionals, sponsors and the membership of AA. Most importantly, we hope that they offer a way to better support people who experience, or have previously experienced, domestic violence and abuse. We also hope that it may be a small step towards helping women who have experienced, or are experiencing, abuse make the most of AA.

Alternative 12 steps

For decades, individuals and organisations have offered alternative steps or statements for women working towards sobriety. In 1975 Jean Kirkpatrick from Pennsylvania, USA, started Women for Sobriety as a self-help organisation for women out of recognition that their needs in recovery were different to men's. In the *Who we are* leaflet she states: 'Although the physiological recovery from alcoholism is the same for both sexes, the psychological (emotional) needs of women are very different in recovery from those of the male alcoholic.' She developed the New Life programme around 13 self-affirming statements including 'I have a life-threatening problem that once had me' and 'I am a competent woman and have much to give life'. Her reasoning is that others 'use fear, reproachments, and dependencies' rather than learning new, more positive and forward-looking approaches. Gail Unterberger, a Christian pastoral scholar, followed suit in 1989 publishing a feminist version of the 12 steps alongside an explanation of why the original steps, developed by men for men, were not appropriate for women.

And yet, for many women like Grace, AA has been a lifeline that she is now able to reflect on, find fault with, find strength in, and from which she can take what she needs. She also gives something back when she can through sponsoring others and, through her reflections and questions, hopes to continue to make it a positive experience for herself and those she supports.

Messages for sponsors

Women who are, or have been, victims of domestic abuse have experienced feelings of hopelessness, shame and guilt as well as a lack of control over their own life. With help from Grace's personal experiences, we have highlighted some areas of the AA programme that may once again leave such women feeling not in control. The following are some suggestions to integrate into the step work to enable a safe and empowering process.

1. *Explore gently*

Develop some gentle explorative questions to assess the member's experiences of intimate relationships. The high prevalence of domestic abuse among women with substance problems suggests we assume domestic abuse has been experienced until it becomes clear otherwise. Many sponsors begin the step work by asking the new member to write their 'life story'. Listen out for issues of control, self-blaming, and isolation.

2. *Choose words carefully*

Consider using different words to explain the process of handing power over to God or a higher power. When exploring 'self-will' make sure you acknowledge that not all their decisions or choices are bad ones. Emphasise that they have the power to make choices that keep them safe. Work with them in an empowering way to build self-confidence and self-belief and to develop a greater understanding of their coping strategies.

3. *Highlight strengths and skills*

Steps 4 and 5 are pivotal in the process of AA recovery. However, the list of 'defects' can mirror the verbal abuse and blaming that a victim may have

experienced in their abusive relationship. Listing the member's strengths and skills, which were visible even through times of adversity, will be an empowering way to support them through the step work.

4. *Be extra aware of feelings of failure*

The AA fellowship encourages commitment and involvement, with the group chanting 'keep coming back, it works if you work it' at each meeting. It is a powerful message. Be aware that for members who have experienced abuse their self-worth is often already low and not attending a meeting can reinforce their sense of shame and failure. Be ready to support people who are ambivalent about meetings, choose to dip in and out and who may seek additional support elsewhere.

5. *Don't always make amends*

Making amends is the link to surrender and serenity in AA's promises. Step 9 refers to making amends to people wherever possible to do so. Sponsors need to be aware that making amends to an abusive partner is not appropriate. It can collude with the sponsee potentially taking responsibility for her abuser's behaviour. Make sure you have spent time exploring the possibility of your sponsee being a victim of abuse, and discuss whether it is advisable to make amends to her partner or ex-partner.

Messages for members

1. *Be aware*

Be aware that a large number of women may have experienced domestic abuse. Stay away from offering guidance about intimate relationships, even when sought, if you do not know the unique circumstances of the other member's situation. For example, you may suggest a woman makes amends to an ex-partner without understanding the partner was abusive.

2. *Acknowledge the power of language*

Common words used to describe alcoholics' defects include 'selfish, self-seeking, self-centered, self-pitying and disobedient'. These are words often directed to women from their abusers. Consider exploring other ways to discuss characteristics that may be unhelpful to recovery which are not so critical and negative.

3. *Challenge self-blame*

Listen for the self-blame when physical violence is mentioned - waking up with a broken wrist because 'we are drunks' is unacceptable behaviour on the part of the abuser; it is not the woman's fault her partner is violent and abusive, even if she does have a drink problem. Gently challenge women taking the blame for the violence of a partner.

4. *Be proactive*

Discuss having posters and information about domestic abuse at meetings. The domestic abuse helpline number and other information could be placed in the ladies' toilets or visible in meeting rooms as a sign that domestic abuse is not an acceptable behaviour.

5. *Alcohol does not cause violence*

Don't buy in to simplistic notions of cause and effect. Alcohol alone does not make people violent, physically or sexually. Sometimes the absence of alcohol can mean the physical violence decreases although this is not the same as stopping. Research tells us the verbal and psychological abuse and controlling behaviour can continue, meaning the woman may still not be safe.

6. *Listen with empathy*

Consider what it feels like for a victim of abuse to hear a male AA member comment 'I was abusive and violent when I drank, but I was sick'. How might this feel to a woman whose partner is abusive when drinking? Research tells us men who are violent and abusive behave that way with and without alcohol.

Messages for professionals

1. *Understand what domestic abuse is*

More than this, understand how it can make women feel; the shame, stigma, hopelessness, self-loathing, self-doubt, fear and withdrawal to name a few. Then think about the impact this may have on someone's vulnerability and drinking behaviour.

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2. *Asking about domestic abuse*

Make questions about domestic abuse a routine part of your 'assessment and review' processes. Follow them up with specific questions about harmful behaviours and feeling fearful. Examples of questions are available through the Stella Project toolkit (www.gldvpstellaproject.org.uk). Ask sensitively and empathically beginning with discussion about 'problems at home' or 'conflict'. While conflict and domestic abuse are very different, it is a sensitive way to open the discussion and can be built on from there.

3. *Responding to domestic abuse*

Make sure you are ready for what you hear – emotionally and practically. Some disclosures are heartbreaking for even the most experienced of professionals. Be aware of your non-verbal and verbal response. Believe what is being said, reassure her she is not to blame, check on her current feelings of safety and that of her children. Offer practical options too, for example, a free telephone call to a specialist service, a leaflet or 'business' card for the local DV service.

4. *Safety planning*

Many victims will want to stay with the abuser out of love, fear, finances, the children, family pressures, shame of separation and so on. Where someone is living with abuse, discuss safety planning – it's the domestic abuse equivalent of harm minimisation. For example, 'Can you keep a bag of clothes/important personal documents at a family member's or friend's house?'

5. *Familiarity with AA*

Be familiar with the way AA meetings run. While this will vary, being able to give some information on what happens and what doesn't happen will be helpful. As with any new appointment, it may be a bit nerve wracking and the more information you can provide the better. Advise her to sit with other women and not to feel pressured to do or say anything.

6. *Couples/family work*

Do not undertake couples or family work where there is domestic abuse or any recent conflict that you think could be domestic abuse. This could put her at greater risk for reprisals post session and also risks you colluding with the perpetrator in your role as a mutually supportive 'therapist'. The victim/s of abuse will be unlikely to speak freely in the abuser's presence.

A final word

In both parts of *Care or control* we have focused on domestic abuse, which is predominantly experienced by women and children from men. However many of the messages are transferable to men and women who have experienced abuse, particularly those who experienced abuse as children. The abuse of power by a loved one, be they partner or parent, can lead to long-lasting emotional and psychological damage. Any organisation that seeks to support people with alcohol and drug problems must consider the links with intimate violence and abuse and be able to honestly and openly reflect on their practice to better support those they serve.

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