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### Moving with the times

I felt the need to write a letter in utter gratitude for the two-part article on care and control within AA meetings (*DDN*, 16 November 2009, page 6, and 15 March 2010, page 14). I realise I am writing this from a male's point of view, yet I felt the second part of the article (the section 'a final word') gives me a voice to speak for myself.

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Having drunk alcohol from the age of eight to the age of 41, when it had firmly taken over my whole life and left me on the streets, I resorted to any method I could possibly think of to obtain my next drink. Finally I was at death's door and literally obeyed anything that was said to me – one of which was 'go to AA'. This was reinforced by professionals from many quarters.

I firmly believed my life was going to be saved, yet once I'd walked into the room I sat very silently at the back, just listening to all that was being said. Anxious and fearful as I was, I persevered with what I had repeatedly been told.

I could relate to both parts of the article in every sense of the word. I had two sponsors yet could not connect my feelings in any way with what was being suggested to me. I found it very disturbing that the 12-step programme was trying to make me feel it was all my fault and nobody else's. My sponsors were not in any way allowing me to open up from within – a person who had been emotionally, physically and sexually abused from an early age.

I truly admire Grace for her courage to speak up and Dr Sarah Galvani for writing a very important and fundamental article for all members to try and understand the complexities of abuse, which come from so many areas of life. There are no 'expert' sponsors within the culture of AA and I have seen more damage and harm than good done to individuals, including myself, in the three years that I literally lived and breathed for the programme.

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tried so hard to follow the programme yet continually failed. I firmly believe AA helped my thought process and I'm sure I would not be here today to write this letter if I had not had the experience. Yet I am amazed that the 12 steps and traditions have not in any way changed since they were first introduced all those years ago. Maybe this is why there is such a high percentage of failures? Someone please educate a simple person and tell me what else hasn't changed with our times.

Compare it with the original highway code and how that has been continually improved to save lives of both drivers and pedestrians. It could work similarly for alcoholics and those who suffer the most, family members and loved ones.

In no way do I have the right to be judgemental towards AA and I still at times take individuals to meetings for support. Yet we women and men who have suffered abuse in our past, if pushed to find a sponsor or talk, will only defend ourselves by staying depressed, in denial, distracted, dissociated, and more often than not go back to our comfort zone of alcohol and drugs. Even the bible has been revamped to different versions – why can't AA do the same?

**Sean Rendell, Hertfordshire**

### Cheap shots

Drs Alex Stevens and Polly Radcliffe would like to know whether I consider buying a 'sweetened cappuccino at the petrol station an utterly selfish act' (*DDN*, 15 March, page 11). Given the state of globalised capitalism I do what I can to not buy products that I know have been produced using 'violence and exploitation', to quote them, which would – fairly obviously, I would assume – rule out cocaine and heroin. My problem is with the people – and I've met lots of them – who'll sit pontificating with a rolled-up tenner in their hand about not buying a certain brand of coffee or trainers. Whether this is through staggering hypocrisy or staggering stupidity is anyone's guess.

As I said previously, the war on drugs is a catastrophic mess but the end result is that buying these drugs subsidises misery and

horror. It's all very well, as Release do in their response to the Home Affairs Committee cocaine report, to say 'oh but the exploitation of drug mules and eradication of the rainforest is the fault of governments, not drugs'. True enough, but you may as well say 'I'm going to buy my clothes from the chain with the most reprehensible record on child sweat shop labour because it's international regulation that's at fault'.

To get back to the subject of stigma, 'nice people take drugs', to quote a particularly facile and pointless poster campaign. Of course, but so do lots of unpleasant people, and drugs can often exacerbate that unpleasantness, as anyone who has seen what crack can do will attest. Denying this does no one any good, least of all the client.

The good doctors then take me to task for 'unevidenced speculation' that drug gangsters would move into other areas of criminality – specifically people trafficking – rather than some legitimate field of endeavour. Firstly, it's not unevidenced, as a five-minute internet search on the disappeared of Cuidad Juarez will show. And just because a cohort of 200 shoplifters in Surrey, or whatever academic paper you want to dig up, showed they went straight when offending opportunities were reduced, doesn't mean that people who think nothing of emptying a bag of human heads onto a nightclub dance floor, or gunning down pregnant American consular staff – as they did just last week – will do the same. I don't know, maybe I'm stigmatising them. Perhaps Alex and Polly would like to apply for a research grant to go and find out? Thought not.

And while we're on the subject of not living in the real world, Chris Ford and co's attempt to seize the moral high ground and close down debate by asserting that Neil McKeganey's original article would be 'illegal under UK law' if it were about gay people is as inaccurate as it is cheap. Have these people ever looked at a British tabloid newspaper? Not only would it not be illegal, it would barely raise an eyebrow at the PCC. I don't agree with everything Neil McKeganey says, and I don't agree with everything Chris Ford says, but I wouldn't deny either of them the right to say

it. She should extend the same courtesy, or perhaps she'd prefer *DDN* to become some sort of *Pravda*, and read by nobody?

It's bad enough the orgy of self-congratulation that passes for 'debate' at either end of the spectrum – the recovery zealots or the likes of Transform greeting every announcement with the same howling hyperbole – and this sector is polarised enough without McCarthyite bullying witch-hunt tactics to silence people you don't happen to agree with. The field is about to face unprecedented financial and political pressures and it might be an idea to at least try and present some sort of a united front – God knows what it must look like to people on the outside. Most of us just want get on with our jobs to the best of our ability without having to unthinkingly submit to dogma of either stripe.

**Molly Cochrane, by email**

## Distorted views

People who suffer with problematic drug use have been stigmatised for decades by the media, politicians, police, and too often even the health system. They need many things, but more stigma is not one of them.

Neil McKeganey may be an otherwise fine person, but his moralistic anti-drug ideology has completely distorted his understanding of drug use. Contrary to his opinion piece (*DDN*, 1 March, page 17), there is no evidence that stigmatising drug users helps them overcome their problems to the benefit of society. None, zero. Stigma only adds to their burdens and ours by deepening their deviant identity, retarding their recovery, and pushing them away from the treatment and other services they need. And as a matter of professional ethics, we doubt that problem drug users struggling to get healthy wish to be used as poster children for social marketing campaigns based on someone's theory of planned behaviour. If the expression of social disapproval is the goal, as with drink driving, this

can take many useful forms that do not entail further stigmatising.

McKeganey's ideology trips him up repeatedly, as, for example, when he recently claimed in the *Big Issue* that methadone substitution treatment for opiate addiction is 'of uncertain benefit'. The scientific evidence shows unequivocally that methadone is the most effective treatment for getting addicts off the heroin rollercoaster, out of the criminal world, and into a more stable life. Yes, methadone is a drug, and McKeganey may prefer that opiate addicts just stop using all drugs. But this is his utopian fantasy, not a workable public policy.

We support Claire Brown's decision to publish McKeganey's piece and the responses to it. The best way to deal with dumb ideas is to put them next to smart ideas.

**Prof Pat O'Hare, HIT, Liverpool and Prof Craig Reinman, University of California**

## Stigmatiser or stigmatised?

Reading the recent spate of letters concerning stigma, complete with multiple academic signatories and copious footnotes, my heart rejoiced. I remembered a series of sketches on *The Mary Whitehouse Experience* where two ancient academics in a televised debate inevitably wound up swapping personal insults with ever-increasing vitriol.

A few years ago a friend of mine (an alcoholic and a heroin addict from out of town) was helping to decorate our house in a village here in Shetland. At lunchtime, midweek, he headed for the pub. When he came back he reported the conversation to me. The local alcoholics propping up the bar asked him what he was doing. He responded that he was helping to decorate a house for us at which point one of the guys said, 'I expect they're getting it ready for a load of dirty junkies.'

I laughed when my friend recounted this. We have known a few alcoholics and heroin addicts

in the eight years we have run our project. Most of them have felt shame, some of them live there. I think most of us can think of things which we have said or done of which we have felt ashamed. How many of us would respond positively to being stigmatised?

Who is going to be the stigmatiser – pompous politicians or arrogant academics? What addicts need, what we all need is not stigma but grace! My favourite author on the subject of addiction Gerald May (*Addiction and Grace*, 1988) put it this way: 'Grace enables dignity within us by empowering our efforts to be honest and responsible. Grace enables humility within us by empowering our realisation that our efforts are insufficient by themselves. Grace enables receptivity and responsiveness within us by empowering our growing trust and our willingness to take the risks of faith.'

**Andy Holt, Papa Stour Project**

## Evidence soup

With reference to the letter *Chemical soup* (*DDN*, March 15, page 11) I might be interested in reading the evidence Christine Hudson uses to support her argument that 'chemical additives, whatever they are (my italics), can and do have a regressive and degenerative effect on health' – except I can deduce from her line of work that she considers the use of actual evidence to be unnecessary. Maybe all of the 'long-term and degenerative disease and an increase in violence' in recent years are caused by the placebo effect?

Christine does however show a remarkable level of self-awareness. Who better understands that 'people are gullible enough to accept whatever they are sold, or told, is healthy and the correct way to live' than a homeopath? At least Christine is not likely to need a label to identify the chemical ingredients of her remedies – two parts hydrogen, one part oxygen.

**Michael Nadasdy, DAT officer, East of England**

## Media watch

### DDN casts its eyes over news from elsewhere

**Hillary Clinton** made a state visit to Mexico to further talks on the continuing 'war on drugs'. Funding from the US has been pledged to aid Mexico in creating a 'stronger border' and finding ways to tackle the 'social problems linked to a rise in drug crime'. The country's strategy is to tackle cartels with a military presence, which President Calderon says needs strengthening in partnership with the US to be effective in cracking down on drugs-related violence.

**The Times, 24 March**

**Councillor Gerry Breen**, chair of the Dublin City Joint Policing Committee recently called for greater regulation on 'head shops', which sell legal highs such as Spice. He said that as some of the products are ingested, environmental health officers should be allowed to inspect establishments. He said that there is not 'a screed of quality control' about products sold and the government needed to 'get their finger out' on regulating the shops.

**Irish Examiner, 19 March**

**The UK's largest drug-smuggling gang** has been sentenced to a total of 70 years, for running an operation worth an estimated £63m. Identifying millions of pounds hidden abroad considered to be 'proceeds that came out of drug-trafficking activity', Judge Stone told the men 'I have to sentence you for the whole of the money laundering operation'. He has also prevented them from travelling abroad for two years after their release.

**Surrey Comet, 25 March**

**Irish drinkers** have been given special permission to raise a glass on Good Friday to celebrate the Munster v Leinster rugby match at Thomond Park. Normally, restrictions prevent bars opening on the holy day. While the stadium held a licence to serve alcohol during the fixture, local pubs did not and applied to the courts for the exemption as a 'last resort'. Limerick City Chairman, Jerry O'Dea, commented 'We see this decision as a victory for common sense and we feel that the majority of the public supported our members in their application'.

**BBC News, 25 March**

**California** could be the first US state to decriminalise cannabis if a November vote to allow possession of up to 28.5g of the drug for those of 21 and over is passed. Almost 700,000 signatures have so far been submitted on a petition backing the move.

**Sky News, 25 March**

**We welcome your letters... Please email them to the editor, [claire@cjwellings.com](mailto:claire@cjwellings.com) or post them to the address on page 3.**