

# ALCOHOLISM

## What You Need to Know • How to Help

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### Alcoholism and You

■ Why is there a need for alcoholism information in the Church?

by **Larry J. Walker**

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Alcohol contributes to 100,000 deaths annually, making it the third leading cause of preventable death in the United States. One half of all traffic fatalities and one third of all traffic injuries are related to the abuse of alcohol. The National Academy of Sciences estimates that alcoholism and alcohol abuse in the United States cost society from \$40 to \$60 billion annually.

Currently, nearly 14 million Americans—1 in every 13 adults—abuse alcohol or are alcoholic. About 43 percent of U.S. adults—76 million people—have been exposed to alcoholism in the family.

It is estimated that over 3 million teens between the ages of 14 and 17 in the United States today are problem drinkers. More than 60 percent of high school seniors report that they have been drunk; 31 percent say they have had five or more drinks in a row during the last two weeks (source: [www.alcoholaddiction.info/alcoholism-statistics.htm](http://www.alcoholaddiction.info/alcoholism-statistics.htm)).

Despite these shocking statistics, alcohol consumption has increased nearly 50 percent over the past generation. Each of the millions of alcoholics negatively affects an average of four to seven other people. There is no way to put a dollar figure on the emotional agony suffered by alcoholics, their families and coworkers.

Although these figures are for the United States, alcoholism is a prevalent problem in other nations as well.

Is alcoholism a problem in the United Church of God? A survey conducted some

20 years ago in our previous affiliation indicated that alcoholism afflicted the membership of the Church in similar proportions to the society in which they lived. We bring our problems into the Church, and society has far greater effect on us than many of us would like to admit.

The fundamental reason has already been stated—we have our roots in this present system and are not immune to the effects of this growing problem.

Many of you reading this article are impacted by alcoholism. Others know of friends, family members or other brethren who have problems when drinking. And this is only the tip of the iceberg, because denial is one of the primary symptoms of the affliction. In addition, by semi-controlled drinking, many alcoholics evade detection for a long time.

The problem of alcoholism thrives in an atmosphere where knowledge and awareness are lacking. Many misconceptions, misunderstandings and prejudices about alcohol and alcoholism and how to deal with it perpetuate the problem and prolong the suffering of all concerned. An enlightened membership can be a strong bulwark against the painful experiences of alcoholism.

Here are some specific areas of need.

#### **Prevention**

The old adage, “an ounce of prevention is worth a pound of cure,” is certainly true with reference to alcoholism. How can we recognize the symptoms and signs of developing alcoholism? Driving under the influence, public drunkenness or debilitating physical problems are the later stages of this problem, not the onset. How can we help our children understand and

prevent this destruction in their lives?

A wealth of material is available on the subject, much of it at no cost.

#### **Recognition**

How would you recognize a problem with alcohol? Few of us are experts in this field. Could you evaluate a developing situation in your life or another's? What exactly is alcoholism? Is it a character weakness or an illness? What are the symptoms? Where would you find sound and reliable information?

#### **Referral**

If you or someone you know has a problem with alcohol, what should you do about it? Should you tell the pastor if the person is a member? Should a member seek help outside the Church, or should prayer and ministerial counsel be sufficient?

How much do you know about treatment programs? What happens at AA (Alcoholics Anonymous) or Alanon meetings? Should a Church member participate in these programs? What about the 12-step AA program? Is it really a spiritual program? If so, would such involvement with nonmembers be joining another religion?

#### **Understanding and Support**

Alcoholics and their families live under a heavy burden of guilt and shame. Even in recovery there can be a great deal of emotional pain and trauma for the entire family. God intends the Church to be a unique spiritual support system for suffering members (1 Corinthians 12:26).

Alcoholics and their families need love and support of the right kind. Unfortunately, the “way that seems right” is often the opposite of what is really needed. The

more we understand the dynamics of any problem, the better we can identify with those who struggle with it. Alcoholism is no exception.

### Reaching Out to Others

Jesus came “to heal the brokenhearted, to proclaim liberty to the captives and recovery of sight to the blind, to set at liberty those who are oppressed” in the context of preaching the gospel (Luke

4:18). He was able to reach out to those suffering people and offer them help and hope.

Alcoholism involves a downward progression to the bottom of the barrel—medically, financially, emotionally and spiritually. It is 100 percent fatal if not arrested. Many never pull out of this syndrome. Those who seek help usually do so only after “hitting bottom” in some area of their life, or because of a successful

“intervention” by caring, concerned friends or relatives.

With proper understanding, you can be a lifeline to someone and plant a seed of hope that can have positive results for all eternity (Romans 8:18-21).

Please do what you can to help by learning all you can about alcoholism so you can provide informed direction, support and encouragement for those in need as God grants you the opportunity.

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# Understanding Alcoholism

by **Larry J. Walker and Glen White**

What is the nature of alcoholism, and how does it differ from alcohol abuse?

### Alcoholism vs. Alcohol Abuse

Just what is alcoholism? Is it just drinking too much? Or is there more to it than that? *Webster's Ninth New Collegiate Dictionary* defines alcoholism as “a continued excessive or compulsive use of alcoholic drinks ... associated with excessive and usually compulsive drinking.”

Alcohol abuse refers to the misuse of alcohol resulting in problems to the abuser and those he or she may affect. Abuse does not necessarily indicate alcoholism. Alcoholism involves developing a dependency on alcohol and follows a somewhat predictable progression of symptoms.

Dr. James Royce defines alcoholism as “a chronic illness or disorder characterized by some loss of control over drinking, with habituation or addiction to the drug alcohol, or causing interference in any major life function; for example, health, job, family, friends or the law” (*Alcohol Problems and Alcoholism*, page 10).

He summarizes regarding addiction: “Addiction is a physiological [physical] dependence or need, with its familiar signs of increased tolerance initially, cellular adaptation, and withdrawal symptoms. One physically needs a drink to function.”

### Four Phases of Alcoholism

This progression typically proceeds through four stages:

1. *Social Drinking*—Social drinking suggests drinking for stress relief, which results in mood change. It may begin as a result of peer pressure, to go along with the crowd or to alleviate boredom or stress.

2. *Seeking the Mood Change*—This leads to drinking for the purpose of achieving mood change. Drinking habits begin to fall into personal patterns (certain times of the day, in private, etc.) and psychological manifestations. Chief among these is the denial of any dependence in order to protect developing behavioral patterns.

3. *Constantly Seeking the Mood Change*—Phase 3 involves a regular pattern of drinking for the desired effects. This may take the form of regular, ongoing daily drinking or sporadic episodes of drunkenness followed by periods of abstinence (often labeled as “periodic drinking”).

Obsessive and compulsive drinking leads to violations of one’s fundamental ethics, values and moral standards. The drinker resorts to entrenched denial defenses to justify this misconduct in response to the objections of family members and other significant persons.

4. *Addiction*—The cells of the alcoholic’s body adapt rapidly to the increasing ingestion of alcohol, resulting in a higher level of “tolerance.” This means the person is able to consume more beverage alcohol without obvious physical effects or showing signs of impaired behavior. Regardless of the appearance of continued ability to hold a job, keep the family “intact,” etc., the increased intake of alcohol causes cellular damage that will eventually exact its toll on

the body, even causing organ failure.

Increased tolerance also demands that the person must drink more to achieve the effects sought in stage 1. The nervous system adapts to the escalating level of alcohol, resulting in physical dependence. Drinking beyond tolerance levels results in drunkenness. Suddenly abstaining or drinking less than the tolerance level throws the cells of the body into acute distress, which produces varying withdrawal symptoms including “delirium tremens” (commonly referred to as “DTs”). The syndrome of physical dependence or addiction is now in full swing.

The growing need for alcohol becomes the focus of the victim’s life. The alcoholic’s world begins to function around the chemical. It becomes companion, conversational item, basis of jokes and determines choice of companions. The half case of beer or the several half gallons of “cooking wine” becomes first on the list of grocery items into the basket. The liquor store becomes very important when the Friday afternoon errands are done prior to the beginning of God’s Sabbath. A picnic just wouldn’t be a picnic without the cooler full of a favorite alcoholic beverage.

Many people who are not alcoholics go through these same motions but not on a consistent basis. They can enjoy an alcohol-free gathering. The dependent person will make sure he or she has a few before attending such an occasion or will find ways to leave early or steer the group to a “watering hole.”

As time goes by, the sufferer develops whatever means necessary to maintain

his supply of alcohol, including lying, hiding bottles, sneaking drinks, even stealing. Family life, job performance and health all suffer from the progression. The alcoholic family member becomes a habitual source of uncertainty, causing embarrassment and shame, often missing scheduled appointments, always promising never to do it again. Frustrated family members often lash out in anger or make threats or impassioned pleas for abstinence. This drives the alcoholic deeper into the delusional world of denial, shame and self-pity.

Psychologically isolated, the alcoholic addictively reaches for what he or she considers as friend and source of stabilization—alcohol. This convoluted progression continues to spiral downward and out of control, leaving emotional trauma and estrangement of relationships in its path.

What we have just described is also called chemical dependency. Dr. James Milam, author of *Under the Influence*, describes this phenomenon as “a progressive, ongoing chronic illness characterized by increased tolerance which results in loss of control over the chemical, resulting in continued use in spite of negative consequences.”

### **Disease or Moral Weakness?**

This brings up a controversial point. Many believe alcoholics simply lack willpower to stop drinking. Yet the medical profession almost unanimously considers alcoholism an illness or disease. Is it a sickness or is it a sin?

Those who are able to drink in moderation may wonder why others seem unable to stop drinking, despite the negative consequences. Some conclude that this person is simply weak-willed or lacking in character.

However, researchers have noted that a genetic predisposition to alcohol addiction afflicts a minority of the population (about 10 to 15 percent of Anglo-Americans). In other words, some people carry a genetic predisposition to addiction, which is triggered by alcohol. In some cases this addiction blossoms with the first drink.

Because this phenomenon has a documented pathology, alcoholism has been classified as an “illness.” The American Medical Society, considering that alcoholism fits that description, declared it so in 1956.



inherit the Kingdom of God (1 Corinthians 6:10).

However, the context of Galatians 5 is noteworthy. In verse 13 Paul admonishes the Galatians not to “use liberty as an opportunity for the flesh.”

The word in Galatians 5:13 translated “opportunity” (“occasion,” King James Version) is significant. Wuest explains:

“It is a military term speaking of a base of operations. In our Galatian passage it means ‘the cause, occasion, or pretext’ of a thing. Paul exhorts the Galatians not to make their liberty ... a base of operations from which to serve sin. Their liberty was not to be used as a spring-board from which to take off with the intention of sinning” (*Word Studies in the New Testament*, Volume 1, page 150).

Classifying alcoholism as an illness does not convey permission for continuing inappropriate and destructive drinking behavior. The disease concept of alcoholism offers an explanation, not an excuse. It simply defines the problem in order to determine proper treatment. Treatment methods emphasize: number one, the primary need to stop ingestion of the chemical; and number two, the need to accept responsibility for the consequences of one’s behavior. For an alcoholic, already carrying a heavy load of guilt, the concept of personal responsibility is much less difficult to bear than more guilt and shame.

Medical classification of alcoholism as a primary disease has opened insurance coverage for many victims who might otherwise not be able to afford the clinical treatment that is so effective in helping to restore thousands to healthy productivity.

### **The Biblical Teaching About Alcohol Abuse**

The Bible clearly labels drunkenness as one of the “works of the flesh” (Galatians 5:19-21), and warns that no “drunkard” will

So Paul is simply disarming the argument that one may continue unrepentant sinful behavior (including drunkenness), using a false concept of “liberty” as a “spring-board.”

To consider these passages as a condemnation of someone struggling with a physiologically-based chemical addiction would be most unfortunate, as well as counterproductive to the victim, who desperately needs love and support in his or her struggle for sobriety.

Alcoholism is a physical condition compounded by developed, entrenched psychological patterns that protect the addiction.

However, much of the behavior associated with alcoholism, including becoming intoxicated, is sin; and all sin must be repented of. No unrepentant sinner will be allowed entry into the Kingdom of God. A repentant sinner will abhor his sin and make every effort, with God’s help, to stop sinning. For an alcoholic, this means abstinence and seeking established and proven treatment methods to gain sobriety.

# How to Help an Alcoholic

by **Larry J. Walker and Glen White**

In the previous two installments of this series, we have identified and described the symptoms of alcoholism. Alcoholism is so widespread that most of us know someone afflicted with the problem.

What can you do to help someone who has a drinking problem?

## The Barrier of Denial

Unfortunately, a major roadblock stands in the way of help for most sufferers. It is called denial. The difficulty of admitting our problems is intrinsic to human nature (Proverbs 16:2; 21:2). The stigma connected with out-of-control drinking stands in the way for many. No one wants to admit to what he or she is ashamed of.

The dynamics of chemical addiction drive denial far beyond the normal degree of human nature. The desperate craving for alcohol leads the deceitful mind (Jeremiah 17:9) to employ a wide range of “defense mechanisms”—such as rationalization, justification, minimization and blame shifting in order to continue drinking. Laying guilt trips, provoking incidents of anger to justify drinking, lying and many other forms of improper behavior often result. An alcoholic eventually develops a world of illusion that becomes a dangerous mirage of reality.

Somewhat this nightmarish world of denial must be invaded and destroyed.

## Don't Be an Enabler

The difficulty is compounded by the fact that family members, especially the husband or wife of the alcoholic, often allow themselves to get hooked into this bizarre world of denial. Making excuses for missed work becomes commonplace, spawned by fear of loss of job, desire to avoid rejection by friends and family, and misguided concern for the drinking family member. The mate often prolongs the alcoholic's drinking behavior by becoming an “enabler.”

The alcoholic must be allowed to face the consequences of his or her inappropriate behavior. This may involve suffering and sacrifice for other family members. But as long as someone shields drinking behavior, the problems normally will continue and intensify.

It is recommended that the wife or other family members avoid making calls to employers, and let the alcoholic call for himself. If he staggers home, vomits and passes out on the living room floor or front lawn, the natural tendency is to clean him up and put him to bed and then let him have the full force of anger and resentment in the morning. Then his head is pounding with a hangover and he is already ashamed of his behavior the evening before—unless he was in a blackout, in which case he will remember nothing.

If this occurs, allowing him to wake up face down in the residue of the night before can provide a powerful dose of reality. Especially if he wakes up in full sight of his neighbors as they begin their day. An alcoholic usually needs this kind of tough love to help him face the consequences of his drinking problem. The morning after may also be the time to calmly and lovingly encourage him to consider getting help.

## Motivation for Seeking Treatment

But what if the alcoholic still refuses to acknowledge the need for help? For many years the belief persisted that an alcoholic has to “hit bottom” before seeking treatment. Sooner or later some crisis will force the alcoholic to face up to reality or suffer tragic consequences—loss of family, financial ruin, imprisonment, a horrible car crash or even death.

Must family members sit by helplessly

and wait for tragedy to strike? What if you or someone else in the family are at the end of your rope emotionally and feel you cannot take any more? What if you feel you cannot ride out this dizzying spiral to oblivion? Is a better alternative available?

## Dynamics of Intervention

Thankfully, yes. The recommended method is called intervention. Intervention should include prayer—asking God for help and having Him in the forefront of all that is done. Intervention also involves a carefully planned, frank but loving confrontation session by as many family and other meaningful persons as are willing and able to participate. Former U.S. President Gerald Ford's wife, Betty, is a well-known example of successful intervention.

Each participant clearly states facts and feelings about how the drinking pattern has affected his or her life. This information is conveyed after sincerely affirming love and concern to the problem drinker. A combination of support and confrontation is important to let the person know that the others in the room love him or her but cannot and will not continue to tolerate the drinking problem.

Alternatives and consequences should be spelled out. Each person must be prepared to follow through on whatever actions he spells out. No bluffing, no threats. These only hurt credibility and prolong suffering of all concerned.

## Dos and Don'ts

### Don't

1. Threaten, bribe or preach.
2. Lose your temper.
3. Allow your anxiety to lead you to do what the alcoholic should do for himself/herself.
4. Cover up, make excuses for or hide the alcoholic from consequences of his/her behavior.
5. Hide or throw away bottles of alcohol.
6. Argue or reason with anyone who is drunk.
7. Drink along with a problem drinker.
8. Ride with anyone who insists on driving while intoxicated.
9. Accept guilt for another's behavior.
10. Allow your spiritual life to suffer as result of alcoholism.

### Do

1. Learn all you can about alcoholism.
2. Become familiar with treatment resources in your community.
3. Be honest with the alcoholic.
4. Keep your cool when talking with an alcoholic.
5. Counsel with your pastor and/or doctor about alcohol problems in the family.
6. Attend Alanon, Alateen or other groups that offer support and helpful information.
7. Teach your children about alcoholism.
8. Do all you can to maintain a healthy atmosphere at home.
9. Be patient; alcoholism can pose many challenges.
10. Maintain your faith in God.

Before undertaking this course of action, be sure to seek professional help, including your minister. It is advisable to have a trained facilitator lead and monitor the discussion.

The object of intervention is to secure the alcoholic's agreement to enter a treatment program at the conclusion of the session. Therefore, a plan of action should already be in place so treatment can begin immediately. Treatment should be considered with the same sense of urgency and gravity as a medical emergency such as appendicitis or a heart attack.

### Where to Find Help

Where can you find help? What type of treatment is available? Of course this should be investigated long before the intervention is scheduled so you are ready to proceed quickly with your prepared plan of action.

Besides help from your minister, the yellow pages section of your phone book is a good place to go. Look under "Alcoholism Information and Treatment" to find a list of treatment centers in your area. Some are privately operated. Some are nonprofit, usually supported by government funds. If insurance coverage is available, private centers may be a better option. If not, treatment at a public facility may be available on a "sliding scale" basis, which means the cost is adjusted according to the family income. Doctors and governmental agencies (including emergency 911 service in the United States) can also provide referral information.

### Treatment Options

What is involved in this type of



treatment? First, an assessment interview is set up with the patient to determine the nature and duration of treatment. Detoxification is usually the next procedure, to help remove alcohol from the system and to treat side effects such as withdrawal symptoms. The patient then enters a period of inpatient or outpatient treatment.

Treatment modalities have been standardized in recent years by government regulations and insurance company requirements. Most programs consist of group therapy, individual counseling, lectures and nutritional support.

Family involvement is also critically important, since alcoholism affects the entire family. Participation in treatment also reinforces their love for the alcoholic. Special family group sessions are planned to help families communicate facts and

feelings openly and honestly with support from other patients and their families. People help people, and learn about themselves in the process.

### The 12-Step Program

The 12-step program of Alcoholics Anonymous (AA) is central to the recovery philosophy of treatment. It was developed years ago by recovering alcoholics who analyzed what they did to attain sobriety.

This program has a longstanding track record of success, so much so that adapted versions are used for many other forms of addictive behavior. The success rate can be attributed to the fact that all 12 steps are in harmony with biblical principles. The book, *Twelve Steps and Twelve Traditions*, available from AA, expounds the value of the program to recovering alcoholics.

Treatment centers do not promise to "cure" alcoholism. They offer treatment and a program to follow to maintain sobriety. Gaining and maintaining sobriety is the personal responsibility of each patient. An ongoing "maintenance program" is usually discussed with the patient prior to discharge from inpatient treatment. This involves periodic follow-up group therapy sessions and selection of an AA group to attend at least once a week.

### What Is Alcoholics Anonymous?

Alcoholics Anonymous is an international fellowship of recovering alcoholics who meet together to help each other maintain sobriety. The only requirement for joining or attending AA is a desire to stop drinking. There is no cost other than optional contributions for

## The 12 Steps of Alcoholics Anonymous

1. We admitted we were powerless over alcohol—that our lives had become unmanageable.
2. We came to believe that a Power greater than ourselves could restore us to sanity.
3. We made a decision to turn our will and our lives over to the care of God as we understood Him.
4. We made a searching and fearless moral inventory of ourselves.
5. We admitted to God, to ourselves and to another human being the exact nature of our wrongs.
6. We were entirely ready to have God remove all these defects of character.
7. We humbly asked Him to remove our shortcomings.
8. We made a list of all persons we had harmed, and became willing to make amends to them all.
9. We made direct amends to such people wherever possible, except when to do so would injure them or others.
10. We continued to take personal inventory and when we were wrong promptly admitted it.
11. We sought through prayer and meditation to improve our conscious contact with God, as we understood Him, praying only for knowledge of His will for us 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.

refreshments and cost of meeting facilities.

AA is not a religion. It is simply a support group devoted to helping people stop drinking. Similar support groups exist for many other causes, such as losing weight.

Belief that looking to a "Higher Power" is necessary for sobriety is a fundamental tenet of the 12-step program. "God as we understood Him" is another term used in AA to accommodate people of all religious faiths. The more general "Higher Power" is designed for agnostics and atheists as a beginning point for seeking help beyond the individual sufferer. This should present no problems to God's people. On the contrary, we can appreciate the 12-step program even more because of our

understanding of God's plan.

Two other common objections to AA are the foul language that seems to be common fare for many recovering alcoholics, and the fact that many recovering alcoholics smoke profusely at meetings. Neither of these problems is insurmountable. The key is finding the right AA group. The local AA office can steer you to a nonsmoking AA group. An AA group that meets in a church is not as likely to have smoking or use of foul language, simply because of the location.

Meetings are chaired by AA member volunteers on a rotating basis. They lead an informal discussion geared toward maintaining sobriety. Discussions sometimes center on a theme, such as one

of the 12 steps and how it applies.

Alcoholics Anonymous has many booklets, for little or no cost, to help explain the organization in much greater detail than is possible within the scope of this article.

### **Focused Education**

The United Church of God Focused Education team is committed to doing what we can to help families suffering from alcoholism. We appreciate your continued prayers for this much-needed program and for those among us who need hope, help and healing. The Ambassador Bible Center lectures on alcoholism can be found on the Web at [www.ucg.org/abc/classes/alcoholism.htm](http://www.ucg.org/abc/classes/alcoholism.htm).

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