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AA Grapevine



First in a series of articles on authors of Big Book stories

Interview

with the author of

"Doctor, Alcoholic, Addict"

DR. PAUL

Dr. Paul's story, "Doctor, Alcoholic, Addict" is published in the Third Edition of the Big Book; his remarks on *acceptance*, which appear on pages 449 and 450, have been helpful to many AA members over the years. This interview was conducted by telephone to Dr. Paul's home in California.



GV: How did you come to write the story that's in the Big Book?

Dr. Paul: The editor of the Grapevine — a woman named Paula C. — was also the chairperson of the committee to review the stories. She

wrote to tell me that the magazine was going to use an article I'd written on why doctors shouldn't prescribe pills for alcoholics. So she knew my writing a little bit and she asked me if I had a dual problem and would I be willing to write an article about it for consideration in the Big Book. My reaction to that was the same as my reaction when it was suggested I come to AA — I thought it was one of the dumbest ideas I'd ever heard and I ignored her letter. Later on she called and asked for the article, and I lied and said I hadn't had time to write it. She extended the deadline and called me a second time. I had a gal working in the office with me who was in

the program, and she thought it would be nice to have typed a story that might end up in the Big Book, so she said to me, "You write it, I'll type it, and we'll send it in." So that's what we did. But by that time they had done another printing of the Second Edition, and I thought, Fine, that means they won't use it. But Paula said she liked it and the Grapevine published it with the title "Bronzed Mocassins" and an illustration of a pair of bronze mocassins. Eventually it was put in the Big Book, but the title was changed, and my guess is that they wanted to show that an alcoholic could be a professional and be an addict, but that wouldn't make him not an alcoholic. It worked well but maybe it overshot the mark, and now one of the most uncomfortable things for me is when people run up to me at a meeting and tell me how glad they are the story is in the book. They say they've been fighting with their home group because their home group won't let them talk about drugs. So they show their group the story and they say, "By God, now you'll have to let

me talk about drugs." And I really hate to see the story as a divisive thing. I don't think we came to AA to fight each other.

GV: Is there anything you regret having written in your story?

Dr. Paul: Well, I must say I'm really surprised at the number of people who

come up to me and ask me confidentially if what they've heard on the very best authority — usually from their sponsor — is

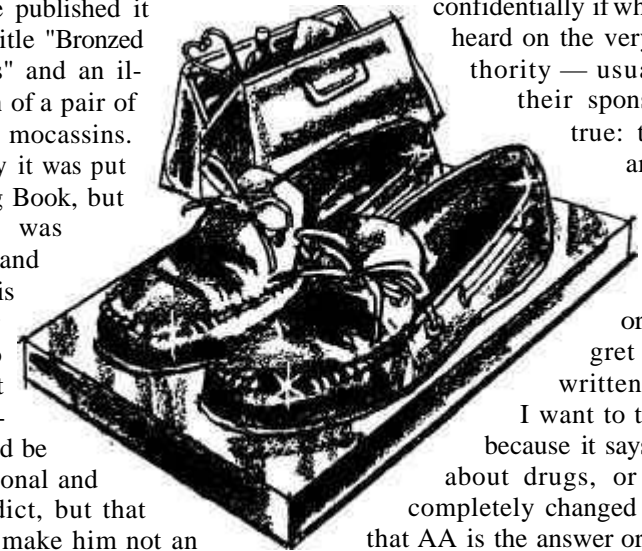
true: that there are things in my story I want to change,

or that I regret having written it, or that

I want to take it out because it says so much about drugs, or that I've completely changed my mind

that AA is the answer or even that acceptance is the answer. I've also heard — on the best authority! — that I've died or gotten drunk or on pills. The latest one was that my wife Max died and that I got so depressed I got drunk. So, is there anything I'd like to change? No. I believe what I said more now than when I wrote it.

GV: Do you think that your story might help those who are dually addicted?



Dr. Paul: I think it does. I think the story makes clear the truth that an alcoholic can also be an addict, and indeed that an alcoholic has a constitutional right to have as many problems as he wants! But I also think that if you're not an alcoholic, being an addict doesn't make you one. The way I see it, an alcoholic is a person who can't drink and who can't use drugs, and an addict is a person who can't use drugs and can't drink. But that doesn't mean that every AA meeting has to be open to a discussion of drugs if it doesn't want to. Every meeting has the right to say it doesn't want drugs discussed. People who want to discuss drugs have other places where they can go to talk about that. And AA is very open to giving the Steps and Traditions to other groups who want to use them. I know this from my own experience, because I wrote to the General Service Office and got permission to start Pills Anonymous and Chemical Dependency Anonymous. I did that when I was working in the field of chemical dependency. We started groups but I didn't go to them because I get everything I need from AA. I don't have any trouble staying away from talking about drugs, and I never introduce myself as an alcoholic/addict.

I'm annoyed — or maybe irritated is a better word — by the people who keep insisting that AA should broaden to include drugs and addictions other than alcohol. In fact I hear it

said that AA should change its name to Addicts Anonymous. I find that a very narrow-minded view based on people's personal opinions and not on good sense. History tells us that the Washingtonians spread themselves so thin they evaporated. Jim B. says the greatest thing that ever happened in AA was the publication of the Big Book, because it put in writing what the program was and made it available all over the world. So wherever you go it's the same program. I don't see how you could change the program unless you changed the book and I can't see that happening.

GV: It's a question of singleness of purpose?

Dr. Paul: That singleness of purpose thing is so significant. It seems to be working; why would we change it? I can't think of any change that would be an improvement.

GV: Nowadays drunks seem to come to meetings already dried out, but that wasn't always the case.

Dr. Paul: No, it wasn't. You don't get Twelfth Step calls as dramatic as they used to be. Now I find that if you're called upon to make a Twelfth Step call, it'll be on somebody who is in the hospital. You find out when they're available and not in some other kind of meeting, and make an appointment. But this might change as the number of treatment programs begins to fade out.

I used to make "cold turkey" calls, where the alcoholic hadn't asked for help. One time I went to see this guy who was described to me as a big husky fellow. He was holed up in a motel. I found out from the manager of the motel that he was on the second floor, and as I was walking up the outside stairs to get to his place, I thought to myself, if this guy comes charging out the door, he could easily throw me over the stair railing and I'd end up on the concrete. So I thought, well, the good news is I'd probably be one of AA's first martyrs. Then I thought, yeah, but I'd be an anonymous martyr. I made the call anyhow, and he got sober for a while.

GV: In your Big Book story, you say that acceptance is the key to everything. I wonder if you've ever had a problem accepting what life hands you.

Dr. Paul: I think today that my job really is to enjoy life whether I like it or not. I don't like everything I have to accept. In fact, if everything was to my specifications and desires there would be no problem with acceptance. It's accepting things I don't like that is difficult. It's accepting when I'm not getting my own way. Yes, I find it very difficult at times.

GV: Anything specific?

Dr. Paul: Nothing major, though it sometimes seems major that I have to accept living with my wife Max and

her ways of doing things! She is an entirely different person than I am. She likes clutter, I like things orderly. She thinks randomly and I like structured thinking. We're very, very different. We never should have gotten married! Last December we were married fifty-five years.

GV: I guess she knows your thoughts on this matter.

Dr. Paul: Ad nauseum.

GV: You're still going to meetings?

Dr. Paul: I'd say five or six a week.

GV: Do you and Max go to meetings together?

Dr. Paul: Max isn't in AA, she's in Al-Anon and she's still very active in it. But I go to Al-Anon too, and that helps a great deal, and Max comes to open AA meetings with me and that helps too. It's kind of like Elsa C. used to say: when two people have their individual programs, it's like railroad tracks, two separate and parallel rails, but with all those meetings holding them together.

GV: Do you think you'd still be married if you hadn't gone to meetings all these years?

Dr. Paul: I'm sure we wouldn't. I initially thought that the Serenity Prayer said I'd have to change the things I couldn't accept. So I thought, well, we can't get along so it's time to change the marriage. I used to go

around looking for old-timers who would agree with me and say that's what the Serenity Prayer meant. But Max and I finally made a commitment to the marriage and stopped talking about divorce and started working our programs. In fact we tend to sponsor each other, which is a dangerous thing to do, but we help each other see when we need more meetings, or need to work a certain Step or something like that.

GV: Do you have, or did you have, a sponsor?

Dr. Paul: Early on I was talking to a friend of mine, Jack N., who was sober a couple of months longer than I was. Jack and his wife and Max and I used to go to AA speaker meetings together. I was telling him how my home group was nagging at me because I didn't have a sponsor, and on the spur of the moment I said, "Why don't you be my sponsor?" and on the spur of the moment he said to me, "I'll be your

sponsor if you'll be my sponsor." And I said, "I don't know if they'll allow that." But we decided to try it and it worked out. He calls me 'cause I'm his sponsor and I call him 'cause he's my sponsor so I guess we call each other twice as often. We're still sponsoring each other. That's been going on for twenty-seven years. He moved to L.A. but we stay in touch, mostly by phone.

GV: Is there a tool or a slogan or a Step that is particularly useful to you rightnow?

Dr. Paul: Pretty much every morning, before I get out of bed, I say the Serenity Prayer, the Third Step Prayer, and the Seventh Step Prayer. Then Max and I repeat those prayers along with other prayers and meditations at breakfast. And I say those three prayers repeatedly throughout the day.

I grew up thinking that I had to perfect my personality, then I got into AA, and AA said, no, that isn't the way we do it: only God can remove our defects. I was amazed to find that I couldn't be a better person simply by trying harder!

What I've done with a number of problems — like fear and depression and insomnia — is to treat them as defects of character, because they certainly affect my personality adversely. With de-

pression, I've never taken any antidepressants. Instead, with any defect I want to get rid of, I become willing to have it removed, then I ask God to remove it, then I act like he has. Now, I know God has a loophole that says he'll remove it unless it's useful to you or to my fellows. So I tell him I'd like my defect removed completely, but he can sleep on it, and in the morning he can give me the amount he wants me to have, and I'll accept it as a gift from him. I'll take whatever he gives me. I've never done that when he hasn't removed a great deal of my defect, but I've never done it when he has permanently and totally removed any defect. But the result is that I no longer fight myself for having it.

GV: That's a helpful way of seeing things. It makes defects into a gift.

Dr. Paul: That's right. And it's the Rule Sixty-two business [see *Twelve Steps and Twelve Traditions*, p. 149]. It's like Father Terry always says, "Be friendly with your defects." In fact some poet said, "Hug your demon, otherwise it'll bite you in the ass." Poets can talk like that.

GV: Has your sponsoring changed over the years?

Dr. Paul: I do a lot more stuff by telephone. When I'm speaking at a meeting, if I think of it, I give out my home phone number. So I get a lot of phone calls from all over the country. People ask me if I'm willing to help

them as a sponsor and I tell them, well, you call me every day for thirty days, or maybe sixty or ninety or whatever, and then they call me every day, and we get to know each other, and during that time we find out what it's like to be relating to each other. It's kind of a probationary period. Then if they still want me to be their sponsor, we'll go ahead and if they don't, we move on and there's no loss. And this gets them accustomed to calling, so when they have a problem, they don't have to analyze it at great depth and decide if it's bad enough that they should bother me with a phone call. I haven't personally been doing each Step individually with people as much, but I've redone all the Steps myself on an average of every five years. And every time I've done that, my sobriety has stepped up to a new plateau, just like the first time I did them.

Sometimes people call me 'cause they're feeling in a funk, their sponsor has moved away or died, or they've moved away from their sponsor, or the meetings don't mean much anymore. They aren't getting anything out of AA. And because of my relationship with pills, I've had a lot of people come to me and say they've got — what do you call it? — a "chemical imbalance." They're seeing a counselor who says, "Yeah, you're depressed," and the counselor wants to start them on an antidepressant. My suggestion is, if you want to do some-



thing like that and you haven't done the Steps in a number of years, do the Steps first. And repeatedly people will do that and decide they don't need the pills.

GV: When you speak at out-of-state AA meetings, does Max go with you?

Dr. Paul: I don't go unless she goes.

GV: Why not?

Dr. Paul: Because I decided I didn't come to AA to become a traveling salesman and be away from home. So we go where it's a big enough event that they can take us both. And what's really more fun is if it's a mixed event where Max can speak, especially if she gets to speak first. She likes that. She likes to say that I say that she tells a perverted version of my drinking story. Then she points out that I was the one who was drinking and she was the one who was sober.

GV: There are many more young people in the Fellowship now. Do you think young people have special problems because they're getting sober at such an early age?

Dr. Paul: People always say they're so glad to see the young people come in, and I agree, but I'm glad to see the old people come in too. I like to see anybody get sober. It's hard to say whether your pain is greater than my pain or mine's greater than yours. I'm sure that young people have problems, but we all have problems — gays have

problems, people who are addicted to other drugs have problems, single people have problems. I can't think of anything more of a problem than being a woman alcoholic trying to get sober, married to a practicing alcoholic male, and with a handful of kids. That must be as about as big a problem as you can get. Everybody has special problems.

I've said it often and I haven't had any reason to change my mind: the way I see it, I've never had a problem and nobody will ever come to me with a problem such that there won't be an answer in the Steps. That gives me a great deal of confidence. I think the program — the Steps — covers everything conceivable.

I'm getting way off from what you asked me. I can't give short answers. I often tell people that the more I know about something, the shorter the answer, but when I don't know, I just make up stuff.

GV: Did you find it helpful at some point to become familiar with the Traditions?

Dr. Paul: I find the Steps easier to understand than the Traditions and the Traditions easier to understand than the Concepts. In fact, I find the long form of the Traditions considerably easier to understand than the short form, and I find that the long form is much more specific on the idea that AA is for alcoholics and not for just anybody who wants to come

in. A lot of people like that phrase "The only requirement for membership is a desire to stop drinking," and people interpret that to mean that if you're willing to not drink, you can call yourself an alcoholic and a member of AA. That's not at all what it says. I think it means that if you're an alcoholic with a desire to stop drinking, that's the only requirement for membership.

GV: How many years have you been sober now?

Dr. Paul: Twenty-seven.

GV: Twenty-seven years of meetings. Have you seen any changes in the way the meetings are conducted?

Dr. Paul: All I see is that there are more meetings and bigger meetings and more variety of meetings. I just love to see AA grow. I enjoy meetings. I've been to meetings in Singapore and Hong Kong and Japan, but I think the most interesting was when Chuck C. and Al D. and I were vacationing in the Cayman Islands and we couldn't find any meetings. We were twelfth-stepping alcoholics there and decided we all needed a meeting, so we went to the local newspaper and got some publicity. Then we had a public information meeting, then we got a regular meeting started. As far as I know, that meeting is still going.

GV: So you haven't gotten bored by Alcoholics Anonymous.

Dr. Paul: Well, I thought about that some years back. Why is it that so many people aren't around any more? Where do they go? It seems to me that most of the people who leave AA leave because of boredom. I made up my mind I wasn't going to get bored, and one of the things I do when I get bored, if I can't think of anything else to do, is to start a new meeting. I've probably started fifteen or twenty. The most recent one was last November. I got a couple of friends together and we started a "joy of sobriety" meeting — it's a one-hour topic discussion meeting and it has to be a topic out of the Big Book and it has to be on the program and how you enjoy living the program. It's fast-moving and we just have a lot of fun. It's a great antidote for depression.

GV: What's the most important thing you've gotten from AA?

Dr. Paul: This whole thing is so much more than just sobriety. To be sober and continue the life. I had before — that would have driven me back to drink. One of the things I really like about AA is that we all have a sense of direction, plus a roadmap telling us precisely how to get there. I like that. All I want out of AA is more and more and more until I'm gone.