Three developmental models of self-help groups for alcoholics: The Western “recovery” model, the Japanese “ripening” model, and the Aboriginal “decolonizing” models

The 39th annual meetings of the Society for Cross-Cultural Research
February 17-20, 2010, Albuquerque, New Mexico

Tomofumi Oka, PhD, Sophia University, Tokyo
Richard Chenhall, PhD, University of Melbourne, Melbourne

Our research aim has been to examine how indigenous cultures influence the conceptual models for overcoming alcoholism that indigenous self-help groups have developed.

First, we talk about the recovery model for alcoholics. This recovery model is thought to have been introduced by Alcoholics Anonymous, the world’s first self-help group for alcoholics, which was started in the US in the 1930s, and has influenced a large number of alcoholics’ self-help groups in the world (Room, 1998).

It is not easy to define the recovery model because “recovery” seems to be a very common word that is used to describe anything related to changing alcoholics into something different. So, we will use the term “recovery model” in a limited way, as it is used by Alcoholics Anonymous.

The recovery model has the following features:

1. The recovery model considers alcoholism as a disease, as opposed to a vice (White, Boyle & Loveland, 2002).
2. The recovery model is closely related to the Twelve Steps program of Alcoholics Anonymous. This means recovery is thought to be realised step by step.
3. The recovery model is often linked to Christian spirituality, and so the process resembles a religious conversion (Greil & Rudy, 1983).

Hence, we can ask the following questions:

1. Are there cultures where alcoholism is considered to be neither a disease nor a vice?
2. Because the recovery model uses steps, it might be related to the linear concept of time. So, is this model effective for people living with a circular concept of time? (Janca & Bullen, 2003; Yamada & Kato, 2006)
3. Even though many members of Alcoholics Anonymous are not earnest Christians, does their recovery model not use Christian religious frameworks? If so, does the recovery model help people who are not familiar with these religious frameworks?

**Methods and samples**

With these questions in mind, we collected data through our ethnographic fieldwork with Japanese self-help groups for alcoholics. These groups are called Danshukai (Chenhall & Oka, 2009) in Japan. The name means “abstinence society.” Danshukai was established in the 1950s; it is the largest self-help organisation for alcoholics in Japan, with approximately 10,000 members.

Since the end of 2006 we have attended many Danshukai meetings, conducted
participatory observations, interviewed leaders, and collected and analysed their publications.

We have also done similar research with Aboriginal self-help groups in Australia. Today in Australia, there is a nationwide group of Aboriginal alcoholics who hold their own meetings both in the community, and in Aboriginal owned and run alcohol and drug rehabilitation centres.

Chenhall, an Australian anthropologist, resided in one such Indigenous-run residential alcohol and drug treatment centre, and conducted ethnographic research (Chenhall, 2006, 2007).

At that residential centre, Alcoholics Anonymous meetings were held and their methods were used by the members and also the ex-alcoholic staff working at the centre.

Although we did not conduct systematic research on Alcoholics Anonymous, we have had a lot of experience with Japanese and Australian Alcoholics Anonymous, and we had reviewed and used research literature on the organisation.

**Findings**

We found interesting patterns in the developmental models for alcoholics. We have called these the “recovery,” “ripening” and “decolonizing” models. The main users of these models are Westerners, Japanese and Australian Aboriginal peoples.

<table>
<thead>
<tr>
<th>Models</th>
<th>Recovery</th>
<th>Ripening</th>
<th>Decolonizing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main users</td>
<td>Westerners</td>
<td>Japanese</td>
<td>Australian</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Aborigines</td>
</tr>
<tr>
<td>Main tools</td>
<td>Steps</td>
<td>Vows</td>
<td>Stories</td>
</tr>
<tr>
<td>Learning</td>
<td>Big Book</td>
<td>Simple phrases</td>
<td>Anecdotes</td>
</tr>
<tr>
<td>materials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inherited</td>
<td>Christianity</td>
<td>Zen-Buddhism</td>
<td>Indigenous</td>
</tr>
<tr>
<td>religious</td>
<td></td>
<td></td>
<td>spirituality</td>
</tr>
<tr>
<td>concepts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behaviour</td>
<td>Journeying</td>
<td>Waiting</td>
<td>Resistance</td>
</tr>
</tbody>
</table>

In the recovery model, the main tool is “Steps.” In Alcoholics Anonymous, these steps are called the “Twelve Steps,” and by following these steps members try to reach their goal, which is sobriety. As the learning materials, Alcoholics Anonymous groups use their “Big Book,” just as Christians use “the Bible” to provide guidance and a philosophy for life. It is well known that Alcoholics Anonymous was established by members of a Christian group called the Oxford Group (Dick B., 1992). So, we can say that the recovery model has Christian roots. The members’ behaviour is called “journeying.” Kasl (1992) describes members on the Twelve Steps’ program as being “on a healing path” or “a spiritual journey.” They take an active role in proceeding to the next step.
The Japanese self-help groups known as Danshukai are very familiar with Alcoholics Anonymous’ Twelve Steps. However, in the fifty-plus years since they were established, they have never introduced the steps into their developmental model. Instead, Danshukai uses “Vows.” All members, including beginners and old-timers, recite the same vows at every meeting. In the recovery model, Alcoholics Anonymous members use Big Book. In contrast, Danshukai members rarely use their textbooks. Danshukai’s “therapeutic theory” can be summarised in just two simple phrases: “Ichinichi-Danshu (One-day-abstinence),” and “Reikai-Shusseki (Attending Meetings).” Instead of spending time thinking about theoretic matters, Danshukai members are encouraged to go and attend meetings. A well-known phrase, “Pursue your abstinence with your feet (not with your head),” symbolises the “practice-first” orientation of Danshukai.

This tendency to avoid theoretical argument and stress the importance of practice might have stemmed from Japanese Zen-Buddhism. According to a Buddhist philosopher, Nakamura (1964), Japanese Zen “aims for detachment from discursive knowledge.” Japanese Zen masters adopt as their motto “the precept: ‘Practice only sitting.’” Likewise, Danshukai’s motto is “Practice only attending meetings.” Another similarity between Danshukai and Zen is the use of “the sayings of the master.” In the early days of Danshukai, “the sayings of Mr. Matsumura,” the first president of the national organisation of Danshukai, were used by many Danshukai. Each of the fifty sayings of Mr. Matsumura is very short – shorter than a haiku – and they are deliberately kept simple so people can ponder their hidden meanings.

While the recovery model is likened to a journey, the Japanese ripening model is likened to waiting for something to happen. Given this passivity, we call it “the ripening model” taken as metaphor from the practice of farming. Farmers do not know, and do not try to know the complicated biological processes that take place as their crops ripen. However, they do know about the conditions that are required for a good harvest, and they will endeavour to ensure they occur. Likewise, Danshukai members seem to be uninterested in how their abstinence is realised, for example, step by step. They are more concerned about what is happening in their families, as family circumstances are seen as being the most influential factor in an alcoholic’s life.

In Aboriginal Alcoholics Anonymous meetings, Steps are also used. However, stories and anecdotes are more important, because stories are more directly connected to Aboriginal culture. Importantly these stories are told within a group and it is this group focus that gives individual members support. Aboriginal AA members state that AA is a spiritual program because it enables them to reconnect with their Aboriginality but also with each other. An emphasis on regaining Aboriginality through recovery is an important facet of Aboriginal stories. Aboriginal members often assert that if it were not for the introduction of alcohol and drugs by the first British settlers, Aboriginal people would never have lost their culture. Thus, abstinence from alcohol and drugs was associated with “getting back to culture.” So, we can say that their behaviour in the model is resistance. Through the effects of colonization, Aboriginal spirituality was destroyed, and Aboriginal AA members claimed that the notion of spirituality is therefore central to their recovery.

Discussion

Because of the limited time, I will focus my discussion on the implication of the Japanese “ripening” model to the relationships between self-help groups and supporting professionals.
When Danshukai was established about fifty years ago, there were very few medical services for alcoholics in Japan, so Japanese alcoholics could not avoid becoming dependent on Danshukai. However, these days there are various medical services available to alcoholics, and as a result, the membership of Danshukai has been decreasing. Probably because of its decreasing number of members, Danshukai leaders have introduced more medical or psychological terms and concepts to their meetings in the hope that the professionals will acknowledge their trustworthiness and refer more of their patients to Danshukai.

However, we have noticed that this change is causing a serious dilemma for Danshukai. If Danshukai continues to introduce more professional concepts to their practice, they might be acknowledged more by professionals and have more new alcoholics referred to them, but Danshukai will lose its special identity. Danshukai is but one choice among many support systems, including professionally-led day care centres. On the other hand, if Danshukai tries to keep to its original “ripening model,” it will be difficult for it to get the support of professionals, who have trained with “culturally-biased” or Western frameworks.

In conclusion, I would like to stress that if social scientists study the rules of the original practice of self-help groups that are naturally based on their indigenous cultures, it will help other professionals, especially medical professionals, understand the way self-help groups think.

References


