Welcome to the new issue of Markings, your archives interchange. We hope you will enjoy the new content and the new appearance. Starting with this issue, Markings will be published six times a year with an expanded focus. We continue to welcome articles contributed by local archivists and we are always on the lookout for more material. We also would like to explore the wealth of our own historic files and present articles on the history of our Fellowship. Each issue will focus on a theme. This first one covers some of the early recovery efforts that predate the birth of Alcoholics Anonymous. Understanding and appreciating the historic context in which our Fellowship came about makes us stronger. The unfolding themes might spark your own curiosity to further explore the roots of our programs, the origins of our structure, our guiding principles, all that adds up to the magic of Alcoholics Anonymous.

What A.A. Owes to Its Antecedents

Most of the ideas and principles that define how A.A. works were far from new at the time of Bill W. and Dr. Bob’s historic meeting in 1935. Drinking was a serious problem in North America starting in the late eighteenth century, when molasses then being imported from Barbados was used to manufacture rum.

Attempts were made to address the problem, though until the early 1840s, no one seriously believed that alcoholics could be helped. The early literature was more concerned with describing a drunkard’s behavior and symptoms than with finding a “cure,” and the Temperance Movement of the 1820s focused on moderating drinking behavior – in effect, preventing alcoholism, not dealing with it once it had occurred.

The rise of the Washingtonian Society in the 1840s introduced the idea that the drunkard – once considered hopeless – could be restored to a useful place in society. Over the next 100 years, various treatments and therapies were attempted, some with modest success. But it was the founding members of Alcoholics Anonymous who finally brought these various strands of knowledge together into a program of recovery that has been consistently effective for alcoholics around the world.

‘This Odious Disease’

The first major American document on the effects of alcoholism was “An Inquiry Into the Effects of Ardent Spirits Upon the Human Body and Mind,” by Dr. Benjamin Rush (1745-1813), who is credited with laying the groundwork for the American temperance movement. Rush, a protégé and friend of Benjamin Franklin, was a member of the Continental Congress and a signer of the Declaration of Independence.

Rush’s writing, which was first published around 1785, dealt exclusively with “ardent spirits” (distilled liquors); he felt that it was difficult to drink enough “fermented liquors” (beer, wine, and cider) to produce intoxication, and thus discounted them. While that and some other of his observations may be questionable, his description of the active drunk and his insight into drinking behavior should resonate with any present-day alcoholic.

He begins with the immediate effects of drinking: “This odious disease (for by that name it should be called) appears with more or less of the following symptoms: . . . 1. Unusual garrulity. 2. Unusual silence. 3. Captiousness, and a disposition to quarrel. 4. Uncommon good humour, and an insipid simpering, or laugh. 5. Profane swearing, and cursing. 6. A disclosure of their own, or other people’s secrets. 7. A rude disposition to tell those persons in company whom they know, their faults. . . After a while the paroxysm of drunkenness is completely formed. The face now becomes flushed, the eyes project. . . the head inclines a little to one shoulder, the jaw falls, belchings and hickup take place, the limbs totter, the whole body staggers.”

Dr. Rush goes on to describe the chronic physical effects, including loss of appetite and “a puking of bile . . . in the morning.” He mentions liver problems, jaundice, hoarseness and a husky cough, “redness and eruptions on different parts of the body,” which he names “rum buds when they appear in the face. . . . A fetid breath, composed of every thing that is offensive in putrid animal matter,” as well as “frequent and disgusting belchings.” And last, he says, come madness and ultimately death.
Rush enumerates a few possible remedies and describes several cases in which the drunk did manage to shake his habit. By and large, though, he offers only random suggestions for recovery.

**The Temperance Movement and the Washingtonians**

The first organized attempts to grapple with the alcohol problem began in the early 1800s. A temperance society was formed in Massachusetts in 1813, another a few years later in Connecticut, and in 1826 the American Temperance Union was established. The reform spread throughout the United States. By the end of 1828 there were approximately 225 temperance societies, with more than 100,000 members who had signed a pledge of abstinence.

The movement advocated temperance for everyone, not just those who were already problem drinkers, and at first opposed only the use of distilled spirits, not fermented spirits. Many of the poor objected because they could only afford to drink cider and beer, not wine. In response, a new pledge was initiated, prohibiting the use of all spirits. This was called the teetotal pledge, which, according to one story, was “a name first given to it in England, and which had its origin in the prolonged and incoherent stuttering, by one who was taking the pledge, at the first letter in the word ‘total.’” One result of the new pledge was a falling off in membership, since many who were willing to sign the original one balked at the more restrictive version.

The temperance movement also aimed to wipe out the sale of alcohol. Not only did its members agree to abstain, but they campaigned to close down distilleries and merchants who dealt in liquor and they lobbied for temperance legislation.

The temperance movement, though, took a pivotal turn in April 1840. It was then that six drinking buddies got together and, more or less on a whim, founded a temperance society that in little more than four years would sober up many thousands of drunks and, for the first time, focus attention on the alcoholic as a person. These six comrades were spending Friday evening in Chase’s Tavern in Baltimore, drinking as usual, and began discussing a temperance lecture scheduled for that evening. Four of them decided to attend and report back to the others, and when they returned the six talked it over and decided to form their own society. A couple of days later they met, drew up the following pledge, and signed it: “We whose names are annexed, desirous of forming a society for our mutual benefit, and to guard against a pernicious practice, which is injurious to our health, standing, and families, do pledge ourselves as gentlemen, that we will not drink any spirituous or malt liquors, wine, or cider.” They named the new organization the Washington Temperance Society, in honor of the nation’s first president.

Here for the first time were drunks banding together to solve their own problem, rather than to attack the ills of society as a whole. The movement caught on quickly, especially after the founders decided on a format that A.A. members will find familiar. According to an article published in 1840, “The president . . . suggested that each member should rise in his place and give his experience; and, by way of commencment, he arose and told what he had passed through in the last fifteen years, and the advantages he had derived from signing the total abstinence pledge.”

The movement soon spread to other cities and began to hold large public meetings; several powerful speakers rose to prominence in its ranks, and within two or three years the Washingtonians could be found in every part of the country, and claimed thousands of members (the exact number is unknown, but probably came close to 400,000 at the peak of popularity).

But its success, though spectacular, lasted only a short time. As early as 1843, interest was beginning to fade, and by 1848 the Washingtonians had virtually disappeared, except for some lingering activity in Boston. But the impact of this movement went far beyond its success rate, for it introduced two elements that changed alcoholism treatment significantly: the concept that the alcoholic was not simply a moral degenerate but a human being who could and should be helped, and the role play by “reformed” drunkards themselves in their own rehabilitation.
At several points in his writings, A.A.’s Bill W. reflected on the Washingtonians as an object lesson for Alcoholics Anonymous. The two were similar in many respects: alcoholics helped each other, held weekly meetings, shared personal experience. Each featured the fellowship of a group and the availability of its members, reliance on God, and of course, total abstinence. According to Bill, it was the lack of guiding principles like A.A.’s Traditions that spelled trouble for the Washingtonians. The society lost its primary focus on helping the alcoholic and became embroiled in controversies within the larger temperance movement.

And without A.A.’s pivotal insistence on anonymity, the society relied too heavily on its more prominent spokesmen, at least one of whom got drunk and damaged the Washingtonians’ public reputation and credibility. By contrast, A.A. learned from hard experience, weathered the multitude of mistakes its groups and members made in their search for a road to sobriety, and fashioned principles that would keep it alive and growing through precisely the kinds of problems that defeated the Washingtonians.

Lincoln’s Temperance Speech

At the height of its popularity, the Washingtonian Society attracted the attention of many prominent people, not the least of whom was Abraham Lincoln, whose speech delivered to the Springfield Washingtonian Temperance Society in February 1842 has become a classic. He began by praising the society’s success, comparing it to advocates of other approaches who “have no sympathy of feeling or interest with those very persons whom it is their object to convince and persuade.

“But when one who has long been known as the victim of intemperance bursts the fetters that have bound him and appears before his neighbors ‘clothed in his right mind,’ a redeemed specimen of long lost humanity, and stands up with tears of joy trembling in his eyes to tell the miseries once endured, now to be endured no more. . . . In my judgment it is to the battles of this new class of champions our late success is greatly, perhaps chiefly, owing.”

Lincoln criticizes the traditional temperance advocates for speaking to drunks “in the thundering tones of anathema and denunciation” and says that “it is not wonderful that they were slow, very slow, to acknowledge the truth of such denunciation. . . . To have expected them to do otherwise. . . . was to expect a reversal of human nature. . . . On this point the Washingtonians greatly excel the temperance advocates of former times. Those whom they desire to convince and persuade are their old friends and companions. They know they are not demons, nor even the worst of men; they know that generally they are kind, generous and charitable, even beyond the example of the more staid and sober neighbors. . . . And when such is the temper of the advocate. . . no good cause can be unsuccessful.”

The Emmanuel Movement and the Peabody Method

Once the Washingtonians had brought attention to the rehabilitation of the individual drunk, the stage was set for the advent of specific therapies directed toward the alcoholic. The best known of these was the Peabody Method, prevalent in the 1930s when little else was being done for the alcoholic. Richard Peabody’s book *The Common Sense of Drinking* was on the reading list of many early A.A. members, though it’s hard to gauge its influence on the development of A.A.

The Peabody Method had its roots in the Emmanuel Movement, which began in Boston in 1906 at the Emmanuel Episcopal Church. Its founder was Dr. Elwood Worcester, and one of the earliest practitioners was Courtenay Baylor, an alcoholic who may have been the first paid alcoholism therapist in the country. The movement encompassed not only a therapeutic approach but group support and service to others. The church provided social hours after the weekly classes, as well as a social services department that gave moral support and some material assistance.

One of the parishioners, Ernest Jacoby, founded a club for alcoholics in 1910. The club held meetings in the church basement; its motto was “A club for men to help themselves by helping others.” The club moved out of the church in 1914, but the church continued to send it new members and it remained active for more than 30 years.

Worcester, Baylor, and Peabody each believed that all diseases, including alcoholism, had physical, mental, and spiritual aspects, and they used relaxation therapy and suggestion to effect change in their patients. The way to deal with a problem, they said, is not to fight it head on but to divert the patient’s attention to something more positive.

For Worcester and Baylor, the object of attention was a life of spirituality and service; for Peabody, who departed from his religious roots and took the therapy in a more professional direction, it was the controlled and productive use of time. In contrast to temperance advocates, who emphasized the evils of drink, these therapists worked to reduce the patient’s guilt and concentrated on the benefits of a sober life.

In *The Common Sense of Drinking*, Peabody advocated a concept of surrender reminiscent of A.A.’s First Step:
“The first step to sobriety is surrender to the fact that the alcoholic cannot drink again without disastrous results.” The patient, he said, also needs to be convinced that he needs help. In the same book he used the phrase “half measures are to no avail,” most likely Bill W.’s source for the phrase “half measures availed us nothing.”

The Oxford Group

The Oxford Group, an evangelical Christian movement started in the 1920s by Frank Buchman, had a profound influence on the early development of Alcoholics Anonymous. Bill W. and Dr. Bob attended Oxford Group meetings to find help with their drinking, and it was Oxford Groupers who brought them together. The Akron A.A.s were active in group meetings, and once Bill W. returned to New York, he was greatly influenced by Dr. Samuel Shoemaker of Calvary Church, a leader of the U.S. Oxford Group and one of the earliest and staunchest friends of A.A. among the clergy.

Four basic Oxford Group principles became the foundation for A.A.’s Twelve Steps: surrendering to God through rigorous self-examination, confession of character defects to another human being, making restitution for harm done to others, and giving without thought of reward. More problematic for the alcoholics, though, were the “Four Absolutes”: absolute honesty, absolute unselfishness, absolute purity, and absolute love. For a Fellowship that was to ultimately acknowledge, “we seek spiritual progress rather than spiritual perfection,” absolute values were hard to swallow.

The A.A.s attended Oxford Group meetings regularly for about the first two years, somewhat longer in Akron, but broke away for several reasons. Frank Buchman was not particularly interested in helping drunks — he concentrated increasingly on working with world leaders to bring peace. Further, the A.A. pioneers believed that the Oxford Group’s evangelical approach would not work with alcoholics, and they had come up with the concept of “God as we understood him” rather than a specifically Christian or religious approach.

Bill’s early, unsuccessful experience with exhorting drunks to get sober had indicated a key truth: alcoholics would respond to suggestions, but you could not tell them what to do. And finally, the A.A.s stressed the need for anonymity, rather than the Oxford Group’s practice of working with prominent people.

Alcoholism Treatment at Towns Hospital

Just as it took the temperance movement a long time to value the drunk as a person, it took the medical profession many years to see the necessity of adequate treatment for alcoholics. Towns Hospital in New York City, where Bill W. eventually got sober, was one of the first to recognize the importance of good medical treatment for alcoholics.

In a 1979 article written for “The Modern Hospital,” its founder, Dr. Charles Towns, a good friend of A.A., wrote that “the alcoholic is the most abused and neglected of sick patients.” The medical profession, he wrote, has not “appreciated the fact that the alcoholic cannot be arbitrarily deprived of his alcoholic stimulants without the doctor having to deal with delirium tremors.”

No alcoholic, Towns said, “has a fair chance when he is simply sobered up. Unless something medically definite is done for the chronic alcoholic, his end is either the morgue or the madhouse. . . . At the present time alcoholism is treated as a disgrace. The alcoholic is humiliated, punished, and still further degraded, and society is doing everything it possibly can to destroy him utterly. This is all wrong.”

In the 1930s, Bill W. came under the care of Dr. William D. Silkworth at Towns. “The little doctor who loved drunks,” as Bill later called him, Silkworth introduced to A.A. the basic concept of alcoholism as a disease — an obsession of the mind, coupled with an “allergy,” as he called it, of the body.

After Bill’s transforming experience at Towns, he left the hospital and, following Silkworth’s counsel, went to work with other drunks. After several months of notable failure on Bill’s part, the doctor again set him straight. Silkworth gave the co-founder of A.A. what Bill later called in AA Comes of Age “a great piece of advice,” without which, “A.A. might never have been born.”

Silkworth cautioned Bill against “preaching” to alcoholics or trying immediately to sell them on Oxford Group precepts like absolute honesty. The doctor advised Bill to discuss his own experience with “the obsession that condemns them to drink and the physical sensitivity or allergy of the body that condemns them to go mad or die if they keep on drinking.”

This advice set the stage for Bill’s meeting with Dr. Bob — a meeting in which Bob, the medical man, understood for the first time the medical facts of his own disease. That meeting, which Dr. Bob had envisioned as a fifteen-minute courtesy call, lasted all night and into the following day, and the miracle of one alcoholic talking to another has since changed the lives of millions of suffering alcoholics.