

Abstract

In 2004 an empowerment project was implemented in order to aid GA in Denmark, at that time a very small twelve step fellowship. The problems encountered raised few interesting questions; the aim of this qualitative research project is to answer some of them. In order to do so the history of GA is presented, the relationship between GA and AA is explored, and the programme of the twelve step fellowships is explained. A focus is put on the active part GA and AA have played in the medicalization of society, and interesting organisational features of the fellowships are discussed. In-depth interviews with enculturated members of GA are used in order to answer questions such as: Why do some gamblers prefer to use AA rather than GA? How is GA different from AA, even if the organisational features are the same? The answers seem to indicate that GA in Denmark is at present unable to provide all the help and structure that AA is capable of. The members interviewed seem to think that GA should try to emulate AA more e.g. put more emphasis on spirituality and "the programme," but worry that this might alienate gamblers seeking help. Spirituality in this instance seems to have more to do with willingness to do service work than with religion. Something in the process of gambling seems to make pathological gamblers less interested in service work (helping others) and more self reliant (grandiose) than alcoholics.

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1. Introduction

There are ...associations such as AA which provide a full doctrine and almost a way of life for their members. Often these associations are the culmination of years of effort on the part of variously situated persons and groups, providing exemplary objects of study as social movements.

Goffman (1990, p. 34).

In 1995 I was working in one of SAA's rehab-centres in the middle of nowhere in the North-Western part of Iceland. SAA was about to start a treatment program for pathological gamblers and one of the counsellors at the Stadarfell rehab was being trained as a certified gambling therapist. He was full of enthusiasm and shared his growing knowledge with me and the other therapists. I really wasn't interested! A few months later, at a Eurocad conference I listened to Dr. Sheila Blume, a more prominent figure in the field of gambling studies than I realised at the time, talk about gambling problems, and the effect on both the gambler and the family. She said that pathological gambling was the same as shooting up with amphetamines! I didn't believe that, but I was interested enough to follow Blume's recommendation and buy "*The Gambler*" by Dostoyevsky, but then again, I've always liked to read good books.

My main contact with gamblers at that time was through working with relapse prone chemically dependent persons. It seemed like many addicts succeeded in stopping drinking or drugging, but started gambling instead, usually gambling on machines. In some cases the addiction was concurring, the person was addicted to a combination of gambling and chemicals. This may explain in part SAA's interest in treating pathological gamblers; other explanations have to do with business expansion and the fact that SAA owns gambling machines. There is much money involved in gambling, and those making money from it usually want to look responsible, everything is highly political about the gambling industry.

Maybe my lack of interest in gambling addiction had something to do with the problem of integrating a pure behavioural (or process) addiction into the theory I had been taught when I was in treatment for alcoholism, and in a revised version, used when working as a therapist. There is no

room for discussing these problems here, let it suffice to say that AA's theory of alcoholism as an allergic reaction can not explain gambling addiction (this "theory" was probably meant more as a metaphor anyway). In 2002, after moving to Denmark and writing a BA on Drug Scares, I became very interested in pathological gambling, precisely because this "addiction" seemed to destroy my "addiction paradigm."

In November 2002 I got a phone call from Gizur Helgason, an Icelandic entrepreneur in the field of treatment in Denmark. He told me he had just received a "bag full of money" from the Danish Ministry of Health and now he needed someone to head the gambling treatment at the Frederiksberg Centeret. In Denmark, 1,5% of the net income of gambling machines is directed into treatment and research on gambling problems (Jørsel, 2003), 1% goes to treatment. This is in part a political measure, a good argument when it comes to defending the Danish monopoly of the gambling market against the European heavyweights like Ladbrokes that want a share of the cake. That the Danish system works well in minimizing problems related to gambling is supported by research (Bonke and Borregaard, 2006).

I was already interested in problem gambling, and the idea of starting up a new project was tempting, I just couldn't say no. I started working for the Frederiksberg Centret in January 2003, a small day-care treatment centre for chemically depended persons. FC is a Minnesota centre and the "patients" are encouraged to use mutual-aid groups such as AA and NA, the gamblers were recommended to try Gamblers Anonymous. I therefore took contact to GA in Copenhagen early in 2003. At that time there was only one, very small group in Denmark, and I soon met the two members responsible for the group. Mostly they appreciated what I was doing, but there were also some heated exchanges. Through my work and through my acquaintances in GA I have been able to follow the changes that have taken place in the fellowship, and it is one objective of this work to make that experience available in print.

I realized in the fall 2003 that GA in Denmark was in trouble. The one group, in Hellerup, seemed unable to grow, and some gamblers, eager to use the twelve step programme preferred AA to GA. Trying to find an explanation in the existing GA group and then recommend changes was, as will be explained later, impossible. After consulting the director of Frederiksberg Centre I was allowed to use some of my time to help GA, a strong GA would be very helpful for the type of treatment FC

was providing. My guiding light in this project was the concept of empowerment as often formulated within the field of Public Health (see chapter 3). This means that I tried to listen carefully to what the members were telling me, and then finding ways to help them achieve what they wanted to accomplish. Sometimes I was ahead of GA, too eager to help, as when I started up the GA homepage, without the permission of key persons in GA. They took it very kindly.

According to the GA members I was working most closely with, some of the problems facing GA just didn't seem to go away. It was difficult to recruit people for service work and many gamblers, highly motivated for working the programme, disappeared, only to be found at the tables of AA or NA. This problem adds to the already high "drop-out" rate noted by Browne (1987) in an early study of GA. This study also revealed tremendous benefits of participating in GA for those who did and could. It is not bad in itself that gamblers participate in AA or NA, but what was it that made them leave GA, was anything wrong or not working properly in GA? What was the difference between AA and GA? These were the questions that began to take form as my work with GA progressed. Was it true that the gamblers were different from the alcoholics? Were the gamblers different from alcoholics already before the addiction took hold, or did it happen in the process of the addiction, if that is the proper formulation? These are some of the questions that have baffled this researcher, hopefully the work presented here will answer some of these questions.

It is tempting to list all the things I try to avoid discussing in this work. I do not seek to answer whether pathological gambling is an addiction, or if it is a disease or where it comes from. Ole Bjerg, a Danish researcher once commented that most of what has been written on gambling addiction miss the mark, that is the authors lose sight of the gambling and start explaining something else. I agree with him, pathological gambling is a very abstract phenomenon; one becomes very aware of that when trying to explain the condition to the wife of a gambling addict. There are other issues I carefully (cleverly?) avoid such as the effectiveness or cost-effectiveness of GA. GA is not a treatment program as such and it is also very difficult, as will be seen later to evaluate the success of GA, besides who would be interested in the cost-effectiveness of GA? GA receives no economic support, and the members of the fellowship seem to think it helps them!

Before turning to the main text, a few words on terminology are necessary. In the rest of this work I will use the term compulsive gambler and compulsive gambling, as originally used in DSM III of

APA. Today's DSM IV uses the term pathological gambler and the diagnostic criteria are a little different from those of the DSM III, the changes were necessary to include new categories of gamblers (Ciarrocchi, 2002). I use the older terms on the simple ground that Gamblers Anonymous still uses compulsive gambling and the Danish GA has quite accurately translated that term into "tvangsmæssigt spil." The most popular term in Denmark for this condition is "ludomani," which was coined and is used by the largest treatment and research institute on problem gambling in Denmark, Center for Ludomani (Jørsel, 2003). Popular it may be, accurate it isn't, and it is somewhat unfortunate to indirectly hint at a manic condition (mani) in this respect; mania is an exclusion criteria in diagnosing pathological gambling according to the DSM IV (American Psychiatric Association, 2000). GA members often use ludomani, both at meetings and in interviews. At times I use "gambling problems," which can be used interchangeably with either pathological or compulsive gambling, but that actually refers to milder more transient problems with gambling. The Danish term "ludomani" seems to cover both pathological gambling and the less severe areas of problem gambling. This is hardly of relevance here, I will just as GA itself, take a somewhat phenomenological view on this issue, it's for the gambler to decide, subjectively, whether the label compulsive gambler is or is not appropriate.

2. Methodological Justification

2.1 The informants

The methods described here can be divided into two themes. The first theme has to do with the methods, or rather the spirit, of the project of assisting GA. The guiding light in that work was empowerment, as will be described later in this chapter. The second theme is the in-depth interview study that evolved out of the empowerment project. In that study five people, three women and two men were asked to talk about certain themes.

The people interviewed were all without work upon entering GA (four on some form for pension), ranged from 37-47 yrs. in age, and had very little education (one was a teacher, other had “folkeskoleeksamen”). All had been able to work earlier, one got his pension because of epilepsy, one because of high age, the other three for psychological reasons (two started school in September 2008, one is on her way to school, one male has been offered a job-training, the last one, a 72 year old woman attends courses in art and exhibits her own work when she can). Three of them had been “clean” 18-36 months; two had been clean 4-7 months. All the participants described a troubled background, alcoholism in the family, psychological problems, being adopted, and outright traumatic events. All had been to both GA and AA meetings; three had also been to NA meetings, even if only one of them is chemically addicted.

The five informants were asked, in the recorded interview, to tell about their first meeting with GA, how that happened and how it felt. Later they were nudged towards comparing GA and AA. This involved questions on the role of the twelve steps, the ambience at the meetings. A related theme was that of spirituality and service work. Toward the end of the interview the informants were asked to estimate the size of GA in Denmark (Copenhagen). Stated more clearly the questions to be answered in the interviews are:

1. Why do so many compulsive gamblers prefer Alcoholics Anonymous?

2. Will Gamblers Anonymous in Denmark follow the same path as GA in northern America, in that it will become more alike Alcoholics Anonymous than it was at the outset?
3. What changes would the members like to see in the future?
4. How big a role does “the programme” play in GA, defined as twelve step work, slogans and spirituality?

Another objective is to give an overview of the history of Gamblers Anonymous in Denmark, how it has evolved, in order to establish some sort of a base for later research into GA (this is mostly done in the next chapter). Now, before giving a more detailed description of the interviews, I would like to take a little detour and discuss the problem of insiders doing research of their own kind.

2.2 Insider vs. outsider

In his study of *The Recovering Alcoholic*, Denzin (1987) found it important make his position clear, he said that he was pro-AA. What he meant by that, is that he believes in some of the fundamental assumptions of the fellowship. It is his opinion that the methods of the fellowship have their merit in the fact that the “program” makes it possible for many alcoholics to stop drinking and live normally. It is impossible to say if Denzin really is an insider, that is a member of AA, but other researchers, like Horarik (2005) and O’Halloran (2003), are what might be termed insiders turned researchers, they are members of Alcoholics Anonymous who do research on their own “tribe.”

O’Halloran, in his paper on ethnographic studies of AA, spends some ink on the subject of “insider” vs. “outsider,” that is the pros and cons of having insider knowledge of the subject of research. He says that all social researchers bring along their personal histories and stance, and that the extent of relative “insiderness” and “identity” between researcher and subjects is best conceived of as a continuum. This is evident in the case of GA, which is not a society one is born into. Every member has identities and roles prior to entering GA, and they have other important roles and identities after entering the fellowship. Both the insider and the outsider have at one time been new to this world of the twelve steps and traditions, one of the main differences being that the insider may formulate the research questions later than the outsider (O’Halloran, 2005).

Some researchers (e.g. Rudy, 1986) have questioned this bipolar distinction (insider vs. outsider) that is rooted in positivist science that depicts the scientist as a tool, or an outsider, unaffected and separate from the subject of the research. This ignores completely both the interactive processes involved when constructing which is inside and to what degree, and the possibility that the researcher will move “in” and “out,” in this respect (O’Halloran, 2005). Probably most researchers find themselves neither fully inside, nor clearly outside, this is at least the case with this writer.

The roles of insider and outsider are clearly ideal-types, but there are instances where the researcher is an insider almost by definition; a blind researcher writing on the situation of the blind would be an obvious example. And there are advantages to this kind of research, even if it doesn’t necessarily live up to the standards of positivist science. This is also true when the object of the investigation is Gamblers Anonymous or some other twelve step fellowship. A researcher who is already a member does not have to negotiate with other members on the right to participate, and the researcher will be at home at the meetings and know some of the members. I have no idea to what degree I am considered an insider in relation to GA; I am clearly more of an insider in Copenhagen than in Aarhus, but more on that later. But as a member of another twelve step fellowship I am to a certain degree an insider and I had already been to a lot of GA meetings before I started this research project. All of the people interviewed know this, and that will have an effect on our interactions, hopefully a positive one.

O’Halloran (2005) writes about the researcher in terms of self and role, and he points out that the researcher when looked upon as 'outsider' is identified in terms of his role, not in terms of his self. The social attributes that affect the researcher's self, the perspectives and the attitudes of the researcher (issues of race, age, gender, class) are likely to be of some concern to those being researched. In the case of research on twelve step groups, those researched are likely to be interested in the researchers' attitudes to and experience of addiction as a disease and his or her tolerance of a spiritual view of life. The insider will have an advantage in terms of access, because those being researched are less likely to fear being judged and thus withhold parts of themselves or alter their behaviour in accordance to what they think are the researcher's expectations.

O’Halloran (2005) adds that the academic traditions of the Western world, emphasizing objectivity and the empirical, fail to capture the additive nature of research done by an insider. GA members are dealing with highly subjective and intangible processes that lead to observable changes in their

lives. In their recovery work, in an attempt to give meaning to their experiences, they use concepts such as God or a spiritual awakening, concepts difficult to define, measure, or understand intellectually. The role of insider turned researcher is probably not, fundamentally, any different from that of a researcher looking in from the outside. But the insider has the benefit of an additional epistemology. It helps, when it comes to interpreting such data, that the analyst is in some sense an insider. The insider will have an understanding of the commonsense views of members socialized into the fellowship and will show cultural competence in interaction with the members.

Taylor and Bogdan (1998) say that since informants are expected to share intimate and often private aspects of themselves, it is helpful and maybe necessary for the interviewers to give something back personally in exchange, they shouldn't hold back their feelings completely. They advise the interviewer to be quiet on personal matters during the interview but to open up more in other situations. I would therefore, in the spirit of Denzin, like to talk about a few of the "facts" that all the people interviewed know about me, and can influence the research at hand, and my status as an insider or outsider.

Those interviewed know that I have for many years worked in the treatment field, treating alcoholics, drug addicts and gamblers. They also know that I have been through such a treatment myself and that I am a member of another twelve step fellowship. Most of them know something about my private life, how many children I have, that I have horses and dogs. They know that my wife got sick again around the time of the recorded interviews and one of them has visited me at home. They know that I am a member of AA and that I am pro-GA.

Being a member of another twelve step fellowship does not make me an insider in Gamblers Anonymous, not by a long chalk. This was apparent when I, in January 2008, wanted to participate in a GA meeting in Aarhus. The chairperson in Aarhus was very sceptical; he wasn't sure whether it was allowed in the unity steps to have an outsider participating, let alone a researcher. The plan to participate in the Aarhus group was later aborted, for other reasons. But being an alcoholic and a member of AA, still makes me somewhat an insider, it means that I and the members of Gamblers Anonymous, in part at least, share the same "language" and have common experiences related to the twelve step fellowships.

My role is further complicated by the fact that I have not only been involved in the treatment field, treating compulsive gamblers and trying to steer them towards GA, but I have also “worked” directly for Gamblers Anonymous, voluntarily. Some years ago I was involved in starting up two GA groups, one at the Frederiksberg Hospital, and the Friday night meeting in Valdemarsgade. In both cases I was an active member of the groups for some months. The Friday group is still alive and well, with about 15 – 25 members attending meetings in the winter of 2008, but for the first five or six months there were rarely more than three or four participants, including this writer. When the group was stable enough I stopped participating and have rarely been to a GA meeting since.

At about the same time I got involved in starting up the GA groups, I was instrumental in making and launching the GA homepage in Denmark. My role in that project was to provide the written material for the homepage; the domain-name and the web-hostel were registered in my name, and paid for with my VISA-card. For the next two years I was responsible for updating the homepage, answering or redirecting e-mails sent to Gamblers Anonymous in Denmark. I have therefore been actively involved in GA, and through that period I have been in contact with some GA members for on a daily or weekly basis.

It is safe to conclude that I am not a detached researcher entering unknown territory with no presumptions and no agenda other than the scientific quest of gathering new knowledge. Helping and supporting GA has been a part of my work for 4 – 5 years now. It is also my intention to help and empower the people interviewed, and GA in general, by doing this research and writing this report. My hope is that some of the questions raised in this research can help the members, in some way, to clarify the major obstacles facing GA today, and then decide upon a line of action.

2.3 An empowering approach

A problem this researcher has been faced with in the project of helping Gamblers Anonymous is not to overdo it. The help should aim at the members becoming self-sufficient and towards eliminating the need for this form of help in the future. The helping hand should also live up to the standards of the unity steps, these steps will be discussed in the next chapter. It is not the intention of this research to evaluate the effect of this help; rather the intention is to yield further help to Gamblers Anonymous.

It is a valid objective of qualitative research to be liberating or empowering, and to aim at reinforcing a spirit of self-help and cooperation in a community (Bell, 2005). But there is a paradox involved, making such an effort problematic. Not only is the decision to try to empower someone else counter-intuitive. A researcher or a professional, who defines “the problem” and the necessary steps to solve that problem, is already ahead of what might be called the empowerment process. At the same time one probably has to have a problem to begin with, because otherwise there would not be any reason to start an empowerment process. It is extremely important to remember that real power is possessed by those who define the problem (Bergsma, 2004). It is for those to be empowered, to define “the problem” and take action. Some of the question raised in this paper, are problems that members of GA have talked about for as long as I have been involved with the fellowship, and it is the aim of this research, to help the members of GA to clarify and deal with these problems.

Bell (2005) who used an empowerment approach in his research in South Africa writes: “We then asked, “What would need to change in your community to make life more rewarding for everyone? And how can that happen?” Now we were approaching the radical change end of the continuum. People were learning to ask their own questions, analyze the answers, and use the results to plan for change... Research can be either empowering or disempowering for both researcher and participants. Placing the power to ask and interpret research questions solely in the hands of the researcher takes the power of understanding problems away from those who are the focus of the research. The phenomenon of power and empowerment is therefore central to the selection of a research methodology. Research that is empowering enables people in their communities to contribute to the process and interpret the findings... Research findings, therefore, should contribute directly to improving participants' quality of life (p. 30).”

Bell (ibid) goes on to stress the importance of examining one’s intention to empower, or to disregard power, saying that this is a critical step for all social researchers. “How you position yourself on these continua will ultimately influence the kinds of research you conduct (p. 30).” For this researcher these are important considerations. When I approach Gamblers Anonymous with my Dictaphone, I am, in the eyes of the gamblers, a counsellor, a friend and a mentor, and also a researcher. These are many hats to wear, and the role of a professional, a specialist that knows all the answers is the least attractive one. According to the “folk wisdom” of the twelve step

fellowships, it is also counterproductive to try to tell addicts what to do! If that is so, an empowering approach might be more appropriate.

Taylor and Bogdan (1998) point out one mistake often made in conventional research, where the persons interviewed are viewed as passive vessels of information. This is wrong, they say, attitudes and information do not simply reside inside peoples head, and there are no magic questions that can retrieve the correct answers. In social interaction, meanings are constructed in situ, and knowledge and social meanings are constructed during interview. According to this view participating in a research project can become an empowering experience. Being interviewed can help people develop new insights and understandings of their situations and experiences; they may interpret things a bit differently through the process. Empowerment is many things, and at many levels; an important part is personal development and consciousness raising (Rissel, 1994). Gaining new understandings and insights is empowering.

To further clarify what is meant by an empowerment approach, it may be helpful to look at empowerment from a community perspective, that is from the perspective of public health and compare empowerment to a key concept in sociology, *social capital*. This is how Putnam (2000, p. 19) introduces social capital: “Whereas physical capital refers to physical objects and human capital refers to the properties of individuals, social capital refers to connections among individuals - social networks and the norms of reciprocity and trustworthiness that arise from them.”

In other words, interaction enables people to build communities, to commit themselves to each other, and to knit the social fabric. A sense of belonging and the concrete experience of social networks can benefit people greatly. Working together through collaborative partnerships is a powerful way to enhance the well-being of the individual, improve communities and these alliances can be used to improve the health of a community in the widest sense of the term (environmental, educational, economic, social, etc.). Every word of this is true, and it is a beautiful picture. Behind the idea of social capital lies the idea of a well-balanced social system, which favors mutual collaboration between social agencies and sectors for the sake of the sustainability of their system itself.

One problem with this sociological concept is that, just like monetary capital, social capital easily becomes a resource to exercise power vis-à-vis those who have only limited or even no access to this resource. Erben, et al. (2000), writing on health promotion, go as far as arguing that the philosophy on which social capital is based, is incompatible with the basic philosophy of the Ottawa charter for health promotion. Social capital, they say, assumes that all of us sit in the same boat aiming at the same objectives with the same strategies in mind. The Ottawa charter clearly states that we live in a world of different cultures, interests, values and beliefs and that health promotion means struggle, and dealing with conflicting interests. The philosophical difference between social capital and health promotion lies in the difference of social harmony and social conflicts, the same can be said of the difference between empowerment and concepts that appear similar, such as community capacity (Wallerstein, 2006). Empowerment is meant to be liberating for the disempowered.

It is somehow difficult to define empowerment and therefore it is often defined by its absence, which can lead to victim blaming, learned helplessness, powerlessness and alienation (Bergsma, 2004). The twelve step fellowships stress the need to admit one's powerlessness, and talking about Gamblers Anonymous as an empowering process, or a part of community empowerment, might seem paradoxical. White and McClellan (2008) have written about the mistakes made in taking addiction treatment and aftercare out of the local communities. Treating long-term, complicated social, mental and physical problems with acute interventions, in short term hospital settings, is a wrong strategy they say. Local, community based, long-term help is more appropriate, both professional and mutual-aid. Gamblers Anonymous is an important link in such a chain for compulsive gamblers and their families.

Empowerment is a highly political and radical concept, in that it has to do with distribution of power and resources in society. These are things that Gamblers Anonymous avoids getting directly involved in, these are outside issues. But Gamblers Anonymous can empower people and enhance community empowerment. It helps compulsive gamblers to help each other to do what they couldn't do alone. It is also a training ground for social interaction, and provides a new network for alienated gamblers. In USA there are also clear signs that recovering people, recovery groups of various origins (twelve step, mutual aid, and other) are organizing into larger networks with more

political and cultural aims, e.g. to counteract the “restigmatization, demedicalization and recriminalization of addiction in the 1980s and 1990s (White, 2008, p. 44).”

Valverde (1998) says that Alcoholics Anonymous constitutes the first successful challenge to the totalitarian rule of medicine over diseases. AA became a frontrunner for other groups of people interested in taking responsibility for their own disease, and trying to influence political decisions and public opinion related to that particular disease. Alcoholics Anonymous has had a tremendous influence on how Americans think about alcohol problems, and if AA has opened the door for groups such as breast cancer survivors, AA can definitely be said to have been empowering. Empowerment means active involvement of disenfranchised persons, in governance and in decision-making processes that impact issues of quality of life.

Just like AA, GA has influenced the way medicine views gambling problems, and not been a mere pawn in the medicalization of the living world. Members of Gamblers Anonymous in the US, who wanted to influence the politics of gambling, were instrumental in starting up the Gambling Councils, thereby creating a forum where they could push their agendas, free from the limitations of the twelve traditions. This has helped to even out the power imbalance vis-à-vis the gambling industry, which is important because: "It is impossible to enhance the health status of poor people who lack political influence until the power imbalance is corrected (McKnight, 1996)." Strangely enough, the twelve step fellowships, who stress the importance of admitting one's powerlessness, are empowering for the individual and can serve to empower at community level.

2.4 Entering the field – with a Grounded Theory approach in mind

It is important to note, that I entered the 'field' with no specific research question, I actually had no intention of doing any research on Gamblers Anonymous when I first began working with compulsive gamblers and GA. The questions arose through my work with and in my interactions with members of Gamblers Anonymous. Given more time, the effort to answer these questions through the members' own accounts, their careers and values, might not only answer the questions, but also generate data from which grounded theory might emerge (Glaser & Strauss, 1967). Rudy, who studied Alcoholics Anonymous said: “One of the most anxiety-producing and yet exciting aspects of doing field research is the uncertainty of direction. Rather than beginning a study with a

specific question, most field research starts with a setting, an arena of social life, and allows that setting, its participants, and the researcher's perceptions of these to forge themes, questions, hypothesis, and grounded theories (Rudy, D. 1986, p.1).”

Rance (2005) states that in practice grounded theory includes the essential building blocks of qualitative research, i.e. “observing from a cultural perspective, building flexibility and iteration into the data collection process, and being reflexive—or examining the influence of one's own attributes and assumptions on the research process (p. 31).” Although she does not follow all the steps of grounded theory, she stays by certain principles that have served her well. At the outset it is important to start with an open mind and leave your research agenda as flexible as possible. “Next, rather than taking preexisting theory as a given and bringing it down onto your data, interrogate the data and allow fresh theory to develop systematically from your questions (p. 31).” This is the strategy chosen in this research of GA and this is probably what is meant by “staying close to the data,” questioning over and over again what the “text” is saying, and whether the theory holds.

2.5 The interviews

In 2007 the decision was made to write about Gambler Anonymous, this includes writing about the history of GA and about the project of supporting the fellowship. It was also decided to address specifically a few questions or themes using that favored digging tool of social researchers, the interview study. Gamblers Anonymous consists of small, closed groups that put high priority on anonymity. Both the themes addressed and methodological issues made qualitative methods more attractive than quantitative. The road chosen in the interview study owes much to Taylor and Bogdan (1998) who give a detailed account of in-depth interviewing. The following is both a theoretical rationale and a description of the steps taken, again based on Taylor and Bogdan’s work (ibid).

In-depth interviewing refers to a qualitative interview method that is flexible and dynamic, and usually, nondirective, unstructured, non-standardized and open ended. The in-depth interview means repeated face-to-face encounters that are modeled after a conversation between equals. The aim is to gather an understanding of the informants’ views on their experiences or situations. A

good example of this would be the writing of life stories that always involve numerous encounters between the researcher and the subject of the story being told.

There are instances where it becomes clear that in-depth interviewing has a lot in common with participant observation, and this method can be used instead of participant observation, to learn about events and activities when they cannot be observed directly. The people being interviewed are informants in the truest sense of the word; they act as the researcher's eyes and ears in the field. The role of such informants is not simply to reveal their own views, but to describe what happened and how others viewed it.

Some of the material used in the work presented here stems from participant observation, that is participation in meetings in GA (and AA/NA), but it is problematic to rely only on participant observation in this research. GA's own rules (unity steps) make it problematic to enter some of the meetings and it is not sufficient to simply sit in on a few meetings, this will not give a full picture of what is happening. As an example, members are encouraged not to criticize each other or the fellowship at the meeting. There is also a lot of interaction going on, outside the meetings; it is very time consuming and almost impossible to gain access to this social activities if you are an outsider. Taylor and Bogdan (1998) admit that in-depth interview can not fully compensate for the depth of understanding that comes from participant observation. But participant observation, that provides the golden standard of qualitative research, is not always practical or possible they admit. In-depth interview seems to be appropriate when:

- The researcher is dealing with relatively clear and well defined subjects
- When the researcher wishes to study past events or can not gain access to a particular type of setting or people.
- There is limited time to do the research.
- When the researcher chooses to sacrifice depth of understanding coming from studying few cases (e. g. an N of 1) for the added breath stemming from studying more cases. If the aim is to build a theory, multiple interviews may give better results.

There are some limitations to interviewing compared to direct observation, other than losing richness of data. People do and say different things in different situation. One cannot guard against people saying one thing in an interview situation and then something else in another situation and

setting. It is quite possible that my informant will have one meaning in a recorded interview with me and then say something different at the next GA meeting. This is natural, and something the researcher has to live with.

2.6 Selecting informants

Like participant observation, qualitative interviewing calls for a flexible research design. It is not necessary to decide the number or the type of informants before starting the research project; it is something that should be determined toward the end of the research. The researcher has in most cases some idea about which people to interview and where to find them. During the course of the research project the researcher must be willing to change tactics after the first interviews, interviewing as many people as necessary to provide the richness of data deemed necessary. Taylor and Bogdan (1998, p.93) argue that there is an inverse relationship between the number of informants and the depth to which you interview each. The greater the number of interviews with each informant the fewer informants are needed to provide enough data to write a research article, dissertation, or a monograph. If theoretical sampling is used as a guiding light the actual number of cases is less important than the potential of each case to provide insights into the social world being studied.

The study at hand is based on interviews and interaction with numerous people through the last five years. Towards the end of the research I decided to record a few interviews with members of GA, to get closer to what they were telling me. I soon found out that there is no easy formula for finding good informants. Originally the idea was to use the snowball technique, starting with one informant who then leads to the next one. The problem with this method is that it can limit the diversity of the informants and the richness of data. After contemplating the options I decided to talk to people I already knew a great deal about. This would not tackle the main problem of limited diversity, but it would be based on trust already established and hopefully give more depth of understanding.

It would therefore be wrong to say that I found the informants rather they simply emerged in the course of my everyday activities. Taylor and Bogdan have had similar experiences regarding life stories: “You just happen to stumble across someone who has an important story to tell and wants to tell it (Taylor and Bogdan, 1998, p. 94).” A researcher involved in the social circles that are the aim

of the study is more likely to come into contact with good informants, and the fact that he or she is already known in these circles will presumably aid in establishing necessary trust. A good informant in this case is someone who is thoroughly “enculturated”: someone who knows the culture of the group, subculture or organization at hand. The informant knows this culture well enough to take it for given and no longer needing to think about it.

Taylor and Bogdan (ibid) argue for the importance of slowly building rapport with the informant. It is about building a relationship. Turning to informants I knew quite well, people I had talked to between four to twenty times, made it easier to establish rapport with them. To build further trust the informants were:

- Informed about the researchers motives and intentions. Of course people wonder what is in it for the researcher. The participants in this study seemed to think that a final project at a foreign university was an acceptable excuse for studying GA.
- Informed about anonymity. This is problematic, GA is very small and participants are easily recognizable. To counter this I refrain from using too much personal material, and I use pseudonyms for the people interviewed (but not places). The interviewees were not particularly concerned about the subject of anonymity.
- Informed that they have the final say on the outcome and they can drop out if they don't like the results. This is difficult because not all my informants can read English, but we did our best not to report anything against the will of the informants. Again, the informants were not concerned as deeply personal issues are avoided in this report.
- Told that they would not get any money for their help. Money has the capacity to corrupt the relationship between the researcher and informant, and it would probably be very inappropriate to offer it to a GA member that may already feel that she is trespassing when speaking on behalf of the fellowship. Money is a serious thing for a compulsive gambler. As a form for reward and simply to talk some more, the five gamblers that participated in the recorded interviews were invited out to a very modest meal.

2.7 The interview context

It is important not to rush things when collecting data through in-depth interviewing; the relationship between the interviewer and informant is the key to data collection and it takes time to

build a relationship. Interviews are a form of social interaction involving at least two persons engaged in constructing something meaningful out of each other's words, gestures and expressions. The person interviewed (and the researcher too) will try to manage the impressions the other has of her. What the person chooses to say and do will depend on the situation and on whom she is interacting with. Therefore, what the informant says cannot be taken at face value, she may exaggerate, distort or deceive depending on what she deems appropriate in this specific situation.

Holstein and Gubrium (1995) argue that knowledge and social meanings are constructed during the interview process, and what the interviewees say will not always be an expression of deeply held beliefs and sentiments. This is different from the assumptions often made in conventional research where information and attitudes are supposed to exist inside people's heads and that they can be elicited by asking the right questions in the right way. Holstein and Gubrium (ibid) take issue with this view and point out that knowledge is always "knowledge-in-the making." Informants do not merely report on their experiences, rather, they are narrators who actively construct a story. The story may be told a bit differently each time, to different audiences and with a different spin.

Not only will people tailor their stories to the situation and the audience at hand, they will also be prone to exaggerating their successes and denying or downplaying their failures. This brings us to the issue of truth in qualitative research which is a complicated one. But qualitative research deals more with perspectives and is less interested in truth as such. The researcher tries to elicit a more or less honest account of the informants' views of themselves and their experiences. In-depth interviewing aims at learning how people construct their realities and how they experience and define their world (Taylor and Bogdan, 1998).

The story the informant will spin, will depend on the situation and the relationship with the researcher. The first interviews are important because it is there that the researcher sets the tone of the relationship with the informant. In these first interviews it is advisable that the interviewer comes across as someone willing to learn from the informants, as someone who does neither have all the questions nor all the best answers.

The relationship with four of the interviewees in GA has been built up over a long time and the decision to participate in this research was taken long after a certain rapport and trust had been

established. They agreed to participate in one or two interview sessions, accepting the researcher's need for more accurate data. Using a recording device is problematic, it can make people self-conscious and change the way they act. It is part of "coming on slowly" in in-depth interviewing to rely more on memory than the Dictaphone until the researcher has developed a feel for the setting. The informants are more likely to alter what they say in the early stages of the research relationship; later on it is easier to record the interviews. By that time the informants are more aware of what the researcher's agenda is and they know that what they say is being analyzed anyway. When a somewhat stable relationship is afoot and trust has been established, hopefully the recording device will not corrupt the interview.

The researcher has to find ways to help people to talk about their experiences and their lives without taking control and overly structuring the interview, the trick is to lead the informants towards certain themes but not to certain opinions about the themes. The general strategy is to ask open-ended, descriptive questions on general topics and then wait for the informant to talk about meaningful experiences in their lives or what is important to them. Then the researcher tries to probe for more details and more specific descriptions of their experiences. To get behind common sense understandings and taken for granted meanings, the researcher encourages the informant to provide details and presses for clarification of the informant's words. It is of course helpful to have some cultural knowledge, e.g. about GA, but the researcher must at times be able to set aside this taken for granted knowledge. What the other person means may be very different from what the researcher thinks. It is often necessary to follow up on the informant's remarks until the researcher has a clear picture of the people, places, experiences, and feelings in the informant's life. As an example, one of the informants, Margarethe told a story about a highly unusual experience. To slow her down, and to get a feel of the situation, I asked very specific questions:

- Where were you sitting?
- What time was it?
- What was the weather like?
- Who was there with you?
- What did you feel?
- What did you do then?

These questions that have nothing to do with the content of the story helped us construct the setting and the story she wanted to tell. Knowing the setting and what had happened in the preceding hours

made the story more comprehensible, to both of us. Margarethe's story (of a spiritual awakening) can be read in the chapter on results.

2.8 Content analysis

The recorded interviews were transcribed within two days and then subjected to content analysis. This is a rather old form for communication analysis dating back to the seventeenth century when the church examined the content of newspapers in order to gauge the terrain lost to other non-religious interests. One of the first scientific attempts at content analysis was made almost a century later, again by the church in Sweden, a quantitative analysis of psalms (Krippendorf, 1980). In both instances the analysis involved a count of certain words in the text.

Ever since, quantitative content analysis has been used on various texts and this form for analysis is excellent when the purpose is to judge the quality of the material, but less suitable if the intention is to decipher underlying meaning or content (McQuail, 2000). In WW II the output of the German propaganda machine was subjected to content analysis, focusing both on the overt and covert messages of newspaper articles and radio broadcasts. The methods used were mostly of the qualitative variety, based on deduction. The methods proved to be useful and later, after the war was over, it was confirmed that the results of the analyses made were incredibly accurate (Krippendorf, 1980). Qualitative content analysis can be said to cover all forms for qualitative reduction on simplification of data in order to find hidden or inner coherence or meaning in the data.

The purpose of content analysis is to reduce and concentrate the data at hand. To do so one has to carefully read the text, find the relevant themes and build a system to codify the themes. The next step is to organize the data around these themes and look into the spread in each theme. When that is done, and the main concepts are clear, one should be able to reduce the data even more and gain a better overview over them. This is by no means easy; it is possible to deduct different messages or histories from the same text. The final step is to find and explain the deepest meaning of the data and communicate the conclusions to those interested in the object of the study (Ulin et al., 2005).

Discourse analysis, which is one form of content analysis, is based on the idea that the text, or language, is never neutral, it conveys knowledge and ideas that are hidden between the words or behind them. The method is based on scrutinizing the language and analyzing metaphors, inconsistencies and paradoxes. This method aims at revealing what is being highlighted in the discourse and what is being hidden or downplayed (Einarsdóttir, 2000).

For analyzing the content of the transcription of the interviews with the five GA members a simple procedure was employed, by setting up three columns. The first column consisted of the unabridged transcript, the next one of key sentences or meaning units and putting what can be called labels into the last one. Here is an example from an interview with Pia.

<p>P: jeg mødte GA via behandlingen, at jeg skulle i GA, men jeg sgu fandeme ikke i GA, det må jeg indrømme, alt det der amerikanske pjat, hvad skulle jeg bruge det til? Jeg havde altså besluttet at GA var ikke mulighed for mig. Men så havde jeg, det var 4. maj, så et spilleregl, altså økonomisk var det ikke hårdt men psykisk var det utrolig hårdt, og der besluttede jeg mig for, da jeg kom hjem og skrev dagbog, så besluttede jeg mig for at nu kører jeg mig selv ned i lortet, nu var det slut, nu gad jeg ikke mere. Som sædvanlig skulle jeg i banken og hæve penge, og så kom jeg til at gå den modsatte vej og faktisk gå til et GA møde, i Valdemarsgade, det var så mit første møde med GA. Jeg nåede at præsentere mig selv og så tudede jeg i en time, og så gik jeg hjem igen (griner). Altså det var mit første møde med GA og da jeg gik hjem, jeg kan ikke forklare det men jeg (1:28) følte en lettelse af den anden verden , jeg følte mig rolig, jeg</p>	<p>Came to GA through treatment</p> <p>Was on my way to my bank to go gambling, but went the other way – into a GA meeting</p> <p>Mystic/guidance/HP??</p> <p>I presented myself and cried for an hour</p> <p>Facework, being able to let the mask fall – Norman Denzin</p>	<p>GA/treatment</p> <p>Came to GA</p> <p>HP</p> <p>Facework</p>
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<p>opdagede sommeren, jeg opdagede det var forår, sådan nogen ting, det var så fantastisk oplevelse at gå hjem efter det der GA møde, selvom jeg ikke havde sagt noget, ikke gjort noget, jeg havde bare siddet og tudet. Og så sad der nogle mennesker som bare snakkede videre og lod som ingenting, det var helt naturligt at jeg kunne få lov til at sidde der og græde, eneste gang jeg nogensinde har grædt offentligt tror jeg – det er første gang jeg</p>	<p>I was very calm on my way home, a great relief that cannot be explained, I could smell the summer, that I hadn't realized had come.</p>	<p>Spirituality (awakening) Relief/calm</p> <p>Came to GA A great relief after first meeting– see Horarik's thesis</p> <p>Facework - Denzin</p>
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2.9 Quality in qualitative studies

The most widely adopted criteria of quality of research are those developed within a positivist framework, i.e. those of validity, reliability, objectivity, precision, and generalizability. These criteria are used to evaluate the rigor of studies that aim to describe, predict and verify empirical relationships in more or less controlled settings. These criteria are less appropriate in qualitative studies that intend to explore, discover and understand. Instead practitioners of qualitative research use the standards of credibility, dependability, confirmability and transferability for evaluating the rigor of qualitative studies. The following short explanation of these concepts is mostly based on Ulin's et al. (2005) excellent book on qualitative research methods in public health.

Credibility: In quantitative science validity assumes correct operational measures for the concepts being studied; credibility focuses on the confidence that can be put in the finding, including accurate understanding of the context. Credibility asks, among other things, if the findings show a logical relationship to each other and whether the original study population finds the reports to be accurate.

Dependability: An important test of quantitative research is reliability, the ability to replicate the processes used to obtain the reported results, even though they may be different in different cultural contexts. This goal is often meaningless in qualitative research. Instead one asks if the results are

dependable, whether the research process is consistent and pays careful attention to the conventions of qualitative methodology. It is to be anticipated that qualitative research will not always lead to exactly the same answers to the same questions, but to a logically consistent patterns of response that are reasonably stable over time.

Confirmability: Objectivity, maintaining distance between the observer and the observed, is traditionally held in high regard in science. The researcher is supposed to minimize the effect of his or her values on the process of inquiry. This can be counterproductive in most qualitative studies and would probably be very hard to achieve in the present study of Gamblers Anonymous. Instead of objectivity qualitative research relies on confirmability, a way of knowing that, even as a participant in the research, the researcher has maintained a distinction between personal values and those of the participants of the study, and ensures that data reflect as precisely as possible their perspectives and experiences.

Transferability (extensibility). The aim of most quantitative research is to produce research findings that can be generalized to a wider population. If the sample from the wider population is statistically representative, this goal can be achieved within specified margins of error. Even if this way of operating is not relevant to most interpretative qualitative research, it is important to know if the results of qualitative research can be transferred to other contexts. The importance of the context has led some people to doubt if this is possible. Other researchers say that results from qualitative research can be applied in “other contexts if samples have been carefully selected to represent viewpoints and experiences that reflect key issues in the research problem. Our goal is to produce data that are conceptually, not statistically, representative of people in specific context (Ulin et al., 2005, p. 27).” This means that well-documented knowledge can carefully be applied in other similar populations, but it would be difficult to directly check the results of the original research in that way. The original researcher cannot know the context to which his research is to be applied, the burden of proof lies with the person who knows the context and wants to test the transferability.

Now we will turn to the history of Gamblers Anonymous around the world, and in Denmark. Some relevant research on GA in North America will be discussed; one of the aims of this project is to check the transferability of this research from the original setting to that of Gamblers Anonymous in Denmark.

3. Gamblers anonymous

“The fellowship of Gamblers Anonymous is the outgrowth of a chance meeting between two men during the month of January in 1957. These men had a truly baffling history of trouble and misery due to an obsession to gamble. They began to meet regularly and as the months passed neither had returned to gambling (From GA’s preamble).

3.1 GA in USA

It is not necessary, for the purposes of this paper, to examine the history of Gamblers Anonymous in the United States in detail, but it is in many ways an interesting history, both from a sociological and a human perspective. The most thorough, “official” account of the beginnings of Gamblers Anonymous is to be found in the blue covered *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1984).

Sharing Recovery Through Gamblers Anonymous is, in some ways, the equivalent of AA’s *Big Book* (Alcoholics Anonymous, 1976), but it does not have the same place, as the Combo Book (Gamblers Anonymous, 2007), in the daily life and practices of the active GA member (Lee, 2005). Chapter one of *Sharing Recovery Through Gamblers Anonymous* starts with looking at compulsive gambling, defining the disease concept and dispelling what might be called the moral deficiency concept (Valverde, 1999). Other chapters cover the many tools of GA; meetings, pressure relief groups, twelve step work, etc. The book includes narratives from compulsive gamblers including that of the founder of the fellowship, Jim W. The final chapters list some research projects done in cooperation with the pioneers in the treatment of compulsive gambling. One of those is Dr. Robert L. Custer, a great benefactor of GA. Dr. Custer established the first residential gambling treatment program in the United States at the Brecksville VA Hospital in Ohio and was greatly influential in the inclusion of Compulsive Gambling in DSM III in 1980 (Ciarrocchi, 2002; Castellani 2000).

Appendix I of *Sharing Recovery Through Gamblers Anonymous* tells the “longer version” of the birth of Gamblers Anonymous. It is the story of Jim W, an alcoholic and a gambler, who sought help in Alcoholics Anonymous in 1949. Jim W did stop drinking, but AA brought him more gifts than his sobriety, he met his wife Sybil through AA. But his gambling was still out of control, causing him and his wife misery and financial problems. Jim W tried to stop gambling by using the methods he’d learned in AA, and his first attempt at starting a mutual-aid group was the Algamus group. It was not a success.

Sybil, Jim W’s wife worked at the AA office in Los Angeles. Not only did she know a thing or two about organizing mutual-aid groups, she was also in contact with a lot of people in the addiction community. It was through the AA office that Jim W got his first chance of reaching out to the wider public. Fred Shield, a well known radio broadcaster, wanted to make a program on gambling problems and contacted the AA office. Jim W took part in the radio program where Fred actually gave name to the fellowship, calling the three participants for Gamblers Anonymous. There was very little response from the audience, and Jim W was soon alone in GA again. About a year later, Jim W appeared in newspaper and on local TV, and this time there was some response from people with gambling problems (Gamblers Anonymous, 1984). It was some weeks later, on Friday the 13th of September 1957, that 13 people met to start up a mutual aid group for compulsive gamblers. At this meeting Jim W presented the twelve steps for gamblers and this meeting marks the beginnings of Gamblers Anonymous as we know it today (Browne, 1994). Its emergence is often quoted as a key moment in the recognition of gambling as pathology (Collins, 2006).

As we can see, Jim W and GA suffered a few false starts and a few slips in the beginning. And it is clear that GA relied heavily on help from AA. But GA delves even further into the AA programme, in order to capture some of the mystical charm of AA. A pivotal moment in AA’s history is the (chance) meeting of Bill Wilson and Dr. Robert Smith in Akron, Ohio, on May 12, 1935 (Alcoholics Anonymous, 1976). This is what Denzin (1987) calls AA’s inception date; the founding date of AA is given as 10th of June, 1935, the day Dr. Bob stopped drinking. The two co-founder’s first meeting has a special place in AA’s folklore, and is kept alive and revisited in meetings around the world, in books and films (ibid). And in a way, GA keeps the very same myth alive, to its own advantage, in the shorter version of its history, or the preamble: “The fellowship of Gamblers Anonymous is the outgrowth of a chance meeting between two men during the month of

January in 1957. These men had a truly baffling history of trouble and misery due to an obsession to gamble. They began to meet regularly and as the months passed neither had returned to gambling (Gamblers Anonymous, 2007, p. 1).”

Jonathan Diamond (2000) has pointed out some of the paradoxes inherent in the twelve step programs (to gain strength you have to accept your powerlessness), paradoxes the members somehow learn to live with. Apparently, GA has no problem living with these two different versions of the origins of the fellowship. Sagarin (1969) goes a little further, saying that both the official accounts ignore well documented earlier efforts, by other people, in other places, to start up mutual aid groups for gamblers. In some cases the name Gamblers Anonymous was used. Sagarin sees GA’s accounts of its origins as self-serving fiction.

After borrowing from AA’s mythology GA acknowledges in the next paragraph its debt to AA, without mentioning its name. “They concluded from their discussions that in order to prevent a relapse it was necessary to bring about certain character changes within themselves. In order to accomplish this, they used for a guide certain spiritual principles which had been utilized by thousands of people who were recovering from other compulsive addictions (Gamblers Anonymous 2007, p. 1).”

Sagarin argues that of all the efforts to emulate Alcoholics Anonymous, probably GA has been the most successful, if only because its groups have been the most enduring (Sagarin, 1969). Much has changed in the world of gambling since Sagarin wrote his piece on Gamblers Anonymous, the gambling market has exploded and gambling is now mainstream in the western world. Gamblers Anonymous in the United States has done more than just endure, going from a few isolated groups in the early sixties and reaching thousands of chapters in the nineties (Vollberg, 2001).

3.2 Gamblers Anonymous around the World

GA has, since its inception in Los Angeles, spread to other countries around the world. It would be a worthy research question to see if its spread and popularity is dictated by the same forces as that of AA. Levine (1993) found that AA, as an organization, was most successful in countries of strong

protestant heritage, and a history of a strong Temperance culture.¹ The countries and the cultures Levine was talking about are e.g. Britain, Australia and Sweden. Glancing through the (online) meeting lists showed that in all these countries GA is relatively strong.² AA and other twelve step fellowships have been quite successful in Denmark, but GA less so. If GA was the most successful copy of AA in USA in the sixties (Sagarin, 1969) it is probably Narcotics Anonymous that takes the silver medal in Denmark today. In Copenhagen there are about 40 NA meetings each week compared to GA's four meetings.³

One can assume that differing laws and regulations on gambling, between countries, will at least have some impact on the growth of GA. It has been observed in South Carolina and Norway that changes in the accessibility and spread of VLT's (Virtual Lottery Terminals), has an effect on the number of people coming to GA meetings and on the number of GA groups. In Norway the ban on VLT's in 2007 has led to the closing down of three GA groups and less attendance in the remaining ones (personal communication with GA in Norway). A similar ban was introduced in South Carolina, at the turn of the century, leading to a drastic fall in number of GA groups, almost half the groups closed down and there were less people attending the remaining groups (Bridwell and Quinn, 2002). The laws and regulations on gambling seem to dictate also, when the initiative to start up the first GA group is taken and how successful the effort is.

It is not the intention to examine these interesting matters at length, but a quick look at the neighbouring countries of Denmark could lead one to the hypothesis that less restrictive gambling legislation leads to more gambling, and to more gambling related problems, and to earlier introduction of GA. This might explain why GA was introduced in the UK long before Scandinavia (culture/language probably plays a role in this too). This came about largely through the efforts of Rev. Gordon Moody (Collins, 2006). Dr. Emanuel Moran (1990) who helped out in building up the second GA group in England says that in 1964 he had two gamblers referred to him for treatment. He searched the literature, but could only find occasional, short references to gambling. There didn't seem to be much interest in doing research in gambling problems, and no treatment was available at that time. GA was the only available help in the early sixties.

¹ Mäkelä et al., 1996, do not wholly agree and cite examples of thriving AA in catholic countries like Mexico.

² In Sweden you have the traditional GA and a Swedish variant called *Slutta spela*, that operates a little differently.

³ This is based on a simple count of meetings on the homepages of NA (www.nadanmark.dk) and GA (www.gadanmark.dk), on the 13th of April 2008.

Most of the Nordic countries, including Iceland, seem to become more interested in gambling related problems in the late eighties and early nineties. Center for ludomani in Denmark opens its doors to compulsive gamblers in 1992 (formally in 1995) (Jørsel, 2003). SAA in Iceland has treated gamblers since the early nineties and by 1995 they had a counsellor specialising in gambling problems and had a booklet on gambling addiction published (Tyrfingsson, 1995). Gamblers Anonymous in Denmark dates back to 1995 (Kaj-Ole, 2003), and GA in Norway is of similar age.

The most obvious reason for this sudden need for treatment and help for compulsive gamblers in Denmark and other parts of Scandinavia are changes in society, in law and in technology (leading to the globalization of gambling through the Internet). The gambling market in Denmark opened up considerably in the late eighties, faster and more advanced forms for sports-betting were allowed and VLT's began to spread out across the country (Bonke and Borregaard, 2006).

Although the same changes found place in Denmark and Norway, the Norwegian GA quickly became stronger than the Danish one. Perhaps this has to do with more gambling problems as measured in Norwegian research compared with that found in Denmark (Lund and Nordlund, 2003; Bonke and Borregaard, 2006). It may also have to do with different treatment systems; the Norwegians were a little more "pro GA," whereas the Center for Ludomani, that alone offered treatment free of charge in Denmark, was not supportive of GA. Another factor might be that the Danish centre provided more comprehensive form for treatment than was offered in Norway (Hansen, 2006; personal communication with Fekjær from Norway and Jørsel from Center for Ludomani). The result has been, for whatever reason, that GA in Denmark has never grown as big a GA in Norway.

3.4 Gamblers Anonymous in Denmark

"My name is Kaj Ole and I'm a compulsive gambler in recovery, "one day at a time," through the use of a few spiritual principles.

I've been an active gambler for 39 years. It began innocently enough in a billiard club as a seven year old boy. My father took med there and we played in the club. I was so small I had to stand on a beer-case or a chair to be able to play. I became a member of the club BK 35 in Frederecia. There was a backroom, for card playing,

and at the age of 14 I gambled for money with the grownups and I loved it. Already 18yrs old, I gambled big money in Rummy, on Casino games, and on Poker and Mousel. Later I gambled in other, illegal clubs where we played “sixes,” a game of dice, and I won big time.

I felt extremely powerful and enchanted by the prestige that goes with big wins. From the age of 26 to 33, I gambled every day from morning to night, and often all through the night. I was a professional gambler, specialising in billiard, cards, dice and the track. I played those games where money moves fast, hazardous games, with cash upfront. I didn't bet on football, it could take a month getting the wins paid out.

I drank a lot and it progressed to the point of me becoming an alcoholic, and my downward turn started for real. I began to cheat in gambling – cheated my friends too – I wasn't welcome at the tables anymore or in town. I hit bottom in 1980 and spent most of my time in bars, living more or less as a vagabond. My family didn't want to have anything to do with me. I went on “tours” as I called it, to Copenhagen, pretending to be a big shot, lying about my occupation. I met a sweet girl and moved to Kokkedal. My family was relieved that I had left town. We were blessed with two daughters in 1½ years. I was in love and was mostly clean for two years. I gambled, just a little, very little, on horses and football.

In 1982 I discovered a gambling establishment in Hørsholm, where they played billiard and hazard, and I started betting again, unfortunately. My wife threw me out and again my daily bred consisted of gambling and drinking. I lived more or less as a vagabond from 1983-89. Regularly I made peace with my wife, moved in with the family, then started gambling again, this happened maybe 8 or 10 times.

This gambling period cost me about 700.000 Danish crowns. Bank-loans, tax, child support, I didn't pay anything. I didn't pay up when my house in Fredericia went on auction, nor did I pay my gambling and drinking debts. I was contemplating suicide and alcohol was killing me.

I had to ask my family and the few friends I still had left for help and I entered treatment for my alcoholism in 1990 at the Egeborg treatment centre. I haven't drunk since, “one day at a time.” But I didn't feel I had a problem with gambling until 1992. After being operated for cancer I started gambling again, soon I couldn't pay my rent. At that time I was ready to leave my family that had stood by me in my physical disease, in order to be able to gamble on. While lying and cheating myself and others I came close to drinking again, but I was fortunate to be helped to see that I also had a gambling problem.

I came into treatment at the Frederiksberg Centre, in order to prevent myself from starting drinking again, and I opened up and told about my gambling. Taking it “one day at a time,” I have not gambled since the 13th of November 1992.

As I see it, I do win every day, without having to gamble. I am very grateful for that. In 1995, I and another compulsive gambler started “Anonyme Gamblere” or GA in Denmark. It was a very slow start as it was not easy to get others to join us. I soon

realized that other compulsive gamblers had the same problem as I (saying they didn't have a problem, just as I said to myself for many years...).

For years I lived in a world of illusion; lying, hustling, faking, today I can live in harmony and balance with myself and others - one day at a time (Kaj-Ole, 2003)."

Kaj Ole seems to have begun by starting up a group in Fredericia and later he founded the oldest surviving GA group in Denmark, the Wednesday group in Hellerup (that later moved to Hotellet on Vesterbro). At the time he wrote the above passage Kaj Ole was getting tired of single-handedly carrying the flag of GA in Denmark. He was also quite sick physically and was unable to attend meetings for long periods. But he had already, in Jytte and Rudy, found the people to keep the group going. And they did for the next three or four years. It was a difficult time for the couple, not many gamblers showed up at the doors and they felt very alone with the responsibility of running the group.

In the autumn of 2003, when I first got to know Gamblers Anonymous in Denmark, there were about three to five people at the meetings in Hellerup. The participants were mostly people who had been chemically dependent and had some experience with other twelve step fellowships. Through the next months I talked to about ten people who had attended these meetings (often just once) and they described how they had experienced the meetings and what went on before and after the meetings. The interaction finding place before and after the meeting proper is considered an important part of the twelve step "therapy." It was clear from what I heard that much of the material read at the meetings and the rituals performed were GA's, it was something Kaj-Ole had learnt and brought back from New York where he had attended GA meetings. But there was also a strong flavour of NA rituals and Minnesota-treatment, it was clear where the oldtimers in GA came from.

This proved to be a difficult barrier for some of the newcomers; they couldn't deal with the hugs before and after the meetings, nor the Serenity prayer and the talk about a higher power. In the autumn of 2003 I talked to two gamblers, after they had attended their first GA meeting in Hellerup. Neither of them had been to any form for therapy or mutual aid groups before. Both complained about how closed the group was ("indspist" was the word), consisting only of three people who seemed to know each other very well. They actually did know each other well, not only were they members of Gamblers Anonymous, they shared a common history of treatment for chemical dependency and knew each other through Narcotics Anonymous. The two gamblers didn't go back

to that meeting, one of them later used AA where he felt much more at home (he had at that time also identified himself as an alcoholic).

In 2004, there were a couple of attempts to start up GA groups in Copenhagen, the most successful in Café Paraplyen, situated on Frederiksberg. This group survived for a few months, members being mostly people being treated at the Frederiksberg Centeret (at Frederiksberg Hospital). A little later the second oldest surviving group in Denmark was formed; the Friday group in Valdemarsgade, on Vesterbro in Copenhagen. The first meeting was held on the 18th of February 2005. The group barely survived for the first eight months, but is now the largest group in Denmark with 15 - 25 people attending the meetings.

Later, in 2006, the Hellerup group moved to Vesterbro, to Hotellet. The 10 o'clock Sunday group began in Valdemarsgade in 2005, and has done very well, a small intimate group with a strong base. A Saturday group that started in 2007 survived only for a few months. A Monday group that also started in 2007 got thrown out of a church basement on Vesterbro, having run into trouble with the caretaker. This problem was solved by opening the Tuesday night group, in another church in the same vicinity.

It was hard work, starting up GA in Copenhagen, and the same is true of other parts of Denmark. Kaj-Ole started a group in Fredericia that didn't survive. Just after the turn of the century a small GA group was formed in Århus, the (informal) capitol of Jylland. This group existed for some months and consisted of 6 – 8 people. These were mostly sober alcoholics and clean drug abusers, who either had started gambling after going clean or had lived with a concurrent addiction to chemicals and gambling. Most of the participants had some experience with other twelve step groups and some had been through treatment for chemical dependency.

One of the members, H, who later told me this story, was a young and recently sober alcoholic at that time. His sponsor in NA was one of the founders of the Århus GA group. According to H, his sponsor's life depended on being able to stop completely or at least get some control over his gambling. That this was a matter of life and death is confirmed by the fact that his sponsor committed suicide, after one more failed attempt at staying clean of gambling. In a few months, most of the founding members (3 – 4 people), were dead, in all cases untimely deaths related to

suicide and drug abuse. The group did not survive these tragedies and it would be some years before the next attempt at forming a GA group in Århus.

In 2004 I visited a place called Café Væxt (café growth), in Aalborg, a place where addicts wishing to stay clean can come together and support each other. There was a restaurant there selling good food (free if you were broke), there were courses held, workshops conducted, concerts given and so on. The building also housed a number of mutual aid groups; one of them was a small GA group which met once a week. The group got support from the counsellors working at Café Væxt. During my visit I met two men that had attended GA meetings for some months, but it was obvious that things were going downhill. Both gamblers had great trouble staying free from gambling and both had other addictions to deal with. The group died a few weeks later.

In March 2008 I talked again to one of those members, S-E. S-E had started shooting himself with amphetamine around the time the group died in 2004. S-E was no less addicted to gambling than to speed. He literally grew up in a gambling establishment; his father ran a casino of sorts. The theme of starting gambling at a very young age seems to be a common one for the GA members I've interviewed. L-E confirmed my impression that Café Væxt has been supportive of people with gambling problems. He also knew of a few failed attempts at starting up a new group under the protection of the café, after 2004. Now, in 2008, one GA group is active in Café Væxt.

In April of 2008, there were four GA groups in Copenhagen, and two thriving groups in Århus (started early 2007) and very small and unstable groups in Fredericia and Ålborg.

3.6 Gamblers Anonymous and the Medical Model

Treatment for compulsive gamblers in Denmark is not a part of the official healthcare system. Since the early nineties a portion of the states gambling revenues has been channelled into treatment and research on ludomani or pathological gambling (Jørsel, 2003; Hansen, 2006). Until 2003 Center for Ludomani was the only actor on the treatment side, providing help for compulsive gamblers. CfL is an outgrowth from an institution that specialised in treating alcoholics (Jørsel, 2003). CfL has not been supportive of GA, and views "ludomani" primarily as learned behaviour, not as a disease. In 2003, one more institution got permission, and funding from the government, to treat compulsive

gamblers, the Frederiksberg Centeret. Frederiksberg Centeret built its treatment on the so called Minnesota model, a model that sees addiction as a disease, and works closely with the twelve step community (Spicer, 1993). Over the next three years, two more state funded Minnesota facilities opened their doors to gamblers in trouble, and since 2008 Århus behandlingcenter has offered specialised gambling treatment in Århus (not state funded). These treatment centres have made a huge impact on GA in Denmark and it is appropriate here to say a few words about the medical (Minnesota) model of “gambling disease.”

Gamblers Anonymous is built around the notion of the compulsive gambler, a rather recent construction. It's a well known that Freud tried to treat the Russian writer Dostoevsky, who gambled excessively (Jørsel, 2003). Freud wrote a short essay on Dostoevsky's problems with gambling, in which the gambler as a compulsive neurotic was born. Freud's analysis initiated the description of gamblers in the psychoanalytic tradition, where compulsive gamblers, because of various unresolved psychological issues, compulsively got through repetitive cycles of self punishment (Reith, 1999).

Freud's interest in Dostoevsky's gambling problem was actually an anomaly, gambling was not really considered a disease or a psychological problem at that time. Collins (2006) concluded that in nineteenth century Britain, compulsive or pathological gambling did not exist as a disease. Gambling was rampant in England in that period, so too were gambling problems, the degeneration of the British Empire was in part blamed on excessive gambling (Reith, 1999). Going through hospital records of psychiatric wards, Collins (2006) found no mention of gambling addiction. This led him to conclude that not only did the psychiatrists of the 19th century not encounter the compulsive gambler; they did not seek him out.

The first psychiatrist that can be accused of seeking out the excessive gambler is Edmund Bergler. In 1943, Bergler published his first article on problem gambling. Later, in 1958, he published *The Psychology of Gambling*, which might be termed the official starting point of the medical investigation of excessive gambling (Castellani, 2000). Bergler elaborated on the (Freud's) theory that compulsive gamblers had an unconscious, masochistic, desire to loose money (Collins, 2006), a theory that had some impact on Gamblers Anonymous (Rosecrance, 1985).

Bergler actually managed to move compulsive gambling out of the shadows, and into the realms of the social sciences (Castellani, 2000). But the compulsive gambler did not attract much attention from the field of psychology or psychiatry until after 1980 (Collins, 2006). In 1980 compulsive gambling was formally accepted as a mental disorder by the American Psychiatric Association, and as a result was included in the third edition of the Diagnostic and Statistical manual of Mental Disorders III (DSM III) (Reith, 1999). A key player in this medicalization of gambling problems was the aforementioned Dr. Robert Custer, the director of the alcoholism treatment program at the Veterans Administration hospital in Brecksville, Ohio (Castellani, 2000). Dr. Custer and Dr. Durand F. Jacobs, chief of the psychology service at Brecksville, enjoyed at brief time of creativity at Brecksville in the early 1970s. They started up some radically innovative programs, and they directed an outstanding inpatient alcoholism treatment program (Taber, 2001). At that time the Veterans Administration had a lot of money for addiction treatment and experimentation (Castellani, 2000).⁴

In 1971 Dr. Custer was approached by several members of the Cleveland GA group who were concerned about members that were beyond the expertise of GA (ibid). They asked Dr. Custer, why, if alcoholics could get hospital treatment, compulsive gamblers could not. “Bob Custer was that rare psychiatrist who could really listen to people. He could set aside his own prejudices, preconceptions, theories and other professional baggage, to open his mind and hear. He was Chief of the Medical Staff, and he could do as he wished. And after careful consideration, what he wished was to admit gamblers to treatment. Never mind, that no one had ever done this before; Bob didn’t need precedents or orders from the top. In 1972 our Gambling Treatment Program opened at Brecksville, as a sub-speciality of alcohol treatment (Taber, 2001, p. 17).”

Dr. Custer attended several Gamblers Anonymous meetings and met regularly with GA members through the next years. He studied GA, using questionnaires, and some of that material can be found in *Sharing Recovery in Gamblers Anonymous* (Gamblers Anonymous, 1984). It is quite clear that the members of Gamblers Anonymous made an impact on Dr. Custer, and on the way he

⁴ The Veterans Administration was geared towards accepting soldiers from the Vietnam war, who were heavily involved in drugs of various sorts. The fact that only a part of these soldiers developed addiction to these chemicals made it necessary to revise theories of addiction (Peele, 1976), and may explain why Dr. Custer could find money and hospital beds for compulsive gamblers in need of treatment.

constructed his treatment model. But Dr. Custer was not operating in a vacuum; he had his feet firmly placed inside what has been called the medical model (Conrad and Schneider, 1992).

Not only did Dr. Custer play a key role in defining compulsive gambling and its diagnostic criteria for the American Psychiatric Association, he also wrote a book along with Harry Milt, called *When Luck Runs Out*. In this book he describes the disease of compulsive gambling, the progression of the disease and how to treat it (Custer and Milt, 1985). Custer and Milt's book has been one of the most influential in the field of gambling treatment in North America. It provided ample evidence, through case histories, for the success of the medical model for treating gambling problems. Dr. Custer's medical model was also indirectly supported by the relative success of Alcoholics Anonymous and derivative programs in dealing with addictions (Isaacs, 2001).

To cut a long story short; Dr. Custer borrowed the techniques and tools of addiction treatment in general and used the discursive strategies of alcohol treatment to construct a theory and a treatment model, a medical model of compulsive gambling. This model has been criticised by practitioners and students of gambling treatment for ignoring important sociological factors in the development of gambling problems and for being too rigid to be able to include all compulsive or problem gamblers (Castellani, 2000; Isaacs, 2001).

It is not possible here, nor the intention, to examine at depth the issue of the medicalization of problem gambling. But a few points are worth mentioning. Castellani (2000) argues that the medicalization of gambling problems can be, in part, explained by legislative changes in US (the third wave of gambling legislation), that opened up the gambling market. These changes led to more problems and it also became easier to admit having problems with gambling. This means that the medical model for gambling was created to accomplish specific goals in response to a very specific set of discourses and discursive actors already in circulation, among others the medical establishment and Gamblers Anonymous.

Sheila Blume (1987), a pioneer in the treatment and research on compulsive gambling, accepts Conrad and Schneider's (1980; 1992) definition of the medical model and some of the criticism they raised. While admitting limitations to the medical model, she defends it mostly on practical grounds; it makes it easier to find money to help people in need and to get funds for research. She

points out that the model seems to work in treatment and more noteworthy, in Gamblers Anonymous.

Castellani (2000) argues that the medical model is beneficial for Gamblers Anonymous and the compulsive gambler in three ways. The most important advantage is overcoming the legal and moral stigma historically attached to compulsive gambling. He points out that it may be far better for individuals to blame their problems on a disease, than to be held responsible because they have sinned or because they lack willpower. The second is freedom from a certain amount of responsibility for past actions; too much guilt can become unbearable and make it very difficult for the gambler to return to “normal” life. The third and most important benefit from adhering to the medical model has already been mentioned. In a hyper-medicalized, individualistic, capitalistic, non-sociologically thinking society, unless there is a professionally recognized medical diagnosis for a social problem, third-party payment cannot be collected. Even though pathological gambling was, in 1980, included in the DSM-III, insurance companies are only beginning to recognize pathological gambling as a treatable diagnosis for which they need to provide payment (*ibid*). Goodman (1995) has this to say: "In the past, most health insurance companies tended to view compulsive gambling as a moral problem, a lack of responsible behaviour rather than a disease, and would not pay for treatment of problem gamblers. But as the problem increased, and counselors became more sophisticated in dealing with insurance companies, treatment payments began to be more readily available (p. 54)."

While GA certainly has benefited from the medical model, so has the medical model benefited from Gamblers Anonymous, without an intervention from the fellowship, Custer would never realised that compulsive gambling required treatment. It was also through GA that the disease concept of gambling gained public support and attention. As more and more of the middle classes began attending Gamblers Anonymous meetings, they became educated in what Castellani (2000) calls the GA hybrid of the medical discourse. They then carried these perceptions with them as they sought out professional treatment.

The members of Gamblers Anonymous have, in other words, not been passive recipients of the practices of the medical model. In fact, over its fifty-year history, GA members have actively sought a role in integrating into their lives the discursive strategies of the medical model and its

treatment. They are responsible for establishing both the first in-patient treatment program and for starting a national council on gambling. And, they've been involved in the treatment process, from working as part of the treatment staff to providing evening meetings at treatment centres.

The medical model of gambling problems is therefore not a simple top-down form for domination, i.e. the domination of medicine and professionals over the common gambler. GA had its own agenda and the discursive practices of GA were intentionally constructed to avoid conflict with the larger political, social and historical terms and conditions within which it was exercised. Alcoholics Anonymous had done something similar earlier, not entirely comfortable with the medical model in the beginning AA later embraced it, to its own advantage. But AA never fully accepted the medical model (Valverde, 1998), and neither does GA! Unless GA is somehow involved, most members of that fellowship are suspicious of medical treatment, but they usually rely upon the medical model to combat public and professional ignorance and stigma about gambling. GA does not believe that, on its own, the medical model has the power to cure compulsive gambling (Gamblers Anonymous, 1984).

Castellani (2000) cites the medical model of gambling problems, as an example of a negotiated order and the complexity of discursive agency. It makes perfect sense for GA members to involve themselves in the discursive strategies of the medical model as they interact with themselves and others. But, in so doing, they negotiate these practices and modify them to fit the various other practices by which they live their lives. As practiced in interaction, members of GA are allowed to take the parts they agree with, discard the rest, and perhaps call on one set of practices in one situation while not using those same practices in another. A member of GA can believe in the power of the medical model, but also, in the same breath, emphasise the importance a spiritual approach to recovery.

3.7 Labelling

A much debated part of the solutions that the twelve step groups promote is the labelling of the members (Flores, 1988). In Gamblers Anonymous in Denmark it is customary to begin ones sharing at the tables with: "Hello, my name is Jesper and I'm a (compulsive) gambler (ludoman)." The same method is used in AA; members label themselves alcoholic, and admit that they are powerless

over alcohol. This has been criticised on a number of grounds. First and foremost are the questions about the term alcoholic, and whether alcoholism can be viewed as a disease (Levine, 1991). Others say that labelling people as compulsive gamblers, alcoholics or drug addicts only make matters worse, as it will lead to powerlessness and depression (Peele, 2000).

Labelling, stigma, deviance and a deviant group are closely related concepts, and worthy of a deeper elaboration than is offered here. According to Goffman (1986), stigma originally referred to bodily signs designed to expose something unusual and bad about the moral status of the signifier, "the signs were cut or burnt into the body and advertized that the bearer was a slave, a criminal, or a traitor - a blemished person, ritually polluted, to be avoided, especially in public places.... Today the term is ... applied more to the disgrace itself than to the bodily evidence of it (p. 2-3)." Deviance, likewise, is some form of discrediting or socially condemned behaviour. On the broadest level, deviance is a category of behaviour or status that is socially defined in a negative manner.

A deviant group can be defined as a collectivity of persons who have some trait, characteristic, or behaviour pattern in common. This can be any attribute that is defined negatively and is of enough significance to themselves and others to differentiate them from all those persons not sharing the attribute. When this attribute is also a deeply discrediting one, we are then dealing with the meeting point of deviance and stigma. Once these deviant and stigmatized people organize to assist each other with their problems, deviant societies are born (Sagarin, 1969).

Some see in the twelve step movement and the accompanying treatment model, the growth of an important social movement (Schaeff, 1992). The twelve step fellowship embodies the idea of open, formal, and structured organizations (voluntary associations) among people whom society has characterized as deviant. That many of these people have been apparently successful in hiding their stigmatizing characteristics makes the fact of these organizations all the more remarkable says Sagarin (1969). It is important to note that gamblers or alcoholics do not become deviant because they join a twelve step group, as happens if you join Ku Klux Klan. These people are already in trouble with society, or would be if their habits were known. They seek association with others like themselves in order to get help with solving their problems. Joining GA does not increase the social condemnation, but it might mean the person becomes more vulnerable to it. All the same, you can, to paraphrase Sagarin (1969), say that the gambler takes his stigma to GA and hopes to lose it there.

In forming, supporting or joining a group, the deviant is seeking to escape his stigma by conforming to the norms of society, or in the hope of gaining approval from society at large. Another line of action might be endeavouring to change the norms of society, to include acceptance of his behaviour. In the first he renounces his deviant behaviour, in the second he changes not himself but the rule-making order.

The criticism of the labelling process, mentioned above, usually comes from professional people, who often ignore the grassroots character of mutual aid groups. Other professionals have tried to defend the use of labelling (AA or GA do not usually engage in debates on the issue), mostly on utilitarian grounds. John Wallace, a pioneer in alcohol treatment says: "The label "alcoholic" or alcoholism provides the person with a convenient explanatory system for much of his behaviour. Moreover, by listening to the experiences of others who make the same self-attribution and who also conveniently explain their behaviour by this attribution, the person has a ready source of social reinforcement for his changing belief system. Furthermore, he is now open to considerable positive social influence. And he has been given the key to dealing with otherwise overwhelming anxiety, remorse, guilt, and confusion (Wallace, 1987, page 33)."

The self-label, be it a gambler or an alcoholic, actually contains far more information to the members of the twelve step groups than to the outsider. To the outsider the label refers to a person who once drank too much or gambled heavily. But to the alcoholic the label alcoholic "signifies everything that the sober AA member must guard against if they are to maintain healthy sobriety (self-centered behaviour, negative attitude, corrupt values). By constantly utilizing the self definition of alcoholic, the AA member... automatically implies the opposite; which is everything a healthy recovering and sober member of AA must attain. Each AA member is thus reminded with each pronouncement of "I am an alcoholic" that they are just a drink away from losing what they have become; which is a person whose values, attitudes, and behaviour is the direct opposite of that of an alcoholic (Flores, 1988, p. 234)."

Most GA members are therefore conveying important messages about themselves, and to themselves, when they make the statement, "I am a gambler". It may sound exaggerated or even false coming from a person that hasn't gambled for years, but it actually has tremendous value. Not only is it made proudly, but this self-evaluation may be the best protection against relapses (ibid).

3.8 The structure and methods of Gamblers Anonymous

It can be assumed that like the alcoholic who enters AA, the gambler who joins up with Gamblers Anonymous is entering a new social world that is structured around GA's recovery program, and around a fellowship in which being a compulsive gambler is the primary identity that is shared (Denzin, 1987). Gamblers Anonymous will also offer the pathological gambler an interpretive theory of compulsive gambling. This theory, which he may have met earlier in treatment, must now be mastered, at least in part, if he is to remain free of gambling. Even if Gamblers Anonymous has been more scientifically minded than the other twelve step programs, it has never really been interested in why one becomes a compulsive gambler. Theory is only interesting insofar as it aids recovery from compulsive gambling (Gamblers Anonymous, 2007). GA has, in other words, a tendency to take a pragmatic view on gambling problems (Ferentzy and Skinner, 2006).

Chapter 3 of *Sharing Recovery Through Gamblers Anonymous* (Gamblers-Anonymous, 1984) is a more or less detailed account of the main elements of the GA program. After explaining a few of the Unity Steps, the writers list the following recovery tools; the recovery plan or the twelve steps, the meeting, the Combo book, and the last section deals with recovery as a way of life. We will now take a closer look at these elements.

3.8.1 The twelve steps

Ferentzy and Skinner (2006) argue that GA has earned a reputation for not really being a twelve step fellowship, paying only lip service to the steps, but focusing instead on less spiritual issues such as debts or behaviour modification. One can be tempted to agree after leafing through chapter three of *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1984). The section on the steps takes up less than a page, while the section on the Combo book spreads over more than two pages. The 20 questions, used to (self-) diagnose the compulsive gambler take up as much space as the section on the twelve steps.

This is, at least on the surface, radically different from AA. In the Big Book of AA, simply called *Alcoholics Anonymous* (Alcoholics Anonymous, 1976), it takes eleven pages to explain the twelve steps, and for those interested, a separate book can be bought that further explains how to work

those steps. To be fair, it has to be added that GA has always used AA literature, not least what has been written on the twelve steps, perhaps there hasn't been any pressing need for writing another *Twelve and Twelve* (Anonymous, 1981) for GA. But according to *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1984), the twelve steps are one of the cornerstones of GA, an action plan that is based on practical experiences through the years, an action plan that works for those willing to work it! The program is not religious, but spiritual, where "spiritual can be said to describe those characteristics of the human mind that represent the highest and finest qualities such as kindness, generosity, honesty and humility (Gamblers-Anonymous, 2007).

The twelve steps, as adopted from Alcoholics Anonymous, ask of the compulsive gambler to believe in and trust a higher power, in order to abstain from gambling (Gamblers Anonymous, 1984). Paul Antze has written some interesting reflections on AA, the mother of all twelve step fellowships, and says that although "AA is at great pains to insist that it is not a religion, its central teaching is that alcoholics can recover only with the help of 'a power greater than themselves' - in effect, a personal deity (Antze, 1987, p. 149)." He goes on to say that AA relies on such practical mainstays of religion as confessions, prayers, testimonials and even regular missions to the unconverted.⁵ This is also true of Gamblers Anonymous; those writing the GA's program of recovery felt that it was vitally important that they carry the message of hope to other compulsive gamblers. This is called twelfth step work. Twelfth stepping, according to GA, helps those involved in such an undertaking to avoid starting gambling again. Was it not for stringent restrictions (attracting people, never agitating or preaching), it would be reminiscent of missionary work.

Like the other twelve step fellowships GA, even if relatively secular, invites members to find their own higher power, be it god, the GA meeting or both. The members are completely free to choose their own deity or higher power (Antze, 1987). This is a freedom seldom granted in traditional religion. Furthermore, AA and GA do not attempt to universalise their (ethical) techniques; that is why they do not preach from pulpits or from television screens (Valverde, 1999). GA members do not seek to change the behaviour of normal gamblers. Later I will return to this issue and talk shortly about whether Gamblers Anonymous is a cult or not.

⁵ Some anthropologists have seen similarities between twelve step fellowships and so called "crisis cults" (Horarik, 2005).

In a recent article, Ferentzy, Skinner and Antze (2006), who have studied Gamblers Anonymous in northern USA and Canada, wrote about the changes that have taken in GA over the last 10 to 20 years. They have found that GA has lately become more focused on the twelve steps and that members are now encouraged to discuss their emotional life and life issues. Gamblers Anonymous, or at least the groups they studied, are moving closer to the AA way of operating and more in line with what the official texts of GA say. It will be interesting to see how Gamblers Anonymous in Denmark develops in this respect, and as could be seen above, one of the research questions addresses this issue.

3.8.2 The GA meeting: The essence of Gamblers Anonymous

Denzin (1987) says that the twelve step groups exist in and through their meetings; hence, to study a GA meeting is to study Gamblers Anonymous. It is important, however, to realize that groups also exist outside the meetings they hold, because group members have interactions that occur outside the boundaries of the meetings.

Gamblers Anonymous implements its recovery program through its meetings. The format of the meetings is on the whole the same in all groups, be it USA or Japan. Every group has the power to tailor the group format according to needs, as long as certain principles are respected. Usually the groups meet once a week. A selected chairperson leads the meeting, and according to *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1984), it is customary to change the chairperson every week. This is done differently in Denmark; here, in AA, the usual procedure is to have the same person chair the group for months and the same tradition seems to be in effect in the Danish GA.

A typical GA meeting includes; sharing from the participants, readings from the *Combo Book*, presentation of new members, announcements from GA and money is collected (ibid). Other elements or rituals are reading of the Preamble and saying the Serenity Prayer. A substantial portion of the meeting time is devoted to sharing of stories or experiences; this is what GA refers to as doing therapy. This method of using narratives or stories as a therapeutic tool comes from AA. AA's big book is a collection of stories, and there is a reason for sharing those stories, both in print

and in the meetings. Some researchers have found this emphasis on storytelling to be both important and fascinating.

3.8.4 Storytelling

Those researchers that take a narrative view of mutual-aid groups, emphasise how members share personal stories about their addiction in order to create a shared discourse representing the common beliefs, values, and norms of the group. This narrative is used by the members to reconstruct or reauthor their personal stories, their identities, and how they see the world, in ways that correspond to those of the other members. In this process the members actively shape and are shaped by their participation in this storytelling discourse, which often serves as an alternative to the culturally dominant forms of meanings about the members' situation (Mankowski, et al., 2001). But how did AA learn to use these narrative, therapeutic tools?

According to Kurtz and Ketcham (2002), Bill W and the early AA members picked up useful ideas from Carl Jung and William James. These ideas put them on the right track, when after leaving the religiously based Oxford Group, AA had to find its own way. "Clumsily, even unwittingly, AA's first members stumbled down the path to find their own answer, occasionally falling, picking themselves up, only to fall again, but gradually developing not only a message of hope, but a way of passing on that hope. Exploring "what it takes to fix drunks," they discovered that sobriety involved not only *not* drinking, it also required throwing out the old way of life – the old map that was their former way of interpreting reality – and learning to follow a new map, a new way of life that would allow them to be both sober and alcoholic. And that *way of life* could be learned and taught only through the process of telling stories... (p. 114)."

Experience taught that telling of their stories by now-sober alcoholics is what works best. The Big Book of AA suggests that the stories should disclose in a general way "what we used to be like, what happened, and what we are like now" (Alcoholics Anonymous, 1976). Such stories, told in the company of fellow sufferers, do aid the alcoholic and the gambler to find wholeness in limitation. It is about sharing for witness, not confession (Kurtz and Ketcham, 2002). "It has proven an effective method of keeping alcoholics sober and reaching out to others less fortunate. It's simple and it works (Diamond, 2000, p. 103-104)."

The well known Icelandic author Einar Már Guðmundsson (2007), wrote about his own experience of AA and storytelling: "... what I would like to say, ... is that I did not begin to understand what I was, and what had happened before I heard others sharing similar stories.

Sober alcoholics tell the truth about each other, by telling the truth about themselves. Telling stories is our medicine. One who has mulled over literature and the nature of the novel finds himself in the next room. It's profoundly different but closely related (p. 208)."

Horarik (2005), who studied AA in Australia through the lenses of anthropology, has also written about the importance of stories in AA. He says that regardless of the interpretive schema used, all alcoholics in AA come to meetings, listen to others' stories, identify with some elements of these stories, share their own stories and talk to other members of the group. Einar Már (2007) talks about this experience of "sharing" between AA members: "Even if I couldn't tell this same story, with the same details, upon hearing it I understood that I had been there, exactly in that very same situation, it had happened often, just a little bit differently ... (p. 210)" It is from these practices that AA meetings, and other twelve step groups like GA, derive their transformative benefits (Horarik, 2005).

Kurtz and Ketcham (2002) say that this process would be called reframing by psychologists, but they prefer "re-mapping." "When newcomers to Alcoholics Anonymous become immersed in storytelling and storylistening, they begin to see the form and outline of a new map, which details where they are, and how they got there, and – most importantly – the way to get where they want to go (p. 114)." Berger and Luckmann (1967) might argue that this involves secondary socialization. They define socialization as the comprehensive and consistent induction of an individual into the objective world of a society or a sector of it. Primary socialization would be the first socialization an individual undergoes; this socialization makes her a member of society. Secondary socialization is the internalization of institutional or institution-based "sub-worlds" (p. 158).

Berger and Luckman (ibid) would probably be understanding of the addicts' need for talking: "...as I objectivate my own being by means of language, my own being becomes massively and continuously available to myself at the same time that it is so available to him, and I can spontaneously respond to it without the "interruption" of deliberate reflection. It can, therefore, be

said that language makes “more real” my subjectivity not only to my conversation partner but also to myself. This capacity of language to crystallize and stabilize for me my own subjectivity is retained (albeit with modification) as language is detached from the face-to-face situation. This very important characteristic of language is well caught in the saying that men must talk about themselves until they know themselves (p. 53).”

3.8.5 The Combo Book

The third tool mentioned in *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1987) is the *Combo Book*. It is a tradition at all GA meetings the writers state, to read from the *Combo Book*, a small pamphlet presenting a short overview over GA’s recovery plan. The booklet contains the following themes or sections: History of GA, the preamble, the steps, the unity steps, a list of FAQ’s on GA, the 20 questions (a diagnostic tool), and the famous page 17, that lists what to do and not to do as a compulsive gambler. This pamphlet is used more often than any other literature of GA and in order to represent where GA is at any given time, it is updated regularly (ibid).

Being GA’s main text, the *Combo Book* is incredibly short. At an AA meeting one can expect to be introduced to one of several lengthy books published by the AA fellowship and in comparison GA’s pamphlet may appear very short and simple. But the authors seem to have had a clear idea of what compulsive gamblers need to hear, otherwise, it would never have become so prominent; in GA, practically everyone endorses the *Combo Book* (Ferentzy et al., 2006 A).

Bill Lee, in his autobiography, certainly endorses the *Combo Book*: “Someone handed me a small, yellow booklet. The first copy I grabbed was crumbled and had numerous coffee stains on the front and back covers... I had no idea that this book, the GA Combo Book, which contains both the recovery and unity programs, would be the most important resource for me-not only in my recovery but in all areas of my life. Merely seventeen pages, it contains answers to the questions I had been pondering for decades regarding my addiction (Lee, 2005, p. 128).”

The last page of the *Combo Book*, page 17, has a very elevated status in GA. Many GA members say that this page, on its own, can ensure abstinence from gambling, if taken seriously. One cannot

understand GA without understanding this page was the conclusion of a team of researchers studying GA in Northern America (Ferentzy et al., 2006 A)! “The last page outlines in simple terms what compulsive gamblers need to do to sustain their recovery. I have read each word and phrase of the Combo Book more than a thousand times. Each time I open it, I gain new insight, either about my disease or myself. I have yet to meet anyone who abides by the seven directives on page 17 and is still out there gambling (Lee, 2005, p. 128-129).”

The seven admonitions may appear simple, but they reflect a philosophy of recovery as well as ideas about the nature of compulsive gambling (Ferentzy et al., 2006 A). The seven directives are (with short explanations):

1. Attend as many meetings as possible, but at least one full meeting per week. Meetings Make It.

(In AA, new members are encouraged to attend at least one meeting a day for 90 days.

This is simply impossible in GA, there are not enough meetings.)

2. Telephone other members as often as possible between meetings. Use The Telephone List.

(This is a common recommendation in all twelve step groups.)

3. Don't test or tempt yourself. Don't associate with acquaintances who gamble. Don't go in or near gambling establishments. Don't Gamble For Anything. This includes the stock market, commodities, options, buying or playing lottery tickets, raffle tickets, flipping a coin or entering the office sport pool.

(This section contains two parts. The first provides a very broad notion of what gamblers need to avoid and the second a definition of gambling. The admonition, not to go near gambling establishments is unusually strict, much more so than one would ever meet in AA. This might be a relic of a different society, where gambling was not mainstream. Sober alcoholics need to adapt to a society where drinking is the norm, and alcoholic beverages are legal and accepted. This was not the case with gambling a few decades back. Times have changed and gambling is more accepted and easily available now, maybe GA will have to reconsider this recommendation of the *Combo Book* in the future.

But there might be another twist to this. Much of the advice in the *Combo Book* is based on experience, and quite a few gamblers have described to the author of this text how

seducing gambling machines are, especially the lights and the sounds. Herscowitch (1999) says that classical conditioning plays an important role in the development of addiction. Classical conditioning may be a more powerful element in gambling addiction than it is in alcoholism. As alcoholics become progressively more intoxicated, they become less aware of their environment. “In the case of pathological gamblers, the excitement of gambling may temporarily increase environmental awareness, thus allowing for strong associations, and therefore, classical conditioning to occur. These environmental stimulus cues create powerful urges to gamble (Herscowitch, 1999, p. 81). Maybe it is sound advice, after all, not to enter gambling establishments, if you don’t want to gamble.)

4. Live the Gamblers Anonymous Program One Day At A Time. Don't try to solve all your problems at once.

(Once again the theme of powerlessness: one has to accept life on life’s own terms, good things happen slowly. Acceptance of this is integral to healthy recovery in GA. It’s easier to abstain from gambling one day or one hour at a time, and one can use the same technique to deal with other problems in life – it’s a journey that is taken one step at a time.)

5. Read the Recovery and Unity steps often and continuously review the Twenty Questions. Follow the steps in your daily affairs. These steps are the basis for the entire Gamblers Anonymous Program and practicing them is the key to your growth. If you have any questions, ask them of your Trusted Servants and Sponsors.

(While it is true that very important parts of the GA program are reduced to one item, page 17 does not neglect the importance of the twelve steps and the unity Steps. Ferentzy et al., (2006 B) mention that some researchers have come to the conclusion that GA has neglected the twelve steps and focused more on practical things, mostly issues around money. There is some truth in this, page 17 is more practical than spiritual, but this has to do with patience. GA wants the gambler to do the recovery program slowly and be patient, not rush into working the steps. Patience may be the most difficult virtue for a GA member to acquire (Ferentzy et al., 2006 A).)

6. When you are ready, the Trusted Servants will conduct a Pressure Relief Group meeting, or re-evaluate for you and your spouse (if married), and adherence to it will aid in your recovery.

(Pressure Relief is a process where experienced GA members help a newer member with financial (and sometimes legal) planning. Normally, members must demonstrate some commitment to GA at least in the form of meeting attendance before Pressure Relief becomes an option (Ferentzy et al., 2006 A). Pressure relief groups are unknown in GA in Denmark, and none of the people I interviewed, had heard these groups mentioned in GA.)

7. Be patient! The days and weeks will pass soon enough, and as you continue to attend meetings and abstain from gambling your recovery will really accelerate.

(As we have seen, patience is a virtue in GA, both spiritually and regarding money. Bill Lee (2005) tells a story of a tempting financial settlement he was offered, but his sponsor was against it. "It's like a bailout, and a quick solution may lead to a relapse. You need to stretch those payments out as far as possible and think about your disease each time you write the check out and mail it to them (p. 215)." Maybe this explains why it took one of the longest serving members of GA in England 17 years to pay his debts (Garfield, 2006).

Page 17 may seem simple and shallow but older GA members report that it takes a long time to "get page 17." It needs a profound grasp of what patience entails, and an emotional state amenable to such wisdom, and this does not come easy for some gamblers (Ferentzy et al., 2006 A).

Some parts of the *Combo Book* have been translated into Danish, and it is customary to read from these pages at the meetings. These translations were made at the time when GA began in Denmark, and have been photocopied and given to members interested in starting up new groups. There have been plans to update these translations, but to date GA still uses the same copies. Recently a therapist, who is himself a compulsive gambler, gave me a copy that he had translated some years ago. I promptly sent it (electronically) to a GA member who was working on updating the material read at the meetings.

One of the interviewees, a long standing GA member, confirmed that the word *Combo Book* is not used in Gamblers Anonymous in Denmark. He actually had no idea that this book existed, nor did he know that the material read at the meetings came from that pamphlet and that it was incomplete. There is every reason to believe that some GA members, who have read GA literature in English, Norwegian or German, will be familiar with the name *Combo Book* (and with pressure relief groups).

3.8.6 Sponsor

Step twelve of Gamblers Anonymous makes no mention of a “spiritual awakening” like the same step in AA does. This is probably a sign of GA’s more secular approach and its aversion to the kind of quick solutions offered by the experiences of the early AA members (Ferentzy et al., 2006 A). But GA has kept the missionary part of the twelfth step, even if it has thrown out the spiritual conversion. Step twelve says that after working the other steps, to the best of one’s abilities, one should carry this message to other compulsive gamblers (Gamblers Anonymous, 2007). This is of course done to help other gamblers in need, but first and foremost to help oneself. To keep what you have gained, you must give it again! This work can be divided into two categories, twelfth step work and sponsorship. One important way of doing the twelfth step is visiting gamblers who still gamble, and talk to them and their families. *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1984) has a detailed description of how this should be done, what to say and do, and what should not be said or done. Members of GA in Denmark have not done much of this kind of work, it is usually limited to visiting people who have been to some GA meetings, but have started gambling again. Another way of doing this is visiting treatment centres and “speak,” that is tell one’s story to the gamblers in treatment.

When it comes to sponsorship, there are not many people in the Danish GA capable of acting as sponsors. A sponsor will ideally have a long “clean-time,” be in good recovery and have worked the steps. There are simply not many people in GA that have these qualities, and are interested in working with sponsees. This has led a few GA members to seek help in AA to work the steps. This author has seen tremendous change since 2003 in how AA treats stray gamblers who show up at their doors. In some groups they are now more than welcome, not least if they come to get help

working the steps. NA has always been more tolerant than AA, one addiction seems to be the same as others in NA in Denmark.

But if some GA members turn to AA to find sponsors, what is it they are looking for, or maybe the question is, what has AA to offer in terms of sponsorship. Sponsorship in AA evolved out of twelfth step work. "Making a Twelfth-Step call on an alcoholic who has asked for help and explaining the AA program to him can be considered the beginning of sponsorship (Alibrandi, 1987, p. 240)." The sober member offers his or her experience of the journey into sobriety as a blueprint for the newcomer. "Experience can be neither right nor wrong. It simply is. The sponsor is not obliged to insist that his protégé "follow the experience," and the newcomer is free to use any portion of the experience offered (ibid, p. 244).

Sponsorship is however not limited to new members of AA. Many AA members with years of sobriety continue to use sponsors well into middle and late stages of recovery. Some stick to their original sponsors while others find that they need different sponsors at different times and for different issues (Diamond, 2000). It is important to note the give and take character of the relationship between sponsor and sponsee. The sponsor benefits from the relationship and the sponsee only benefits if he or she is active in the relationship and uses the "tools" offered (Alibrandi, 1987). Every sponsor/sponsee relationship is different and negotiated, and it is not unusual for them to become friends and socialize with one another outside the context of the meetings (Diamond, 2000).

An important theme in the twelve step fellowships has to do with tolerance, defined as the acceptance of both likeness and difference. Members are told to identify, but not to compare. An alcoholic can easily compare herself out of the AA group (I don't drink as much as they did). In AA there are many sources of identification, if the member can let go of comparing. And the new member learns that there are no champions in AA, there is no gold medal of sobriety to be won. Each and every member has some unique qualities to offer, something that can help some other member along the road (Kurtz and Ketcham, 2002). These unique qualities are often found in the experiences of the sponsor. "AA sponsors often mention their personal relief from guilt over the past when they share with the newcomer. A formerly shameful experience gains utility and even a certain amount of dignity when it is used to help another alcoholic (Alibrandi, 1987, p. 244)."

Kurtz and Ketcham (2002) say that AA has been accused of sectarian tendencies and brainwashing. “But careful observers remain constantly amazed at the variety of beliefs that one finds among its members and at its meetings... all drinking alcoholics are alike; each sober alcoholic develops a sobriety that is unique (ibid, p. 208).”

3.8.7 The Serenity prayer and GA; a paradoxical union

GA has tried its best to become more secular than AA, but it still retains the Serenity prayer, a prayer of unknown origins but adopted by AA and many other twelve step groups. In Denmark this prayer is usually performed at the end of every GA group meeting. Ferentzy et al., (2006 A), note that while the Serenity Prayer is important in other twelve step fellowships, this prayer rings even more true in GA. Many members they interviewed considered this prayer one of the three or four most important components of their recovery. That the prayer is important to many atheists in GA reflects a paradox that has long haunted the fellowship; the need to retain the word "God" while seemingly doing away with the need for a deity (ibid).

Paradoxes, it was stated earlier, are an integral part of the twelve step programs. Berenson (1987) names some of them in an article called “Alcoholics Anonymous: From surrender to transformation.” He says: “One has to put one’s sobriety ahead of everything else, yet to maintain sobriety one has to care for others. One has to do it totally for oneself, to stop being dependent on the bottle or addictive relationships, and at the same time to stop trying to do it by oneself, to accept the help of the group and/or one’s personal higher power...Alcoholism is seen as a disease beyond one’s control and not a moral failing, yet much of the process of recovery is about taking a moral inventory, healing character defects, and making amends for the damage that one’s behaviour has caused (Berenson, 1987, p. 30).

GA, just like AA, advocates a spiritual program of recovery. And all spirituality, according to Kurtz and Ketcham (2002), involves the perceiving, embracing, and living out of paradox. “A “paradox” is an apparent contradiction: two things seem to exclude each other, but in truth need not do so... Openness to paradox allows both the understanding and the acceptance of our human condition as “both/and” (both a saint and a sinner) rather than “either/or” (either a saint or a sinner). The demand

for “either or,” for one-or-the-other, signals the rejection of paradox and therefore the denial of spirituality (Kurtz and Ketcham, 2002, p. 6).”

That the twelve step groups put so much emphasis on paradox is not at all surprising. Diamond (2000) says that the lives of alcoholics and addicts are really a study in tortuous paradox that embodies thinking that in order to survive I must persist in behaviours that are killing me. For a compulsive gambler the obvious example is: In order to win back what I’ve lost gambling, I must gamble more. John Wallace (1987) says that helping the addict isn’t so much about helping her to think rationally; it has just as much to do with helping her to use her denial and her distorted ways of thinking, to get into recovery. And at the end of the day, most people will have to deal with paradoxes in their life; addicts can take them to their meetings and find that they are normal.

3.8.8 A spiritual or a religious program

The Serenity prayer is a clear sign of the so called spiritual dimension of the twelve step programs, and the undeniable religious origins of AA. The twelve step groups also seem to perform the major social and psychological functions of religion with considerable success: they give identity and a sense of purpose to members, they school them in the general conduct of their lives and they bind them into a community (Antze, 1987).

Spirituality (and religion) poses some problems for the scientific world and for the evidence minded professional. “While not the only factor in AA’s dismissal until recently by the “helping professions,” it was the primary one (Diamond, 2000, p. 309).” Kathleen Tangenberg (2005) agrees, and says that in social work and feminist literature, the cultural appropriateness of twelve step programs has been challenged, often with reference to the Oxford Group, and continued associations of the twelve step groups with Christian churches and ideologies.

Bufe (1998) who is highly critical of AA is not convinced that “the program” is spiritual rather than religious, like the Big Book of AA states (Alcoholics Anonymous, 1976). According to him, AA is almost as religious as the Oxford Group and shares some of the Oxford Group’s dogmas; hostility to formal institutions and anti-intellectualism. Based on a review of AA literature and on participant observation research, Rudy and Greil (1989) argue that both the religious features of AA and AA’s

denial of its religious nature are integral to the structure and functioning of AA. They say that AA denies being a religion, in order to better realize its therapeutic goals. But as an “identity changing organization” it encapsulates its members and creates an atmosphere where members are likely to experience a sense of institutionalized awe for the power of the group. “AA is properly classified as a quasi religion in so far as a tension between sacred and secular is crucial to its functioning (Rudy and Greil, 1989, p. 41).”

Some of the most serious criticism on Alcoholics Anonymous and the other twelve step fellowships comes from people who have personal experience with one or more of the fellowships. This is the case for Bufe (1998) and Meacham (1999; 2000). Sometimes the critique is levelled at the fellowships only, in other cases it is more a criticism of the industry that has developed around the fellowships, in North America particularly, e.g. the treatment industry and the publishing business. Both the above mentioned authors stop short of saying that AA is a cult or a sect, and Meacham (2000), a true insider both at grass roots level and inside the treatment industry, is kinder towards AA than the treatment industry.

Khantzian (1995), a long serving Clinical Professor of Psychiatry at the Harvard Medical School, says that all groups run the risk of subordinating the “will and identity of an individual to the values, attitudes, and objectives of the group and its leader(s). In fact, in some respects it is an inevitable if not at times necessary aspect of acculturation and civilized life (p. 161).” AA, he argues, has much less the characteristics of a cult, and more the attributes of therapeutic group processes that produce personal transformation and maturation.

Marianne Valverde (1999) would probably not lump together twelve step groups and professional therapeutic groups, but she distinguishes between AA and religion. “Unlike religions, AA does not attempt to universalise its ethical techniques: that is why it does not, as an organisation, preach from pulpits or from our television screens (p. 399).” She describes AA’s method as hybrid; the programme uses elements of the disease model of alcoholism while remaining fundamentally a spiritual programme, “thus mapping an important hybrid terrain, often ignored by students of medicalisation (Valverde, 1999, p. 339).”

Gamblers Anonymous can also be described as hybrid in its methods. In the beginning GA made somewhat more use of experts than AA. In the early years it was common for psychiatrists to attend meetings, both in order to gain knowledge about compulsive gambling, but also to help the members deal with difficult cases or situations (Taber, 2001; Moody, 1990). Experts working in the Brecksville treatment programme studied members of Gamblers Anonymous and reported the results in *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 1984). This may have been done to gain credibility and prestige, just like AA had done earlier (Valverde, 1998). But when push comes to shove, Gamblers Anonymous doesn't always welcome the intrusion of scientists. Mark Griffiths, a professor of psychology in England, had worked closely with GA in England for some time, when suddenly he was met with disinterest from Gamblers Anonymous. They simply didn't want to work with him, nor provide the necessary information (Mark Griffiths, personal communication). It is very difficult, almost impossible, for someone whose "higher power" is the scientific endeavour, to understand this anti-scientific attitude.

Gamblers Anonymous was rather pro-scientific in the beginning and it tried its best to be secular. It still is ardently secular, but today Gamblers Anonymous in Toronto puts more emphasis on the twelve steps, and on spirituality, than was customary 10 – 15 years ago. And a striking feature of GA in the Toronto area is that members often refer to AA as an example of where Gamblers Anonymous should be heading. What AA has to offer is more spirituality, AA is better at taking care of newcomers, and above all, puts more emphasis on twelve step work (Ferentzy et al., 2006B). In the Toronto area, GA members are now encouraged to talk about emotions and life issues. Ferentzy and Skinner (2003-2004) found that more women are entering GA now than before. It is probably difficult to tell, if this emphasis on emotions, spirituality and step work is attracting more women to GA, or if it is the consequence of more women entering GA in North America.

To round off this discussion, Horarik (2005) found a number of studies of AA that revealed that some sober alcoholics have not had a "spiritual experience" and, in fact, do not believe in God. Some of these members point out the group dynamics and the companionship with fellow-sufferers to account for the healing power necessary to keep them sober. In fact very few members of AA claim to have had vivid, spiritually meaningful visions or other extraordinary religious experiences (ibid). But more will be said about this later.

3.9 The Unity Programme of Gamblers Anonymous

Unity is the most precious quality Gamblers Anonymous possesses. It is the key to the welfare of individual members and groups, and for the fellowship as a whole (Gamblers Anonymous, 2002). Yet unity in GA cannot automatically be sustained. In order to maintain unity Gamblers Anonymous adheres to the twelve unity principles, which are based on AA's twelve traditions.

The Twelve Traditions of Alcoholics Anonymous were written after reviewing the successes and failures of the pioneer AA groups. By that time AA had made the difference between misery and sobriety for its own members, and could mean just as much, to future alcoholics in need of help. "Therefore, no society of men and women ever had a more urgent need for continuous effectiveness and permanent unity. We alcoholics see that we must work together and hang together, else most of us will finally die alone (Alcoholics Anonymous, 1976, p. 563)." The same urgency and commitment to help gamblers in need, seems to motivate the writers of the unity principles of GA. They also stress the responsibility for keeping GA alive, not only for current members, but also for future gamblers. Members understand that what is best for the group is also what is best for the individual member; GA puts principles before persons (Gamblers Anonymous, 1984).

The unity steps or the traditions are a set of rules, made to govern and guarantee the survival of the mutual aid group or the fellowship. What matters most is the common welfare, to avoid conflicts, not the letter of the law, as the following story illustrates: Ten years ago a well known AA member in Reykjavik used copyrighted material from AA without licence and probably in breach of the traditions too. At the request of the Icelandic AA office the general service office in New York took a look at the issue. Their response was that the AA in Iceland could of course sue the author, but should first think of the split it might cause in a small community. AA in Iceland decided not to take any further action (personal communication with the AA service office in 1998).

Generally the twelve step fellowships see the traditions as much as spiritual principles as a set of rules. Narcotics Anonymous published a book on the twelve steps and twelve traditions that "seeks to explore the spiritual principles within the traditions, engage member with the spirit-not the law-of the traditions, and provide a basis for thought and discussion about the traditions (Narcotics Anonymous, 1993, p. 132)."

The twelve traditions of Alcoholics Anonymous and Narcotics Anonymous have received some attention by scholars studying the fellowships (Horarik, 2005). This is understandable, considering how much emphasis the fellowships place on adhering to these principles. Bill Wilson, the co-founder of AA, had this to say on the 25th anniversary of Alcoholics Anonymous: “AA's Traditions are the yardsticks by which our fellowship can accurately measure its progress -- or the lack of it. In our Traditions we see such wisdom as we have been able to muster in a quarter of a century of living and working together. That these principles stake out the path we ought to follow, there can be little doubt (Bill W, 1988, p. 316).” Bill W was the main architect of the traditions, and they were first published in the 1946 April edition of The AA Grapevine under the title, “Twelve Suggested Points for A.A. Tradition” (Kurtz, 1979).

According to Bill the traditions have two main characteristics, and each of these aspects reinforces the other. The first aspect is protection; the second is progress. “As we ponder protection, we see that our Traditions warn against the perils of public fame and power, against the perils of great wealth, against the making of compromising alliances, against professionalism. We are reminded that we may deny no alcoholic member his membership, that we must never create an authoritative government of men. We are cautioned that we should never force AA's message upon the world by aggressive promotional schemes, and that we should shun public controversy as the devil himself (ibid, p. 316).”

But the traditions were to provide the members of Alcoholics Anonymous with far more than protection against mediocrity and dissolution. There is also a positive side to the traditions, aimed more at progress than protection. It’s “the disciplined sacrifices and responsibilities that we shall need to undertake; the degree of mutual trust and love that we shall need to achieve if we are to find the greater freedom we seek (ibid, p. 316).”

3.9.1 The Unity Steps – GA’s organizational principles

GA's organizational structure is spelled out in the Unity Steps, but one should not forget that there are principles of GA's organization that cannot be found in the Unity steps, nor are they written down in any of the official GA literature.

1. Our common welfare should come first; personal recovery depends upon Gamblers Anonymous Unity.

The first unity step says that Gamblers Anonymous' common welfare comes first. This really means that personal ambitions will have to be set aside when they are in conflict with the safety or the effectiveness of the fellowship. Another way of putting this is found in the slogan: "Principles before personalities." The stress on unity is inherited from AA. The experiences of the Washingtonians movement, the Temperance groups, and the early AA groups were the guiding lights when Bill W wrote the traditions (White, 1998). And Bill was adamant on securing that divisions and animosity would not destroy Alcoholics Anonymous. "The unity of Alcoholics Anonymous is the most cherished quality our Society has. Our lives, the lives of all to come, depend squarely upon it. We stay whole, or AA dies (Anonymous, 1981, p. 129). "

2. Our leaders are but trusted servants, they do not govern.

Gamblers Anonymous, adhering to the same principles as Alcoholics Anonymous, has but one ultimate authority, a higher power as expressed the group's conscience. The leaders are but trusted servants they do not govern (Anonymous, 1981). Mäkelä et al., (1996), say that the discussions of tradition two in AA's official literature clearly favors elections as the method for choosing group leadership, even if elections are not mandated, reinforcing the ideology of a bottom-up structure. Rotation of representation and leadership is mandated in AA's service structure, and this is recommended to groups concerning their own leadership.

Gamblers Anonymous in Denmark is obviously familiar with these principles of AA. But it aligns itself with Alcoholics Anonymous in Denmark in preferring to have the same person lead the meetings for months or years, whereas in Iceland the group leader usually serves for shorter periods. But just as in AA, all major decisions are referred to group conscience meetings. "Group conscience" in Alcoholics Anonymous, is a key to the working of the group, and has come to mean decision-making by consensus (Denzin, 1987). This does not mean complete unanimity, nor does it mean decisions by majority vote. Instead, it frequently entails lengthy discussions in search of consensus before the group decision is taken.

Information flows freely between the Århus and the Copenhagen groups (through personal contacts), without a formal official structure, this is probably a sign of the same internal openness as seen in AA and mentioned by Mäkelä et al. (1996). They say that there is no secrecy of process in AA, and that the anonymity is only partial. The same can be said of GA in Denmark. Anonymity, when it comes to the outside world is held in high esteem, but information, including names, is relatively freely available within GA. This is a matter of tradition and necessity. Twelve step groups often circulate a list of members' names and addresses as an aid to twelve step work and for organizational maintenance. The *Combo Book*, advises all members, especially newcomers, to use the telephone list and call if in need of help (Gamblers Anonymous, 2007). This organizational openness and the easily available information serves an important role in limiting oligarchic tendencies (Mäkelä et al., 1996).

3. The only requirement for membership Gamblers Anonymous, is a desire to stop gambling.

This tradition says, in effect, that any compulsive gambler can become a GA member the moment she says so. It also implicitly suggests that no other member can deprive her of that membership, no matter how she behaves. In their discussion of the twelve traditions of AA, Mäkelä et al., (1996), ponder: “This is an unusual organizational characteristic. Most political, religious, or other voluntary organizations have a well-defined boundary between membership and non-membership. Bans on property and on professionalism help make AA's open membership structure feasible: there are no tangible assets for the members to share or quarrel over, and the AA group is not financially burdened with maintaining professionals (a burden which tends to force a definition of membership in religious congregations, for instance). The lack of any procedure for exclusion from membership has probably helped in avoiding splits of AA as a movement...The openness of membership and the freedom to come and go also distinguish AA from religious cults (Mäkelä et al., 1996, p. 43).” Horarik (2005) talks at length about how Alcoholics Anonymous focuses on avoiding conflicts. He sees this form of open membership as a powerful mechanism for avoiding conflicts between members and between an individual member and the fellowship of AA as a whole.

There are no membership applications in GA or committees to evaluate who should be let in or kept out. The only person who can decide who belongs and who does not, is the gambler herself. Two gamblers can affirm each other's membership through sharing experiences but

there is no structural mechanism that would allow one gambler to deny or even question the other's right to be in GA. Gamblers Anonymous does have a questionnaire to help decide if you have a gambling problem, but at the end of the day it is the gambler's own subjective evaluation that is the deciding factor.

This seems to indicate that there are no rules on membership, and one might fear for chaos in AA or GA. But Horarik (2005) points to some mechanisms that help avoid individuals and groups competing with each other in an attempt to impose or defend various spontaneously forged rules. He says that just as the "fellowship through its meetings moulds the subjective experiences of its members so do these subjective experiences mould and structure the fellowship. Underneath, there operate powerful structuring mechanisms of an experiential nature (rather than competitive nature, institutional nature, or any form of stable power-relations nature). While there are no membership rules that would allow one member to check the credentials of another member, the experiential criterion 'AA has to work for you' is powerfully present and works as ongoing self-exclusion of all those for whom AA does not work (Horarik, 2005, p. 172)." In other words, participation in GA is completely voluntary and those for whom GA does not work, simply stop attending meetings.

4. Each group shall be self-governing except in matters affecting other groups or Gamblers Anonymous as a whole.

Horarik (2005) argues that in the third tradition AA relinquished control over its membership and that in tradition four, it has done the same with its groups. In AA each group is given full autonomy, the undisputed right to manage its own affairs. To make this condition doubly permanent and secure, all AA groups are guaranteed that they will never be subjected to any centralized authority. In turn each group agrees that it will never take any action that could injure the fellowship as a whole (Wilson, 1988). This rule would make anyone with a bit of sociological imagination expect a rapid differentiation within AA and a proliferation of various local forms of AA. AA defies this expectation. Horarik (2005) points out that by minimizing conflicts between groups, the fourth tradition opens up more space for healing interaction, and that in return imposes limits on the freedom of the groups. "While, on paper, the Fourth Tradition gives groups extreme freedom, they are all severely constrained by the need to facilitate healing experiences. The moment they stop that, alcoholics cease to have a reason to

come to meetings ... Such meetings are like a bakery selling stale bread – people stop buying there. The healing experience is the ‘product’ that alcoholics come to AA to get and the group has to be able to provide it. And these healing experiences are contingent on conflict-free environment of AA. It is this ‘social logic of experience’ that allows us to understand both why there is a need in AA for rules that eliminate control of one alcoholic over another or one group over another, and, at the same time, why the fellowship of AA is somewhat homogeneous rather than highly differentiated (Horarik, 2005, p. 174).”

It should be clear by now that the fundamental organizational unit of both AA and GA is the group. A group is defined in terms of those who show up at meetings scheduled for a particular place and time of the week (Mäkelä et al., 1996). An important fact in the organization of GA is that there are no exclusive territories or franchises. No GA group can stop a new one from forming. This is quite unusual for such an organization; chapters of fraternal organizations often have an exclusive franchise for some defined territory or population. This might be regarded as a corollary of the autonomy of the group, that is extended to new as well as existing groups, and it provides both a safety valve for internal conflicts and gives greater freedom for growth (ibid). A member of Gamblers Anonymous that has fallen out with the leader of his homegroup is free to start up a new one. As the saying goes, all it takes to start a new GA group are two recovering gamblers, resentment, and a coffee pot.

5. Gamblers Anonymous has but one primary purpose - to carry the message to the compulsive gambler who still suffers.

Gamblers Anonymous is to do what it does best, help compulsive gamblers in need, and GA puts great emphasis on holding on to this singleness of purpose. Bill W explains this idea at length in an article on the fifth tradition of AA. “Because it has now become plain enough that only a recovered alcoholic can do much for a sick alcoholic, a tremendous responsibility has descended upon us all, an obligation so great that it amounts to a sacred trust. For to our kin, those who suffer alcoholism, recovery is a matter of life or death. So the Society of Alcoholics Anonymous cannot, it dare not, ever be diverted from its primary purpose (Bill W, 1988, p. 82).”

Standing alone, the above citation would not only convey the importance of the help AA has to offer to the drunkards of all ages, but also something akin to religious fervor. There is an obligation that amounts to a “sacred trust”, and nothing must stand in the way of AA meting this obligation. But maybe, incredible as that may be, the intention of the fifth tradition is precisely to avoid religious fervor, or more accurately, to avoid AA becoming a religion or a cult. Bill W knew that there were temptations aplenty to be diverted from the primary purpose of helping alcoholics in need. “Seeing fine works afoot in the field of alcohol, we shall be sorely tempted to loan out the name and credit of Alcoholics Anonymous to them; as a movement we shall be beset to finance and endorse other causes. Should our present success continue, people will commence to assert that AA is a brand-new way of life, maybe a new religion, capable of saving the world (Bill W, 1988, p. 82).” Bill Wilson may or may not have thought AA had something to offer to the world in general, but for the alcoholic these speculations were dangerous, they could lead to a “dry bender,” a condition “when an A.A. member displays all of the characteristics of being drunk, or hung over – self-centered, emotional, self-pitying, angry, resentful (Denzin, 1987, p. 211).” When on a dry drunk, the sober alcoholic has lost touch with his or her fragility and suffers from “alcoholic grandiosity.” For the members of Alcoholics Anonymous, “... anonymity is better than acclaim; that for us, as a movement, poverty is better than wealth (Bill W, 1988, p. 83).”

6. Gamblers Anonymous should never endorse, finance, or lend the G.A. name to any related facility or outside enterprise, lest problems of money, property and prestige divert us from our primary purpose.

The effectiveness of GA is dependent upon keeping outside interests separated from the fellowship. Supporting other issues or fellowships will cost energy, time and money, it might also compromise individual groups and the fellowship as a whole (Gamblers Anonymous, 2002). This principle supports the maintenance of a bottom-up organization and helps keep GA free of imputed affiliations by breaking the link between the external commitments of individual GA members and their GA membership. The sixth unity step effectively prohibits external affiliations and endorsements. This works both ways; GA groups should not affiliate with another organization, and neither will GA allow any other groups to affiliate with it.

GA as a whole, and individual groups, is to abstain from owning any real property. “This principle is the most radical departure from usual organizational practice: the greatest aspiration of a new congregation or a fraternal club is normally to own its own building, and most voluntary associations would jump at such a chance. This principle recognizes that property issues, on the other hand, are often sources of collective and individual strife in voluntary associations (Mäkelä et., 1996, p. 46).” This unity step has its roots in AA’s early experiences, when the fellowship was involved in running hospitals or treatment centers. Getting economically involved in professional treatment spelled trouble for AA, but when Bill wrote the sixth tradition he was also thinking about the demise of the Washingtonian movement in the 1840’s (Anonymous, 1981). The Washingtonians went from being a huge success to vanish completely in a surprisingly short time. “Political controversies within the Washingtonian movement ... splintered many groups, diverting the focus from the reformation of the individual alcoholic. It would be a lesson for the future: service to individuals can be undermined through political involvement and political controversy (White, 1998, p. 13).”

7. Every Gamblers Anonymous group ought to be self-supporting, declining outside contributions.

Here the members of the fellowship undertake to pay every cent of their own service expenses, meanwhile declining outside contributions. The fact that the fellowship doesn’t take money from the outside world builds confidence in those who think of approaching the fellowship. Not only will this go down well among the public, this salutary practice takes the fellowship in the direction of increased freedom. By declining outside funding, whether from individual donors or by the government, the fellowship is preserving its liberty of action (Wilson, 1988).

For AA, giving birth to the seventh tradition was harder than any of the other. It was hard to say no to people who sincerely wanted to help and give money to an organization that was broke (Wilson, 1988). But experience said that groups that got rich got into trouble, and that the reason for AA being poor had to do with the fact that the alcoholics themselves got rather stingy after sobering up. AA needed some money, but the solution was to have the members open up their purses and take responsibility for their groups. Each group was to be fully self-supporting. The expenses of the group are paid with the money collected when "the hat is passed," usually at the end of the meetings. Normal expenses include rent, refreshments, literature purchases, and contributions to activities at higher service levels (Mäkelä et al., 1996).

Horarik (2005) sees the adherence to “collective poverty” (Anonymous, 1981, p. 161) as a mechanism for conflict minimization, for not having to repeat the conflicts that ravaged some of the early AA groups. Facing the prospect of affluence, AA set up structural measures to avoid a surplus of money. The decision to embrace collective poverty was a wise one for AA, but it may be even more essential for GA, where money generally is a big issue for most members. This is also one of several measures designed to ensure that the fellowship maintains both a singleness of purpose and a focus on the egalitarian nature of the twelve step meeting (Mäkelä et al., 1996).

8. Gamblers Anonymous should remain forever non-professional, but our service centers may employ special workers.

According to Gamblers Anonymous compulsive gamblers are best suited to help other compulsive gamblers. GA does not doubt that professionals can help gamblers and members are free to get all the help they want from outside sources. But professionals are held at arms length, GA fears that once inside there might be trouble if the professionals do not agree with some elements of the recovery program (Gamblers Anonymous, 2002). This is probably based on experience. In the beginning GA used professionals at their meetings, both in the US and England (Taber, 2001; Moody, 1990). AA also has a rich history of trouble that this principle is intended to help avoid repeating. These stories are told at length in “*Twelve and Twelve*,” (Anonymous, 1981) where AA’s traditions are explained at length, and Kurtz in his dissertation, *Not God. A history of Alcoholics Anonymous* (1979) adds a few more examples. Kurtz also reveals in his book how Bill W’s personal forays into professionalism were met with great skepticism by his fellow sober alcoholics. Generally the alcoholics reacted badly when some members of AA set them selves up as paid experts; it had a tendency to split the group (Anonymous, 1981).

Bill W and the oldtimers in AA also used psychological explanations to explain the need for the eight tradition. According to them, based on personal experience, alcoholics have problems with authority, a disposition they thought could explain AA’s hostility towards professionals and how the eight tradition is formulated. But they were also, sincerely, of the opinion that professionals were unable to help alcoholics to stop drinking (again grounded in personal experience) (Anonymous, 1981).

Out of need AA, and later on GA, found it necessary to employ people in the service centers. Mäkelä, et al. (1996), say that although great emphasis is put on the equality of members, seniority in the movement does play a significant part in who ends up in what position in the structure. Some AA groups impose a minimum length of sobriety as a prerequisite for election to office. But a number of principles and practices outweigh all tendencies towards hierarchy or oligarchy within AA.

9. Gamblers Anonymous as such ought never to be organized, but we may create service boards or committees directly responsible to those they serve.

Gamblers Anonymous is governed by a spirit of service, not power. To avoid problems related to power issues GA avoids all forms of hierarchy, and there is no ruling central committee. In USA there are service committees and service offices but they do not have a veto on any issues, and they are responsible to the fellowship as a whole (Gamblers Anonymous, 2002). AA's central office in New York works according to the same principles; those who work there have found out that they can only give advice when asked, in the form of suggestions, always carefully staying close to the spirit of the traditions (Anonymous, 1981). Gamblers Anonymous in Denmark has almost no service structure yet, but there is every reason to believe that they will follow the example of AA in Denmark which has become quite an elaborate organization, without losing sight of its grassroots character. Research on AA organizations around the world, confirms that power is firmly defined as lying at the base rather than higher in the structure (Mäkelä et al., 1996).

10. Gamblers Anonymous has no opinion on outside issues, hence the GA name ought never be drawn into public controversy.

Bill W said that this was perhaps the first tradition ever to take shape in AA. Early members of Alcoholics Anonymous did keep that sometimes enjoyable right of quarreling among themselves about non-divisive issues, but when it came to subjects that can split society, such as politics and religion, early members of AA knew that these conflicts were to be avoided (Wilson, 1988).

AA based the tenth tradition of the experiences of the Washingtonians and they decidedly did not want to be cast as another branch of the Temperance movement (Valverde, 1998). For Gamblers Anonymous, the survival of the fellowship is much more important than taking a stand on outside issues. Getting involved in other issues will always divide the fellowship and threaten its existence (Gamblers Anonymous, 2002).

11. Our public relations policy is based on attraction rather than promotion, we must always maintain personal anonymity at the level of press, radio, films and television.

Bill W saw the eleventh tradition of AA as “the most important application of AA's principle of anonymity, ... it sets the pitch and tone of our entire public relations policy, nothing can be more critically important (Bill W, 1988, p. 319).”

Originally anonymity was introduced in AA because of the stigma attached to alcoholism. But from the beginning, this principle was in conflict with the need to spread the message among practicing alcoholics (Horarik, 2005). This focus on anonymity is also important and problematic to Gamblers Anonymous, which as a fellowship wants to be open for all who are interested in GA or compulsive gambling. To be able to do so it must be visible in society and personal stories are used to inform the public about gambling problems and how the fellowship works (Gamblers Anonymous, 2002). But those whose service work includes appearing in public must tread carefully and keep the principle of anonymity in mind.

“The danger, of course, is the possibility that we may one day recklessly abandon the principle of personal anonymity at the top public level. This possibility arises from the fact that many of us AA’s have been, and sometimes still are, possessed by enormous power drives. These are frequently fueled by an almost irresistible craving for money, approval, and public acclaim. My own past history is outstanding in this respect. I can well understand the constant temptation to turn one's self into a public figure. Therefore I have urged, in season and out, that we AA’s maintain our personal anonymity at the top level, no matter what the personal sacrifices may be (Bill W, 1988, p. 319).”

Bill W is referring to a period in the history of AA where many members of AA, including himself, had a strong impulse to promote AA publicly in spite of the ideal of anonymity. In fact,

in some quarters it was felt that anonymity was no longer so important (Horarik, 2005). This enterprise proved to be very counterproductive. Many of the members who went public ended up drinking again and Bill W himself started behaving erratically. As one member told him, he was “acting like a man on a dry drunk (Kurtz, 1979, p. 96).” Through these experiences the members realized, that breaking the principle of anonymity is bad for alcoholics. The idea was that it inflated “alcoholic grandiosity” and led to a condition that AA came to describe as being on dry bender (ibid). What the members of early AA realized through experience was that being a spokesperson for AA is an ego-inflating activity, whereas the healing power of AA comes from the deflation of ego. Going public in the name of AA could therefore undermine the benefits of working the program of AA and lead to alcoholic grandiosity (Horarik, 2005).

The principle of external anonymity is justified, by AA, on several grounds, and some have little to do with psychological theories but more with organizational matters (Mäkelä et al., 1996). It of course helps avoid affiliations and distractions and it is also is a crucial element in maintaining equality and democracy. Reporters and authorities are most interested in dealing with leaders and those in power, and they are not interested in talking to a different spokesperson every time. This often undermines the ambitions of social movements wanting to adopt a collective leadership. An enhanced status of one (or more) member in the outside world is often reflected internally in the organization, leading to oligarchic leadership. It is therefore understandable that AA, not only holds in high esteem the principle of anonymity but also, perhaps unique among Western social movements, it does not have public spokespersons (AA has non-alcoholic “public-relations” people to help out).

12. Anonymity is the spiritual foundation of the Gamblers Anonymous program, ever reminding us to place principles before personalities.

Enough has already been said about the troublesome business of being a spokesperson for an anonymous fellowship, and how members might hurt themselves or the fellowship as a whole. Anonymity at personal level is another issue. The rule on anonymity in Alcoholics Anonymous serves two purposes; it protects the individual members from harassment, as disclosure might cause them harm, and it protects AA from its own members who might use their AA identity to promote their own interests where membership in AA might be an asset (Óafsdóttir, 1998).

Individual members may sometimes choose to break their anonymity, e.g. to counter public perceptions or prejudices about addiction or addicts (Lefever, 2002). Knowledge of other people's membership is to be kept strictly confidential and not to be revealed (Ólafsdóttir, 1998). This is extremely important. Not only is the compulsive gambler (or the alcoholic) liable to be met with prejudice in the general population, but the new member will probably share these ideas at the time he or she enters Gamblers Anonymous. "New members will not come forward to tackle their shame ... if the consequence of their honesty is for their personal stories to be blazoned abroad, sometimes with dire consequences to their employment or family life (Lefever, 2002, p. 166).

The twelfth tradition/unity step, as well as the other eleven, does not take up much time at the meetings. It is customary, both in GA and AA, to read a few of them out loud at the end of each meeting. Often the only comment on the traditions is that people will be reminded of the principle of anonymity and to help finance the group by paying a small amount at the end of each meeting. Bill W said that the principle of anonymity, "and its enormous implications, touches every aspect of our lives. Anonymity is humility at work. To maintain the humility of our society we shall constantly take stock of our temptations and of our defects. The spirit of anonymity calls upon each of us for personal sacrifice in every level of our Fellowship's undertakings (Bill W, 1988, p. 320)."

3.9.2 Breaking Michel's Iron Law of Oligarchy

Robin Room is undeniably one of the leading scholars in that field sometimes called the "sociology of alcohol" (Levine, 1991). Room wrote in 1993 an essay on Alcoholics Anonymous, called "Alcoholics Anonymous as a social movement." He argues that Alcoholics Anonymous, that began its life as an organization "*sui generis*," now has become a prototype for a number of mutual aid organizations. According to Room, AA does not fit neatly into the usual descriptive categories of social science, e.g. a social movement usually aims at change in society, but AA seeks only to help its members to change themselves personally, never attempting to change society at large (Room, 1993).

Mäkelä (1998) who has studied AA in Finland claims that social mobilization in Finland has evolved through four different phases. The first phase typically consisted of religious revivalist movements that were instrumental in breaking down traditional systems of social networks and hierarchies, and provided platforms for social groups which didn't have a public voice. The second phase was the pre-political organizations, e.g. temperance movements or organizations addressing specific social issues. "The third phase is characterized by political parties and other class-based mass organizations, which aimed at carrying out their program at the level of the nation-state (ibid, p. 109)."

"The new social movement" represents the fourth phase but Mäkelä (ibid) finds the novelty of this category of social movements often exaggerated. He argues that these movements have existed for a long time, but are now situated in a new social matrix, where class based conflicts are not the decisive dynamic force. The new social movements are a heterogeneous category, and if divided into subcategories, would include what might be called the identity movement, where membership is based not only on structural position, but on members' understanding of who they are; this category would presumably include Gamblers Anonymous.

Habermas (1987) has also been interested in groups such as those oriented to greater equality, increased self-realization and the preservation of the environment. He sees society divided into the "systems-world" and the "life-world." The relationship between the two is somewhat like colonization, where decoupled subsystems penetrate into the life-world, just as the colonists did into a tribe. The activities of the groups mentioned above can be seen as defending the life-world against the intrusion of the system world. Heterogeneous they may be, but they have been an important part of the resistance against the colonization of the life-world (Ritzer, 2000). Castells sees the new social movements as the contemporary equivalent to Marxian class-struggle. The spread of, e.g. informational capitalism, leads to the "construction of social action and politics around primary identities, either ascribed, rooted in history and geography, or newly built in an anxious search for meaning and spirituality (Castells, 1996, p. 22)." The hope against the problems caused by informational capitalism lies not with the working class, but with a diverse set of social movements, based primarily on identity (Ritzer, 2000).

AA is in some ways an anti-consumer organization says Valverde (1998), at least it challenges the for-profit psychotherapy market. She adds that students interested in the ways in which non-professional forms of expertise have challenged the authorities of physicians and scientists, would do well to study Alcoholics Anonymous. Today there are other organizations like AIDS activists and breast cancer survivor groups, where activists try to wrest control of health problems from traditional institutions. Of all these organizations, AA is the oldest and most rooted in working-class life. It was AA that invented mutual-aid, not women's health activists; it was AA that came up with the idea that the physician's monopoly on disease could be challenged, and it probably was AA that first succeeded in turning a disease into a lifelong social identity. AA seeks only personal change among its members, but it seems safe to say that it has achieved what many identity movements aim at, that is changing society, through unconventional political means (ibid).

“The new social movements have been critical of organizations based on representative democracy and formal bureaucracy. Nevertheless, the natural history of social movements frequently moves toward increasing formal structure. And whatever their relationships to basic social cleavages, even movements oriented towards inwardly directed action have a tendency to split. The unique unity of AA, therefore, deserves special attention. AA may well be the only movement that has been able to maintain segmental structure for such a long time (Mäkelä, 1998, p. 110).”

AA is unique in having largely broken Michels' “iron law of oligarchy” states Robin Room (1993). In AA, GA, and other twelve step groups, power resides firmly at the base, in the group conscience and at face to face level. GA relies primarily on group conscience to keep functioning (Gamblers Anonymous, 2002). It may sound remarkable, given the importance of such meetings, that there are no written guidelines for group conscience meetings in AA (Horarik, 2005). Instead new members find that the guidelines are transmitted orally. AA is not interested in formulating rules of conduct, but rather in methods of behaving and ways of speaking, that are taught by example, that is, by experienced members acting as role-models. In AA one learns virtues and experiential wisdom, not the rules of good conduct. (Mäkelä et al., 1996)

3.10 Rules of discourse at twelve step meetings

In AA every group is sovereign in conducting its business of recovery. This leads to such a variety of meeting formats that it is difficult to pin down the core of the interaction order. Mäkelä (Mäkelä et al., 1996) observed AA meetings in Finland, mostly small groups, and found that there were some common rules or guidelines on how to talk and behave at the meetings. The first rule almost prohibited interrupting the person speaking and the second stipulates that one should only share about one's own experiences, and definitely not talk about other people's private affairs. When speaking at GA or AA meetings you tell self-narratives and you are supposed to be as honest as you can. It doesn't matter whether the topic is the urge to gamble, a certain step or principle, you address it through your own experiences, through your own history. This leads directly to two other rules; you should not give direct advice to other members, nor are you to present psychological or causal explanations for their behaviors. You stick to your own story and other members will decide if they can use your experiences and in what way.

Other rules aim at avoiding conflicts at the meetings. Members are not to talk about religious doctrines or give lectures on scientific theories, this might start a debate. It is prohibited to refute the twelve step program on the same grounds, and it is accepted that one should not confront or challenge what other people have said at the same meeting. How openly you may connect, in your talk, to what has previously been said differs from meeting to meeting. Agreement is more explicitly expressed than disagreement. Actually one can choose to elaborate, from one's own experience, on what has been said, or choose to talk without any reference to the previous speaker's sharing.

3.11 Structure and service work in GA in Denmark

AA is of course organized at a higher level than individual groups, but Mäkelä (1998) says that the ordinary AA member, in Finland, is not particularly interested in regional matters. The same is true for AA in Denmark; the regional coordination, and the thriving publishing business of AA, happens without destroying the bottom up structure of AA (Anonyme Alkoholikere, 2005).

In the case of Gamblers Anonymous in Denmark there is hardly any structure above the level of single groups. There is a group of less than 8 people that carries the lion's share of the work

involved in managing the groups and GA as a whole. These people meet to delegate some tasks, such as taking responsibility for a certain group for a certain period of time, or to talk through problems in the fellowship. There is a good connection between the Århus group and the groups in Copenhagen, but this is in no way formal, it's more personal and ad hoc. The same goes for contact with GA abroad; there is some contact to GA in Norway and Sweden. To sum up, there is no formal regional organizational structure in GA in Denmark, nor does Gamblers Anonymous in the Scandinavian countries seem to work formally together.

3.12 Spirituality and techniques for governing the self

Alcoholics Anonymous has generally been ignored by social science, and when interested the scientists have mostly focused on evaluating its success rate and comparing it to other available treatment modalities (Valverde and White-Mair, 1999). Other studies have used AA to illustrate general, pre-existing theories, e.g. about how personal narratives are used to build or change identity. Still other scholars, “lump self-help programmes like AA together with professional psychotherapy in a general narrative about the domination of psychology in the twentieth century (ibid, p. 393).”

In her excellent book “Diseases of the will,” Valverde puts on a different set of glasses (Valverde, 1998). She does not intend to evaluate AA's success rates, nor is she interested in large scale organizational features or the written texts of AA. Her lenses are somewhat anthropological, paying closer attention to the rich storehouse of techniques for sobriety, used by groups and individuals in AA. Her stance is highly original, despite the AA's basis of unity in alcoholism the control of alcohol is not focus of AA. “It is the soul of the member that is the main object of AA's innovative approach to ethical governance, an approach relying primarily on *self*-governance rather than on advice or exhortation (ibid, p. 120).”

According to Valverde and Kimberley-Mair (1999), “spiritual awakening” is a key feature of the twelve step programme. William James (1907) said that conventions and scientific respectability could keep people from discussing certain themes, not least those of a mystical nature. And it takes some courage to take up the subject of spirituality, a subject that would seem to place the twelve step programme inside the realms of religions or the supernatural. This is not the stuff of science, as

a funny little story told by Jonathan Diamond, a family therapist, shows: “On a personal note, one of the most spiritually affirming experiences in my professional life took place at one of Berenson’s workshops ... more than ten years ago. I can’t describe what an epiphany it was for me to see a Harvard-educated MD stand in front of a room full of educated professionals-who were expecting to grapple with issues of “wet” and “dry” phases of family interaction, “high” versus “low” bottom recovery, and the effects of problem drinking in couple treatment-and say, “Folks if you want to know what gets alcoholics better: It’s the *God stuff*.” (Diamond, 2000, p. 77).”

This may have been, at least in part, meant as a joke, but there is actually a widespread belief among both therapists and addicts that craving and addiction reflect a state of spiritual disharmony (Milkman and Sunderwirth, 1987). Abraham Twerski, a psychiatrist and a Rabbi, has coined the phrase “the spirituality deficiency syndrome,” which is a state of being many addicted people experience. He says that just as the body needs nutrients, so does the human spirit. Spiritual deficiency will show itself in discontent, not a depression, but a pervasive, non-specific feeling of lack of happiness (Twerski, 2005). Another doctor from the treatment field, Robert Lefever, seems to agree, but takes great care to explain that this need not have anything to do with religion (Lefever, 2000). The road to recovery, according to these two doctors, is the spiritual program of the twelve steps, and the key to a spiritual recovery is work and discipline. To Craig Nakken (2000), a twelfth step veteran and a family therapist, discipline, and principles, is at the heart of twelve step work. Discipline slows life down to a manageable pace. It is this very fact that makes discipline such an important concept to addicts and their families in recovery. “One day at a time,” when practiced, teaches discipline well. And if the addict is consistent in her spiritual discipline, the principles she practises become part of who she is. She becomes a person of integrity. She not only understands care, she becomes caring. Through operating in a disciplined manner she will create an “internal conscience, instead of external conscience (ibid, p. 51).”

Spiritual awakening is usually not a sudden experience or change (as was the case with Bill W). Terence Gorski, who has been an active member of AA for many years, explains spiritual awakening, using common AA language. “This spiritual awakening is a radical change within yourself and how you operate in life, based on solid principles. It’s not mumbo jumbo and it didn’t happen to you by accident or fate. It happened because you began to understand how to use the spiritual and psychological laws necessary for change. In other words, you begin using your mind

properly to seek truth. You tried to expose mistaken notions about yourself, other people, and the world and refused to follow your old and destructive patterns. As a result you changed in dramatic and fundamental ways (Gorski, 1989, p. 168-169).” Valverde and Kimberley-White (1999) argue that the twelve step programme manages to combine the extraordinary experience of spiritual awakening, or rebirth, with the tedious, non-sacred practices of self-management of everyday life.

Gamblers Anonymous is a spiritual fellowship where the members try to cultivate in themselves the highest ideals or principles; compassion, honesty, humility, service, generosity and joy (Gamblers Anonymous, 2002). But we are perhaps skating on thin ice now, because, what is spirituality? “To have the answer is to have misunderstood the question. Truth, wisdom, goodness, beauty, the fragrance of a rose, all resemble spirituality in that they are intangible, ineffable realities. We may know them, but we can never grasp them with our hand or with our words... When we attempt to “define” spirituality, we discover not its limits but our own (Kurtz and Ketcham, 2002, p. 15 – 16).”

The above citation from Kurtz and Ketcham would probably be too philosophical for most people, and Gamblers Anonymous has a reputation for putting less emphasis on spirituality, spiritual awakening and higher power than other twelve step fellowships, perhaps in an attempt to eliminate the mystification endemic to a problem gambler mindset (Ferentzy and Skinner, 2006A). Still, according to *Sharing Recovery Through Gamblers Anonymous* (Gamblers Anonymous, 2002), the recovery programme of Gamblers Anonymous is based on the belief that compulsive gamblers can be helped by a higher power, either God or the fellowship, or both (Gamblers Anonymous, 2002).

The psychologist Francis Vaughan (2002) defines spirituality as the domain of ultimate concern, which can of course be interpreted in many different ways. Spirituality she explains, can “be described in terms of ultimate belonging or connection ... Some people define spirituality in terms of relationship to God, fellow human beings or to the earth (Vaughan, 2002, p. 29).” Other definitions involve some kind of a developmental line, going from lower to higher forms of morality, consciousness and interpersonal relationships. Spirituality can also refer to peak experiences rather than stages of growth. To Pia Mellody, one more veteran from the treatment field, spirituality is probably all these things, and has more specifically to do with “the experience of being in a relationship with a power greater than self that provides acceptance, guidance, solace, serenity, grace or healing, love, and non-destructive creativity (Mellody, 2003, p. 53).” Mellody is

obviously rather religious in her definition, but it is still a definition that would ring true for many addicts in recovery.

Waters and Shafer, (2005), wrote a two part article addressing the importance of spirituality in the recovery of addicts. The article is written for professionals working with addicts, and the reader is presented with this definition of spirituality: “The term spirituality generally refers to the human longing for a sense of meaning and fulfilment through morally satisfying relationships between individuals, families, communities, cultures, and religions. Although often viewed in a religious context, spirituality is not necessarily about being religious. Spirituality is about responding to the deepest questions posed by an individual’s existence with a whole heart. Religion refers to organized structures that center around particular beliefs, behaviours, rituals, ceremonies, and traditions (ibid, p. 2).” Spirituality is one area of concern for religion, but religions have other non-spiritual objectives. Spirituality is best understood as a characteristic of individuals. It includes the individual’s religiousness, but is not necessarily defined in relation to religion.

The above definition emphasises both the relational and communal aspects of spirituality, and that spirituality is a characteristic of the individual. The first two components are recognized by both professionals and the twelve step fellowships. Gamblers Anonymous provides a constantly available safety net so that the gambler has people to turn to whenever she needs them (Dayton, 2007). Much has been written about the deteriorating effect gambling (and other addictions) has on the families of compulsive gamblers and how the gambler and the family can move on towards a better life (Larsson, 2007, Berlmán and Siegel, 1998). Steps eight and nine are really about restoring relationships.

Waters and Shafer (2005) say that spirituality is best understood at individual level. Mäkelä, et al. (1996) studied AA in eight different societies. They point out an important feature of AA; members usually enter the fellowship as individuals, cut off from their social matrix. “A person’s social position affects the linkages that may lead him or her to AA. The newcomer’s social background, at least initially, determines which groups feel attractive. The crucial thing, however, is that a person does not bring his or her social position to the AA meeting (ibid, p. 53).” The member enters the fellowship as an individual and individuation is perhaps the particular aspect of modernity that is a prerequisite of GA. Individuation, here, refers to the process by which individual persons become

the basic units of social action (Turner, 1986). “The individual takes precedence over “the family, the kinship group, the work team, and the village community (Mäkelä et al, 1996, p. 53).” Upon entering the twelve step fellowship everybody is equal and even when it comes to gambling, drinking or disease, comparing is not welcome (Kurt and Ketcham, 2002). As they say in GA; “Either you are pregnant or not,” and if you think you have a gambling problem you are welcome.

4. Findings

4.1 Description of a Gamblers Anonymous meeting in Copenhagen

It is important to remember what has been said earlier, that every GA group is actually free to decide on the format of the meeting, what is to be read and how the tables are arranged. *Sharing Recovery Through Gamblers Anonymous* (1984) mentions the tradition to read from the *Combo Book* at the meetings and some other common procedures. But there is no detailed description of how a GA meeting should be conducted. This is the same with AA. The “Big Book” of AA (Alcoholics Anonymous, 1976) outlines a personal recovery program but it offers no detailed guidance on how to behave at meetings. All of this is communicated either by example at the meetings, or orally before and after the meetings. This is related to the fact that AA does not formulate rules of conduct, but rather methods of behaving and ways of speaking. The format of the meeting, what is to be talked about, or how it is to be said is decided by the group. This separates AA from the fraternal organizations of the late nineteenth century, including the temperance societies, which built their meetings around elaborate rituals set forth in printed handbooks (Mäkelä, et al., 1996).

Pia chairs the most recent GA group in Copenhagen, and she is also new as a chairperson. But she’s been to a whole lot of AA and GA meetings, so she knows most of the usual procedures, and she has got some guidance from the member who started up the group. Her description is in many ways interesting, not least because she wants to introduce some new things into GA, things she has learnt in AA.

Pia: “Well, I’ve only chaired the meeting two times, but, I start by reading the ”Welcome,” and then another member reads “What we’re here for,” after that I declare the meeting open, and if there is a new member present, we talk about that.

M: Do the new members get the chance to present themselves?

Pia: Yes

M: Do you start with a name-call?

Pi: Yes, and how many days without gambling

M: And then you open the meeting – do you start from the left or the right or...?

Pia: It's totally free.

Pia: At the end I read some things aloud [some of the Unity Steps], then the "Promises" [actually AA material] are read and then it's the Serenity Prayer.

M: But you say it's a kind of a ritual the members do not believe in?

Pia: It feels like that, yes, it's just something you do out of habit, that's how it feels to me and this is one of the reasons I said yes [to become a chairperson], to see if I could change things a bit, I would like to have more of the spirit of AA, so to speak."

M: What precisely is it in AA you want to...?

Pia: I would like to see more hope, the belief that it can be done, I've talked about this in the two meetings I've chaired, then there is this girl I've been to follow-up [in treatment] with, who also participates in GA, and she's said yes to start talking about the good things, her more positive experiences. This is what we're trying to do...but I can't change this in a day or two, what I'm trying to do is to put more focus on the bright side, instead of how badly I'm doing."

The format of the Tuesday group meeting seems the same as that of the Friday group I frequented a couple of years ago, and the Wednesday group at the Hotellet (former Hellerup group) is probably the blueprint for the younger groups. But it isn't the format itself that Pia is critical of, it's the

attitudes of the gamblers and what people talk about that she has problems with. She wants a warmer tone and more spirituality in GA, the same theme that surfaced in interviews of GA members in North America a few years ago (Ferentzy et al., 2006).

Palle seems to agree with Pia when he says that GA meetings are in need of:

”... more spirituality, and not, kind of, not just to use the group as a therapy group, but as a forum where you share about getting better, like, to share about hope, strength and experience, for the newcomers who are in need of help – but not that people who’ve been there for years and, to tell it as it is, simply talk rubbish...”

Palle has worked the steps in AA (even if probably not an alcoholic), and he wants the AA spirit and the twelve step programme to be more prominent in GA talk, at least, says he, there should be at least one group in GA that is run along those lines. The freedom granted every group means that there is a lot of cultural and even local variation in what is seen as the belief system of AA. There are extremely fundamentalist and authoritarian variants, but one can also find quite loose, open, and liberal groups. (Mäkelä et al., 1996). Palle’s homegroup in AA operates in a highly structured fashion; every member should preferably have a sponsor and work the steps. Both the Big Book and the twelve steps are held in high regard and members are supposed to talk about the program at the meetings. The meetings in AA that Pia wants to emulate are different in that they are smaller and not as authoritarian.

Not everyone is as concerned about the way GA meetings are conducted as Pia and Palle; Irene can easily live with people talking about almost everything.

“My experience is that people talk about their everyday concerns, those who have children and wives talk about their families, if they’ve gambled they talk about that. I have shared a great deal about my creativity and the books I’m reading ... Sometimes I talk about my childhood... sometimes it happens precisely because you go to GA meeting, you suddenly become conscious of something you’ve forgotten and it’s like you have to deal with it immediately ... maybe that’s why you feel better afterwards because you’ve gotten it out of your body.”

Irene is an elderly lady and there have been many rough spots in her life. She's been married to a couple of alcoholics, suffered violence and abuse, and painful personal losses. At times she has drunk too much and later she found relief in gambling on machines, at first in bars and taverns, later in the gambling saloons that started appearing in Copenhagen in the nineties. Irene has always seen herself as an artist. She wasn't allowed to pursue her ambition, either through ignorance or because her mother couldn't afford to help her study drawing and painting. As a grown woman Irene has attended courses and classes, and she has painted pictures and made sculptures. Her gambling has sabotaged her efforts, when gambling she usually gambles away every cent; there is no money to buy colours and other materials necessary for her hobby. Gambling makes it hard for her to concentrate, she worries constantly about money, debt and how she will survive one more month without any money. The GA meetings help her refrain from gambling, but while sitting at the tables she occasionally remembers things she had almost forgotten, like the abuse she suffered as a child. And she remembers how it felt.

4.2 Group conscience

The decision that Pia should take over the Tuesday church group meeting was made (or at least confirmed) by a conscience group, held after the usual GA meeting. In most cases group conscience meetings are run in the spirit of the first guideline of the Unity Program, "Our common welfare should come first; personal recovery depends upon group unity" and the second that states, "Our leaders are but trusted servants; they do not govern" (Gamblers Anonymous, 2002, p. 87). The leaders in GA are not elected to command, demand, or to change anything, but simply to serve and express the opinions determined by the group through a conscious consideration of opinions expressed by all members of that group. This same emphasis on consensus can be seen in AA and most other twelve step groups.

Denzin (1987) tells a wonderful story of how group conscience works, that is worth citing at length:

"The setting is as follows. A member with two years sobriety from a western city has assumed the chairmanship of one of the oldest A.A. meetings in the community. This meeting has a core of

members with the longest sobriety in the community (average of 14 years). The chair makes the following motion:

I would like to have a group conscience on changing this meeting into two groups on Wednesday. We're too big for one group. I would like to also move that we not read from the *24 hour a Day book* because that's not AA. I also propose that we just read "How It Works" and no the traditions. Do I have a second?

A silence of five minutes followed in which no member (25 present) spoke. Then an old-timer of 16 years spoke:

I helped start this meeting. As long as I come here I want everything read. That's part of how I got and how I stay sober. I vote no.

A second old-timer spoke:

I'm with B, but I've only been here five years. But I Ohio we read everything. I don't think we should change. I like tradition.

A third old-timer spoke:

I'm with G. I vote no. We can sit here all night and have a group conscience. But I came here to have a meeting and stay sober. Let's have a meeting [field conversation, as reported, December 27, 1982].

A group conscience was taken and no one seconded the Chair's motion. His motion failed for lack of second. The meeting was held (Denzin, 1987, p. 105-106)."

In this rather long example, group conscience was at work. It worked through the silence of the group and through the talk of the three old-timers. The twelve step movement is based on sharing experiences and older member have often (more or less) successfully tackled difficulties younger members are struggling with. Understandably, seniority is highly valued in personal matters, but the old-timers also exert considerable influence in matters regarding the structure and functioning of the movement. The influence of the old-timers, however, does not necessarily depend on their formal position in the organization, and all attempts at establishing formal hierarchies in AA, are met with fierce opposition states Mäkelä (1998). "Infrequently invoked in an explicit fashion, the group conscience reveals how the group is simultaneously greater than its members, while being only what its members give to it (Denzin, 1987, p. 107)."

In Gamblers Anonymous in Denmark a number of conscience meetings have been held. Usually a conscience group or meeting is called for and held after the “normal” meeting has been closed. Often the conscience meeting only takes five to ten minutes, the task being to find someone to make coffee, or somebody to open the doors for the next few meetings. In May of 2008, a few oldtimers met to discuss the situation in GA in Copenhagen. The attendance at the Copenhagen meetings was declining rapidly and it was difficult to get people to do service work. But this conscience meeting held in the Wednesday group at the Hotellet was held to discuss the future of other groups. More precisely they wanted to close down another group, the Tuesday church group. The leader of the Tuesday group, who did not attend the Wednesday meeting, refused to discuss the proposition, making the claim that every group is independent in its affairs. And a conscience group held in the Tuesday group came to the conclusion that they wanted to carry on. Nothing further happened and no group was closed at that time (personal communication with GA members). This story documents that there are some initiatives, on a small scale, to try to organize Gamblers Anonymous on a higher level than the single group stage. The group of people that met in May has met before to organize the fellowship, and talk things through, these people also have close contact with the groups in Århus.

4.3 Service work in GA

One of the biggest problems in GA in Denmark is lack of interest among members in doing “service work.” It might be a problem not only restricted to GA in Denmark as Bill Lee (2005) talks about the same problems in GA in California. This researcher does not know how widespread this problem is in GA groups around the world, but from my first contact with GA I have heard complaints about this lack of interest in service work. Anton has been around in GA for some years:

“To me it seems..., that in GA people just talk without listening, and nobody wants to do anything. They seem to think, I come to GA and the others will take care of everything. When I started a meeting in February, 2005, I experienced the same thing that the people in the Hellerup group talked about...These two people were the first I got to know in GA and for them it was extremely difficult to get people to take any responsibility for the group. The NA group in Holbæk, was relatively new when I used that group, but they had full control over everything.”

From 2001-2006, two people were mostly responsible for keeping GA alive in Denmark. By the time they stopped attending GA meetings regularly (they use other twelve step groups instead) they were worn out and disillusioned; most of the gamblers who came to GA didn't want to take on any responsibility in the usual chores of the service work. That many of the old timers in GA leave for greener pasture in other twelve step fellowships, creates problems for those who chose to stay. But they are also met by certain understanding by Margrethe:

“...because I can feel that some of the members that have been there for many years, seem to think it is OK to use other [groups], and they want to somewhat withdraw from service work, but when they do they almost disappear, but maybe they need to recover, I don't know.”

Those GA members who have complained about this attitude of the gamblers, seem to seek the explanation in some unique characteristics of the compulsive gambler, that not only separates them from “ordinary” people, but also from the average member of other twelve step groups. Margrethe had this to say:

“...I think that we, compulsive gamblers are really awful at being responsible, we are awfully unstructured and bad at keeping appointments...we are terribly lazy and we really want the things served on a silver platter and we want others to do things for us...which means that most of the duties are carried out by relatively few people.”

Margrethe and other informants will elaborate on this theme later in this chapter, attempting to explain this lack of interest in service work in GA.

But even if the old timers in GA feel that the members of Gamblers Anonymous are more irresponsible and less interested in service work, due to some combination of personal characteristics and the nature of gambling, than member of NA or AA, the truth is that other fellowships have to deal with the same problems. Not only GA in Los Angeles has problems in recruiting members to do service work, AA in Marin County in California is met with similar problems. The regular service commitments that support the groups, setting up chairs, secretary,

treasurer, literature person, coffee maker, are not popular in some of Marin County. “Old-timers are especially vocal about this: What upsets me so...they’ll ask for somebody to clean up that day, and not a hand goes up.... Secretary, coffee maker, clean-up: these are six months commitments, but I say “make it three months instead,” or even play it day by day. We had to, at the Monday Mill Valley meeting at noon, nobody will help. Yet, they’re willing to come in and eat the food! (Dana, sober 27½ years) (Kaskutas, 1998, p. 37).”

Some of the old timers in Marin County believe that this lack of interest in AA service work has to do with treatment: “Particularly now, with so many people coming out of programs, and having spent a lot of money in these programs, it’s very difficult to impress upon them the importance of commitment in AA (Martin, sober 29 years) (ibid, p. 37).” It’s impossible to say if this explanation holds true for GA in Denmark. Many of the gamblers entering Gamblers Anonymous in Denmark have been through treatment, either for their gambling problems or chemical dependency, in some instances both. But very rarely have they paid for the treatment. AA in Denmark seems to have a positive relationship with treatment, the exponential growth in the number of AA groups, starting in the middle of the eighties, is the result of what has become known in Denmark as Minnesota treatment. In 1985, when Minnesota treatment was gaining foothold in Denmark, there were 18 registered AA groups in Denmark; in 1989 there were 87 and three years later they were 150 (Anonyme Alkoholikere, 2005).

This doesn’t say anything about the willingness of the new members to do service work, but AA in Denmark isn’t complaining, at least not as much as GA. Furthermore, AA does not complain that treatment is disturbing the workings of AA, they seem rather glad that some new members have learnt about AA in treatment, as the following episode demonstrates. The setting is an AA group in Ryegade, Friday night in 1987: “There were usually five to seven participants in this group. This night there were 15 – 20 new participants, all recently discharged from Vesterborg treatment centre on Lolland. The group’s motto was to take good care of newcomers, and talk to every one of them. It was a great relief to hear, where the newcomers came from, they had all learnt in treatment what AA was about (Anonyme Alkoholikere, 2005, p. 50).”

4.4 The way I came to Gamblers Anonymous

Most of the people that were interviewed came to Gamblers Anonymous through treatment, and all those who participated in the recorded interviews have been through treatment in at least one of the four official treatment centres in Denmark, two of them have received treatment at three treatment centres. But both the men I interviewed came into contact with GA and Minnesota treatment through women who were involved in AA. These women pointed out the similarities between alcoholism and compulsive gambling and recommended trying the twelve step program.

Palle: "... I think, it's about three or four years ago; I actually came into contact [with GA] through AA. I met an AA member, very briefly, who saw that we had much in common...she was an alcoholic, dry, that is a sober alcoholic. She took me to an AA meeting in Ryesgade, and they got me into contact with someone in Hellerup, that's how I came into contact with GA."

Anton has a similar story to share, he was in a relationship with a woman that attended AA and Al-anon meetings, and she helped him into treatment. Although their relationship did not survive his gambling, he finished his treatment and started using GA. This is not as easy as it seems, and not only because Anton lived a long way from Copenhagen. Some resist going to meetings because they can't afford the train-ticket or other practical reasons. Others are afraid of the meetings or can't see the point in involving total strangers in their problems. For Pia it was quite difficult to enter GA.

"I came to Gamblers Anonymous through my treatment, I was to go to GA meetings they said, but no, no way I was going to GA...all that American bullshit, what use was that to me? That is, I had decided that GA was not a possibility for me! But I had, it was on the 4th of May ... really it wasn't all that hard economically [the consequences of gambling], but psychologically it was extremely tough, and when I came home and was writing my diary, I made the decision, now I will ruin myself, it's all over now, I can't take it any more. As usual I had to go to the bank and get some money, and then I simply walked in the opposite direction and actually went to my first GA meeting, in Valdemarsgade, that was my first meeting in Gamblers Anonymous."

It has already been said that most newcomers in GA enter the fellowship through treatment and it is often required in treatment that they attend weekly meetings in GA. This has led some to think that GA is reliant upon the treatment providers, if it is to function properly. In some AA groups this is a hotly debated topic, some see treatment as interfering with AA work, and forced membership is at least partly at odds with the traditions and the Unity steps. Both views were represented in the interviews with the GA members, but in general those I interviewed were positive when discussing treatment and at least one openly stated that Gamblers Anonymous can't do it alone, but then neither can treatment. In the following sections one can see short examples of the tension, between the twelve step fellowships and treatment, between the grassroots and the experts, between the patient and the doctor. Gamblers Anonymous is both reliant on and wary of working with treatment centres and professionals.

Anton: "... I don't think that GA can stand alone, and treatment plus follow up can't stand alone, but together they are very strong indeed..."

Margrethe is also of the opinion that GA relies heavily on the treatment provider's help, more so than AA which puts its faith more in its own programme. And one can feel that she is not altogether pleased with the situation.

"... in AA, the way I understand it, it is a doing programme, and you are guaranteed 100%, that if you work the steps and get a sponsor, you will get better. And that... that is not the way we see the programme in GA. It's more like, it's a good thing if you are in treatment, and if you're not in treatment, then we can help you get into treatment. In AA it's, we can help you find a sponsor, but in GA ... there really isn't anyone that can be a sponsor, so what we have, is that we can help you find a treatment centre, we have good counsellors, we can give you a telephone number ..."

4.5 A feeling of relief

Two of the women interviewed wanted to talk about what it felt like to go to their first meeting in Gamblers Anonymous; they wanted to talk about their feelings of relief, the very same feelings expressed by alcoholic women upon entering AA (McConville, 1995). The men did not talk about

this, at least not in the same way, this may be because they had a longer history in GA, and therefore were farther away from their first meeting. But maybe the interview with the men simply took other turns that led to different places. There is nothing that indicates that they didn't experience the same relief upon entering GA, either when coming for the first time, or later on. The women gave a very vivid description of their first GA meeting.

Margrethe: "... [it was] a Wednesday meeting, yes, and in a small room, and I was nervous, there were six people, of all ages ... and they looked quite normal [laughs] and I felt welcome. I was surprised at how they started the meeting, and presented themselves, because it was so structured, and then... Because I was there for the first time, they, they told bits and pieces of their own history [with gambling], which made me feel secure, and at this first GA meeting I got to know, what my situation was like. But it was a good experience and I felt, at the end of the meeting, that this would not be my last GA meeting!"

Margrethe's first GA meeting did something good for her, and she was determined to come again. Pia's first meeting in Gamblers Anonymous was more cathartic, a very strong experience. In an earlier section, Pia described how she happened to turn left where she usually turned right, walking away from the automatic teller machine and ending up at a GA meeting, feeling desperately low...

"I just managed to present myself [say her name at the beginning of the meeting], and then I cried for an hour, afterwards I walked home [laughs]. You know, this was my first meeting in Gamblers Anonymous and while walking home, I can't explain it, but I felt an enormous relief, I felt serene, I discovered it was summer, I discovered it was spring, things like that, it was such a fantastic feeling walking home after that GA meeting, even if I hadn't said a word, not done anything, I had just sat there and cried."

Pia may not have said nor done much at this meeting, nor may she have heard much of what was being said. But she felt accepted, she felt that those present at the tables understood what she was going through and, most importantly, they didn't judge her. If Pia didn't identify with those present at the meeting, they probably did identify with her; identification is an important issue in all the

twelve step fellowships. Margarethe was told, at her first meeting, the older members' histories. They were trying to help her identify with them, or parts of their histories more precisely.

“... yes because it gave me this identification, I could identify with their histories, and it also gave this feeling when I left the meeting, how good it is to find that there are people like me, because I really had missed that ...”

Irene mentions these same things, when she was discussing the size of the GA meetings:

“It's nice when there are many people, it's also good when it is more intimate, but it's great when there are really many, you hear what the others are sharing, and you can use it later, you also find out that you are not alone in this, there are a lot of people that have the same, the same feelings ...”

Norman K. Denzin, working in the borderland between sociology and anthropology has met the same experiences when studying alcoholics involved in Alcoholics Anonymous. He calls this experience alcoholic understanding (Denzin, 1987). Denzin believes that this emotional understanding, based on the lived experiences of the alcoholics, is one of the keys to understanding how AA works. Horarik (2005, p. 96) has summarized what Denzin (1987) has to say about the process of alcoholic understanding as it works out in AA. The following is based on Horarik, but adapted to the discussion on Gamblers Anonymous.

Emotional understanding between gamblers involves:

- Authentic deep understanding that emerges when selves are joined in a common field of experience which, in turn, is produced when past set of experiences is shared
- In the process, the gamblers appropriate the other's perspective and apply it to their own situation. This results in a merger of shared emotional feelings
- The selves of the people involved become lodged in the shared emotional field
- A merger of biographies, of common pasts and a discourse in a common language that draws upon that shared past, emerges
- A sense of fellow-feeling occurs as each gambler identifies with the feelings and the past experiences of the other

- A reciprocal sense of emotional infection and emotional contagion appears
- The heightened emotionality of each individual passes over to the other. Each, in a sense becomes emotional because the other is emotional. Out of this process emerges a sense of emotional identification. Each individual identifies with and through the emotional feelings of the other
- The individuals are drawn together into an emotional situation where relational bonding occurs
- There is a merger of the two selves in the emotional situation they have produced together

Irene went to her first meeting after a long and painful relapse, in a newly formed group:

“It was actually nice being just the two of us because I needed to talk to somebody about ... the sorrow I felt after starting to gamble again, we touched upon all kinds of issues, among other things I told XX how much I missed my creativity, and I told her how creative I had been after being in GA for awhile.”

The remarkable thing is that this understanding between addicted persons (alcoholic understanding seems an inappropriate term) can happen even across fellowships. Willingness and an open mind are of course required. This can be seen in the fact that an action gambler (e.g. poker) often has great difficulties in understanding someone who is addicted to VLT's, even if both are compulsive gamblers. The interesting fact is that some alcoholics are able to say, one addiction is the same as the other, and some gamblers can identify just as well with alcoholics as with gamblers, even if they remain in the dark as to what the alcoholic believes he can win by drinking. Pia is one of those gamblers who have benefited from AA meetings:

“... it made me very happy, I felt a kind of serenity when I was there, and I felt relief just sitting there and listening to the others, even if they were alcoholics they told my story, and it was there that I came to see that maybe I wasn't as abnormal as I had thought until then ...”

And later on she tells that she didn't have the same experiences at the Gamblers Anonymous meetings. In GA, she said:

“... what I noticed mostly, it was again this comparing [she had talked about comparing oneself out of GA before the interview took place], the girls in GA, in one way or another, you know their histories are so hardcore and so fantastic, and I felt sort of like the little girl who had done something a little bit wrong, but not much, you know, I sort of felt like my story, even if there were resemblances, just didn’t cut it, but when I came to AA, I noticed that there are a lot of people with stories similar to mine. It was a relief really, it was a relief to meet people who didn’t remember all that had happened ... it was drinking in their case but it was a relief to find others who couldn’t remember. “

Anton had more to say about the gamblers need to compare themselves to each other:

“Yes, it is my experience that you can’t allow yourself, as a drug addict in Narcotics Anonymous to say, I have never broken the law, at least I haven’t heard it yet, but I have run into many compulsive gamblers who have that attitude, while others talk about the horrible things they’ve done, been to prison, beaten up people and whatever, I often meet the gamblers who think, that’s fine, I never was that bad. I’ve never taken anything that wasn’t mine! ... even if the gamblers attend meetings, they are still comparing themselves to others, when I think back to the time when I stood in the gambling hall, you see, I could always find somebody who was more sick in his head than I was, and as I understand it ... you know, I have never met an NA member who says he is twice as much an addict as I am. But talking about gamblers, it’s like, if I haven’t been to prison, if I haven’t done this or I haven’t done that ... “

4.6 The steps as the road to recovery

“After starting in AA I’ve realized that the steps and slogans are hardly used in GA. Some things are read aloud without any conviction – as if one doesn’t believe in them.”

Pia

The program recommended by Alcoholics Anonymous is not just a set of beliefs, it is also a set of behavioural tools. AA’s basic texts present a program for action (Mäkelä et al., 1996). The Twelve steps are a description of the road taken (in retrospect) by the first 100 members of AA and any new

member is advised to try some or all of the steps, and see where that brings her (Alcoholics Anonymous, 1976). But one has to be ready to believe, to a certain point, or be desperate enough, to be able to act. A football player involved in a penalty shootout is definitely at a disadvantage if he doesn't believe that he can score, negative thinking or hopelessness can almost paralyze him.

But even if one is willing to try and willing to believe, it is difficult to work the program alone. For the program to work you need people willing to help you and support you, at least in the beginning. Palle is convinced that he could have gotten the help he needed to work the steps when he joined GA for the first time in 2004.

“...the first time [his first period in GA] I joined the Hellerup group it was actually possible to work the steps, I got some papers on the steps from a woman...but I don't know why I didn't start, maybe I simply wasn't ready, but the possibility was there, this woman had worked the program in another fellowship, so the chance to work the steps was there...” Palle

By the time Pia came to her first Gamblers Anonymous meeting, there was no one available who could help her start working the steps. The couple who had kept Gamblers Anonymous alive in Denmark had mostly retired from GA, and the members who welcomed Pia didn't offer any assistance in working the steps. One explanation might be the fact that it is recommended that women help women, and there probably weren't any women capable of sponsoring her. The fellowships are wary of men helping (sponsoring) women, this may lead to step thirteen, that is a sexual or a romantic relationship. Whatever the reason Margrethe didn't get the inspiration to work the steps in GA:

“No there was no [stepwork being done], and there was nobody who told about ... there wasn't actually ... it wasn't there that I found the willingness and the inspiration [to work the steps], not at all...”

Margrethe found both the inspiration to work the program and a sponsor in AA. This was relatively easy as she is actually an alcoholic and has used drugs, she feels at home in AA. It was a female therapist working with her that teamed her up with an experienced sponsor in AA. It seems that the

huge experience and the practical knowledge accumulated in AA, is part of the attraction of Alcoholics Anonymous for the compulsive gambler. GA in Denmark is much smaller and poorer in experience and traditions.

“AA has so much experience, and GA’s recommended program of recovery, the steps, originally comes from AA, AA has that enormous experience, AA has people and reading material ...” Palle.

Alcoholics Anonymous has the people, the books, and a lot of meetings; it also looks like the alcoholics are more willing to work the programme, maybe because there are more role models in AA.

“Even in AA groups that resemble the Wednesday GA group, there are always more members in AA who work the steps and have a sponsor, work the programme and read the Big Book; I don’t see that in GA yet.” Palle

4.7 Sponsorship

In addition to the activities centred on participating in AA meetings, there is another set of traditions having to do with specific interpersonal activities in the twelve step fellowships. A crucially important part of AA is the sponsor-sponsee relationship. A sponsor is a person who advises another member in how to work the AA program, the way these relationships are conducted relies more on oral traditions than on written instructions in the official AA literature (Mäkelä et al., 1996)

Not everybody in GA likes the idea of a sponsor supervising or leading another member through the steps, using one or another questionnaire, or a certain formula to achieve certain results. In effect Anton opposes those who think that there is only one way of stopping gambling and entering recovery. Mostly he opposes those radical groups inside AA (and GA) that believe that there is but one road, through working the twelve steps and developing a conscious contact with some God. Anything less than working this formula will certainly lead to misery and perhaps relapse. It is this rigidity that Anton opposes in the following section:

“Sometimes I can, sometimes I think that ... there are those who think they have found the Philosopher’s stone, and according to then the only road to recovery is to go to meetings every single day and work the steps in a certain way. Or get yourself a sponsor, I don’t think that the first thing you should say to a new member is, “Get yourself a sponsor,” but there are those that think so.”

Palle has been a member of an AA group that might humorously be said to be of the German variety (in Denmark they talk about “den Tyske metode” when describing a strict and a rigid way of working the steps, in Iceland it is customary to talk about “the Talibans” when referring to such groups). In this group newcomers are helped to find a sponsor as soon as possible, and the sponsor will then help you work the steps and tackle your problems with sobriety and life in general (Taliban or not, this way of operating can be very helpful for many addicts, but it is certainly not everybody’s cup of tea). Palle is one of those who have benefited from this group, he thinks he has been helped by the group, and this writer certainly agrees, having known him for a few years. Palle is not only grateful for his group he feels that he has learned a lot from his sponsor. And he wants to share what he has learnt, which is also in accordance with the twelve step programme:

“... I also make myself available to help others work the steps, but I haven’t been fortunate enough to attract anybody who wants to yet, well maybe the chance has been there but I just didn’t make it sort of. There were at one time two guys who wanted to work the program, and I could have done more, but I believed that I should wait until they asked directly, can you help me with this, that is, I didn’t want to offer it to them, and that may have been a mistake, they went to XX instead, but they’ve begun [working the steps] and that’s all that matters.”

Palle is not altogether pleased with himself, not having sponsored anyone yet, and one can hear that he doesn’t feel altogether ready for the role, that maybe he should work a little more on himself before he becomes a sponsor himself. But even if he has not sponsored anyone directly, he has still managed to carry the message.

[I have not been a sponsor myself] "... but I've been fortunate enough to be able to help people who were members of groups [in GA], where all the sharing was about misery, and I've taken these people to my homegroup in AA, where they recommend that you to get a sponsor, and work the program..."

Of course, not all of the people he has invited to his homegroup have taken to the group, some love it though, but all have been introduced to another way of doing twelve step therapy. They are introduced to a lineage of an oral tradition that may go a long way back, starting with some charismatic and enthusiastic sponsor, many sponsees ago (Mäkelä et al., 1996). An important part of this oral tradition are the slogans, their apparent simplicity belies their importance in the twelve step program.

4.8 Slogans

Valverde and White-Mair (1999) say that AA has developed an oral tradition for teaching people to alter their relation to their own desires and their own freedom in a fundamental way. They say that the slogans are "both techniques for building mutual-help, bottom up networks and inherently ethical practices (p. 407)." The slogans are an important part of what Valverde (1998) calls the hybrid technology of AA; they may have little semantic content, but as crystallizations of AA's homespun collective wisdom they are full of practical meaning and power.

"But there were people there, who hadn't gambled for four years, who also knew AA, yes, and ... they had something I really wanted. And they had this language, and some slogans... those that were most important for me in GA... were, one day at a time, stay clean of gambling 24 hours at a time, and stick to the winners. There were people who hadn't gambled for a long time, and I just wanted to feel as good as they did. I could see that they felt good, I could hear it in their stories ... and see it in their eyes, that they were happy." Margrethe.

Margrethe, like many newcomers, notices a special language among the members of the GA group. Mäkelä et al. (1996), say that the slogans provide a framework of shared understanding among members of social movements and that they serve as boundary markers on membership in a

subculture. The slogans used in conversations or as bumper stickers, can identify one as a member of the twelve step movement.

The things that the most common slogans address, are the 24 hour circle mentioned by Margaethe, surrender to a higher power, humility, tolerance and self-control in general. The most prominent one, “One day at a time,” is mentioned specially on page 17 in the Combo book. This slogan has many different functions, e.g. it serves to combat the tendency of the oldtimers to feel better than the newer members; it tends to equalize everyone; “the one who woke up earliest today has the longest sobriety,” is often heard at twelve step meetings (Valverde, 1998). The most common usage of the 24 hour circle is probably to deal with fear and cravings and the dreadful feeling that life without gambling or alcohol will be boring as hell. On page 17 of the Combo book the stress is immediately placed on patience (which is a common interpretation of this slogan) (Ferentzy et al, 2006). And for Anton the slogans are more important than the steps. In the following section he talks about the 24 hour circle, and adheres to the advice of another well known slogan, “keep it simple:”

“I use slogans quite a lot. I like it when you can with just a few words convey complicated ideas. I try to bring this on to the new member. Slogans mean more to me than the steps, there probably isn’t anything wrong with the steps and those who work them... I haven’t worked the steps and I’ve not gambled for almost three years, but if I remember to take the first step each day...”

Most of the slogans used in GA originally stem from AA. There are of course some newer sayings like, “GA is the world’s most expensive club,” and at least one slogan needs to be explained when used in GA, the recommendation to “stick to the winners.”

Gamblers Anonymous, it has been said earlier, is known to be less twelve step oriented than AA, it is difficult to tell if this also applies to the slogans. Palle had this to say when asked how prominent a place the slogans have in the talk at the tables in GA.

“[Slogans]... in Gamblers Anonymous? It’s relative of course, I have to relate it to something to be able to answer that, somewhat less than in Alcoholics Anonymous, but,

you know, the most simple slogans used in AA are also used in GA, that is, “one day at a time” and “meetings make it,” the Serenity prayer, it’s of course not a slogan, but, it’s the same things but much less than what you hear at some AA meetings.”

All three of them, Anton, Palle and Margrethe agree that when they entered GA, the slogans were used by the oldtimers. For all of them the slogans are an important part of the program, but there is a consensus that in general the steps are less used in GA than in AA (Palle and Margrethe) or NA (Anton).

4.9 Spirituality, hope, and a higher power

Gamblers Anonymous is by its own definition a spiritual fellowship, where the members try to cultivate in themselves, compassion, honesty, humility, service, generosity and joy (Gamblers Anonymous, 2002). All the interviewees were interested in talking about spirituality and higher power in general and in relation to the meetings they attend in GA. Pia wanted more spirituality in GA. The stress on spirituality is one of the things that separate the twelve step meetings (mutual aid groups) from professionally run “self-help” groups.

“Get more spirituality, and not, like, not just use the group as at therapy group, but as a forum where you share about getting better, like, to share about hope, strength and experience, to the newcomers who are in need of help – but not that people who’ve been there for years and, to tell it as it is, simply talk rubbish... “ Pia.

We didn’t go into details of the content of this rubbish that Pia listened to at the GA meetings, but one can assume that some hope and joy were missing, and that the talk wasn’t likely to give newer members the strength or stamina to stop gambling, or a valid reason to come again to the GA meeting. Pia is not only comparing GA to some therapy groups she has participated in, she is also comparing GA to AA. Even if she isn’t an alcoholic she feels welcome and somehow the AA group she frequents is better suited to build up her self-esteem than the GA groups.

“Well, actually I have only been there since the end of November, what I have experienced is that I trust the people at the meetings, you know, what I felt when I came

there was a peace of mind, I felt welcome and they accepted me as I was, with all my shortcomings. I have been, and still am, extremely fearful of reading aloud, of having to talk, if I'm in a group of more than four people, I can hardly open my mouth, and it [the AA group] has helped me overcome this, overcome this barrier, you know, I am a chairperson today, I sit there and read aloud every Tuesday evening, suddenly I am able to do some things. I've received incredible support from them, they've patted me on the shoulder ... I feel I've really been helped in Alcoholics Anonymous, the kind of help I haven't been able to, I haven't been able to find in GA. I was helped to start believing in myself."

If Pia seems to suggest that GA is less spiritual than AA, Anton says directly that NA meetings, as far as he knows, are more spiritual than GA, as spirituality is defined in GA.

"Yes, yes, I don't know, I could imagine when I think about the NA meeting, they seemed more spiritual, more grateful from the start, even those people who were relatively new and didn't have all that long cleantime, it seemed as after two, three or four days they were humble and grateful. As I see it, if you're a compulsive gambler, you have to have a certain cleantime before you start contemplating gratitude, in the beginning you often meet the attitude, it [the program] is a necessary evil, because I'm forced to something."

Pia, once more, doubts the sincerity of what she hears at the GA meetings, people often say the right things, but neither they themselves, nor the others present, believe in what is being said:

"...there are many who say that they have found peace and serenity, that they have it all, but at the same time they talk about how rotten they feel, and that they, of course you can feel bad even if you know serenity, that is not what I mean, but there are so many contradictions, you know, you know the words, you know what to say, and people say it, but mostly it's "fake it till you make it", that's what's happening in GA, at least that is how I see it."

Perhaps Pia is too harsh on her fellow sufferers in Gamblers Anonymous, maybe they are more sincere than she thinks, and she will also meet the same contradictions in AA and NA if she listens carefully, the very same “fake it till you make it,” the same willingness to move closer to a new ideal, but the thoughts and words having difficulty catching up, perhaps still being less than fluent in the language of the twelve step movement. Ingrid feels better after joining GA, and she talks about serenity as one of the rewards of the program.

“... after I started in Gamblers Anonymous, ever since I began my treatment, I do not feel as depressed as I used to do ... it’s as if there is a blanket wrapped around me ... it’s a kind of serenity, I have to admit I really feel much more at ease.”

Later in the interview it became clear that this blanket Ingrid talks about, this defensive shield, has a religious flavour to it, it has to do with a personal deity that protects her and gives her strength. Ingrid is not especially interested in Christianity or the Danish peoples church and religion does not fill much in her life. But she is interested in spirituality, mostly Buddhism, treatment and GA have made her more interested in spiritual matters, the twelve step fellowships have always stressed the need for being open-minded in spiritual matters. And like the following quotations shows, members are to reflect on the subject of God. “It is especially required of the atheist and agnostic that he become open-minded on the subject of God. This seems to require a considerable exertion indeed. If we then suggest that he address himself to whatever God there may be, in meditation and prayer, he usually finds this takes a lot of discipline to do, even as an experiment (Bill W, 1988, p. 273).”

This “God thing” is a difficult barrier for both gamblers and alcoholics entering the fellowships. This writer has on numerous occasions heard arguments that essentially convey that believing in and talking about God is extremely “un-Danish” and what’s more, it is believed to be very American, which is bad. The same writer can also testify, after attending more than 200 AA meetings in Denmark that Danish alcoholics quickly adapt to these concepts and talk freely about God and their higher power. But is it any different in GA in Copenhagen?

Margrethe: “Yes ... to give an idea, I think that 20% of those GA members I know, or who come to GA, 20% believes in a higher power, which means that there are those 80% who sit there thinking, now they’re rambling about this god-bullshit, and now we have to

stand and hold each others hands, but what the heck if I only stay free from gambling, there is this ... there is this deep rooted attitude that this is something I can deal with on my own, I don't need the fellowship, I don't need no higher power, I know I am regaining my sanity, I just have to stay away from gambling the first 20 crowns, not to put the first "tyver" into the machine."

And this is different from AA, probably because in GA people have not worked the steps:

Margrethe: "... because if, if you haven't had a spiritual awakening or the feeling that a higher power has entered your live, I think that, I have observed that it is what happens when you start working the steps."

Margrethe sees this lack of belief in a higher power or God in GA as a result of not working the steps, there is less emphasis on "the program" in GA and having missed out on the spiritual awakening the gamblers are less inclined to believe in God. Robin Room found the explanation in the experiences of the gambler while still gambling. The compulsive gambler has, again and again, in desperation, relied on help from God, praying for help "just this time," and lost; this experience will undermine the faith of even the staunchest believer said Room (personal communication).

This may pose a problem for the compulsive gambler entering GA. Having admitted her powerlessness over gambling, the GA member is expected to come to believe that a power greater than herself can restore her to a normal way of thinking and she is furthermore to turn her will and her life over to the care of this higher power, or God as she understands him. Faith in God or a higher power is very much at the core of the belief world of the twelve step fellowships. In principle, GA and AA do not promote any specific religion or monotheism. The fellowships advocate no theological or onto-logical beliefs. They speak of this life and have nothing to say about afterlife. The fellowships are only interested in the relationship of the individual to herself, to other people and to some higher power (Mäkelä et al., 1996). It is probably this complete freedom granted, to define ones higher power that solves this dilemma for many compulsive gamblers. The following story tells more about the protective blanket Ingrid talked about earlier.

Ingrid is standing in a shop, waiting in line for her turn at the counter. It was one of those shops (kiosk) in Denmark that have a licence to operate the so called “one-armed bandits,” usually just two or three machines. Ingrid notices a man gambling on one of the machines.

“Yes, I probably have some kind of a higher power, but it is difficult to explain what it is, but I can give an example. I have thought a lot about this, I went into a tobacco shop, where they have a few gambling machines, and as soon as I came inside my eyes were fixed to the machines. Oh yes, it would be great [to gamble some], and then I look at the display on one of the machines, I was standing about one meter from the machine, standing in line, there were many people in the shop, there stood 500 crowns on the display, and I thought, shit, has he put that into the machine, or has he won 500 crowns. I was just ready to step out of the queue ... and take one of the machines, I wanted to ask him if he had put some money into the machines, or if he had won, and then it was as if I became paralysed, it was as if there was cotton all around me, as if I was isolated in cotton wool, and I, it was completely quiet, even if there were a lot of people around me and the shop was noisy. It was completely quiet, and I just stood there and looked, as if hypnotized, at this damn machine, as if I, surprisingly, never had seen it before, and I thought, what is this... it was an extremely weird experience ... And just as I had, it took maybe about 20 – 30 seconds, well maybe a bit longer, it was gone, then the sounds and my whole, my whole person entered the situation. But it was as if I hadn’t been there, it was quite an astonishing experience, I’ve thought quite a lot about it, it was probably some sort of an awakening ... When I came home and tried to analyze what I had experienced, I became somehow high, because it is almost impossible to explain, I thought, if I tell this to someone he or she will think I am mad, but only I can know what I have experienced.”

Ingrid felt that this experience was a sort of a spiritual awakening and fellow GA members supported her in her belief. She was not the only interviewee to tell a story of a spiritual awakening, even if it was not asked for in the interview. Margrethe had one such story to tell:

“...you do want to hear about it? I was sitting outside Majorgaarden [a treatment centre], it was either on the 21st or 22nd of July, 2006. I was deeply, deeply moved by a lecture I

had been to on [the subject of] the family, about how our relationships are affected by the addictions, what we have done to the family, and I had in my hand a piece of paper, I was to write down the names of my loved ones, those I wanted to invite to the family program at Majorgaarden. I was deeply moved and very defenceless, and full of guilt and shame. I am sitting outside, on this beautiful, beautiful summer day, and I have no idea how to handle this, this thing about involving [the family], how to move on, and suddenly, as I sit there, it comes, I become filled with, there comes and at the same time I am filled with light and warmth, to such an extent that I am unable to see what is before me, I can not see the table and the chairs, I can just, I can just be a part of this, completely. Later I have thought, what was this light Margarethe that you saw, was it like neon-lights, or, it was actually intensely bright. And it was very, very comfortable and very, very kind. It was a feeling and an experience that I have never felt before. And at that moment I was filled with so much light and so much warmth, that I came to believe that this was something good ... I think I sat there for some time, before I start thinking, what the hell is happening, I can't see the people around me, I can't see the table, I am sitting here filled with light and warmth, and I have this feeling that is very, very different from all I've ever felt before in my life ... I think this lasts for a few minutes, and then it slowly fades away, and slowly I start seeing the people around me, slowly I start seeing the table, and as I sort of sit there, I think it took about two or three minutes, when I sit there afterwards, I feel that, well, I think I dare do this."

Margrethe does not try to explain this experience, and she didn't invoke God or a higher power as an explanation. But for her this was a spiritual awakening, and an important turning point. These experiences are important argues Palle:

"If you have had a spiritual experience, once or more often, it will give you the strength to fight for a better life."

There is hope and energy in these highly private experiences.

Now let us turn again to the discussion of higher power or God. It has been said earlier that the twelve step fellowships are vary of explanations, and this holds true for higher power, the GA

members interviewed are mostly practical when they talk about the God of their understanding. They don't know what the higher power is at the end of the day, and they don't care as long as it works! Pia says:

“It is actually something I happened to talk about at an AA meeting recently, I don't know what higher power is, and really, I couldn't care less. But I can feel, inside my self, that something has happened, I realised that when I talked about it at the AA meeting. My conclusion was that for me, higher power is this clearness of mind, this serenity, being pleased with how things are, joy, not least feeling the joy I've found, and I very much would like to keep, this is probably higher power for me. Where this comes from, I couldn't care less, but it suddenly was there one night when I went to bed, and when I woke up again I felt full of joy, and that feeling has been there ever since, and it's a fantastic feeling.”

Anton has a longer time in GA than Pia, and his take on higher power is in line with common interpretations of higher power in AA and GA. As Palle once formulated it: “All you have to know about God, is that you're not him.” Anton says:

“I feel that, in Gamblers Anonymous, when people get a grip on things, you see, there are those who talk about their higher power, but it's a difficult concept I would say, because, what is a higher power, is it God, or what is it. I think that those who really understand what their talking about, are of the same opinion as I am, that all I have to do is stop controlling everything, or rather, I should control what is in my power to control and leave the rest. That is essentially my relationship to my higher power, that's how it works best for me. As long as I don't act as if I know everything better than everyone else and so on, it's a form of a higher power for me; this is how I understand it. I can pray, and I can say thank you, I have come to believe that I am at least not alone, that's the way I have it. There is this group in Holbæk [Narcotics Anonymous] where they believed in God, and I respect that, this was their higher power. It didn't fit me, and this isn't something I meet regularly in GA, it may be different in NA and AA, but this isn't something a compulsive gambler needs. Gamblers [feel that they] really do not need a higher power, you just have to stop

gambling and think rationally, then you don't need anybody's help, just go to one meeting a week or one meeting monthly."

Anton tries to keep both his feet on the ground when dealing with the concept of God and of higher power. Ingrid has heard people grapple with these ideas at GA meetings:

"... I think there are more people talking about this and they have no idea what this higher power is, and that doesn't come as a surprise to me. Because, what is higher power, you know, I can't help thinking about Dalai Lama, where he says that there is no God, there are only your deeds ... there is no God, there is only, now I'm not sure if I'm using his exact words, but there are only the consequences of your actions. It's of course, in many ways, quite logical ... If you do something good, something good is bound to come out of it, if you do something stupid, then something stupid happens. I can see it myself, when I have been gambling, when I have no money, then when I stop gambling there is suddenly a lot of money in my purse ..."

Margrethe has found some form of a higher power and really wants to explain it to the newcomers, to give them something of value that she has been given, as GA parlour would have it. In her experience the gamblers are not only disinterested in being helped by a higher power, there are some deep seated psychological barriers making it difficult for them to relate to a God or a higher power.

Margrethe: "Yes I have [a belief in a higher power] ... It has been difficult for me to believe in higher power and to believe that the world is a good place to be, it has been very difficult for me in Gamblers Anonymous. Often I've felt like a fu**ing idiot, a jubilant moron, you know, drifting on a cloud, and, and, an overly positive missionary, that enters the meeting and declares that everything will turn out fine, because I have this form for spirituality, because I believe in and trust a higher power. Because I don't feel alone, because I know ... that this process, this work, it will eventually pay off, because I know there is something on the other side, because I know, you know, this is what it's been like for me, a few times I have felt like an idiot. It's been hard and sometimes I've had to rely on and trust my higher power and

say, you have to pull me through this, it's no good me pretending to be something I'm not at the GA meetings, or putting up my façade, or this coldness.

M: Coldness?

Margrethe: Yes, this toughness that my spirituality has helped me to slowly work on.

M: Is it some hardness or coldness in yourself or something you meet in other members of Gamblers Anonymous?

Margrethe: I find it in myself, but I'm also mirrored in the others, if that's what I want."

Maybe it's this coldness, or hardness, that once led to the assumption that most compulsive gamblers were psychopaths. This is not to say that a tough façade is common to all gamblers, far from it, but having worked with families of compulsive gamblers, this writer can testify that this is a complaint often heard. Margrethe's description of herself and other gamblers, leads us to the next section, a section on the personal characteristics of the gambler, as described in the interviews.

4.10 Personal characteristics of the Gambler

The AA program as such is not based on any particular psychological theory and the same can be said of GA. The basic texts of both fellowships mostly use everyday moral and psychological vocabulary and show few traces of either positivistic or psychodynamic psychology, which undercuts attempts to translate the original twelve step system of belief and action into professional psychology (Mäkelä et al., 1996). Individual members (and the treatment industry) often feel a need to explain the roots of addiction, and the gamblers interviewed came up with some psychological explanation for the differences between AA and GA in Denmark. It was not always clear, from the interviews, if these personal characteristics are supposed to be inherent personality traits of the gambler, the consequences of gambling, or simply a result of not working the recovery program of Gamblers Anonymous. Anton's experience is that:

“Members of Narcotics Anonymous are more willing to read out loud at the meetings, it has taken a long time to implement the same tradition in Gamblers Anonymous. When I started in GA they seemed all to talk at once, and nobody was interested in doing any service work. They seemed to think, I just come to the meetings and then somebody else takes care of what needs to be done.

When I started up a new meeting in February, 2005, I discovered how extremely difficult it is to find people willing to do any form of service work, those [two persons] responsible for the Hellerup group, had the same experience, having to run it alone for many years. They were among the first I learned to know in GA, and they found it very hard to find someone willing to take any responsibility for the group. The NA group in Holbæk was a relatively new group, but they had everything under control.”

The theme Anton addresses is probably as old as GA in Denmark, Kaj-Ole sat alone for some years with the responsibility for GA, later it was Jytte and Rudy. Margrethe agrees wholeheartedly with Anton’s description, and is a little frustrated:

“... I am not satisfied with how things work, because I think that we gamblers avoid taking responsibility, we are very unstructured and we do not keep appointments and ... we are extremely, that is, we are extremely lazy and we want things served on a silver platter and we really want others to do things for us, and to me it seem a lot of crap, and I think it destroys, because then there are only a few persons that carry all the responsibility and reap the hard earned rewards ... “

A little later, in the same interview she adds:

“... when I go to AA meetings and see how things work in the other fellowships, I see much more involvement, and a willingness to share and a feeling of joy in doing service work ... and talking before the meetings and after the meetings, and doing things together, you don’t find this in GA. ... I actually think that when you talk about addiction, then I think that compulsive gamblers are really the most egoistic and self-willed and arrogant and proud of all the different addiction races.”

To do justice to the claims made by some GA members, that compulsive gamblers share some traits, rendering them less susceptible to do service work, I would like to finish this part with support from a professional with a lot of experience in working with compulsive gamblers. Ciarrocchi (2002) says that although problem gambling and substance abuse share some attributes, there are some differences too. Ciarrocchi does mention, just as some of my interviewees, egotism and grandiosity as problematic characteristics of gamblers. Ciarrocchi (2002) does not say that substance abusers are free of these attributes, it's just that gamblers more frequently show these characteristics and to a greater degree. He has this story from his time as head of an addiction unit that had a separate group for gamblers:

“Although pathological gambling patients never comprised more than about one-fourth of the total unit, they invariably served as elected officers. At this particular meeting limited to gambling patients, the representative began by assuring me that we clearly had the finest program in the world. All concurred that they based this conclusion on extensive investigation prior to hospital admission. They then suggested that, because I was responsible for overall marketing of the program, I would no doubt welcome their suggestions to make the program even more attractive to potential gambling patients. To assist me they wrote out an extensive list of recommendations...

Moving onto existing services, they brought up our housekeeping department. Surely, they reasoned, it was in my authority to institute needed changes there. Not knowing where they were headed on this issue, I felt my own anger rising. Until now I was merely bemused at their outrageousness. Housekeeping personnel on our unit were on the low end of the wage scale, yet these women went above and beyond job descriptions to create a family atmosphere for the patients... So what exactly did the patients expect from housekeeping? This time the spokesperson was a parish priest in treatment. His complaint was that housekeeping neglected to pick up items from the floor of patient's rooms. After all, he pointed out, in his rectory room the housekeepers willingly picked up his dirty underwear off the floor.

The cumulative effect of hearing these requests was to render me speechless. Only readers who understand something about the culture of inpatient psychiatric treatment have a sense of the grandiosity behind such requests. This discussion took place on a locked unit that for safety reasons

and the nature of addictions treated, required body searches of patients coming in and out. The representative making the request had embezzled half a million dollars from client stock accounts and kept his job only because the company feared multiple lawsuits if it went public with his behaviour (Ciarrocchi, 2002, p. 3).”

The gamblers Ciarrocchi talks about, admittedly, do not seem like good candidates to do service work in GA, unless they experience a radical shift in thinking and in relating to other people. Palle experienced such a shift in his last treatment. It had been a bad day and he was miserable. In order to get some help he talked to the guy working the nightshift, Sven-Erik. Sven-Erik listened to what Palle had to say and agreed that maybe he should talk to one of the psychologists. But Sven-Erik also recommended that Palle do something himself. The first thing he advised Palle to do was to find someone, a fellow sufferer in treatment, who needed help.” Do something good for that person, help him or her, and see if you don’t feel better.” This advice, rooted in “twelve step wisdom,” is quite common in treatment and is meant to combat self-centeredness and self-pity. For Palle this was a turning point, maybe a small incremental spiritual awakening, on his road to recovery. In a later interview Palle talked about GA meetings:

“No, sometimes it can be really good at the Gamblers Anonymous meetings, sometimes the meetings feel a bit monotonous, but it kind of depends on what your own intentions are, because more often now I feel that my intention is, that I have this wish that there is somebody at the meeting I can give something to, this is how I feel in GA, especially in GA, but also in AA. if my motivation is to give, then I’m not all that interested in what the meeting can give me, but what I can bring to the meeting, or maybe to a newcomer ... but sometimes I come only to identify and get some “mirroring,” some strength and hope, to be with someone who is feeling low.”

Whether compulsive gamblers seeking help in GA are radically different psychologically from the alcoholics in AA, or people in general is a question not answered here. The stories of the irresponsible and lazy (average) GA member are a part of the oral tradition of GA in Denmark. All the people I interviewed knew the story of Jytte and Rudy who alone had the responsibility for GA, even if only two of them had actually been to the Hellerup meeting and met the couple. Most of

them had heard a similar story about Kaj-Ole, even if he had stopped going to GA meetings years ago. The theme of these stories is the same, gamblers do not do service work.

An interesting and common explanation, given by the gamblers I have interviewed, of the perceived differences between alcoholics and gamblers, is that the gambler is more isolated than the alcoholic. The compulsive gambler is a loner they argue and today it is possible to gamble totally alone, from a computer, nobody really needs to know that you gamble at all. Not only is it possible for the compulsive gambler to hide how often or how much she is gambling, she has also become adept at hiding the economic consequences of her activities. The feelings associated with gambling are closely guarded secrets, the elation and the ecstasy is kept under control; guilt and fear are seldom revealed. There is a lot going on in the gamblers head that she doesn't want talk about. This secrecy, this constant being on guard, this isolation has its price, and it is difficult for most gamblers to open up and start talking about how they feel and what they are thinking. It is of course understandable that gamblers new to the programme, do question the logic of the statement, that going to GA meetings and talking about "how it was, what happened, and how it is now," will help them stop gambling and get out of debt. This is problematic when it comes to "selling" the program to the newcomer, and arguing for the benefits spirituality in recovery is no easy task!

Margrethe has learnt that the best way for her to stay sober and free of gambling is to help other gamblers and do service work. She sincerely wants to help those new to the programme of GA, and to share with them the benefit of what she has "been given" in the fellowship. But it is problematic, she believes she knows how the gamblers think, and she actually changes her role accordingly, when talking to a newcomer.

"Yes, as an example, when there is someone new in GA, I notice that it is, that, that I, mmmm, that I try to analyze how much this person can take, that ... if I can be Margrethe just the way I am, or, or am I forced to take remove some of the spirituality and put on a tougher front to be able to speak his language, so that he or she will come again, because I really want them to get this chance, this opportunity, I become like a salesman who monitors his client ... it's like I'm protecting my company and there is very little spirituality. ... and then I become sort of more streetwise, a lot faster and a bit sharper..."

Many gamblers have described a feeling of travelling between two separated and different worlds, the world of gambling and the “everyday” world. Margrethe describes the different roles she plays as a streetwise gambler and her role as a member of GA. The need to connect to the newcomer, to not scare him or her away, makes her change the way she behaves; she would behave differently if she was interacting with an insider in GA or AA. The changes remind her of a self she is working at changing, a role she knows by heart but didn’t bring her much luck. Palle has fewer reservations, for him it is important to:

“Share about the message, the possibility for, what shall I call it, for a spiritual awakening, or a spiritual experience, all depending on who you are... If you have had a spiritual experience, once or more often, it will give you the strength to fight for a better life.”

4.11 Money

It is money, or lack of money more precisely, that often is the most acute problem a compulsive gambler faces upon entering GA. There are of course other pressing problems, but for a long time most gamblers feel that what they are facing is a cash-flow problem. If they had more money they could win back what they have lost, or pay up their debts so that they wouldn’t have to win anything back! For Ingrid this money is still the main reason for being in GA:

“I have worried a lot about money, that’s the reason were here [in GA], because we have lost a lot of money ... I never had problems paying my rent, but it has been bad at times, I didn’t have any money for food, today I can really see the difference, my refrigerator is full of things, there is money in my purse ... I can buy the things I need ...”

After gambling at the beginning of the month Ingrid used to spend a lot of time compulsively worrying about how she would survive another month without money. She only has her pension, and gambling away her money means that she can’t pay her debts or keep her appointments with her dentist. For days after gambling she used to obsess about how stupid she was, and try to figure

out how to solve her economical problems. It was a great relief for her when, after stopping gambling for some time, she realised that this obsession was gone.

At the first meeting in the Friday group in Valdemarsgade, there was a visitor from Iceland present. He was of course a compulsive gambler in recovery (member of GA), sober for more than six years. He shared his story of gambling at the meeting and concluded that for himself, and many others like him, it was not the debt that was the toughest problem. For him it was more difficult and more meaningful to build up the relationships he had damaged, not least his relationship to himself. I asked Palle if people talked much about money in GA.

“No, they don’t, you know, of course they’ve lost money ... it’s difficult to generalize, but normally there isn’t that much talk about money. We talk about how were doing, and about gratitude, and about what it does for us to come to the meetings. For some it is enough to do that, just to go to the meetings ... I need to do more [i.e. work the steps] than that, maybe it will wear of after a few years, it will become easier, I do hope so ...”

Palle’s economic situation is something he could worry a great deal about, but as he said, that won’t help much. He is much better off after staying away from gambling for two years, and for him it is more important to work the program. Money is mentioned in the twelve steps of GA, but it is only a part of a larger programme. GA in Denmark has no tradition for using pressure relief groups, and they are not a part of the AA programme. It is possible that more mature GA groups abroad are more focused on money than the Danish groups, and less focused on other parts of the programme.

4.12 Size of meetings

I asked each of the in-depth informants to estimate the number of GA members in Copenhagen. This is of course a very rough and unreliable estimate, but it can give some idea about what has happened in GA since spring 2003, when there were approximately three to five more or less active members. It is quite problematic to conduct a survey of membership in the twelve step fellowships, it is difficult to draw the line between active members and those who either meet irregularly or have dropped out. There are no lists over members and the unity steps make it difficult for outsiders to

conduct surveys of membership. GA and AA in USA do make surveys and publish information on number of meetings, number of active members and some demographic information. How accurate these numbers are is questionable, AA in USA consistently underrate their membership (Mäkelä et al., 1996).

“I came to know GA in November 2004, at that time GA was very, very small, one meeting in Hellerup and there was a meeting at the Frederiksberg Hospital. I went to both meetings, and there were ca. 5 – 6 active members if both meetings are combined. The hospital meeting closed at the beginning of 2005, soon afterwards the Friday afternoon group started in Valdemarsgade, I was involved in starting that group. For about a year there were two meetings in Denmark, one in Hellerup and one in Copenhagen. For most of that time there were maybe 8 – 10 active members. Things have picked up speed since then. Now we have 5 – 6 meetings in Denmark and there are probably 50 – 70 compulsive gamblers that regularly attend the meetings.” Anton

Anton is also in contact with the Århus groups, and he uses the opportunity to once more point out how reliant upon treatment GA is:

“It’s great, it’s happened quite fast really. In the beginning the founder of the group sat there alone ... Now there is also a treatment centre for compulsive gamblers in Århus.”

The founder of the Århus group said, at the time of this writing, that there were two groups in Århus and at least 15 active members.

Palle has known GA for a long time. I asked him if he could give an estimate on how many gamblers used GA regularly:

“Yes I think I can, but, you know, I’m not one of those who goes to GA meetings all the time, but I show up regularly on Wednesday and every now and then Friday. It’s a very big meeting the Friday group, 20 – 25 ... the Wednesday group is smaller now

than it was, but it is growing again. Well, I would say 60 – 70 maybe, that are active, meaning that they go to meetings, then there are maybe a little more than 10 that work the programme, and there are a few that work the programme in some other fellowship ... “

Margrethe has known GA for two years now, which is long enough to have witnessed quite dramatic changes in the fellowship, but the number of participants seems to ebb and flow:

“About a year back there were many, about 80 [members], today I would say about 50. ... Yes it has fallen a little, when I came to GA two years ago there were 30, well 20 or 25 maybe, then it seemed to grow, and there were incredibly many at one point and now it's shrunk a little ...”

Pia who is the newest member of GA and has mostly participated in the newest and smallest group believes there are about 35 active members in all the GA groups in Copenhagen. Her estimate may be considered a little to low and the number 80 to be too high at this moment in time. If we take the lowest estimate from the other three informants, we could say that there are about 50 active GA members in Copenhagen, and about ten in Århus. Adding to that number the groups in Fredericia and Ålborg we could conclude that about 70 people use GA regularly in early 2008. Gamblers Anonymous has grown considerably since 2003, when the first treatment centre supportive of GA opened its doors.

4.13 Some similarities among the gamblers interviewed

Among interesting findings not elaborated upon here, are some striking similarities between the gamblers interviewed. Those interviewed at depth have all had traumatic experiences in childhood; four out of five come from alcoholic families. One informant, an elderly lady, hardly ever knew her father who died when she was quite young and her mother was unstable psychologically. Our elderly lady never talked about the sexual abuse she suffered as a child and as a young woman she married a violent alcoholic, after divorcing her first husband there came other relationships with other alcoholic men. She reached a point where she could no longer care for her two sons; they were removed from the home, something she finds difficult to forgive herself.

Anton's father was an alcoholic and drank mostly at the local pub. Anton often followed his father to the pub or was sent to fetch him for dinner. It didn't matter if Anton came to shepherd father home or just wanted to stay close to him, he often wound up playing the "one-armed-bandits" at the pub, while father drank his beer. Anton's father died of his alcoholism. Margrethe's history is even more tragic, after catastrophic events in her family she was removed from her home (at that time her family was totally shattered). Her life has not followed any sort of normal curve since, foster homes, cocaine, prostitution, gambling ... and then AA and GA.

It is observations like these that have lead some students of problem gambling to try to formulate theories of the relationships between compulsive gambling and depression, painful memories, current life problem or even boredom, i.e. theories of gambling as an escape (Jacobs, 1986; 1988). Jacobs (1986) has proposed a general theory of addictions, and the compulsive gambler serves as the prototype. He defines addiction as a dependent state acquired over time to relieve chronic stress; addiction is thus a form of self-medication or self-treatment. There are some predisposing factors to addiction: a physiological state of chronic, atypical, unpleasant state of either depression or over-excitement, combined with feelings of inadequacy and inferiority, and a sense of being unwanted or rejected. This state would, according to Jacob's theory, be produced by childhood and early adolescence experiences.

It is not my intention to debate the value of viewing compulsive gambling as a way of escaping unpleasant states or situations, such theories seem more plausible for some gamblers than others. As it happened, all the gamblers interviewed would, at first glance, more or less fit Jacob's model (ibid).

5. Concluding remarks

Gamblers Anonymous in Denmark has grown relatively fast after the introduction of Minnesota-treatment for people with gambling problems, and the members interviewed see this treatment as something positive for GA. Still, quite a lot of the gamblers entering the fellowship seem to leave it again relatively quickly, and what is even more remarkable; some of them seek help in AA or NA instead. What seems to attract the gamblers to AA is the size of the fellowship; AA has more people and more experience. The gamblers also describe AA and NA as warmer, more tolerant and more structured than GA.

Another difference between GA and the other two fellowships is the emphasis on “the programme.” In AA the twelve steps and the slogans, to name some of the tools of recovery, have a much more prominent place than in GA, both at the meetings and in the daily practises of the members. Both AA and NA can provide the interested member with a sponsor, someone who is willing and has enough experience to guide the interested person through the steps and help with other parts of the programme. It is not clear if the disinterest for the programme in GA stems alone from the fact that GA is still small and relatively young or if there are some traits, inherent or learned, in the gamblers themselves that make them less inclined to work the programme. One should also remember that most of the members interviewed for this study were interested in working the programme, even if they didn’t quite agree on how to do it.

This may tie into GA’s reputation for being less spiritual than AA, which has been interpreted as if the members of GA are less religious than the people in AA. Denmark is a highly secular society and for some people, talking of spirituality, as is done in the programme, is both embarrassing and very American (meaning childish and shallow). This actually goes for both alcoholics and gamblers. Somehow many of the alcoholics seem to overcome this threshold and to either accept some sort of a personal deity or organized religion, or they somehow manage to separate spirituality from religion. It appears that spirituality, as interpreted in the twelve step fellowships, refers to positive human qualities such as honesty, modesty and willingness to help others. Defined in that way, GA in Denmark can be said to be less spiritual than AA in that members seem to be less

willing to do service work and generally show a lack of responsibility when it comes to working for the common good in GA.

Some of the members interviewed for this study think that this lack of willingness by gamblers, to take part in the service work, and the little interest shown in spirituality and socialising, could be explained by processes inherent in the “gambling addiction.” Pathological gambling, they say, is a very isolating activity. Usually the gambler becomes adept at hiding how much gambling takes place, how much is won and lost, and tries to solve all the problems alone, without help. Not only will the gambler lie about money and gambling behaviour, it is also necessary to hide feelings and thoughts. The gambler is alienated from family and friends and fears the consequences of revealing the lies and deceit, making it almost impossible to open up and ask for help.

It is a well known theme that technological changes influence the forms and spread of addiction to substances and behaviour. This happened with the almost simultaneous development of the syringe and morphine, and trains, newspapers and telegrams revolutionized gambling in Victorian England, leading to enormous problems, as is well documented in Gerda Reith’s (1999) excellent book *The Age of Chance*. Today the internet, mobile phones and interactive television has changed the world of gambling. Danish gamblers gamble on foreign soccer teams, in remote areas of the world⁶, placing their bets with bookmakers thousands of kilometres away. This can be done in the company of others, but the advanced technology has made it much easier to gamble alone. You can gamble at home or in the car with your mobile phone, and nobody will notice until the problems erupt, wrecking havoc in your life and those nearest and dearest. Gambling has become globalized but the problems are very much local, the global “gaming” providers rarely think they have any responsibility for the problems incurred.

Add to all this secrecy and hiding, and this reliance upon one self, a great deal of shame, and you have a person that is not inclined to open up and share about problems. Further studies could aim at identifying the processes at work here, and see if these traits are the results of the process of becoming addicted to gambling or whether they were already in place before the person started gambling. A better understanding on these processes would be valuable for GA and for treatment providers aiming to help pathological gamblers. As an example, it is the experience of this writer

⁶ Late in the summer Iceland is almost the only country where football is played, and most of the odds players seeking treatment have gambled on Icelandic games.

that gamblers in treatment usually do better in small groups (4-6), whereas alcoholics thrive in larger groups (8-12). This is only a clinical observation, but it appears to support the above theory that pathological gamblers are more isolated and “closed” than alcoholics. More research on this would be valuable.

GA in North America is said to have become more like AA in the last decades, in that there is more emphasis on working the steps, and sharing about soft issues, e.g. talking about feelings and common life problem instead of “war stories,” is accepted. This generally warmer atmosphere has made GA attractive to more diverse groups than before; it has for example benefited women entering the fellowship. Whether GA in Denmark has ever operated in a similar way to the early GA groups in Northern America is an open question, but those members interviewed seem to think that GA in Denmark would do well to learn more from AA. They want more warmth and more of the programme even if they do not agree which parts of it are most important. It seems likely that GA in Denmark will follow in the footsteps of the sister fellowship in North America and become more alike AA.

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Appendix 1. The programme.

The GA preamble.

Gamblers Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from a gambling problem.

The only requirement for membership is a desire to stop gambling. There are no dues or fees for Gamblers Anonymous membership; we are self-supporting through our own contributions.

Gamblers Anonymous is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any cause. Our primary purpose is to stop gambling and to help other compulsive gamblers do the same.

Most of us have been unwilling to admit we were real problem gamblers. No one likes to think they are different from their fellows. Therefore, it is not surprising that our gambling careers have been characterized by countless vain attempts to prove we could gamble like other people. The idea that somehow, some day, we will control our gambling is the great obsession of every compulsive gambler. The persistence of this illusion is astonishing. Many pursue it into the gates of prison, insanity or death.

We learned we had to concede fully to our innermost selves that we are compulsive gamblers. This is the first step in our recovery. With reference to gambling, the delusion that we are like other people, or presently may be, has to be smashed. We have lost the ability to control our gambling.

We know that no real compulsive gambler ever regains control. All of us felt at times we were regaining control, but such intervals - usually brief - were inevitably followed by still less control, which led in time to pitiful and incomprehensible demoralization. We are convinced that gamblers of our type are in the grip of a progressive illness. Over any considerable period of time we get worse, never better. Therefore, in order to lead normal happy lives, we try to practice to the best of our ability, certain principles in our daily affairs.

The Serenity Prayer.

God grant me the serenity
to accept the things I cannot change,
courage to change the things I can,
and wisdom to know the difference.

The Recovery Program.

Here are the steps which are a program of recovery

- We admitted we were powerless over gambling - that our lives had become unmanageable.
- Came to believe that a Power greater than ourselves could restore us to a normal way of thinking and living.
- Made a decision to turn our will and our lives over to the care of this Power of our own understanding.
- Made a searching and fearless moral and financial inventory of ourselves.
- Admitted to ourselves and to another human being the exact nature of our wrongs.
- Were entirely ready to have these defects of character removed.
- Humbly asked God (of our understanding) to remove our shortcomings.
- Made a list of all persons we had harmed and became willing to make amends to them all.
- Make direct amends to such people wherever possible, except when to do so would injure them or others.
- Continued to take personal inventory and when we were wrong, promptly admitted it.
- 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.
- Having made an effort to practice these principles in all our affairs, we tried to carry this message to other compulsive gamblers.

The 12 Step Program is fundamentally based on ancient spiritual principles and rooted in sound medical therapy. The best recommendation for the program is the fact that "it works."

Gamblers Anonymous would like to indicate that we are not soliciting members. Our intention is to highlight that gambling for certain individuals is an illness called "*compulsive gambling*." Gamblers Anonymous provides the message that there is an alternative to the destruction of compulsive gambling and this alternative is the Gamblers Anonymous program.

Our ranks are filled with members who have recovered from the illness by stopping gambling and attaining a normal way of life. These members remain ready to help any individual who passes through the Gamblers Anonymous door.

Page 17.

To all Gamblers Anonymous members, particularly the new Gamblers Anonymous members:

1. Attend as many meetings as possible, but at least one full meeting per week. **Meetings Make It.**
2. Telephone other members as often as possible between meetings. **Use The Telephone List.**
3. Don't test or tempt yourself. Don't associate with acquaintances who gamble. Don't go in or near gambling establishments. **Don't Gamble For Anything.** This includes the stock market, commodities, options, buying or playing lottery tickets, raffle tickets, flipping a coin or entering the office sport pool.
4. Live the Gamblers Anonymous Program **One Day At A Time.** Don't try to solve all your problems at once.
5. Read the Recovery and Unity steps often and continuously review the Twenty Questions. Follow the steps in your daily affairs. These steps are the basis for the entire Gamblers Anonymous Program and practicing them is the key to your growth. If you have any questions, ask them of your Trusted Servants and Sponsors.
6. When you are ready, the Trusted Servants will conduct a Pressure Relief Group meeting, or re-evaluate for you and your spouse (if married), and adherence to it will aid in your recovery.
7. Be patient! The days and weeks will pass soon enough, and as you continue to attend meetings and abstain from gambling your recovery will really accelerate.

The Recovery Program and the Unity Program are reprinted with permission of Gamblers Anonymous International Service Office. Permission to reprint the material does not mean that GA has reviewed or approved the contents of this publication, nor that GA agrees with the views expressed herein. GA is a program of recovery from compulsive gambling – use of the the Recovery Program and the Unity Program in connection with programs and activities which are patterned after GA, but which address other problems, does not imply otherwise. The same holds true for page 17 of the Combo Book.

Appendix 2. Tilladelse fra Datatilsynet.

Magnus Dagbjartur Larusson
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1264 København K

Sendt til: magnus@promis.dk

14. december 2007

Vedrørende anmeldelse af: Gamblers Anonymous in Denmark comes of age

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1300 København K
CVR-nr. 11-88-37-29
Telefon 3319 3200
Fax 3319 3218
E-post dt@datatilsynet.dk
www.datatilsynet.dk

J.nr. 2007-41-1602
Sagsbehandler
Tina Susanne Nielsen
Direkte 3319 3229

Ovennævnte projekt er den 7. december 2007 anmeldt til Datatilsynet efter persondatalovens § 48, stk. 1. Der er samtidigt søgt om Datatilsynets tilladelse.

Det fremgår af anmeldelsen, at De er dataansvarlig for projektets oplysninger. Behandlingen af oplysningerne ønskes påbegyndt 1. januar 2008 og forventes at ophøre 1. september 2008.

Oplysningerne vil blive behandlet på følgende adresse: Skelbyvej 108, 4171 Glumsø.

Oplysningerne vil endvidere blive behandlet ved de deltagende centre: Félagsvísindadeild Háskóla Íslands (Sociologisk Institut), Suourgötu Reykjavík Ísland.

TILLADELSE

Datatilsynet meddeler hermed tilladelse til projektets gennemførelse, jf. persondatalovens § 50, stk. 1, nr. 1. Datatilsynet fastsætter i den forbindelse nedenstående vilkår:

Generelle vilkår

Tilladelsen gælder indtil: 1. september 2008

Ved tilladelsens udløb skal De særligt være opmærksom på følgende:

Hvis De ikke inden denne dato har fået tilladelsen forlænget, går Datatilsynet ud fra, at projektet er afsluttet, og at personoplysningerne er slettet, anonymiseret, tilintetgjort eller overført til arkiv, jf. nedenstående vilkår vedrørende projektets afslutning. Anmeldelsen af Deres projekt fjernes derfor fra fortegnelsen over anmeldte behandlinger på Datatilsynets hjemmeside.

Datatilsynet gør samtidig opmærksom på, at al behandling (herunder også opbevaring) af personoplysninger efter tilladelsens udløb er en overtrædelse af persondataloven, jf. § 70.

1. Magnus Dagbjartur Larusson er ansvarlig for overholdelsen af de fastsatte vilkår.
2. Oplysningerne må kun anvendes til brug for projektets gennemførelse.
3. Behandling af personoplysninger må kun foretages af den dataansvarlige eller på foranledning af den dataansvarlige og på dennes ansvar.

4. Enhver, der foretager behandling af projektets oplysninger, skal være bekendt med de fastsatte vilkår.

5. De fastsatte vilkår skal tillige iagttages ved behandling, der foretages af databehandler.

6. Lokaler, der benyttes til opbevaring og behandling af projektets oplysninger, skal være indrettet med henblik på at forhindre uvedkommende adgang.

7. Behandling af oplysninger skal tilrettelægges således, at oplysningerne ikke hændeligt eller ulovligt tilintetgøres, fortabes eller forringes. Der skal endvidere foretages den fornødne kontrol for at sikre, at der ikke behandles urigtige eller vildledende oplysninger. Urigtige eller vildledende oplysninger eller oplysninger, som er behandlet i strid med loven eller disse vilkår, skal berigtiges eller slettes.

8. Oplysninger må ikke opbevares på en måde, der giver mulighed for at identificere de registrerede i et længere tidsrum end det, der er nødvendigt af hensyn til projektets gennemførelse.

9. En eventuel offentliggørelse af undersøgelsens resultater må ikke ske på en sådan måde, at det er muligt at identificere enkeltpersoner.

10. Eventuelle vilkår, der fastsættes efter anden lovgivning, forudsættes overholdt.

Elektroniske oplysninger

11. Identifikationsoplysninger skal krypteres eller erstattes af et kodenummer el. lign. Alternativt kan alle oplysninger lagres krypteret. Krypteringsnøgle, kodenøgle m.v. skal opbevares forsvarligt og adskilt fra personoplysningerne.

12. Adgangen til projektdata må kun finde sted ved benyttelse af et fortroligt password. Password skal udskiftes mindst én gang om året, og når forholdene tilsiger det.

13. Ved overførsel af personhenførbare oplysninger via Internet eller andet eksternt netværk skal der træffes de fornødne sikkerhedsforanstaltninger mod, at oplysningerne kommer til uvedkommendes kendskab. Oplysningerne skal som minimum være forsvarligt krypteret under hele transmissionen. Ved anvendelse af interne net skal det sikres, at uvedkommende ikke kan få adgang til oplysningerne.

14. Udtagelige lagringsmedier, sikkerhedskopier af data m.v. skal opbevares forsvarligt aflåst og således, at uvedkommende ikke kan få adgang til oplysningerne.

Manuelle oplysninger

15. Manuelt projektmateriale, udskrifter, fejl- og kontrollister, m.v., der direkte eller indirekte kan henføres til bestemte personer, skal opbevares forsvarligt aflåst og på en sådan måde, at uvedkommende ikke kan gøre sig bekendt med indholdet.

Oplysningspligt over for den registrerede

16. Hvis der skal indsamles oplysninger hos den registrerede (ved interview, spørgeskema, klinisk eller paraklinisk undersøgelse, behandling, observation m.v.) skal der uddeles/fremsendes nærmere information om projektet. Den registrerede skal heri oplyses om den dataansvarliges navn, formålet med projektet, at det er frivilligt at deltage, og at et samtykke til deltagelse til enhver tid kan trækkes tilbage. Hvis oplysningerne skal videregives til brug i anden videnskabelig eller statistisk sammenhæng, skal der også oplyses om formålet med videregivelsen samt modtagerens identitet.

17. Den registrerede bør endvidere oplyses om, at projektet er anmeldt til Datatilsynet efter persondataloven, samt at Datatilsynet har fastsat nærmere vilkår for projektet til beskyttelse af den registreredes privatliv.

Indsigtsret

18. Den registrerede har ikke krav på indsigt i de oplysninger, der behandles om den pågældende.

Videregivelse

19. Videregivelse af personhenførbare oplysninger til tredjepart må kun ske til brug i andet statistisk eller videnskabeligt øjemed.

20. Videregivelse må kun ske efter forudgående tilladelse fra Datatilsynet. Datatilsynet kan stille nærmere vilkår for videregivelsen samt for modtagerens behandling af oplysningerne.

Ændringer i projektet

21. Væsentlige ændringer i projektet skal anmeldes til Datatilsynet (som ændring af eksisterende anmeldelse). Ændringer af mindre væsentlig betydning kan meddeles Datatilsynet.

22. Ændring af tidspunktet for projektets afslutning skal altid anmeldes.

Ved projektets afslutning

23. Senest ved projektets afslutning skal oplysningerne slettes, anonymiseres eller tilintetgøres, således at det efterfølgende ikke er muligt at identificere enkeltpersoner, der indgår i undersøgelsen.

24. Alternativt kan oplysningerne overføres til videre opbevaring i Statens Arkiver (herunder Dansk Dataarkiv) efter arkivlovens regler.

25. Sletning af oplysninger fra elektroniske medier skal ske på en sådan måde, at oplysningerne ikke kan genetableres.

Ovenstående vilkår er gældende indtil videre. Datatilsynet forbeholder sig senere at tage vilkårene op til revision, hvis der skulle vise sig behov for det.

Opmærksomheden henledes specielt på, at Datatilsynets vilkår også skal iagttages ved behandling af oplysninger på de deltagende centre mv., jf. de generelle vilkår nr. 4.

Datatilsynet gør opmærksom på, at denne tilladelse alene er en tilladelse til at behandle personoplysninger i forbindelse med projektets gennemførelse. Tilladelsen indebærer således ikke en forpligtelse for myndigheder, virksomheder m.v. til at udlevere eventuelle oplysninger til Dem til brug for projektet.

En videregivelse af oplysninger fra statistiske registre, videnskabelige projekter m.v. kræver dog, at den dataansvarlige har indhentet særlig tilladelse hertil fra Datatilsynet, jf. persondatalovens § 10, stk. 3.

Anmeldelsen offentliggøres i fortegnelsen over anmeldte behandlinger på Datatilsynets hjemmeside www.datatilsynet.dk.

Persondataloven kan læses/hentes på Datatilsynets hjemmeside under punktet "Lovgivning".

Med venlig hilsen

Tina Susanne Nielsen