

# FAA: Federal Alcoholics Anonymous?

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## FACTS:

1. The Federal Aviation Administration (FAA), responsible for the safety of civil aviation, certifies pilots to fly based upon high professional standards including education, experience, physical fitness, health, mental health, and personal character. The cost of preparing pilots for the cockpit is very high, so when pilots are found to be problem drinkers or drug users, the airline corporations attempt to rehabilitate rather than simply terminate their employment. There is no question that firing substance abusing pilots would be more economical than indulging them in hugely expensive rehabilitation and addiction treatment services, nor can there be any doubt the purpose of safety would be better served by FAA by permanently revoking the medical certificates of pilots found to be drinking irresponsibly or using illicit drugs.

2. The 12-step program of Alcoholics Anonymous is the core of the addiction treatment industry, the standard to which all impaired professionals are held to retain their licenses. Physicians, pilots, ship captains, operators of heavy equipment including automobiles and trains, accountants, attorneys, and all other professions requiring the public trust are required to participate in AA/NA as a condition of remaining license. In other words, they must *actively affiliate* with AA/NA, adopt addict-identity (Hi, I'm Dr. Jones Imanalcoholic), and apply 12-step principles in all of their professional and personal affairs.

3. The 12-step program of AA, however, was created by and for substance abusers who refuse to summarily quit drinking/using. Very strangely, but understandably considering the source of the 12-step program, reserve the option, one-day-at-a-time, to resume self-intoxication, i.e., "have a relapse." The abstinent outcome of 12-step recovery is very, very low, around 5% at the 5 year mark. No research has found that AA/NA or any form of addiction treatment has produced a significantly higher abstinent outcome than independent recovery, and some compelling research shows that the outcomes of addiction treatment are considerably worse than allowing the natural consequences of addiction to take effect.

4. During 2008, the California Medical Board disbanded the physician's diversion program for the simple reason that the monitoring authorities are incapable of supervising their colleagues who are also *in recovery*, clean and sober, one-day-at-a-time. Yes, you read "also," meaning that the monitor committees are always in recovery themselves, for reasons which may become clear to you as you read on.

**Question:** Assuming that by chance the pilot for your next flight does have a history of problem drinking, would you rather that he never drink at all, or try to drink moderately, or try to stay sober, one-day-at-a-time, relying upon a higher power, and attending frequent meetings of AA/NA?

I realize that many readers find it distasteful to read criticism of AA due to powerful, cultural forces and taboos which surround serious dissent. For now, I will present just one common tactic used as part of 12-step addiction treatment, one which should be of serious interest to anyone who flies or cares about someone who flies in commercial airliners.

### **Relapse Hazing in the Airlines Industry**

Relapse hazing is widespread in the addiction treatment field, a practice based upon the explicit direction and instructions of Alcoholics Anonymous (AA) founder, Bill Wilson. In his revered field manual for “sponsors”, *Twelve Steps and Twelve Traditions* (p. 23), Mr. Wilson directs experienced members, “sponsors,” to advise resistant newcomers to consume alcohol so that they will “hit bottom.” The tactic is intended to teach resistant newcomers a lesson, so that when they return to the recovery group defeated by the consequences of the relapse, they will be more receptive to the spiritual 12-step program. In AA mythology, “bottom” is a built-in barrier against further self-destruction, when one’s thoughts suddenly become clear, illuminating new “spiritual” realities. Remember, now, that in AA everything is backwards, and that this is far from the truth. In down-to-earth reality, the desperation of hitting bottom actually causes one to *go over the edge*, into a state of extreme suggestibility and receptiveness to *anything, no matter how implausible*, which promises to reduce the agony. Any port in a storm. Any warm hand will do when all is lost.

Relapse hazing follows the general pattern of hazing, i.e., imposing a difficult or painful experience to initiate newcomers into the gang, syndicate, fraternity, or club, and to solidify one’s highest loyalty to mother group – higher than to family, certainly higher than to one’s profession. The intended purpose is to teach resistant newcomers a lesson, so that upon return to the recovery group defeated by the consequences of the relapse, they will be more receptive to the spiritual 12-step program. Those who perpetrate relapse hazing on resistant AA members know that their advice will likely suffer horrendous losses, emotional devastation, and even bring some of them to and beyond the brink of suicide.

To addicted people, any authorization for consuming alcohol, especially by any respected authority, is *irresistible*, and is practically always carried out. This is a time-honored tradition that really works, resulting in the ignominious return of many newcomers finally desperate enough to accept the implausible, counter-intuitive 12-step belief system. Below is the passage from *Twelve Steps and Twelve Traditions* in which Mr. “W” sweetly encourages sponsors to literally drug newcomers into submission, placing the rest of humanity at risk of mayhem in the process.

As you read, compare two viewpoints, (1) that addiction is a voluntary, pleasure-driven vice, and (2) that addiction is a chronic, progressive disease just like cancer, multiple sclerosis, or diabetes. Shift back and forth between these opposite views to get the feel of stepcraft:

*Step One: We admitted we were powerless over alcohol – that our lives had become unmanageable.*

Since Step One requires an admission that our lives have become unmanageable, how could people such as these take this Step?

It was obviously necessary to raise the bottom the rest of us had hit to the point where it would hit them. By going back in our own drinking histories, we could show that years before we realized it we were out of control, that our drinking even then was no mere habit, that it was indeed the beginning of a fatal progression. To the doubters we could say, "Perhaps you're not an alcoholic after all. Why don't you try some more controlled drinking, bearing in mind meanwhile what we have told you about alcoholism?" This attitude brought immediate and practical results. It was then discovered that when one alcoholic had planted in the mind of another the true nature of his malady, that person could never be the same again. Following every spree, he would say to himself, "Maybe those A.A.'s were right . . ." After a few such experiences, often years before the onset of extreme difficulties, he would return to us convinced. He had hit bottom as truly as any of us. John Barleycorn himself had become our best advocate.

Why all this insistence that every A.A. must hit bottom first? The answer is that few people will sincerely try to practice the A.A. program unless they have hit bottom. For practicing A.A.'s remaining eleven Steps means the adoption of attitudes and actions that almost no alcoholic who is still drinking can dream of taking. Who wishes to be rigorously honest and tolerant? Who wants to confess his faults to another and make restitution for harm done? Who cares anything about a Higher Power, let alone meditation and prayer? Who wants to sacrifice time and energy in trying to carry A.A.'s message to the next sufferer? No, the average alcoholic, self-centered in the extreme, doesn't care for this prospect—unless he has to do these things in order to stay alive himself.

Under the lash of alcoholism, we are driven to A.A., and there we discover the fatal nature of our situation. Then, and only then, do we become as open-minded to conviction and as willing to listen as the dying can be. We stand ready to do anything which will lift the merciless obsession from us. (*Twelve Steps and Twelve Traditions*, P. 23)

Of course, permanently discontinuing the use of alcohol/drugs would be the logical and ideal remedy for the agony of addiction, but addicted people are constitutionally incapable of thinking in such terms. People who are "in recovery" are obviously not recovered, but only tentatively sober, one-day-at-a-time, because of the pangs of deprivation felt by all sober addicts each time they contemplate permanent, unyielding abstinence. If you are in recovery, try it. Think right now, "I will never drink again," *and mean it*. Betcha can't. If you could, why would be in recovery? AA founder Bill W couldn't believe it and look what happened to him. He became an AA lifer, disowning his original family values in favor of the inverted perceptions, beliefs and values of

addiction which he set to sanctimonious prose which only another addict in recovery can appreciate.

It is from this little-known phenomenon, the emotional recoil associated with abstinence, that the idea of powerlessness stems, along with the blossoming concept of addictive disease and group recoveryism. All addicted people have this trait, *in spades*, yet no account of this is to be found in the mountain of literature on addiction treatment and recovery. The medical profession is *woefully* ignorant about the nature of addiction and recovery, starting with the recoil phenomenon, then to the self-serving, antifamily, disease concept of addiction, then to the surrogate family movement, then to the bizarre spectacles of addiction treatment such as seen on A&E's *Intervention*, and finally to the public health catastrophe resulting from the inmates running America's asylums. I am merely adding *relapse hazing* to an already burgeoning body of evidence better described as the American addiction tragedy.

### **Federal Alcoholics Anonymous (FAA)**

Please forgive my repeating that, in the United States, *all licensed professionals* found to be problem drinkers or using illicit drugs are required to attend 12-step meetings submit to 12-step indoctrination and indefinitely as a condition of retaining their professional licenses. This means that the doctors who supervise other doctors and pilots in recovery, whether they are in recovery or not, must endorse the 12-step program.

In other words, the Federal Aviation Administration is in the bag for Alcoholics Anonymous because the medical profession is in the bag for Alcoholics Anonymous. Physicians themselves have accepted the addiction-coddling attitudes of the 1960's drug revolution as the standard of care for the entire nation, squandering our national treasure and their own integrity, not to mention the millions of lives blighted by 12-step recovery. While the physician's office protocol for "inebriacy" was once moral exhortation stressing total abstinence, med students are now required to attend AA meetings, as though some evidence suggested that addiction is a medical problem in the first place.

Addiction is not a medical problem. Addiction causes medical problems, but no medical problem causes addiction. There are no medical treatments for non-medical problems. The FAA diversion and monitoring programs are an extreme iatrogenic menace to problem drinkers/users and to all passengers of commercial airlines.

In the context of original family values, this amounts to sanctimonious bullshit for the simple reason that adults have no need for daily moral preening. Moreover, there is only one moral issue for addicted people, which is the moral dimension of the one, vile act which is the prime mover in all of their personal affairs: the act of self-intoxication. However, 12-steppers quite literally believe the steps because to them, rigid adherence is a matter of life and death.

Medicine is at the top of our social pecking order, reaping rewards bestowed by the public trust. Medicine is no stranger to tyranny, however, as the Third Reich and the

Soviet Union amply demonstrated. In the same book containing the recipe for relapse hazing we find, “With one arm around the shoulder of religion and the other around the shoulder of medicine, we might change the world.” The recovery group movement has marched to become the surrogate family movement, which has achieved enormous political victories and power.

Right now, pilots, physicians, nurses, attorneys, and others who would live free or die are being relapse-hazed as part of forced participation in 12-step recovery. Many will destroy themselves and some will destroy others during their obligatory relapses. You can make a difference. You can set this blog in motion, to get it where you believe it is needed most. Relapse hazing must stop, but most of all, Alcoholics Anonymous needs to be banished from the corridors of public institutions forever, in keeping with the most basic concepts of civilization, human dignity, and compassion.

I am publishing this blog in an attempt to catch the attention of someone in a position of social responsibility who will require me to report this extraordinary public danger to the proper authorities, which I will gladly do. In fact, I am already attempting to draw this matter to the attention of the authorities, but encountering a degree of evasiveness, denial, and duplicity found only in bureaucracies. We should never underestimate the ability of government agencies to function in the public interest, or in accordance with their stated mission.

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## APPENDIX

### THE TWELVE STEPS OF AA

**Step 1: We admitted we were powerless over alcohol — that our lives had become unmanageable.**

**Step 2: We came to believe that a Power greater than ourselves could restore us to sanity.**

**Step 3: We made a decision to turn our will and our lives over to the care of God, as we understand him.**

**Step 4: We made a searching and fearless moral inventory of ourselves.**

**Step 5: We admitted to God, to ourselves and to another human being the exact nature of our wrongs.**

**Step 6: We were entirely ready to have God remove all these defects of character.**

**Step 7: We humbly asked Him to remove these shortcomings.**

**Step 8: We made a list of all the persons we had harmed, and became willing to make amends to them all.**

**Step 9: We made direct amends to such people wherever possible, except when to do so would injure them or others.**

**Step 10: We continued to take personal inventory and when we were wrong promptly admitted it.**

**Step 11: We sought through prayer and meditation to improve our conscious contact with God as we understand him, praying only for knowledge of his will and the power to carry that out.**

**Step 12: Having had a spiritual awakening as a result of these steps, we tried to carry this message to others, and to practice these principles in all our affairs.**