23 Seeking Professional Help

Probably every recovered alcoholic has needed and sought professional help of the sort AA does not provide. For instance, the first two AA members, its co-founders, needed and got help from physicians, hospitals, and clergymen.

Once we have started staying sober, a lot of our problems seem to disappear. But certain matters remain, or arise, which do require expert professional attention, such as that of an obstetrician, a chiropodist, a lawyer, a chest expert, a dentist, a dermatologist, or a psychological counselor of some kind.

Since AA does not furnish such services, we rely on the professional community for job-getting or vocational guidance, advice on domestic relations, counseling on psychiatric problems, and many other needs. AA does not give financial assistance, food, clothing, or shelter to problem drinkers. But there are good professional agencies and facilities particularly happy to help out an alcoholic who is sincerely trying to stay sober.

One's need for a helping hand is no sign of weakness and no cause for shame. "Pride" that prevents one's taking an encouraging boost from a professional helper is phony. It is nothing but vanity, and an obstacle to recovery. The more mature one becomes, the more willing one is to use the best possible advice and help.

Examining "case histories" of recovered alcoholics, we can see clearly that all of us have profited, at one time or another, from the specialized services of psychiatrists and other physicians, nurses, counselors, social workers, lawyers, clergymen, or other professional people. The basic AA. textbook, "Alcoholics Anonymous," specifically recommends (on page 74) seeking out such help. Fortunately, we have found no conflict between AA ideas and the good advice of a professional with expert understanding of alcoholism.

We do not deny that alcoholics have had many unfortunate experiences with some professional men and women. But nonalcoholics, since there are more of them, have had even more such experiences. The absolutely perfect doctor, pastor, or lawyer, who never makes a mistake, has not come along yet. And as long as there are sick people in the world, it is likely that title time will never come when no

errors are ever committed in dealing with illness.

In fairness, we have to confess that problem drinkers are not exactly the easiest people to help. We sometimes lie. We disobey instructions. And when we get well, we blame the doctor for not undoing sooner the damage we spent weeks, months, or years wreaking on ourselves. Not all of us paid our bills promptly. And, time after time, we did our best to sabotage good care and advice, to put the professional person "in the wrong." It was a cheap, false win, since in the end it was we who suffered the consequences.

Some of us are now aware that our behavior prevented our getting the good advice or care we really needed. One way of explaining our contrary conduct is to say that it was dictated by our illness. Alcohol is cunning and baffling. It can force anyone in its chains to behave in a self-destructive manner, against his or her own better judgment and true desires. We did not plan willfully to foul up our own health; our addiction to alcohol was simply protecting itself against any inroads by health agents.

If we now find ourselves sober but still trying to second-guess the really expert professionals, it can be taken as a warning signal. Is active alcoholism trying to sneak its way back into us?

In some instances, the conflicting opinions and recommendations of other recovering alcoholics can make it hard for a newcomer seeking good professional help. Just as nearly every person has a favorite antidote for a hangover or remedy for the common cold, so nearly everyone we know has favorite and unfavorite doctors.

Of course, it is wise to draw on the large bank of accumulated wisdom of alcoholics already well along in recovery. But what works for others isn't always necessarily what will work for you. Each of us has to accept final responsibility for his or her own action or inaction. It is up to each individual.

After you have examined the various possibilities, consulted with friends, and considered the pros and cons, the decision to get and use professional help is ultimately your own. To take or not to take disulfiram (Antabuse), to go into

psychotherapy, to go back to school or change jobs, to have an operation, to go on a diet, to quit smoking, to take or disregard your lawyer's advice about your taxes —these are all your own decisions. We respect your right to make them—and to change your mind when developments so warrant.

Naturally, not all medical, psychological, or other scientific experts see exactly eye-to-eye with us on everything in this booklet. That's perfectly okay. How could they? They have not had the personal, firsthand experience we have had with alcoholism, and very few of them see as many problem drinkers for as long as we do. Nor have we had the professional education and discipline which prepared them for their duties.

This is not to say that they are right and we are wrong, or vice versa. We and they have entirely different roles and responsibilities in helping problem drinkers.

May you have the same good fortune in these regards that so many of us have had. Hundreds of thousands of us are deeply grateful to the countless professional men and women who helped us, or tried to.