Ron Roizen, PhD

Ron Roizen began work in the alcohol social arena in the late 1960s when, as an architectural analyst, he toured alcoholism treatment facilities in five American cities in an NIMH survey team headed by Friedner Wittman. This study represented an early federal government effort to gain a better understanding of the breadth and diversity of facilities in the U.S. alcohol treatment domain. It preceded the creation of NIAAA on December 31, 1970, which agency assumed responsibility for alcohol related research thereafter. Not long after the NIMH study Ron began working with the Social Research Group (later, renamed the Alcohol Research Group) in Berkeley, upon hearing of an opening there via his then wife, Judy, who was a college friend of Robin Room's then wife, Elizabeth. At ARG, Ron worked with and learned the craft from Genevieve Knupfer, Don Cahalan, Walter Clark, Robin Room, and a legion of pre- and post-doctoral fellows who took advantage of the group's fellowship program. Now, in semi-retirement in northern Idaho, Ron writes grants part-time for Shoshone County. He lives in Wallace, Idaho with his wife Maggie and their dog, Meisty.

I began reading Ron in the late 1980s when I first became enthralled with the growing body of literature being written on alcoholism from a sociological perspective. Ron and I subsequently met and exchanged correspondence over the years—in part because of our shared interest in figures such as E.M. Jellinek, Mrs. Marty Mann, Dr. Harry Tiebout and other figures who laid the foundation for modern alcoholism treatment. I consider Ron’s dissertation, The American Discovery of Alcoholism: 1933-1939 (See the complete dissertation at http://www.roizen.com/ron/disshome.htm) to be the best single summary and analysis of what has been christened the “modern alcoholism movement.” Ron has courageously and competently analyzed such controversial issues as the research and debates surrounding controlled drinking and his insatiable curiosity sparked a series of papers on some intriguing mysteries within the history of alcohol science and the alcoholism movement. The following article is typical of such investigations and also illustrates Ron’s engaging style of writing. Ron is one of the people I can always count on to stretch my thinking.

Where did Mrs. Marty Mann learn alcoholism was a disease and why should It matter?¹

Ron Roizen²

Listen to tapes of her talks to Alcoholics Anonymous gatherings around the country and you may hear, as I did, how Mrs. Marty Mann sculpted out of her own life experience a new moral definition of the alcoholic for mid-20th-century America.


² Email: ron@roizen.com; smail: 117 Cedar St., Wallace, ID 83873
Mann (1904-980) was a superb speaker, who combined an air of complete frankness with an almost weary gratitude for her 1939 "discovery" that there existed something in the world called "alcoholism," that it was "an illness," and that she herself was "an alcoholic."

It was this thingness about alcoholism -- i.e., its solid tangibility as a concrete disease entity -- that seemed to give Mann the rock upon which she built not only her own recovery but the message of the movement she championed.

According to Mann's own account, the worsening course of her drinking in the mid-1930s as well as frightening occurrences of memory-erasing, post-drinking blackouts finally caused her to seek psychiatric help.

The treatment experience that followed was remarkable in that it comprised almost two years of inpatient care.³

According to Mann's account, after being declined by several psychiatrists she became the noted Dr. Foster Kennedy's⁴ patient in his Neurology Ward in Bellevue Hospital for seven months. Next, and soon thereafter, she became Dr. Harry M. Tiebout's patient for a still longer, 16-month stay at Blythewood Sanitarium in Greenwich, Connecticut.

It was at Blythewood in the Spring of 1939 that psychiatrist Tiebout handed Mann a manuscript copy of Alcoholics Anonymous -- the volume that would before long become the celebrated "Big Book" of the AA movement.

He invited her to read it.

Mann thereafter credited her "discovery" of alcoholism's disease character to this text.

Indeed, a consistent element in Mann's personal history talks was her contention that before reading the Big Book's MS she'd neither heard the term "alcoholism" nor been made aware of alcoholism's disease character.

But can this contention have been literally accurate?

³ Inconsistencies across Mann's accounts, however, cast doubt on what, precisely, her inpatient experience comprised and how long it lasted.

⁴ Mann frequently cited Dr. Tiebout by name in her talks, but she drew a veil of discretion across mention of the famous Dr. Kennedy by name, preferring to refer to him in vaguer terms such as "a well-known neurologist," etc. I know of only a single instance in the ten tapes I've heard in which she identifies Kennedy by name--and my guess is that this mention was in effect a slip of the tongue. I don't know why Mann would have treated the names of her two physicians so differently.
"Alcoholism" was by no means an uncommon term for problematic drinking in the 1930s and well before the Big Book's publication in 1939.

Moreover, a person with Mann's anxieties about drinking -- and especially one as hungry for information about her problem as she says she was -- might have encountered the term in more than a few places.

For example, lay and professional representatives of the "Emmanuel Movement" and the "Peabody Method" -- men such as Courteney Baylor, Francis T. Chambers, Jr., Dr. Samuel McComb, Richard R. Peabody, and Dr. Elwood Worcester -- identified alcoholism as the target of their therapeutic efforts.5

Even Charles H. Durfee, Jr., an alcoholism therapist who preferred the term "problem drinker" for his patients, noted in a 1936 paper that presenting patients who manifested neither inadequate personalities nor evidence of clear psychopathology had usually been labeled "alcoholics."6

Contemporary magazines also used the term. For example, Genevieve Parkhurst, writing in the July, 1938 issue of Harper's, titled her article "Drinking and Alcoholism." Parkhurst's text, moreover, quoted "an eminent physician who has made alcoholism his special study" to the effect that the phenomenon was not a vice but a disease--thus prevoicing Mann's famous theme.

Bellevue Hospital, where Mann was an inpatient, was well known as New York City's reception and repository center for "alcoholics." Internist Dr. Norman R. Jolliffe published a paper titled "The alcoholic admissions to Bellevue Hospital" in Science in 1936.7

"Alcoholism," the word, was by no means exotic or rare in 1930s America.

Of course it's always possible that Mann regarded herself as "mentally ill" rather than "alcoholic," thus distancing herself from the currency of the term in medical and popular literature.

5 A wonderful book on pre-AA alcoholism treatment in the 1930s remains to be written. Meantime, see: Katherine McCarthy, "Early Alcoholism Treatment: The Emmanuel Movement and Richard Peabody" (Journal of Studies on Alcohol 45:59-74, 1984).

6 See Charles H. Durfee, Jr., "Understanding the Drinker" (Mental Hygiene 20:11-29, 1936, p. 13).

Yet even that distancing possibility is reduced by an intriguing detail that crops up in (of all places!) the Big Book itself and from Mann's own hand!

The first edition of *Alcoholics Anonymous* contained only a single personal story by an alcoholic woman, titled "A Feminine Victory."

By the time the BB's second edition was in preparation, however, this chapter's author had returned to drinking.

Her chapter was replaced with another woman alcoholic's story, titled "Women Suffer Too." And this was Mann's story.

Mann began her chapter with an account of a deeply disturbing blackout experience.

She tells of suddenly finding herself wide awake in a living room "in the middle of an animated conversation" with a person whom she could not recall meeting.

Terror struck Mann as she tried to recall and reconnoiter her situation.

A drink might calm her anxiety, she thought, but instead she determined to leave the situation before she might "...let slip my abysmal ignorance of how I came to be here..."

It was six o'clock in the evening.

She recalled that she'd last checked her watch at one o'clock -- when she was drinking martinis in a 42nd Street restaurant with a friend.

In the intervening five hours, therefore, Mann had somehow ended up in the Brooklyn basement apartment of a total stranger.

It took two train changes and three-quarters of an hour, Mann related, to get back to Grand Central Station, where her adventure had started.

And now comes the intriguing detail mentioned above -- in a passage about the evening that followed:

That night I got very drunk, which was usual, but I remembered everything, which was very unusual. I remembered going though what my sister assured me was my nightly procedure of trying to find Willie Seabrook's name in the telephone book. I remembered my loud
resolution to find him and ask him to help me get into that "Asylum" he had written about. (Third Edition, p. 224)

[IV]

William Seabrook, author and journalist, wrote a first-hand account of his stay in a mental hospital in search of a cure for his own alcoholism.

His book, titled Asylum, was published in 1935 by Harcourt, Brace and Co. and sold very well.

Mann's BB story suggests, of course, that she was familiar with Seabrook's book -- even familiar enough with the treatment he received to have wished to enter the same establishment for her own troubled condition.

As it happens, Seabrook's account readily employed the terms "alcoholic" and "alcoholism." Hence--and if she read the book--Mann had indeed been exposed to these terms well before encountering them in the Big Book MS.

Seabrook's book also offered a remarkable argument for the legitimacy of his patienthood in a mental hospital as an alcoholic -- in effect, a case for alcoholism's disease character.

Seabrook's argument began with a description of his living circumstances as a patient:

There is something I had better try to explain at this point,--if the general picture is to make sense. I was an alcoholic, but was not now, or at any time thereafter, put with a group of other alcoholics. (pp. 45-46)

There were only a few "drunks" in residence, Seabrook says, "...a scattering of a half dozen, maybe among three hundred patients" (p. 46). The facility's approach to residential grouping called for an intermixing of patients with different diagnoses -- fourteen to a unit.

While our ailments were dissimilar...there was one respect in which we were all alike--one thing which differentiated us from people on the outside, made it expedient for us to be locked up. I soon had this figured out. (p. 47)

Seabrook did not reveal this singular commonality straightaway.
Instead, he narrated a series of cameo descriptions of his unit-mates -- each time, and regardless of each case's symptomatology or diagnosis, coming to the conclusion that the patient could not control his behavior in some particular regard.

This led, in turn, to Seabrook's discussion of his own alcoholism and how it also fit the cardinal criterion, applied previously to his unit-mates, of uncontrolled conduct.

So long as any man drinks when he wants to and stops when he wants to, he isn't a drunkard, no matter how much he drinks or how often he falls under the table. The British upper classes were constantly and consistently mildly stewed, from father to son, in Parliament and Pall Mall for nearly the whole of the eighteenth century. It isn't drinking that makes the drunkard. I had drunk for years, enthusiastically, and with pleasure, when I wanted to. Then something snapped in me, and I lost control. I began to have to have it when I didn't want it. I couldn't stop when I wanted to. Instead of being a pleasure any more, it was just too bad. I wasn't here because I drank a lot . . . or too much. I was here just like the rest, because I had lost control. (p. 53)

Seabrook's passage contains remarkable echoes of ideas that would not fully find expression in the new science of alcoholism until the publication of E.M. Jellinek's famous phased symptomatology in 1952.  

[V]

But what does it really matter whether Mann heard the term "alcoholism" and read a cogent argument for its disease character even before she commenced the long trail of neurologic and psychiatric treatment experience that at last brought her to AA's Big Book?

Why should we care whether Mann's readiness to accept the alcoholism-as-an-entity and alcoholism-as-a-disease ideas had been, say, primed by reading Seabrook's well known book?

Maybe Mann was too deeply befogged by her drinking when she read Seabrook's book to pay much attention to anything he wrote.

Obviously, we need to take care not to place too much significance on the "Seabrook detail."

---

It is at most, I believe, an intriguing hint.

But as a hint, it hints at some important aspects of the sociology of social movements -- aspects that merit more investigation.

Social movements shape and guard the stories of their histories as treasured rhetorical capital. Such stories, moreover, often embody discernable proselytizing features.

For instance, they may highlight a sharper break with past tradition than in fact was the case -- by way of emphasizing the newness and originality of the new movement's cause.

They may also frame their genesis ideas or inspirations in ways useful to current survival or growth preoccupations.

The Seabrook detail, in turn, invites our attention to how such processes may have been at work in shaping Marty Mann's account of her personal rescue.

It's a nontrivial question.

After all, Mann's personal story went far toward shaping a larger movement.

© 1998 Ron Roizen, reprinted here with permission of the author.

Note: Many other publications by Ron Roizen, including his other articles on Mann, Jellinek and Tiebout, can be found at  http://www.roizen.com/ron/index.htm