The impact of a social support process on alcoholics' communication patterns a collaborative inquiry.

Gerald S. Edmonds
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THE IMPACT OF A SOCIAL SUPPORT PROCESS ON ALCOHOLICS' COMMUNICATION PATTERNS: A COLLABORATIVE INQUIRY

by

Gerald S. Edmonds

A Thesis Submitted to the Faculty of Graduate Studies and Research through the Department of Communication Studies in partial fulfillment of its requirements for the Degree of Master of Arts at the University of Windsor

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ABSTRACT

The investigation examines the impact of a social support process on alcoholics' thought worlds. There are two general views of social support: one positive and one negative. From the positive perspective social support helps individuals overcome a problem while allowing them the opportunity to continue with their lives in a productive manner. From the negative perspective, social support groups persuade individuals to adopt the group's ideology while doing nothing to change the structural networks of those individuals.

The study uses the collaborative inquiry method which is an intensive qualitative methodology. In this type of research the people involved are not subjects, rather they are collaborators who have a say in how the project evolves. The design of the research is flexible and emerged as the study progresses. Three sets of interviews were conducted. The first set involved alcoholics who were beginning a treatment program. The second set consisted of those alcoholics, from the first set, who successfully completed the program (exemplars). The third interview set involved those alcoholics, from the first set, who exited the program before their treatment time was finished (non-exemplars). The data collected from the interviews was coded and analyzed to produce a pool of common themes for each of the interview sets.

The investigation found that the thought worlds are significantly different for those individuals who successfully graduated from the program. For the alcoholics who exited the treatment program there is little or no change in their thought worlds. The difference in the thought worlds resulted from the change in communication patterns the treated alcoholics learn. The support group also did not have a negative effect on the supportive networks of the individuals who graduated from the program.
ACKNOWLEDGEMENTS

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CHAPTER ONE
INTRODUCTION

INTRODUCTION

I have studied communication in its various forms for six years at Canadian universities. In that time, I have learned about communication policy, communication theory, propaganda and persuasion, organizational communication and small group theory. One area that I have not been instructed in, to any large degree, is the role of communication in helping or aiding people to live better and richer lives. This thesis is about communication and how it can be used to help people overcome problems in their lives. This study will examine the effect of social support on the communication patterns of alcoholics and how communication helps these individuals overcome a life threatening condition. The study is not solely restricted to alcoholics. In effect, it is through their suffering, pain, hopes, fears, defeats and triumphs that information about supportive communication is made possible. Each of us can use this knowledge and insight to enrich our own lives and relationships.

In communication research, often, we are more concerned with the effects that the media have on people and what people are watching, but we have not been concerned with ways in which people can help other people communicate better so they can lead more productive and healthier lives.

BACKGROUND

Everyday the significance and role of social support groups is becoming more and more important as increasingly larger numbers of Canadians seek
such groups to solve various problems. Support groups allow people the opportunity to solve and understand their problems with the aid and support of peers who either have the same problem or who have had the same problem. In Canada, there are support groups which deal with such problems as terminal disease, divorce, separation, domestic violence and substance abuse. There are no indications that the need or demand for social support is on the decline. On the contrary, the enrollment in support groups is rising. This study tries to gain a deeper understanding of the social support process from the perspective of the people involved in a social support group.

The project uses the interpretive research method to examine the impact of social support groups on alcoholics' supportive communication networks as well as the cognitive frameworks of individuals who successfully complete the treatment program. Social support agencies could use similar studies to identify and better understand individuals who successfully make use of their programs.

Much of the research that has been undertaken on social support groups has been from the perspective of social work, sociology and psychology. The importance of communication as a central element of the support process has only recently been highlighted and examined. Approaching the study of social support from a communication perspective provides a unique vantage point from which to examine a process which helps people to overcome difficulties in life and to provide people with the knowledge that they do not have to deal with their problems alone.

Individuals use interpersonal communication to anchor themselves to their environment by gathering information that helps them reduce uncertainty about their lives. Individuals also use interpersonal communication to establish and maintain ties to family, friends, acquaintances, co-workers and other
people who are important to them. The environment and the relationships that individuals construct determines their sense of self-worth and self-esteem. Without socially constructed bonds, individuals find themselves alone and alienated.

Alcoholism destroys the bonds people have to each other and to their environment. Alcoholics find their ties deteriorate to a point that they are unable to cope to a degree that their lives and existence are threatened. When alcoholics enter a support group, they gain knowledge that helps them recover by reducing uncertainty, and at the same time realize that they are not alone. That is the essence of supportive communication.

SUMMARY

The phenomenon of social support is complex and involves people who have sought out support for a number of reasons. These people are emotionally damaged. The phenomena of social support is best understood from their perspective as they heal and try to continue with their lives. The method used allows for flexibility in dealing with these people by helping them to better understand what is happening to them and simultaneously providing new insights into an important social phenomenon.
CHAPTER TWO
NEW PARADIGM RESEARCH

INTRODUCTION

This chapter gives some general background on new paradigm research as well as specific information on collaborative inquiry. The first half of the chapter contrasts new paradigm research with logical positivism. The second part of the chapter discusses the stages involved in a collaborative study.

NATURALISTIC INQUIRY

Background

This section highlights some of the differences between a naturalistic and a positivist research method. This study employs a naturalistic inquiry or a qualitative approach to research; specifically the collaborative inquiry method, described by Dr. Thomas Carney in *Interpretivism: A methodology*. Lincoln and Guba (1987) in *Naturalistic Inquiry* outline five axioms which distinguish this approach.

The first axiom concerns the nature of reality and people's relationship to that reality. From a positivist perspective, a single concrete reality exists. This reality can be broken down into independent variables and processes. Each of these factors can be studied independently. The goal is to predict and control reality. From a naturalistic perspective, reality is viewed as multiple constructed phenomena which can be studied holistically. This type of research ultimately raises more questions than it answers and hence prediction and control are unlikely outcomes (Lincoln & Guba 1987:37).
CHAPTER TWO

The second axiom concerns the relationship of the knower to the known. From the positivist viewpoint, the knower and the known are independent of each other. In a naturalistic study, the researcher and the people or material to be researched interact and influence each other (Lincoln & Guba 1987:37). As a result, the researcher's reflexivity (that is his tendency to be influenced) has to be monitored.

The third axiom deals with the possibility of generalizations. The aim of a positivist inquiry is to develop a set of generalizations that are "truth statements free both of time and context (they will hold anywhere and at any time.)" (Lincoln & Guba 1987:37). The goal of a naturalistic inquiry is to construct a set of hypotheses which describe the individual research project (phenomenon recognition check- to reconstruct the reality constructed interactively by persons situated in a given context).

The fourth axiom deals with the "possibility of causal linkages." In a positivist inquiry, action can be "explained as the result (effect) of a real cause that precedes the effects temporarily (or is at least simultaneous with it)" (Lincoln & Guba 1987:37). In a naturalistic inquiry, all phenomena are interconnected and mutually influenced so that it is impossible to distinguish causes from effects.

The fifth and final axiom examines the position of values in an inquiry. In a positivist research study, the inquiry is value free so that an objective methodology and approach is employed. A naturalistic inquiry is value bound by the choice of what is to be studied, how it is to be studied, by the choice of theory to guide the study, and by the specific researcher (Lincoln & Guba 1987:37).
There are four more areas of contrast to consider, namely, truth value, applicability, consistency and neutrality. Both positivist and naturalistic studies include these factors, though dealing with them differently (Figure 2.1).

**Truth Value**

In a positivist study, truth value concerns the internal validity of a study. Internal validity “relates to the purposes the researcher has for measurement” (Anderson 1987:119). Internal validity results when the measurements the researcher is using perform as predicted.

In naturalistic inquiry, truth value manifests itself in credibility which includes multiple operationism, pattern matching and explanation building. Multiple operationism entails running more than one triangulation method on another sample (or samples). Pattern matching involves the synthesis of data into a format, for example, a matrix, in which patterns in the information become evident. Explanation building involves adding explanations piece by piece as new data is progressively gathered. For example, in this study, I started with a propositional inventory to which new information was added from the interviews, matrixes and triangulation, all of which culminated in a shift in the propositional inventory.

**Applicability**

In a positivist study, applicability refers to external validity which is the ability to apply or generalize the findings of a specific test to other actions, settings and individuals. For example, if researchers were doing a study on the reactions of 1,000 teenage males to pornographic material, they then could use the findings from their controlled test to try and predicate how all teenage males react to pornography.
<table>
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(Carney 1987:78)
A naturalistic inquiry is concerned about the transferability of a particular study to the work of other researchers who are doing similar studies on similar populations. Because of the small sample involved in a naturalistic study, you cannot generalize on the basis of one study alone. In a naturalistic inquiry, researchers can use their findings to test a theory but not attempt to predict how another sample will react under different conditions.

Consistency

A positivist researcher approaches consistency by questioning the reliability of a study: Does the measurement device employed generate the identical response when the same thing is measured more than once? Each time a study is duplicated other researchers are looking for consistent results. For example, when Sir Issac Newton explained his theory of universal gravitation and the reaction of falling bodies, other researchers checked the reliability of Newton's theory for consistency (so much so that it became a law).

In a naturalistic inquiry, researchers are concerned with the dependability of their findings. Dependability is established by leaving an audit trail which allows another researcher to replicate the study with the same people (or a similar sample) and to achieve the same results. The audit trail is created by keeping a record of research completed in a reflexivity journal and is used for confirmability. It acts like a paper trial in accounting. The reflexivity journal enables the auditor to check that all the data are present as described, the analytical and synthesizing techniques described were performed on the data and performing these techniques does indeed give the results claimed. The reflexivity journal consists of three parts, the log, journal and diary. The log is used to record additions to the study and to indicate where they were added. The journal provides a brief explanation of the material and
what was done. The diary is used by researchers to record their insights and reflections on the data and the project as a whole. (The audit trail and reflexivity will be discussed in more detail in the section on collaborative inquiry: Initiating the Study).

Neutrality

Positivistic researchers approach a study believing that they will remain objective in their analysis of the data. In a positivist project, researchers are assumed not to influence the project or situation in any way. The results of the study are believed not to have been affected by any of the researcher's perceptions, attitudes or biases. It is taken for granted that the researcher has been objective in his evaluation.

In naturalistic inquiry, biases affecting the research are considered from the outset of the study. This approach assumes that there is no way that a researcher cannot affect a study or be affected by it. Because of this, a naturalistic researcher is concerned with the confirmability of the project. Confirmability is created by conducting triangulatory cross checks. Each of these instruments can be used by another researcher to check or confirm the researcher's operations and findings (Carney 1987:78A).

- Emergent Design

This is an investigatory approach, not proof/disproof of a pre-established hypothesis. As the project continues, new information will become evident. New areas that the researcher wishes to investigate more closely will lead the project in new directions. This is called emergent design. This is why it is difficult at the outset of the project to develop triangulation methods. The emerging design of the project could take the project in a direction that was not
anticipated by the researcher. The emergent design also sheds new light on the initial propositions. Because of the emerging design, Chapter Seven will highlight bibliographic information that was added as the study progressed.

Reduction of Thick description

After the interviews have been conducted, the researcher has to listen to the tapes of the interview and make notes on what was said. After completing twenty interviews, a thick description of each individual’s situation is generated (Geertz 1973:6-7). When a researcher finishes collecting information essentially what he or she has done is to generate a “thick description” of the situation or phenomena. The researcher will have, for each interview conducted, a tape of that interview, notes made during the interview, a coding scheme for analyzing the interview and a list of the interviewee’s main points. This information is incorporated with all the interviews to draw common main themes from the data. These main themes are then used to reconstruct each collaborator’s reality and set it out in an economical display format. This process is called data reduction and display.

Feedback

Feedback plays a significant role in a collaborative inquiry. Feedback comes from two sources, the peer debriefers and the collaborators. The peer debriefers check the researcher’s coding schemes and reality reconstructions. They also serve as advisers about the researcher’s ideas and thoughts. The collaborators have a direct say in how the researcher interprets their statements. After the interviews, the researcher allows the collaborators to go over the main points of the interview to change or add any other important information.
Ethical Code

The basic ethical tenet of this research approach is that good research means never having to say you are sorry (Carney 1987). There are no tricks, deceit or manipulation of the respondents in any way. Researchers have to consider the consequences of their research and the impact that research will have on all the persons involved. The collaborators are involved in the project from the beginning of the project. They are told the project's goals, the researcher's motives and the method of the study.

THE COLLABORATIVE METHOD

Background

This research project employs the collaborative inquiry method which has been developed under the general heading of interpretivist methodology. This research method has been outlined by Dr. Tom Carney in Interpretivism: A methodology.¹ The following points are summarized from his book (Figure 2.2).

The collaborative method views the participants of the study as collaborators, not as subjects. These collaborators are seen to have more experiential knowledge, if less theoretical and analytical knowledge, about what is being studied than the researcher does. They have a say in how their input is evaluated and are also responsible for evaluating their researcher and his findings.

¹ I had the opportunity to study this method under Dr. Carney at the University of Windsor in a graduate methodology course.
FIGURE 2.2 Steps in the Collaborative Inquiry Method

*Used With Permission from Dr. Thomas Caimey*
INITIATING THE STUDY

Propositional Inventory

The propositional inventory starts with the question that is to be studied, in this case: what are the characteristics of people that allow them to successfully use a formal social support group? This section also lists the basic assumptions of the study as well as the theoretical basis of the study. The propositional inventory contains my initial review of the literature as well as my thoughts and hypotheses on the subject.

Interviewing Methodology

The next stage is defining the interview sample and interview protocol. The collaborators for this study are from the social support agency of Brentwood which is located in Windsor, Ontario. Permission was granted and the project was begun in May 1988. Two conditions were to be followed and in no way have affected this project. The first condition involved outlining the project to the Head Psychologist at Brentwood and the second condition involved picking the sample of respondents at the beginning of their treatment program (which the researcher was going to do anyway). The initial sample size included twenty people. Ideally, twelve people are needed to conduct this study (six exemplars and six non-exemplars) (Carney 1987).

Brentwood states that their success rate is about 65%. In order that twelve people would be involved with the project from start to finish twenty people were asked to participate. This would allow enough leeway for people

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2 For a list of the propositions see Chapter Three: The Propositions
3 For a complete description of Brentwood see Chapter Three: The Brentwood Recovery Home.
to withdraw from the study for various reasons without dramatically jeopardizing the results.

The collaborative inquiry uses non-directive interviewing as the basis for gathering data. This inquiry is specifically designed to result in “significant personal learning for the researcher and the collaborators. As well, the researcher is responsible to society and to the collaborators for the project’s end product” (Carney, 1987:19). The differences between this approach and questionnaire driven research are outlined in Figure 2.3.

In non-directive research, researchers direct their research subjects. It’s a top down process. The researcher decides on the questions and the categories for the responses. In non-directive interviewing, the researcher interviews upwards. The research assumes that the people who are interviewed understand better and know more about what is happening to them than he or she does.

Questionnaire driven research sets out to test a number of predetermined hypotheses. In non-directive interview research, the design of the project develops as the study progresses. There is a generic research design plan, but the precise nature and combination of techniques used depends on the types of cross-checks which prove to be necessary. Researchers participating in the project assume that their study is objectively constructed. In a non-directive interviewing study, it is assumed that the research is subjective in nature and involves symbolic interactionism. This means that the collaborators, not the interviewer, give meaning and context to what is being discussed.

A summative evaluation comes at the end of a questionnaire research project. The situation and measurements are discussed as their validity and
### FIGURE 2.3

**DIFFERENCES BETWEEN QUESTIONNAIRE-DRIVEN AND NON-DIRECTIVE INTERVIEW-DRIVEN RESEARCH**

<table>
<thead>
<tr>
<th><strong>QUESTIONNAIRE-DRIVEN</strong></th>
<th><strong>NON-DIRECTIVE INTERVIEWING</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Top down: researcher decides content on questions</td>
<td>1. Bottom-up: collaborators shape and direction</td>
</tr>
<tr>
<td>2. Difficult to get cooperation from professionals</td>
<td>2. Possible to 'interview upwards'</td>
</tr>
<tr>
<td>3. Perceptive: predetermined hypotheses tested</td>
<td>3. Receptive/integrative; collaborator interaction means emergent design</td>
</tr>
<tr>
<td>4. Single method probes used: unobtrusive measures difficult to use</td>
<td>4. Multiple methods and triangulation used; unobtrusive measures prized</td>
</tr>
<tr>
<td>5. Investigator's objectivity and non-reflexivity presumed operating</td>
<td>5. Reflexivity a central issue: symbolic interactionism assumed to be</td>
</tr>
<tr>
<td>6. Summative evaluation only</td>
<td>6. Pre-formative, formative, responsive and summative evaluation</td>
</tr>
</tbody>
</table>

(Carney 1987)
reliability is tested by other researchers. In non-directive interviewing, however, pre-formative, formative, responsive and summative evaluations are conducted: evaluations of different kinds occur throughout the duration of the project. The conclusions gradually emerge as the study progresses. They indicate areas that were of interest to the researcher and to the collaborators.

Audit Trail

The audit trail is used by researchers to give credibility to a project by enabling other researchers to audit the project in detail. The audit consists of the reflexivity journal as well as peer debriefing sessions.

Reflexivity

Using the collaborative inquiry method means that the respondents cannot be kept from influencing the researcher. The researcher is biased in his/her thinking because he/she chose the subject to be studied as well as the method. Because of these factors, the researcher's 'reflexivity' (that is the researcher's tendency to be influenced by the persons researched) has to be monitored. This is done by the collaborators as well as the researcher's peer debriefers. The evaluation of the project goes on continually. This means that the project is shaped and molded because many people are involved hence different perspectives are used and the criticism of the project comes early enough that it can be used (Carney 1987:21).

Researchers monitor their own reflexivity by keeping a reflexivity journal. The reflexivity journal consists of a log, journal and diary (Appendix A). The log is used to record additions to the project and where they were added. The journal is used to record why additions were made and where the
information came from. The diary is used by researchers to record their thoughts and feelings on the progress of a study.

Peer Debriefing

The above means that checks on reflexivity must occur throughout the project. This includes allowing for biases from the researcher that will affect the collaborators as well as the collaborators affecting the researcher. The interviews and the researcher's interpretations of the interview tapes are given to a peer debriefer and the collaborators so they can check and assess the results. The researcher can learn from the collaborators and from the peer debriefers. The research frame of reference and picture of what is going on is enhanced from these sessions.

The peer debriefer for this study, Donna Hennessy, was a graduate student in communication studies at the University of Windsor. She had taken Dr. Carney's graduate methodology course on interpretivism and she had served as his teaching assistant for an undergraduate course on interpretivism. In the graduate methods course she completed a project on social support and battered women. Because of these factors I felt she was an appropriate peer debriefer.

ANALYSIS OF THE INTERVIEWS: STAGE ONE

Matrix Analysis

After all the interviews are concluded and the main points from the interviews are checked by the peer debriefer and by the collaborators, it is necessary for the researcher to find common themes that arise in more than one of the interviews. One effective method is a technique that uses matrices.
This method allows for the synthesis of a large amount of data into a format which enables patterns or trends to be easily be seen. The interview numbers are listed along the X axis and the interview themes are listed along the Y axis. The themes from the interviews, which are derived from the coding schemes, are assigned a corresponding numerical value (from 0 to 4) which reflects the amount of importance that the collaborator gave that theme. The matrix allows for the quick identification of the most important themes by looking for points raised by all the exemplars and none of the non-exemplars, then for the reverse, and then comparing the two.

ANALYSIS OF INTERVIEWS: STAGE TWO

Triangulation

After this has been done, it is necessary to triangulate the inquiries. This entails running cross-checks on the data which means using multiple operationism, but there is no “telling at the outset which [instrument] the situation will allow you to use” (Carney 1987:4). The term and concept comes from surveying and from military thinking. Triangulation involves using several reference points to establish the position of another point. An example from World War Two serves as a useful illustration:

During World War II, three stations, two on the North America eastern seaboard and the third in south-east England monitored the Atlantic for radio signals emanating from U-boats. These [boats] had to surface to send radio signals and sent them in distinct bursts of code lasting only a couple of minutes. As a U-boat sent the message it provided a fix on its position: the point where the three scanning beams intersected/triangulated. (Carney 1989: 2)
Thus the purpose of triangulation is to help the researcher define his understanding of the data he has collected (Carney 1989:2). This means that a researcher uses other instruments, based on his original data, to compare his findings with information generated from another population.

Some examples of triangulation techniques include card-sorting, questionnaires, unobtrusive measures, and interviews with significant others. In card-sorting the data generated from the interviews are put on individual cards and are given to a sample of people who are like (or unlike) the respondents so they can place the cards in order of importance to them. This technique allows the researcher to identify any blind spots or biases in the informants' responses. In questionnaires, the interview data is arranged into a questionnaire format and given to a sample of people who are like or unlike the respondents. This technique allows the researcher to check on the collaborators' statements. A third type of triangulation involves unobtrusive measures. There are two categories. The first includes the standard types of literary analysis and involves both content analysis and discourse analysis. These techniques are used to analyze already generated data. The second type of unobtrusive measures are non-reactive. This type does not cause the data or the people to be changed. Using this type of unobtrusive measure includes such things as investigating physical evidence. For example, if we were looking at computer users, we would look at the person's computer and accessories. A fourth type of triangulation consists of interviews with people significant to the collaborators. This will help the researcher to assess the collaborator's pictures of reality by providing information about the respondents' reality and behavior which the respondents may have been unaware of but which their significant others are aware of.
ANALYSIS OF THE INTERVIEWS: STAGE THREE

Phenomenon Recognition Check

The next aspect of the collaborative method involves reconstructing the respondents' reality and cross-checking the reconstruction. At this stage, there should be enough cross-comparable data to be able to construct the 'deep structure' of the collaborators' views on the topic. These structures are the principles or trends that underlie the findings. The peer debriefers also do a reconstruction using another set of data. The researcher and the peer debriefer then get together and make a third reconstruction. The three reconstructions are given to the collaborators to allow them to pick the one that best fits their reality with any alterations necessary.

The final aspect of this method is the report writing. Reports are written for the authorities (in this case, the thesis committee), the collaborators, and any other interested third parties who should be informed of the findings.

SUMMARY

The collaborative inquiry method is an intensive qualitative methodology which examines social phenomena from the perspective of collaborators. The collaborators are interviewed using non-directive interviewing techniques which produce the initial data. The data is then coded. Once the data has been coded matrices are used to highlight the most important themes. The information is then triangulated. Then deep structures of the collaborators are reconstructed. Researchers begin a collaborative inquiry by setting out their initial feelings and ideas in a propositional inventory which the next chapter will outline.
CHAPTER THREE
PROPOSITIONAL INVENTORY

INTRODUCTION

This chapter provides the initial explanatory framework on which the study was begun. In this type of research new data emerged as the study progressed. Because of this, new information that was uncovered as the study progressed is examined in Chapter Seven.

The first part of the chapter lists a series of definitions that are relevant to the study. In the second section of the chapter, two opposing views of support groups, one positive and one negative, are given. The latter part of the chapter deals with interpersonal communication and the theoretical perspective of the study. The chapter concludes with a list of propositions.

DEFINITIONS

Alcoholics: The term alcoholics is us to describe an individual who is suffering from alcoholism.

Alcoholism 1: At Brentwood alcoholism is a disease of mind, body and spirit which affects millions of people. Alcoholism is also a term many people attribute to skid row bums, but alcoholism is indiscriminate in who it attacks. Individuals who are suffering from alcoholism frequently need help to overcome it. At Brentwood alcohol comprises 10% of alcoholism and the spiritual and cognitive aspect make up the remaining 90%.

Alcoholism 2: I view alcoholism as a condition that destroys families and groups and kills and injures. That is sufficient enough reason to pursue an investigation into the thought world of the alcoholic.
Brentwood: Refers to the Brentwood Recovery Home, in Windsor, Ontario. Brentwood was founded by Father Paul Charbonneau. Brentwood is the largest treatment in Canada with a 214 bed capacity. For more information see Chapter Three: The Brentwood Recovery Home.

Collaborators: Refers to the people who were asked to participate in the study. The collaborators are further divided into exemplars and non-exemplars.

Communication: A process of interaction in which meaning is exchanged between individuals and/or institutions and can take place on an interpersonal, group, organizational or mass level. Supportive communication is a process that shapes supportive interactions by generating meaning that can help reduce life stress. Offering sympathy is not considered supportive communication because sympathy does nothing to constructively help a person adjust to a difficult situation.

Denial: Alcoholics refuse to recognize that they have a problem with alcohol. Denial is a psychological defense technique alcoholics use to hide from themselves how much they drink, how often they drink and how dependent they have become on alcohol (Denzin 1987:90).

Exemplars: A collaborator who has successfully used the support group. In this case they have graduated form Brentwood.

Father Paul Charbonneau: The founder and director of Brentwood. He gave permission for the study to take place. He is commonly just referred to as Father Paul.

Networks: A series of relational patterns which individuals maintain between themselves and such people as family members, close friends, neighbors, acquaintances, associates and co-workers. A healthy network has approximately 25 strong or primary ties and numerous secondary weaker ties. An individual with less ties is said to have a fortress network and is danger of succumbing to life stress.
Non-exemplars: A collaborator who did not complete the Brentwood program and withdrew before their ninety days had expired.

One-on-one's: One-on-one's are a daily activity at Brentwood. An alcoholic seeks out another alcoholic to have a conversation with. The pair can either go for a walk or sit and discuss different subjects, i.e., their spouses.

Provider: An organization or individual who provides social support to an individual or group.
(sender)

Recipient: An individual or group who receive social support from some source.
(receiver)

Social Support: Refers to "...verbal and nonverbal communication between recipients and providers that reduces uncertainty about a situation, the self, the other, or the relationship, and functions to enhance a perception of personal control in one's life experience" (Albrecht and Adelman 1987:19). Social support groups are formal groups whose purpose is to provide support to individuals seeking it, for example, Alcoholics Anonymous. The social support process refers to the interaction of the seeker of support and the provider in a specific context that has a beginning and end.

Social Support
(Self-help)
Group "Self-help groups are voluntary, small group structures for mutual aid and the accomplishment of a special purpose. They are usually formed by peers who have come together for mutual assistance in satisfying a common need, overcoming a common handicap or life-disrupting problem, and bringing about desired social and/or personal change" (Katz and Bender 1976:34).
BACKGROUND

When I first entered the field of communication, there were a wide range of subject areas to explore. There were many interesting sub-fields to this diverse discipline but one area that attracted me particularly was the study of organizations and small groups. Upon entering graduate school at the University of Windsor in the Master of Arts program, this interest had become my focus for study. When the time came to select an area for a thesis, the choices again were endless. However, I knew that I wanted to work in the area of small groups. After meeting with individuals who were interested in organizational and group communication, the area of social support started to draw my attention. Communication scholars were only becoming aware of the importance of communication in the functioning of the support process. I discovered that indeed this was becoming an important area not just for communication scholars but also for society as well.

Many times in communication studies we are concerned with the effects the media is having on the audience or various matters of policy. I wanted to explore an area which had the possibility to utilize communication in a helpful and positive manner. I felt the exploring the area of supportive communication and social support would allow me an opportunity to explore this new area of communication research.

After the preliminary review of some of the literature, it became evident that there have been a number of studies on social support from the perspective of psychology, sociology, and social work but there have been a few, if any, studies done from the perspective of communication. Moreover, it was evident that while much research had been done on actual support groups, little research had been done on how these groups were affecting the people who
were participating in them. If communication was the central element, how were the participants' communication patterns and behaviour being changed by the social support process?

SOCIAL SUPPORT

Introduction

Increasingly, people are taking responsibility for their own health and well-being. This is reflected in the number of people exercising and watching the kinds and amount of food they eat. With the rising costs of medical attention and social services, the need for personal health is drawing people to seek social support groups in an attempt to solve complex problems they cannot solve on their own (Naisbitt 1982). It has been known since the beginning of this century that few individuals are able to lead healthy lives without the existence of close personal ties and people who can be relied upon in times of stress (Brownell & Shumaker 1984).

It appears that as we move towards an individualistic society in which people are separated from their immediate family by geographical distance, and as it becomes increasingly difficult to establish meaningful relationships in society, individuals will seek out social support groups in increasingly large numbers.

In the workplace social support can play a larger role as employers and organizations fight to keep loyal and productive employees. This trend will continue as the work force shrinks due to the declining birth rate. In order to keep employees happy and content, organizations will have to help their employees deal with stress and its effects. One way to do this is through the use of social support groups. For example, as offices become more and more
computerized, workers have to learn how to use computers. One way to help employees deal with problems is to establish support groups, in which employees can help each other help themselves.

One use of social support groups which has met with a great deal of success is the treatment of alcoholism. Alcoholics Anonymous helped to pave the way for many of the support groups that exist today and the success of this program has been an inspiration to many. This study chose to study social support groups from the perspective of alcoholics because a large and very successful support agency is located in Windsor. This agency, Brentwood, also provided a natural setting in which to conduct the research project. Brentwood was chosen because its members undergo an intensive residency program where the changes are said to be significant.

Social Support in General

Social support does not lie dormant waiting to be activated by stress but is part of a person's communication network and part of a person's daily interactions (Bruhn & Phillips 1984). A person can seek out a formal support agency when his or her own support network is not able to handle a crisis such as alcoholism. For example, if your spouse were suffering from alcoholism, it would be difficult for other members of your extended family who have not dealt with this problem to offer the kind of support that is needed. In this case, the person who has to deal with a stressful situation would seek out a formal support group organized to help people deal with loved ones who are suffering from alcoholism. The need for social support changes as an individual and his situation changes (Bruhn & Phillips 1984). The function of social support is to reduce uncertainty about a particular life situation or problem by providing
meaningful information (Mitchell et al. 1982; Brownell & Shumaker 1984; Albrecht & Adelman 1987).

Social support is a process that takes place on an individual level and usually has a provider (sender) and a recipient (receiver) of social support (Albrecht & Adelman 1987). Social support, like communication, can take place on an interpersonal, group, or organization level. Three fundamental factors have been identified in the development of social support. First, "engaging in supportive interactions is a search for human contact and at the same time a search for meaning to interpret or make sense of one's circumstances of life events" (Albrecht & Adelman 1987:19). Second, successful supportive interactions occur when there is an exchange of meaning that reduces uncertainty about oneself or a particular life situation. Third, the giving and receiving of support is a "reciprocal process occurring in socially constructed networks of both strong (or primary) ties to family and friends and weak ties to acquaintances, friends of friends, co-workers and general others in the community" (Albrecht & Adelman 1987:1).

Social support has both negative and positive effects. Positive effects include solving the original problem so the receiver of support can continue his or her life in a productive manner. Negative effects of social support occur when the receiver uses the social support group as a crutch and cannot let go of the group to continue his or her life (Bruhn & Phillips 1984; Albrecht & Adelman 1987; Jurick 1987). One dependency, for example, alcoholism, is replaced by another, i.e., dependency on the support group. But some scholars would argue that a person who does not let go of a social support group is no different than a kidney patient who has to return to the hospital for dialysis treatments. Just as kidney patients are dependent on the dialysis machine, alcoholics are dependent on the support group for their well-being.
A Positive Model of Support Groups

A support group affects its members in a number of ways\(^1\). Support groups facilitate changes that affect the self, group communication skills, and attitudes to the problem faced (Albrecht and Adelman 1987). Within the self a role transition occurs. There is a re-organization of the cognitive framework regarding the problem. In addition there is also a emotional transformation. These two factors are a result of an improved self-concept and realistic worldview (Naiper and Gershenfeld 1985).

The support group has an effect on group communication skills. The group unconditionally accepts individuals. For many of them, it is the first time this has happened. Individuals feel that they belong to the group. The group allows individuals to express and discuss feelings in a safe supportive environment (Albrecht and Adelman 1987).

The group affects a change in individuals’ attitudes to their problem. The group provides a a great deal of knowledge and history about the problem faced. Longtime members of the group share their coping strategies and skills with newcomers. Individuals learn to accept themselves and to interpret and respond to new situations instead of just reacting. With this comes the ability to recognize situations they can control and ones they cannot control (Albrecht and Adelman 1987).

A Negative Model of Support Groups

Jurick in her article “Persuasion in a Self-Help Group: Process and Consequences,” suggests that members of a support group undergo a conversion process. During this process individuals adopt the group’s ideology

\(^{1}\) The changes occur gradually. The sequence that is outlined is to give the reader an overview and is not meant to imply that it is a simple sequential process.
to solve their own problems. Jurick describes the conversion as primarily a persuasion process. Persuasion implies that individuals are adopting the group's ideology without being aware of the fact or that individuals are adopting the ideology against their will.

While the acceptance of the group's ideology may:

...facilitate the "recovery" of the individual, it simultaneously reinforces an understanding of mental problems as caused by individual inadequacies. The social structural context of such individual's problem is then largely ignored. (Jurick 1987: 368)

In other words while the group helps its members to recover internally, the group is doing nothing to help solve the external causes of an individual's problems. The group's ideology discourages individuals from trying to "change the behaviour of other individuals or the structural conditions that also contribute to the tensions that they experience in their lives" (Jurick 1987: 391).

From Jurick's viewpoint support groups exact a price for solving individuals' problems: persuasion to adopt the group's ideology while at the same time doing nothing to change the external networks of individuals.

The Brentwood Recovery Home

The Brentwood Recovery home for alcoholics was established in 1974 by Father Paul Charbonneau. By 1988, Brentwood had become the largest residential resource facility in Canada with a 214 bed capacity. Approximately 1,600 people are served and treated on an annual basis at Brentwood. Brentwood views alcoholism as a disease in which alcohol or other forms of substance abuse account for 10% of the problem of what society calls alcoholism; the remaining 90% is a result of alcoholic thinking. Alcoholic
thinking distorts alcoholics' perceptions and understanding of people and situations. The term alcoholic does not simply apply to a person who has a drinking problem but also to people who have substance abuse problems. Father Charbonneau also believes that there are alcoholics who have never taken a drink in their lives. Alcohol is not the problem, rather, alcoholic thinking is the problem. Brentwood's record of achievement speaks for itself. Since Brentwood's inception, over 5,000 people have been helped through the program, mostly by the recovering alcoholics who have devoted their lives to helping others in return for their own sobriety.

A typical day at Brentwood consists of a series of structured activities. The individuals enrolled in the program start their days between 6:00 a.m. and 6:30 a.m. They are required to attend breakfast, whether or not they want to eat. From 8:00 a.m. to 9:20 a.m. individuals find a partner and begin “one-on-one's.” “One on one's” give the people in the program the opportunity to find someone to talk to on an individual basis. The pairs walk around a parking lot or find a quiet area to sit and talk. The purpose of “one-on-one's” is for individuals to learn from people who have had similar experiences. At 9:30 a.m., all residents are required to attend group meetings. There are approximately 25-30 people in a group (all members of a group are of the same sex). The groups are led by alumni of Brentwood. The group discusses aspects of alcoholism and the way that it affects relationships and the alcoholic's life.

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2 Brentwood has facilities for men and women but the women's program is much smaller. There are approximately 190-200 men and 30-50 women enrolled at any one time. Windsor residents may stay in their own homes for the evening but they must return to Brentwood at 7:00 a.m. and stay the day to take part in the activities.
At 10:30 a.m. the groups break and a common lecture for all the people in the program is given by Father Paul. Father Paul talks about various components of alcoholism and its effects. The talk continues to between 11:30 a.m. and 12:00 noon. A mandatory lunch is given from 12:00 noon to 1:00 p.m. From 1:00 p.m. to 2:30 p.m. the groups meet again. At 2:30 Father Paul sometimes gives a second talk. From 3:30 p.m. onward is “free time.” People in the program can use that time to reflect, exercise, go to the store, or relax. Occasionally there are structured activities in the evening. From 7:00 p.m. to 10:00 p.m., the alumni gather for fellowship meetings. These meetings help recovering alcoholics maintain the ties between themselves and Brentwood.

At Brentwood the dangers of people entering the program and dropping out are realized. It is better not to enter the program than to drop out after coming, because after dropping out individuals know what they are doing is wrong and self-destructive. The alcohol (or other substance) no longer provides an escape.

Alcoholism

Alcoholism is difficult to define, and it is not my intention in this thesis to do so. There are hundreds of differing opinions and theories, many conflicting, of whether alcoholism is a disease, a personality weakness, or a chemical imbalance. Some people even suggest that you do not have to drink to be an alcoholic. Regardless of which opinion may or may not be correct, I take the position that alcoholism is a serious condition that destroys families and groups and kills and injures. That is sufficient enough reason to pursue an investigation into the thought world of the alcoholic.

Alcoholism affects three aspects of a person; their mind, body and spirit (Watts 1986:10). Alcoholism affects alcoholics’ minds by warping their
perceptions and attitudes toward people, situations and time. Alcoholism affects the body by destroying the muscles, the liver, the central nervous system, memory and a wide range of other body parts (Estes and Heinemann 1986). Spiritually, alcoholism destroys individuals' will to live, hopes and dreams. Untreated, alcoholism eventually kills a person.

At Brentwood alcoholism is considered a disease that affects a person's mind, body and spirit. Problems with these three factors comprise 90% of what alcoholism is. The remaining 10% is a result of substance abuse. At Brentwood, people can be alcoholics regardless of whether they drink or not, or whether they are addicted to alcohol, drugs, work, sex or whatever. The substance abuse problem is the effect rather than the cause of alcoholism.

Brentwood helps alcoholics to recover from their condition by treating the mind, body and spirit. Through group meetings, one-on-one's, and self-inventories (of feelings), the mind is helped to heal. Through exercise and nutrition the body heals. Through the healing of the mind and body, the spirit is healed.

COMMUNICATION AND SOCIAL SUPPORT

Because this is a relatively new area of study, the theoretical framework of social support and communication is in its infancy. Yet it is possible to highlight the theoretical framework that shapes this research project. Much of the research on social support groups has been atheoretical (Brownell & Shumaker 1984). The basis of the theoretical framework that will be employed is that social support is fundamentally a communication process:

The communication of help is a symbolic activity embedded in personal relationships. Conceiving of social support from a communication perspective
casts it as a transactional, symbolic process of mutual influence occurring between two or more individuals that alters their affective, cognitive, or behavioral states. . . This interaction occurs within a network structure of relationships that affects how the specific helping relationships operate, the ways helpers and recipients are linked together over time, and the extent to which individuals have access to pathways of help through contacts. (Albrecht & Adelman 1987:20)

Communication is a dynamic process of interchange. Communication takes place on a wide range of levels from the interpersonal to the mass (Littlejohn 1983). In a group setting communication operates at an interpersonal level as well as on a group level. When a message is sent from the sender to the receiver, the meaning of the message is not only in the words of the sender but also in his tone of voice and his actions. But more importantly, the meaning of the message also resides in the receiver of that message. The receiver uses the sender's body language and style of delivery, as well, his own perceptions and experiences to judge, interpret and respond to the initial message.

In a communication exchange between two people, “noise” can hinder the reception and proper understanding of a message. The term “noise” derives from physical models of information transmission, but has been extended metaphorically in the social sciences to human communication models. Noise can be physical in nature, for example, static on a telephone line. Noise can also be semantic in nature, for example, individuals misunderstand a message based on different interpretations of words or actions. Noise can also be psychological in nature, for example, the condition of alcoholism which impairs understanding.
Humans use communication to develop bonds with each other as well as to their environment. The primary function of communication is to provide a link between people and the environment, both the physical environment and the emotional environment. In other words, the individual uses communication to construct cultural, social and psychological ties to the world that is outside of the self (Littlejohn 1983:162). But alcoholics are out of touch with themselves, reality and the world. They can no longer make the link to the environment. Alcoholics do not fit comfortably into their social/ cultural surroundings. As a result, they have a difficult task of establishing and maintaining relationships. Relationships are the core of interpersonal communication:

The essence of interpersonal communication is relationship. Relationships are established and maintained by interpersonal communication, and inversely, communication patterns between people are shaped largely by the nature of their relationships (Littlejohn 1983:164).

But alcoholics are unable to maintain these ties and as a result of other problems such as their low self esteem they compound their problems by excessive drinking. Such drinking further weakens their ties to people and to the environment. Social support groups provide a bridge that allows alcoholics to reestablish this link: "Through communication, then, we relate the self to the environment. We do this largely to adapt to or fit comfortably into . . . [our] social/ cultural surroundings" (Littlejohn 1983:163).

The distinctiveness of the communication perspective is that it makes it possible to define supportive communications as "a dynamic interaction involving persons who mutually influence one another's attitudes, beliefs, emotions and/or behavior" (Albrecht & Adelman 1987:22).
Theoretical Perspective

The theoretical foundation that will be guiding me is symbolic interactionism (Wilson 1983). The basis of this perspective is the importance of symbols in the understanding of social interaction. The social world is shaped by the unique ability of human beings to use symbols and to attach meaning to those symbols. Social interaction is a natural ongoing process that has no beginning or end; it is continuous. The meaning of our acts emerges from the process of interaction. A person's intentions determine the meaning the object will have. For example, if I use a hammer to hammer with, then it is a tool. However, if I throw it at someone in anger, it becomes a weapon.

When a researcher is looking at a situation, it is more important to know what people think is going on than to know what is "really" going on. From the standpoint of social support groups, it is important to understand the process of social support from the perspective of the collaborators. They are the people who are having the experience of the social support process and they are the ones who are changing as a result of the social support group. How people define their situation is important. From this perspective, the functioning of society is not a natural occurrence but the functioning of the interpreter's mind.

PROPOSITIONAL INVENTORY

Propositions

It is relevant to highlight some of the propositions that arose from the initial review of the literature. While this list is not exhaustive, it serves to illustrate some of the areas of concern or interest to me. The following list
changed and reformed as the study progressed and as new information that was
"hidden" came to light.

1. Social support is fundamentally a group process and as such it is
subject to the same conditions or development that other groups
undergo concerning history, bonding and cohesiveness.

2. There are positive and negative aspects to social support. The
positive aspects include helping the person overcome his/her
original problem but the negative aspects occur when one
dependency is replaced with another.

3. The alcoholics who are taking part in this study are looking for
something, in addition to help, which cannot be pinpointed at this
time.

4. The communication process plays a central role in the social
support process and acts as the link between the sender and
receiver of support.

5. Social support and the demand for social support will not be
decreasing in the next few years; rather, the demand will be
increasing and will become more and more important to people
and society.

6. People who are in a formal social support program are there of
their own free will.

7. If people are in a support program then they want to help
themselves.

8. The changes that alcoholics undergo as they go through the
support program should be significant.

9. From a communication perspective alcoholism can be seen as a
form of psychological noise which interferes with the
transmission and reception of messages.
10. Interpersonal communication provides a link between alcoholics and their environment. However in the alcoholic's case, interpersonal communication is hampered. This leads to damaged relationships, isolation, and negativity.

SUMMARY

This chapter provided the initial explanatory framework with which I began. Two opposing perspectives of social support were given, one positive in which support groups help people, and one negative in which individuals are conditioned by the group. The two views of support groups are compared against the data to see which of the two views better represents the support process at Brentwood.

The Brentwood Recovery Home was described and their view of alcoholism was given. The chapter ended with a discussion of communication and a list of ten propositions.

The next chapter details the first stage of the data collection and primary data analysis. The interview process is described and the matrix analysis that followed. The chapter concludes with a list of themes that arose from the interviews.
CHAPTER FOUR
ANALYSIS STAGE ONE

INTRODUCTION

Chapter four explains the initial data collection procedure, specifically, the interviews and their coding. The coding provides the material on which the collaborators' 'deep structures' of reality are built. The themes for each of the respective interview sets are also given.

INTERVIEW SET ONE: INITIATING THE STUDY

How the Interviewees were chosen

The study was begun by approaching a person involved on a professional level with Brentwood, and detailing the goals and the nature of the project. He felt that it was an interesting project and approached Father Paul Charbonneau, the founder and director of Brentwood, about the possibility of the study taking place. Father Paul agreed on two conditions: first, that the resident psychologist approve and oversee the project and secondly, that the participants of the study be chosen at the beginning of their program so as to minimize the amount of disruption to their schedule. Enrollment at Brentwood is on a continuous basis and anywhere from one to four people are admitted into the program on any given day. The entry method of the recovery program provided a natural selection process. People who entered the program on a given day, within a three week period, were approached and asked if they would be willing to participate in a research project for a Masters' thesis from the University of Windsor and a research project for the Brentwood recovery home.
All the collaborators who were asked to participate were alcoholics who had enrolled for a ninety-day program. It was decided at the outset of the project that only people entering Brentwood on a ninety-day program would be included in the study. The ninety-day program is the maximum time period offered by Brentwood and is the most intensive submersion into the social support process. Twenty people were approached to participate. Ideally, six people who graduated from the program and six people who left the program were needed on which to conduct the study. Brentwood suggests that their success rate is about 65%. In order to be sure that twelve collaborators would be left in the program for the purposes of this study, the success rate was set at 50%. In other words, of the twenty people in the study, it was hypothesized that approximately ten people would stay in the program and ten people would leave the program. This would allow enough leeway for people withdrawing from the research project, so that six exemplars and six non-exemplars would remain.

There was to be an initial set of interviews with the twenty individuals who were beginning their treatment program (Interview Set One). At the end of the ninety days, the remaining collaborators (exemplars) who completed the program were interviewed (Interview Set Two). I was informed if any of the twenty left the program before the ninety days had elapsed. I then made contact with these collaborators (non-exemplars) and interviewed them a second time (Interview Set Three) (Figure 4.1).

Who the Interviewees were

The interviewees were all male alcoholics who were enrolled in a ninety-day treatment program. They ranged in age from their early twenties to their early sixties (mean=36.6). Each had entered the program to receive help deal
FIGURE 4.1 Interview Sets

DAY 1

Interview Set One

TIME

Interview Set Two

D A Y  9 0

Exemplars

Non-Exemplars

Interview Set Three
with dependency on either alcohol or drugs or a combination of the two. All the participants were from Southern Ontario (from Windsor, northeast to Wallaceburg and east to Toronto). Some of the participants were married, were separated, divorced or single. They had differing degrees of education ranging from grade school to university education. Economic status varied from welfare recipients to wealthy professionals. All had entered the program on their own although they had entered for a variety of reasons: some had entered because their wives had left them, some had entered because of physical sickness due to alcohol, others had entered as a way of breaking the cycle of alcohol and crime, and still others had entered because they did not like the direction in which their lives were going. At this stage, it did not appear that there were any common denominators for these people except for some form of substance dependency. (For biographical data see Figures 4.2 to 4.6).

How the Interviews were conducted

The interviews, which were tape recorded, were conducted using non-directive interviewing methods, i.e., asking non-leading open-ended questions. In this type of interview the interviewer attempts not to lead, that is, not to guide the interview and the interviewee toward a desired goal. In a non-directive interview the interviewer lets the interview develop naturally. The interviewees are allowed to discuss information or events that they feel were important. For example, the first question asked, "When you think about alcoholism what thoughts come to mind?" (as opposed to "When you think about alcoholism, do negative thoughts come to mind?). The non-directive interviewing method allows the collaborators the leeway to discuss any aspect of alcoholism that they feel is important or significant to them. The second
FIGURE 4.2
History of Addiction In Your Family

FIGURE 4.3
Who Decided You Should Seek Help
FIGURE 4.6
Collaborators' Marital Status

Marital Status

Separated
Single
Divorced
Married

# of Collaborators

0 1 2 3 4 5 6 7 8 9 10 11
question asked "When you think about the future what thoughts come to mind?" This question was asked to probe the collaborators' thoughts and feelings about the future and how they pictured their future. The third question asked "How did alcoholism affect your life three years ago/ two years ago/ one year ago?" The third question allowed the collaborators the opportunity to speak on the past three years of their lives and how alcoholism affected their lives during this period. The fourth question asked, "Was there any event that particularly influenced you in regards to seeking help?" This question probed the collaborators' reasons for coming to the treatment facility. The fifth question asked, "What advice would you give to someone who was about to become an alcoholic?" The sixth question asked the collaborators to lead the researcher through a typical day or week of how they spent their time. The last question asked, "Is there any other information you have not already discussed?"

The tape recordings of the interviews are listened to and the discourse is written out in long hand on a piece of paper. It is then necessary to indicate the themes in the interviews. This is done by using content analysis (Diagram 4.7). The coding scheme is used to highlight the main points in the interview. For example, if Interview #21 talked about how he did not get along with his family and he did not want to spend time with them, then that would be coded as alienation from the people he was close to. After the interview had been coded in this manner, the points under that theme were added up and a numerical value was assigned to it. For example, if the collaborator talked about fear five times, then fear was recorded with a score of five. When all the points had been added up it became possible to show which of the points were the main ones. For example, a point that had a score of ten would be ranked higher than a
FIGURE 4.7 INTERVIEW SET ONE AND THREE CODING SCHEME
(Adapted from Anne Schaef & Diane Fassel, The Addictive Organization by Dr. Thomas Carney)
point that scored a three. When the points were ranked, they then were typed in rank order with the most important point at the top of the page.

After all the interviews had been done, a peer debriefer checked over the coded material and ordering of the points as well as the coding scheme. Any discrepancies that arose were discussed and a compromise reached or a re-evaluation of the coding scheme or instrument in question was undertaken. The points were then given back to the respondents so they could comment on the points.

Qualitative Instruments

In addition to answering the questions in the interview, the collaborators were asked to fill out a short questionnaire, a pie chart of time usage, and a network diagram of relational patterns. The questionnaire was used to gather the biographical data as well as the collaborators' permanent addresses and telephone numbers for future reference. In addition to the questionnaire, the collaborators were presented with a circle to indicate their time usage:

![Circle Diagram]

The collaborators were then asked to divide the circle into pie slices of how they spent their time before they came to Brentwood. For example, if Wayne Gretzky was asked to divide up a circle into pie slices of how he spent his time playing hockey, he might do it in the following manner:
This instrument was used in each of the three interview sets.

The network analysis diagrams were used to gain insights into the relational patterns of the individuals. The respondents were asked to write the initials of the person who best represented that circle to them. If the person was a wife, brother, girlfriend, sister, mother, or father (any family member) the collaborators were asked to write that name in. For example, in the model circle, if it were a person like Wayne Gretzky, they were to write his name in full. The collaborators were also told that if they could not think of anyone or there was no one to place in a particular circle, it could be left blank.

The network analysis diagrams are constructed around seven circles which are placed around a circle in the middle which represents the individual filling in the diagram. The seven outer circles represent: models, close friends, challengers, referral agents, competence, foul-weather friends and referent group. For a complete description see Figure 4.8. The network diagram was filled in by each collaborator in Interview Set One, Set Two and Set Three.

**Respondent Checks**

The respondents were given the chance to comment on the researcher's interpretation of their main points. This was done to highlight or uncover any hidden points I might have missed. The respondents were free to add to any point and they were allowed to add any other points that were missing that they
FIGURE 4.8 Network Diagram

Please read the descriptions beside each of the seven circles. Then in each circle write the initials of the people or person who represents that circle to you. For example in Models I might write the initials W.G. (Wayne Gretzky) as a model.

**MODELS**
Models are people you either know or do not know but they are someone you look up to, for example a sport's hero.

**REFERENT GROUP**
The Referent Group is the group of people you most closely identify with. For example friends, family, etc.

**CLOSE FRIENDS**
Close friends are just that, your closest friends.

**FOUL-WEATHER FRIENDS**
Foul-Weather friends are friends who you can count on when you need them the most for example in an emergency or when things are not going well for you.

**ME**

**CHALLENGERS**
Challengers are people who challenge the way or what you think about. You do not necessarily have to like that person.

**COMPETENCE**
Competence refers to people who believe in you and your abilities.

**REFERRAL AGENTS**
Referral Agents are people who have the resources to help you in some way. For example someone you could go to, to help you find a job.
felt were important. After they had done this they then ranked the points in order of importance by placing a "1" beside their most important point and so on until all the points had a number beside them.

**INTERVIEW SET TWO: EXEMPLARS**

Of the twenty people who started the program and were in the treatment program, fifteen completed the program, three left the program before the ninety days had elapsed and two withdrew from the study.

At the end of the ninety days, I returned to Brentwood to conduct a second interview with the fifteen collaborators who had finished the program. The same questions were asked as in the first set of interviews except the question "Was there any event that particularly influenced you into staying in the program?" was added.

After the interviews had been tape recorded and written out in long hand, it was again time to code the data into categories. After an initial analysis, it became evident that the coding scheme that was used for the first interviews was no longer relevant in coding the second set of interviews. Thus, a new coding scheme was needed that contained elements that were opposite to the kind of topics that the collaborators spoke of in the first interview (Figure 4.9). As in the first set of interviews, the main points were arrived at by examining the numerical values of the coded data. From this, each of the collaborators' main points for their second interview was arrived at. The main points then were critiqued by a peer debriefer.
FIGURE 4.9 Interview Set Two Coding Scheme
(Adapted from Anne Schaef & Diane Fassel, The Addictive Organization, by Dr. Thomas Carney)
Chapter Four

Respondent Checks

The respondents were again given the chance to comment on my interpretation of the points that they raised in the interview. However, this time, because the collaborators were no longer in one location but had returned to their home and communities, a letter was sent to them which explained what they were to do, a list of their main points and a self-addressed envelope (to me) so they could mail their information back to me (fifteen letters were sent out in total). From this procedure, eight letters were received back from the collaborators who still were interested in participating in the study. (One of the problems faced by researchers using this type of research is that individuals are not committed to staying with a study and they are free to withdraw at any time. No pressure is exerted on the individuals to try and coerce them into staying in the study).

Interview Set Three: Non-exemplars

After the first set of interviews were conducted, the collaborators were allowed to continue with the treatment program. Arrangements were made with the Brentwood Recovery Home to contact me if any of the original twenty left the program before their ninety days were finished. Of the original twenty, a total of three left the program before they had finished. Arrangements were made immediately and these three individuals were contacted. A second interview was arranged with them. The questions for this interview were the same as for the first interview except for the question "Was there any event that particularly influenced you in regards to leaving the program?" was added.

After these interviews were coded, (using the same coding scheme as the first set of interviews) attempts were made to re-contact these three
individuals so they could respond to the main points I had extracted from the second interview with them. Unfortunately, the individuals either responded in a negative manner to my inquiries or contact had been lost (i.e. they had moved with no forwarding address or telephone number). It was decided that using an in depth peer critique of these interviews would be satisfactory. I recognized that having no collaborator response would limit the use of the findings from the non-exemplars.

SYNTHESIS AND ANALYSIS

Because of the large amount of data that had been generated by the three sets of interviews, (Interview Set One exemplars and non-exemplars together, Interview Set Two exemplars, and Interview Set Three non-exemplars) a method or technique for organizing and synthesizing the data had to be utilized. One such method is matrix analysis. The matrix format makes it easy to manipulate the data and to portray the data in a manner that is conducive to pattern matching.

MAKING SENSE OUT OF THE DATA

Matrix Analysis: Interview Set One

Analysis

The matrix system allows the themes, from the interviews, to be entered into a matrix and a corresponding numerical value added to them to indicate the amount and intensity of discourse concerning that theme. The themes used for the subject categories were the same themes used to derive the main points
from the interviews. These points were arranged along the Y axis with the interview number along the X axis.

Each of the interviews was reviewed carefully and the points were categorized using Dr. Carney's scheme. In this method a full and lengthy discussion on a topic received a rating of a 4. A somewhat detailed discussion received a score of 3, some discussion received a 2, a simple mention received a 1, and no discussion received a 0. It was decided a subject was discussed in detail by examining the number of mentions in the interview. The subject that received the most attention and hence was categorized as the collaborator's main point received a 4. When the main points were given to the collaborators they were asked to rank order the points in the order that they felt was most important to them. If my main point and the collaborator's main point were different, both received a 4. The reason behind this was that collaborators were often not aware that they were dwelling on a point or that they were raising a point over and over again. Many times the point that the researcher designated as number one was in fact the collaborator's main point.

The matrices were originally clumped together under the main theme area but the matrix system allows the data to be moved around and compared in different ways (e.g., numerical order, most important to least important, major theme area). Seven major theme areas were chosen. Five of these theme areas were based on a coding scheme that was modified by Dr. Thomas Carney from the work of Ann Schaef & Diane Fassel (Figure 4.7). The last two major themes were added to the coding scheme to accommodate commonalities that began to emerge in the interviews. The seven major theme areas are: denial, dishonesty, ethical deterioration, self-centredness, compulsion to control, realization of a problem and escapism (the last two my additions). Under each
of these main themes were grouped a number of minor themes that were built on the major concepts.

Denial deals with refusing to recognize that one has a problem with alcohol and pretending that everything was as it should be. Denial also concerns deviousness in getting a drink and tricking people into believing that one does not have a problem. Denial also includes the alcoholic's confusion about personal identity, defensiveness towards attempts to persuade the alcoholic that he or she has a problem and needs help, and forgetfulness about times, places and names. Alcoholics use denial primarily to hide their problem from themselves. Denial acts as a psychological defense technique alcoholics use to hide from themselves how much they drink, how often they drink and how dependent they have become on alcohol (Denzin 1987:90).

The second major theme area deals with dishonesty both within the individual and with other people. This includes disinformation and "nice lies." Disinformation is used to deceive spouses, family and friends about the alcoholic's whereabouts and doings. For example, the collaborator might stop after work for a few beers but tell his family that he had to work late. "Nice lies" were mainly lies the individual tells himself, for example, "I am not an alcoholic because I only drink beer," though he was drinking fifteen to twenty beers a day. A second minor theme under dishonesty is lack of trust, closely related to the third minor theme, inability to self-disclose. The collaborators on the whole did not trust anybody and as a result, hid their true feelings from the people closest to them. The final minor theme in this category is the feeling of not belonging to any group including family and friends. Because they were dishonest with themselves, they could not maintain the ties that normal people maintain with family and friends. The collaborators felt that they were different from the people around them.
The third major theme area deals with ethical deterioration, that is the loss of the individual’s sense of what is right and how to maintain meaningful relationships. It includes shame, fear of being caught, paranoia (thinking that everybody is one's enemy) and spiritual bankruptcy, i.e., not believing in oneself or in any higher cause or principle, i.e., God.

The fourth major theme deals with self-centredness, the belief that everything in the world relates to the individual. In regards to their families this means that everything should be done to accommodate the alcoholic. Spouses and children are there to serve them. Another minor theme is the belief that there are no accidents in the world. Everything that goes wrong is the result of somebody trying to harm the collaborators or cause them problems. Self-centredness also causes alcoholics to make cold hearted decisions about situations or other people with little regard for the consequences to themselves or the people they affect, for example, "picking-up" another woman for the evening with little regard for how that action would affect or hurt their spouses. Self-centredness also leads to rapid mood swings which are heightened by the effects of alcohol or drugs. Typically, the families do not know how to deal with this.

The fifth major theme area deals with the collaborators' compulsion to control situations. This category contains such themes as negativism about themselves and their situations, for example, “nothing good ever happens to me.” This theme area also covered low tolerance for cognitive dissonance, perfectionism, and inflexibility in dealing with new situations or people. All these factors contribute to the collaborators’ sense of frustration. These types of situations caused anxiety and despair.

I added the sixth category to Dr. Carney's coding scheme. This theme deals with the realization by the collaborators that they have a problem which
they cannot deal with on their own anymore, and that they needed help to deal with it. This realization is a major contributing factor in seeking help.

The seventh major theme deals with escapism from people and their problems by turning to alcohol or drugs. This theme includes using drugs or alcohol to alleviate stress and to resolve issues, problems, people and situations.

It was these themes that composed the categories on which the initial matrix was composed. A matrix was composed for the statements that occurred during the first interview. Along the top of the matrix were listed the individuals who were still in the study, both non-exemplars and exemplars, because at this time it was impossible to distinguish the two from each other. The interviews were then examined and a numerical weight was assigned to the themes for each of the collaborators. (Only the themes that included a score higher than zero were kept in the final matrix see Figure 4.10)

Themes in Interviews Set One

After some initial analysis of the themes, some common elements began to emerge from the data. This meant that a larger percentage of the collaborators were spending more time talking about one point rather than another point. The total numerical score for each theme came from summing the scores from all the collaborators. It also became evident that some themes received little attention while others received a great deal of attention.

Findings

Seventeen minor themes emerged from the initial matrix analysis. These themes were listed in descending rank order with the most important theme first:
### CHAPTER FOUR

**FIGURE 4. 10 Interview Set One Themes**

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<th>THEMES</th>
<th>30</th>
<th>22</th>
<th>37</th>
<th>29</th>
<th>18</th>
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<th>32</th>
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<th>34</th>
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<td>4</td>
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<td>2</td>
<td>2</td>
<td>3</td>
<td>22</td>
<td>18</td>
<td>18</td>
<td>18</td>
<td>24</td>
</tr>
<tr>
<td>Everything seen relating to self</td>
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<td>2</td>
<td>1</td>
<td>4</td>
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<td>3</td>
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<td>Disinformation/Nice lies</td>
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<td>4</td>
<td>4</td>
<td>4</td>
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<td>12</td>
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</table>

### Interview Set One Themes

- Negativism: 3
- Quick Fix: 3
- Perfectionism: 3
- Lack of trust: 6
- External: 6
- Rapid Mood: 6
- Spiritual: 6
- Confusion: 7
- Fear: 7
- Shame: 7
- Denial: 7
- Deviousness: 8
- Disinformation: 10
- Escapism: 12
- Alienation: 17
- Everything: 18
- Realization: 24

**Intensity of Mentions**

![Intensity of Mentions Diagram](image-url)
1. Realization that they had a problem which they could not deal with on their own.
2. Everything seen relating to themselves
3. Progressive alienation
4. Escapism
5. Disinformation/Nice Lies
6. Deviousness
7. Denial (this was specifically mentioned often enough to make it a minor theme)
8. Shame
9. Fear
10. Confusion
11. Spiritual Bankruptcy
12. Rapid Mood Changes
13. External Self-Validation
14. Lack of trust
15. Perfectionism
16. Quick Fix
17. Negativism
Matrix Analysis: Interview Set Two Exemplars

Analysis

The second matrix was built around the six major theme areas that were used in the second coding scheme, while I added the seventh major theme of identity groups. The seven major themes for the coding scheme are: openness, honesty, principled behaviour, care for people in their lives, unconditional love; positive self-concept, and identity groups. Under each of the major themes were grouped a number of minor themes.

Openness contains such topics as living an examined life, admitting one has a problem, accepting of one's flaws, working on personal growth one day at a time, and sharing with others. This theme area deals mainly with opening up to other people and attempting to start communicating with them.

The second major theme, honesty, is constructed around the following minor themes: directness in communicating, not indulging in impression management in dealing with other people, trust in others, and skills in self-disclosure. The theme of honesty deals with being genuine with oneself as well as with other people.

The third major theme, principled behaviour, includes things such as cheerfulness, spiritual needs, conflicts openly faced, causing one's own fortunes, closeness to a large network, and small group skills. Principled behaviour focused on a re-examination of the collaborators' moods and their methods of dealing with other people and situations, as well as acceptance of the damage they were causing to themselves.

The fourth major theme, care for people in their lives, examines such things as weighing the consequences of one's actions for other people, an
awareness of the image and attitude one projects to other people, and an awareness of one's own feelings.\textsuperscript{5}

The fifth theme, unconditional love, contains such minor themes as a tolerance for differences in others, thoughtfulness in responses, patient work towards solutions for problems, and work towards effectiveness in life as opposed to perfectionism. This theme area deals with the ways the collaborators in their insensitivity harmed or hurt other people they loved.

The sixth theme, positive self-concept, includes self-validation, use of criticism, and the ability to try out new roles in new situations. This theme also includes the ability to function in new situations without causing stress to oneself.

The last major theme, identity groups, refers to the collaborators' realization that they were not alone in dealing with their problem. There were people who were just like them and who had the same problems that they had.

Themes in the Interviews: Set Two

Again, after an initial analysis, the themes which received the most attention received the greatest numerical scores as a result of the "0 to 4" weight assigned to them. As before, some of the minor themes received a total score of zero and were not included by the collaborators in their discussions (Figure 4.11).

Findings

From the matrix analysis twelve minor themes emerged:

1. Not alone with problem
2. Awareness of own projections
FIGURE 4.11 Interview Set Two Themes

<table>
<thead>
<tr>
<th>THEMES</th>
<th>29</th>
<th>18</th>
<th>25</th>
<th>21</th>
<th>32</th>
<th>36</th>
<th>34</th>
<th>26</th>
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<tr>
<td>Not alone with problem</td>
<td>4</td>
<td>4</td>
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<td>4</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>31</td>
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<td>Awareness of own projections</td>
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<td>4</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>3</td>
<td>19</td>
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<td></td>
<td></td>
<td></td>
<td>4</td>
<td>4</td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>Patient work towards solutions</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Working on one's growth, one day at a time</td>
<td>3</td>
<td>3</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Spiritual needs</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>7</td>
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<td>Small group skills</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>Acceptance of own flaws</td>
<td></td>
<td>4</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>Skills in self-disclosure &amp; listening</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Sharing with others</td>
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<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Tolerance of differences in others</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>I cause my own fortunes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

Interview Set Two

Themes
- I cause
- Tolerance
- Sharing
- Self-disc.
- Acceptance
- Small group
- Spiritual
- One day
- Patient work
- Aware/Feeling
- Aware/Proj.
- Not alone

Intensity of mentions
3. Aware of own feelings
4. Patient work towards solutions
5. Working on own growth one day at a time
6. Spiritual needs
7. Small group skills
8. Skills in self disclosure
9. Acceptance of flaws
10. Sharing with others
11. Tolerance of differences in others
12. Cause own fortunes

Matrix Analysis: Third Interview Set Non-Exemplars

Analysis

Once again, the matrix system was used to analyze the non-exemplars' second interview. These were the individuals who left the program before it reached its logical conclusion. In total, three people left the program before their treatment time was concluded. I assumed that these individuals' perceptions and attitudes would not have changed significantly. Because of this, I used the first coding scheme to base the matrix analysis on.

Themes in the Interviews: Third Set

In this matrix analysis, the collaborators had very little to say to me. Because of this, only one or two points were raised in the interviews. However, the points that they did raise were all similar and closely related (Figure 4.12).
FIGURE 4.12 Interview Set Three

<table>
<thead>
<tr>
<th>Themes</th>
<th>Interview #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>22</td>
</tr>
<tr>
<td>External Self-Validation</td>
<td>3</td>
</tr>
<tr>
<td>Confusion</td>
<td>4</td>
</tr>
<tr>
<td>Alienation</td>
<td>2</td>
</tr>
<tr>
<td>Bad Self-Concept</td>
<td>0</td>
</tr>
</tbody>
</table>

Interview Set Three Themes

Intensity of Mentions
Findings

The minor themes that arose from this analysis were:

1. External Self-Validation
2. Confusion
3. Alienation
4. Bad Self-Concept

Qualitative Instruments

The pie chart analysis was used for comparison with the triangulation aspect of the study. Because of this, the pie chart analysis is discussed in Chapter Six.

From the information that was gathered from the network diagrams, four bar graphs were generated. When the collaborators filled in each circle, they indicated “friends” by writing their initials in the circle, “family members” by writing out the word that described them (for example “mother”) and indicated “people they had met in Brentwood” by placing a star by their name. I then reviewed each network diagram and counted the number of responses for each category defined by the collaborators. The results are displayed in Figures 4.13 for the exemplars and Figure 4.14 for the non-exemplars.

It can be seen there is a difference in the networks of the exemplars and the non-exemplars, both at the beginning of the program and when they exit from the program. The exemplars on entry have a fuller range of support, compared with the non-exemplars limited networks. On exiting the program the exemplars had extended their range of support. The non-exemplars had a
FIGURE 4.13 Network Analysis for Exemplars

Where Support Came from Before the Support Group

<table>
<thead>
<tr>
<th>Group</th>
<th>Percentage Relled on for Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>4.1</td>
</tr>
<tr>
<td>Professionals</td>
<td>5.2</td>
</tr>
<tr>
<td>Work</td>
<td>7.3</td>
</tr>
<tr>
<td>Nobody</td>
<td>11.5</td>
</tr>
<tr>
<td>Family</td>
<td>17.7</td>
</tr>
<tr>
<td>Friends</td>
<td>54.2</td>
</tr>
</tbody>
</table>

Percentage Relled on for Support

Where Support Came from After the Support Group - Exemplars

<table>
<thead>
<tr>
<th>Group</th>
<th>Percentage Relled on for Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nobody</td>
<td>0.6</td>
</tr>
<tr>
<td>Professionals</td>
<td>1.3</td>
</tr>
<tr>
<td>Work</td>
<td>1.9</td>
</tr>
<tr>
<td>Other</td>
<td>2.6</td>
</tr>
<tr>
<td>Father Paul</td>
<td>7.1</td>
</tr>
<tr>
<td>Family</td>
<td>15.4</td>
</tr>
<tr>
<td>Friends</td>
<td>22.4</td>
</tr>
<tr>
<td>Brentwood</td>
<td>48.7</td>
</tr>
</tbody>
</table>

†† Please note that the thickness of the bars in the two graphs is not significant but is a result of the different number of categories in each of the graphs.
FIGURE 4.14 Network Analysis for Non-Exemplars

Where Support Came from Before the Support Group

<table>
<thead>
<tr>
<th>Group</th>
<th>Percentage Relied on for Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional</td>
<td>6.3</td>
</tr>
<tr>
<td>Priest</td>
<td>6.3</td>
</tr>
<tr>
<td>Family</td>
<td>28.1</td>
</tr>
<tr>
<td>Friends</td>
<td>59.3</td>
</tr>
</tbody>
</table>

Where Support Came from After Leaving the Support Group

<table>
<thead>
<tr>
<th>Group</th>
<th>Percentage Relied on for Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work</td>
<td>1.7</td>
</tr>
<tr>
<td>Priest</td>
<td>3.5</td>
</tr>
<tr>
<td>Family</td>
<td>5.3</td>
</tr>
<tr>
<td>Brentwood</td>
<td>7</td>
</tr>
<tr>
<td>Friends</td>
<td>82.5</td>
</tr>
</tbody>
</table>

†† Please note that the thickness of the bars is not significant but is a result of the different number of groups in each of the two graphs.
limited expansion but there was also a regression to relying on friends as the primary source of support. The non-exemplars were relying on friends (drinking buddies) for help. The amount the non-exemplars were relying on their families had fallen.

**SUMMARY**

The project was begun by interviewing 20 people. Of those 20 people, 3 dropped out of the program (non-exemplars), 8 completed the program and indicated that they wanted to stay with the research (exemplars) and 9 withdrew from the study. After the interviews had been conducted, they were written out and coded using the appropriate coding scheme (Diagrams 4.7 & 4.8). It was then necessary to use matrices to uncover the most important themes for each of the respective interview sets. In addition to the interviews, the collaborators filled in a pie chart of time management and a network diagram. The network diagram showed a significance difference in the pattern of support between the exemplars and the non-exemplars.

The next chapter will examine the themes, in detail, for each of the interview sets.
CHAPTER FIVE
AN OVERVIEW OF THE MAIN THEMES

INTRODUCTION

In this section, the themes that arose in the interviews are summarized. Each theme is stated followed by a quote that typifies that theme. The categories have been rearranged in rank order from the theme that received the most attention to the theme that received the least attention. By examining the collaborators' discourse, it is possible to examine the issues that arose during the interviews. Interview Set One will be dealt with first, followed by Interview Set Two, Exemplars and lastly Interview Set Three, Non-Exemplars.

INTERVIEW SET ONE: THEMES

Theme #1: Realization of a problem

"Realizing there was a problem with myself allowed me to take the first step in admitting that I needed help."

The theme that received the most attention was the topic of realizing that the collaborators had a problem and that they needed help to deal with it. This is not an easy step for them to take. For example, many of the collaborators had known that they had a problem or that they were different from people around them. Nonetheless, the realization that “Yes, I am an alcoholic” was a huge step in the recovery process. Sometimes, the collaborators did not come to the realization that they were alcoholic until they walked through the door of the
treatment center. Others had known that they were alcoholics for a number of years but they were incapable of changing their situation.

Theme #2: Everything seen as relating to themselves

"Everything had to do with me, me, me. I was the most important person in the world."

The collaborators talked about people and events relating solely to them and their desires. Everybody should do what the collaborators wanted them to do. People were on the earth to serve their whims and desires. The collaborators had little regard for the feelings of the people around them and how their (collaborators') actions and comments affected the people who loved them. Typically they felt that they did not need anybody in their lives. They could handle everything by themselves. They manipulated people to get their own way. They withdrew into themselves and effectively started to sever the ties with the people around them. They could make mistakes but the people around them were supposed to be perfect. If somebody made a mistake, they would feel that that person did it on purpose to cause the collaborator harm or to cause disruption to their lives. They could handle anything that came their way. they did not need anything from anybody including love and respect.

Theme #3: Progressive alienation

"Slowly I was isolating myself from everybody who cared about me. I didn't care about myself, why should they?"

Since the collaborators increasingly withdrew into themselves, when they needed help many times the help they needed was no longer there. Slowly the ties between the collaborators and the people around them began to weaken
and in some cases they disintegrated. At work they tended to keep to themselves and the ties between them and their co-workers became almost non-existent. The self-centredness typical of alcoholism created loneliness for the collaborators. Even though people still loved them, they felt that they were alone. The collaborators spoke of walls that they had constructed around themselves; walls that effectively shut out their wives, girlfriends, children, friends, and even their parents. The result was isolation, despair, and loneliness.

The networks which most of us take for granted, such as friends, family and co-workers, had in the case of the collaborators become non-existent. This made the collaborators feel that their situation and suffering was unique and that they were alone. In the network diagrams that the collaborators filled in at the end of their interviews, many could not fill in the circle for close friends or reference group (the group a person most closely identifies with; family, friends, or co-workers). Hence, it is of little surprise that when the collaborators came to the realization they had a life threatening problem, the people they needed the most were no longer in any kind of a position to help them. The collaborators realized their only source of help would be a formal social support group such as Brentwood.

Theme #4: Escapism

“When things started to get to me and the pressure became too much
I used alcohol (drugs) to put my problems behind me.”

When the pressures of everyday life build up in most people, they have the capabilities and resources to deal effectively with these problems by turning to their friends and family. The collaborators, on the other hand, are
effectively isolated from the people around them. They do not feel that there is anybody they can turn to for help. Therefore, the pressures of their lives build and build. With no path open to deal with their problems, and few outlets for help, the collaborators turn with increasing frequency to alcohol for solutions in an attempt to escape from the boredom of their jobs, pressures of dealing with their families, and the helplessness that they feel in trying to deal with their problem.

Alcohol provides an outlet in which they can escape to a world where their pain and anxiety are deadened. But this has a leads to the inability to think coherently or to deal with people in an acceptable manner. The collaborators’ solution feeds the problem; they are caught in a vicious circle where the solution has a deadly price.

Theme #5: Disinformation/ Nice Lies

"I would tell any number of lies to deceive my family and friends about my drinking. While I was doing this, I was also lying to myself."

Many times the collaborators constructed elaborate lies and deceptions to fool their families into believing a number of falsehoods, for example, leaving the house every morning to “go to work” (or school) when in reality there was no job or the job was only part-time. The rest of the time would be spent in bars. Many families did not realize the extent of the deception until the person entered the treatment center. The collaborators felt no shame or guilt in lying because they were convinced that people were out to get them and they themselves were the most important people in the world. Lying also further deepened the gulf that developed between the collaborators and their families and to heightened the sense of isolation and alienation.
The collaborators were also lying and using disinformation to deceive themselves. Many of them felt that they were not alcoholics because they only drank beer even though they drank twenty-four beers in one sitting. Or they were not alcoholics because they only drank beer on the weekends or they were not alcoholics because they used drugs. They conned themselves into believing any number of stories and half-truths to deny they had a problem and to further conceal the fact that they were deteriorating.

Theme #6: Deviousness

"My family or friends had no idea what I was doing or who I was with. I could manipulate them into believing anything."

In an attempt to feed their growing addiction to the perceived benefits of alcoholism, the collaborators would go to any lengths to hide their behaviour and actions from their family, friends and co-workers. They used a variety of elaborate schemes and techniques to get away from their family and friends to go to bars or to obtain alcohol or drugs. Moreover, many would steal from their spouses or families to get enough money to buy alcohol or drugs. Many times they would give the appearance of leading a normal life or paying bills but the money for the bills was being channelled towards their addiction. They would lie to cover their tracks and to lead their families away from discovering the truth about them.
Theme #7: Denial

"Denying I had a problem only compounded it."

Denying the collaborators had a problem, is closely related to the theme #1 of realizing they had a problem. Many had been aware that they had a problem for a number of years but they continued to deny that their problem was alcoholism. The collaborators maintained that they did not have a problem; it was the people around them who had the problem. It was a big step to move from denying they had a problem to accepting they had a problem and to subsequently seeking help. If anyone tried to point out that maybe an alcohol or drug problem existed, they perceived that the person was trying to harm them in some way. Denial also led the collaborators to further abuse various substances. If alcoholics believe that no problem exists, they can continue with their behaviour patterns.

Theme #8: Shame

"Drinking made me feel ashamed about myself."

Because of the stigma that society places on asking for help or admitting that a person has a problem and needs help, there is a great deal of shame that goes along with alcoholism. There is also a great deal of shame felt for asking for help. One collaborator said that he would always remember the humiliation and shame that he felt when his family dropped him off at Brentwood so he could begin his treatment program. Some collaborators viewed alcoholism as a mental weakness which leads to a great deal of shame. If they accept that, it is a weakness of character then somehow people will see them as being weak because they had to ask for help.
Chapter Five

Theme #9: Fear

"You live with the constant fear of being found out,
of the lies finally catching up with you."

The collaborators also lived in constant fear of being discovered for
what they actually were; alcoholics with a serious problem. They feared that
their elaborate lies and deceptions would be uncovered. They all seemed to
realize that eventually the lies would catch up with them but they piled
deception upon deception to quell their fears about their situation.

They also feared what was happening to them. They felt as if they were
spinning out of control with no way of stopping the cycle. They feared
themselves and the kind of person they became when they drank. They were
fearful of their future and what it held for them, whether there would be
happiness or more of the misery they had experienced all their lives.

Theme #10: Confusion

"I never knew where I was going or what I wanted to do with my life
I never knew what people wanted from me."

The collaborators felt a great deal of confusion about their situations and
who they were. Many of the relationships that people use to define who they
are and their sense of self-worth, are lost to the collaborators. They have no
reference point from which to deal with their problem. They feel ashamed
about themselves so they are unlikely to ask people for assistance. They deny
that they have a problem and when they feel pressure or confusion, they turn to
alcohol which feeds the vicious circle in which they are now entrapped.

They feel that there are no other people like them and they do not want
any form of help from anybody. They are trapped behind a wall with the only
way out a door which only they can unlock. They are confused about how to communicate in a loving way with those around them.

Theme #11: Spiritual Bankruptcy

"Before I sought help I had nothing more to give to people. I was an empty shell."

Near the end, before they admit that they need help, comes the point where they feel as if they are an empty shell that is alone and worthless. They have run out of energy and the capability to deal with the pressures that have surrounded them and cut them off. No longer do they have the ability to physically absorb the punishment they have inflicted on their bodies. They lose weight, develop ulcers, lose their memory and develop liver problems. Their bodies start to reject the lifestyle they are forcing upon themselves. Emotionally, they come to the realization that they are alone, that the people who care about them no longer want anything to do with them or have given up hope. Socially, they lose their jobs or run into trouble with the law or their place of employment. Their ethical code of conduct concerning their marriage and their families no longer governs their behaviour. They beat their wives and children and they have little regard for them. They are spiritually and physically bankrupt. They have nothing to give and there are two ways to solve their problem: get help or die.
Theme #12: Rapid mood swings

“One minute I would be the best father in the world, the next I did not want anything to do with my family.”

Alcohol wreaked havoc with the internal balance regulating their emotions and their reactions to situations. Sometimes, they would let things pass while other times they would overact to situations. The alcohol magnified their emotions and attitudes and as a result distorted their perceptions of what was going on around them. When they started to feel depressed or anxious, they would turn to alcohol to help alleviate those problems. As euphoria set in, their mood would swing to the opposite extreme and they would become happy or carefree for a short period until they had consumed enough alcohol to become incoherent. Their mood would swing back to depression or sometimes their drinking would provoke a violent reaction.

Theme #13: External Self-Validation

“It was important for me to fit in with the guys at work and if that meant going out for drinks after work that was fine.”

It is important for the collaborators to try to fit in with other people and to be accepted by them. This is especially true of their place of employment (where they usually have the most contacts outside of their family). To fit in, they will succumb or bend to group pressures to conform and accept the group’s standard of what normal is. Unfortunately, the groups in which the collaborators find themselves only reinforce their drinking patterns and substance abuse problem. The group’s socialization process includes stopping for drinks after work and at lunch time as well as drinking on the week-end.
While not attached to or trusting of any of the group members, the collaborators will bond with them in hopes of being accepted. But the price of admission to the group is high. It is a significant step for the collaborators to recognize their co-workers or referent group as people who have a substance abuse problem.

Theme #14: Lack of trust

"You don't trust anybody even the people who genuinely care about you."

It is not surprising, considering the first thirteen themes, that the collaborators feel little trust for anyone including the people who genuinely care about them. They feel that everybody is out to get them or to cause them harm. They feel that because of their constant lies people are following them trying to find out what they are up to. Not trusting any one also furthers their isolation. Keeping everyone at a distance makes it difficult for anyone to be able to help them to recover.

Theme #15: Perfectionism

"I always thought I was perfect and everybody else had something wrong with them."

Typically, the collaborators feel that they are perfect and the rest of society and especially their families have something wrong with them. The collaborators try to achieve a high degree of perfection in what they do. However, the levels of expectation are too high and unrealistic. The result is collaborators see themselves as failures, further compounding the low self esteem and sense of self worth and leading them back to substance abuse.
The collaborators also expect everybody around them to be perfect. Theirs is a world of “no accidents.” Things are done or not done because somebody “has it in” for the collaborators. They expect their wives to be perfect, their children to be perfect and their jobs to be perfect. When they are not, the collaborators have a difficult time relating reality to their idealized expectations of reality. Inconsistency between the alcoholic’s thoughts and reality leads to stress and ultimately back to substance abuse.

Theme #16: Quick Fix

“Every morning when I got out of bed, I needed a hit to get me going. Sometimes I would drink four or five beers before seven in the morning.”

Some of the collaborators relied on a quick fix to jump start their emotions or their bodies either throughout the day or in the morning. Waking up in the morning feeling sick and depressed, the collaborators reached for something to dull the pain and to get them “flying” again. Throughout the day they might smoke a joint or two either at their break to get high again or at lunch they might drink at a bar or smoke again until work started. They justified this by saying they did it to alleviate the boredom of their job. After work, they drank or smoked more before going home to unwind from their day at work. At home they would drink or smoke to help them deal with their families, and finally a drink or two to help them sleep.
Theme #17: Negativism

"Nothing good has ever happened to me"

With everything negative building inside them, the collaborators harbour a negative view of people and of their own lives. They are extremely unhappy, tormented people who have no idea how to break the vicious cycle. They drift in and out of a sober reality to a world which is twisted and warped by their own paranoia and alcohol abuse. As a result, they feel as if their lives are worthless and they have little hope for themselves or their futures.

INTERVIEW SET TWO: EXEMPLARS

Theme #1: Not alone with this problem

"There are people like me. I thought I was the only one in the world."

The theme that received the most attention from the exemplars (that is, the people who made it through the program) was the realization that they were not alone; there were other people in the world like themselves who had similar problems. An overwhelming sense of relief pervaded their discussion on this topic, relief that somehow they belonged and fit into something and somewhere. The collaborators were able to say "Yes, I am an alcoholic but that is all right. I can accept that I am one and that there are other people like me." The collaborators had found a significant identity group that had been missing in their lives.
Theme #2: Awareness of own projections

"I know now that I was not a very nice person. I had a lousy attitude so why should people like me."

The collaborators also gained an awareness of how the attitudes and moods that they projected affected the people around them. They were aware of how the negativism, fear and insecurity bred inside them and affected the interaction and communication with the people around them. To them, alcoholism was the effect rather than the cause of their situation. They realized that their negative attitude and terrible disposition left them open to rejection. They realized that their actions had consequences, but consequences that they could attempt to control.

Theme #3: Aware of own feelings

"I have feelings and it's all right to be mad sometimes and happy other times."

The collaborators became aware that they had feelings and that it was all right to acknowledge those feelings. They had to face the negative feelings and attitudes that they locked inside themselves before they could attempt to unlock the positive feelings that they had for their families and friends. They also realized that they needed to tell people how they were feeling and that it was all right to tell people that they cared about them. In return, they would receive the love and attention that they needed.

The collaborators also gained the ability to say they were sorry for the pain and suffering they had put their friends and families through. They became aware that other people have feelings and that they themselves could harm these people through their destructive actions.
Theme #4: Patient work towards solutions

"Things don't happen over night. I have to work slowly at them and eventually I will get what I want."

If the collaborators wanted to achieve some of their new goals and aspirations, they realized it could take time and patience. If they wanted to have a nice house and a fancy car, they were going have to work at it. Nobody owed them anything. They had to work for everything they wanted out of life. They also realized that they were going have to work slowly and with a lot of pain and desire to keep their problem under control. If they were going to stop drinking and not revert to their former attitudes and behaviour, it was going to take patient work every day of their lives.

Theme #5: Working on own's growth one day at a time

"I can't think about long range goals. I have to live one day at a time."

Closely related to the fourth theme was the refusal or reluctance to talk about anything in the future. They wanted to stay focused in the now and what they were going through. As in Alcoholics Anonymous, the collaborators believed that they have to live one day at a time. As far as they were concerned, there was no future, only the present. Believing this helped the collaborators deal with their problems, instead of denying them or escaping from them. They realized that if they wanted to make it through the day, they had to deal with their problems as they arose. Also, living a day at a time helped them not to fantasize about the future, not to feel depressed or lost when their fantasy did not materialize."
Theme #6: Spiritual needs

"With God's help I can make it through anything."

Some of the collaborators accepted that there were forces more powerful than they, not surprising considering the role of the Catholic Church at Brentwood. The collaborators accepted the fundamental truths inherent in the Bible about treating their fellow man with respect and love. They also came to believe that there were elements in their own lives which could become more Christian.

Theme #7: Small group skills

"It is important to be able to get along with people. Not everyone is out to get me."

Brentwood helps people in the treatment program to develop small group skills which focus on the ability to get along with people and to communicate with people in a small group setting. Brentwood places great emphasis on interacting in small group settings. The groups meet twice a day and participation is mandatory. Through these groups the collaborators learn how to self-disclose and to listen to other people. The collaborators take an active role in the groups' existence and development. These are skills the collaborators can take with them to help them interact at work as well as with their families.
CHAPTER FIVE

Theme #8: Skills in self-disclosure

"I can talk with my wife now. I can tell her how much she means to me."

Through the small group skills, the collaborators learn how to self-disclose. They are able to tell people how they feel and they can acknowledge their feelings. By self-disclosing, the collaborators accept their own feelings and the consequences of those feelings. They learn to trust other people with information that is confidential, information that they have kept secret or hidden for a goodly number of years.

Theme #9 Acceptance of flaws

"I am not perfect."

The collaborators learn to acknowledge that they are not perfect and that they have flaws like everybody else. Instead of blaming other people for their mistakes or shortcomings, the collaborators learn to look within themselves for the cause of their problems. Previously, the collaborators believed that everything related to them and it was a world of no accidents. Now they have learned that they have just as much if not more to do with their own problems than their spouses, families, friends and co-workers.

Theme #10: Sharing with others

"Normal people communicate with the people around them. They don't hide behind walls."

The collaborators had to learn how to communicate with people and genuinely share their feelings with the people who care about them. Before, the
collaborators would lock everything in and not trust the very people whom they needed in order to get better. They did not trust anybody and as their isolation developed it became increasingly difficult for them to share their feelings and dreams with the people around them. In the support group, they learned how to share and communicate with people.

Theme #11: Tolerance of differences in others

"Everybody is different and just because someone is different doesn't mean I have to beat them up."

The collaborators learned how to tolerate differences in other people. Previously, one of the collaborators explained that if he did not like something that another person did, for example, the way that they crossed the street, he would immediately dislike that person. The collaborators learned that they were different from other people and that they had to accept the differences in other people. They could no longer judge people on the basis of initial perceptions because many times those perceptions were wrong or warped because of their addiction.

Theme #12: I cause my own fortunes

"I have to take responsibility for what happens to me. I cause or make my own future."

Finally, there was the acceptance by the collaborators that they caused their own fortunes. They were the ones who had to take control of their situation. They were the individuals who were going to have to live with alcoholism for the rest of their lives. It was time for them to accept responsibility for their lives. Throughout their lives they could rely on the
other alumni of Brentwood and the people they had met and who had experienced many of the same things that they had experienced.

**INTERVIEW SET THREE: NON-EXEMPLARS**

**Theme #1: External Self-Validation**

"I don't do much else than work. I get up, go to work, come home, go to bed, get up, and go to work."

The non-exemplars all talked about work and how much time they spent there. All three of them had come to the realization in Brentwood that they had a problem but they were now unsure of how to deal with that problem. To give themselves something they could do to spend the day without worrying about drinking, all three immersed themselves in their work. That was how they described their days; they worked. Typically, they sought overtime for the weekends. The problem created by their need for external validation led them back into the process of denial of their alcohol problem. This I feel will eventually lead them back to drinking again.

**Theme #2: Confusion**

"I'm not sure what I am going to do...Maybe go back to Brentwood, I'm not sure..."

The non-exemplars were also confused about their situation. They were unsure of their next step. They talked of plans for the future but they were confused about what those plans were or how they were going to achieve them. They were also unsure of how to treat the people around them. They had spent a short period of time at Bentwood but the program's philosophy had not yet taken root within them.
Theme #3: Alienation

"I don't see my family much right now because I am always working."

Again, the non-exemplars were shutting out the people in their lives through concentrating on their work. They immersed themselves so wholeheartedly in their work that they left little if any time for their families. Hence, when I tried to renew contact with some of them, their whereabouts were unknown.

Theme #4: Bad Self-concept

"I still don't feel good about myself."

Some of the non-exemplars still held onto beliefs they had when they entered the program. They had negative attitudes about themselves and their relationships to their families and to other people. They lacked a positive self-concept.

SUMMARY

In the this chapter, the themes for each of the interview sets were summarized. A brief description of the collaborators' discourse on these themes helped to highlight the collaborators' feelings and perceptions. In Interview Set One, seventeen themes were discussed, in Interview Set Two, twelve themes and in Interview Set Three four themes.

Up to this point in the study much of the information collected has been interpreted by myself and by the peer debriefer. Now we turn to the triangulation of the data using different instruments and a new sample. The
purpose of triangulation is to generate new data and to compare that information with the original data.
CHAPTER SIX
DATA ANALYSIS STAGE II
TRIANGULATION

INTRODUCTION

Triangulation is a set of instruments and methods which are used to compare the researcher's set of themes, hypotheses, feelings and insights with information gathered from another population. The purpose of triangulation is not to test a set of hypotheses as in positivist research but to clarify some of the researcher's ideas, trends, and data. While triangulation does not entirely confirm what has already been uncovered, it has allowed me to state with greater accuracy whether people who are entering the program are similar and if the experience of the support group is similar. The triangulation methods that were selected for this research project were used to gain a better understanding of time usage, of supportive networks and of the themes that were stated in Chapter Five. Three qualitative triangulation methods were chosen: a values clarification exercise, a pie graph of time usage, and a network analysis diagram. These new techniques and the new sample are multiple operationalism and serve as a check on theory, data, and myself.

Why were these triangulation methods chosen?

These triangulation methods were chosen for a number of reasons. When Brentwood was approached about the possibility of using another sample from their population Father Paul agreed on one condition. The people chosen could not be away from their activities for more than half an hour. This meant that the triangulation instruments would have to be completed by the respondents quickly. Similar values clarification exercises had been used in Dr.
Carney's graduate methodology course and had produced good results. The pie chart and the network diagrams were chosen because the collaborators had completed these instruments. This would provide comparable data for the collaborators and the respondents.

Exclusion of Significant Others

An appropriate triangulation method that has been used in the past by other researchers is interviews with significant others, for example, spouses, girlfriends, boyfriends, or parents (Edwards 1985). During my initial interviews, significant other interviews were also begun. They were discontinued after six had been completed however, because much of the information that the collaborators revealed was unknown to their spouses; hence, I knew more about the lies the collaborators were telling than their significant other. I was in an uncomfortable position and made a personal decision not to continue with these interviews. The design of the research project was flexible so that I was able to use other triangulation methods to collect the data that I needed.

Triangulation Methods Employed

The values clarification exercise was designed using the themes that arose from the matrix analysis, detailed in Chapter Five. A short description of a situation was given followed by three value choices of how the respondent thought they would act in that given situation. In each situation one solution or behavior was related to a theme that arose from Interview Set Two (exemplars - people who made it through the program). The remaining choices were taken from the themes that arose during Interview Set One (people entering the program--exemplars and non-exemplars) and some were taken from Interview
Set Three (non-exemplars). To clarify, in each situation the respondent was faced with three choices: one representing how an exemplar would answer, and two representing how a person entering the program would think and sometimes how a person who left the program would answer (since much of what these three said was covered by Interview Set One).

What was being checked by using this triangulation method was the degree of differences that existed between people who either were just entering the program or people who were just graduating from the program. From the themes that arose from the Interview Set One, it initially appeared that a great deal of heterogeneity existed in the groups, that is, the experience of being an alcoholic was not as commonly based as I believed it to be at the beginning of the study. For people who were graduating from the program, I believed that a lesser degree of heterogeneity existed because the respondents had the common experience of the support group. What this meant for the values clarification exercise was that for people just entering the program, I expected that any patterns that emerged would be scattered and would not support the themes from Interview Set One overwhelmingly if at all. But on the reverse side I expected the choices made by the people who were graduating would support the themes that arose from Interview Set Two and some definite patterns or trends would emerge.

The second use for the Values Clarification exercise was to indicate with a greater degree of certainty which themes were in fact common to people entering the program and people graduating (leaving) from the program. The importance of using pattern analysis and matrices is that trends in the themes would become evident. For example, if the underlying theme for a situation was honesty, then, it was expected that people graduating from the program would chose the selection of the situation which appropriately indicated
honesty. If all the graduating people chose the selection that indicated honesty, the pattern would emerge in the matrix. It then could be stated with a greater degree of credibility that the theme of honesty was common to all people graduating from this program.

The second triangulation method that was employed was a pie chart indicating time management. Previously, the original collaborators of the study divided a circle into pie slices to indicate how they spent their time before they came to Brentwood (see Chapter Four). The respondents who filled in the values clarification exercise were also asked to divide up a circle into pie slices of how they spent their time before they came to Brentwood. This triangulation method could also be used to check on whether or not the samples used at the outset of the project were the same as the samples used in the triangulation section. This was done by making a composite or average time management chart for the collaborators and comparing that with a composite chart of the respondents' pie charts.

The third triangulation method that was employed consisted of a network diagram filled in by the initial collaborators who started the program. The network diagram is used to indicate the ties that the collaborators or respondents have with other people or the lack of ties to other people. The respondents were presented with the network diagram containing the seven circles of support (see Chapter Four & Appendix D).

The Triangulation Sample

The sample of respondents (none of the original collaborators were in this group) who were used in the triangulation exercise were again taken from the Brentwood Recovery Home. The sample included only men. A small sample of twelve was chosen because the triangulation instruments being used
generate a large amount of qualitative data that has to be analyzed. All of the respondents were enrolled in the ninety day treatment program. Six had entered the program within two weeks of treatment when the triangulation was conducted and six were preparing to graduate at the end of the week in which the triangulation exercises were conducted.

THE TRIANGULATION INSTRUMENTS

Values Clarification Exercise

The Values Clarification exercise contained seventeen situations, each of which had three possible choices to it (see Appendix D). As stated previously, each situation contained an answer that a person who was graduating from the program should choose and two answers which a person just entering the program should choose. Each of the situations will be examined and the choices discussed.¹

1. I sought help because:
   a. I realized I needed help
   b. someone important in my life wanted me to come
   c. a professional (judge, doctor, etc.) told me to come

   Question one dealt with the themes of denial and the realization that the respondent had a problem. If the alcoholics realized they had a problem and needed help they would indicate "a." If they thought that they were at Brentwood for some other reason than their own belief that they had a problem they would indicate "b" or "c." If the alcoholics were at Brentwood for any

¹ The choices that the people graduating from the program would make are indicated by italics. The choices that the people entering the program would make are in normal type face.
other reason other than their realization that they needed help, they probably denied that they had a problem in the first place.

2. If my boss yells at me at work:
   a. he is centering me out
   b. it is my fault so I should take responsibility
   c. it is someone else's fault

   The second situation dealt with self centrèdness and the acceptance of one's flaws. If you are self centered and believe everything relates to you, anybody that finds fault with you will be centering you out (a) or trying to destroy your world (c). You don't make mistakes. However once the alcoholics have gone through the support group they come to accept their flaws and to the realize (b) that their boss is probably yelling at them because they have done something to warrant the criticism.

3. You have a few free hours, do you opt to spend it:
   a. with your family or friends
   b. alone
   c. by going out

   The third situation dealt with the theme of alienation and sharing with others. When individuals enter the program, they are alienated to a large degree from the people around them. Because of this, if they have any free time available to spend with the people who love them, they do not spend it with their families. Rather, the alcoholics spend their time alone thinking about life and their situation, they will drink alone, or they will go out with friends or to a bar (b & c). People who have gone through the program, however, realize that in order for people to still care about them they have to make a commitment to the people around them and to share with them. This means spending time with the people who love them and care about them (a).
4. When someone offers me advice, I usually:
   a. take it
   b. ignore it
   c. take it into consideration

   When advice is offered to alcoholics who are seeking help or who are just entering the support group, they ignore it. Other people are all ‘assholes’ and their way of doing things is wrong. The alcoholics claim to know the “right way” and the “right way” is “my way.” When they are offered advice, they ignore it or they take it but do not think about it. They see everything as relating to them and their needs (a & b). People who have used the support group successfully take advice or suggestions into consideration and actually think about using them. The recovered alcoholics are more tolerant of the differences in people around them and because of this, they realize that there are a number of ways of approaching problems and people. To do this, they need people’s advice and help (c).

5. You were to be home over two hours ago but you and your buddies went out after work. Do you, tell your family?
   a. you had to work overtime
   b. where you were and why
   c. it is none of their business

   The people entering the program are secretive about their lives and their activities, especially to those closest to them. They build lies upon lies. They use disinformation to hide their whereabouts and activities (a & c). The people who are graduating from the program, however, have learned how to self-disclose and to be honest with the people around them (b). They are taking the first steps towards open and honest communication.
6. If your job or family is getting to you, do you:
   a. try and deal with the problems
   b. drink or smoke up
   c. think "who cares anyway"

   In the past the alcoholics dealt with the pressure and stress of everyday life by seeking an escape. They are unable to deal with the problems and conflicts in everyday life so they seek to escape from them (b & c). They do this through drugs and alcohol. Their destructive, alcoholic thinking leads them to stop caring about anything. People who use the support group instead of running from their problems, however, now try to face their problems and to deal with them by working patiently towards a solution (a).

7. When it comes to dealing with friends and family, do you find:
   a. that you always get what you want
   b. sometimes get what you want
   c. that you never get what you want

   To get what they want, individuals who are entering the program use deviousness to manipulate the people around them (a). If they are unsuccessful in manipulating them, they feel that they never do get their way (c). People who have gone through the program are tolerant of the differences in other people. They are aware that they cannot always get what they want but they can get their way or what they want some of the time (b).

8. When it comes to dealing with your family and friends, do you:
   a. leave
   b. communicate with them
   c. feel that you don't have any friends

   Before entering the program, the alcoholics are unsuccessful in dealing with other people. They either do not have any friends or if their families try to talk to them, they leave (a & c). The alcoholics alienate themselves. Individuals who are graduating from the program will make an effort to
communicate with the people around them. They will share with the people who are the closest to them (b).

9. When I think about why I am here it is because:
   a. somebody else wanted me here
   b. I have a serious problem
   c. I don't know why

   If the people who are entering the program feel that somebody else wanted them in the program or they do not know why they are there, in all likelihood they are still denying that they have a problem and that they need help with it (a & c). The individuals who are entering the program, however, have come to the realization that they have a problem for which they need help, in much the same manner as the people who have already made it through the program (b). Both groups should answer this question similarly because both groups are in the program.

10. When I think about why I came here I feel:
    a. ashamed
    b. good, positive
    c. depressed

    When the individuals who are just entering the program think about why they came, many times they feel depressed or ashamed that they had to seek help from people outside of their immediate family (a & c). The people who are graduating from the program feel good about the program because they have been helped and because they realize that they are no longer alone in trying to deal with their problem.
11. When I think about trust, I feel:
   a. that I don't trust anyone
   b. I have to trust people
   c. trusting is part of normal relationships

People entering the program have little or no trust in anyone. The alcohol or drugs have warped their sense of perception and hence their ideas about whom they can trust and not trust (a). But they can swing to the opposite extreme and they feel that they have to trust everybody which most people realize is difficult to do because there are individuals who will abuse such trust. People who have made it through the program, however, realize that when it comes to relationships with co-workers, friends, girlfriends, wives and families, trust is an integral part of these relationships and without it relationships usually do not survive (c).

12. When I am under stress, my moods:
   a. swing rapidly from one extreme to another
   b. generally feel like I am on an even keel
   c. I have learned to deal with my moods

Individuals entering the program either feel that their moods do not swing from one extreme to the other and feel that they are on an even keel, or they are aware that their moods swing from one extreme to the other (a & b) but find themselves unable to deal with the rapid mood swings. People who are graduating from the program have learned to be aware of their feelings and moods and to deal with them before they start to cause problems with their relationships (c).
13. When I start feeling negative, I will:
   a. call a friend
   b. try to deal with it alone
   c. use alcohol or drugs

   When people who have not had the experience of being in a support group start to feel negative, they deal with their problem either alone or with the help of alcohol and drugs (b & c). Each of these two choices only perpetuates the problem and continues the cycle of addiction. Individuals who have made it through the program realize that they cannot make it alone and that they have to share their thoughts and feelings with a friend or someone else close to them (a).

14. When people react negatively towards me, it is because:
   a. they have a problem
   b. my attitude caused their reaction
   c. I am not aware of their reaction to me

   When others react negatively to respondents who are entering the program, the latter either feel like the others have the problem, or are not aware of the responses to them. This furthers the alienation the alcoholics are already experiencing (a & c). The respondents who are graduating from the program are aware of the image and attitude that they project to other people and are aware of how they affect other people's reactions to them (b).

15. I can usually solve my problems:
   a. quickly and effectively
   b. with difficulty and confusion
   c. with hard and patient work

   The respondents who are entering the program feel that they can solve their problems quickly and effectively or that they can solve them with a great deal of confusion and difficulty (a & b). If they could solve their problems quickly and effectively, they would not find themselves in the support group.
The alcohol and drugs cause confusion and the inability to solve problems. The respondents who are leaving the program realize that the only way to solve their problems is with hard, slow and patient work (c).

16. When I think about the future:
   a. I live with an eye to the future
   b. concerns me but I do not think about it
   c. I plan a lot for the future

   Individuals who are entering the program think about the future and what they are going to do with it (a & c). They make plans but when their plans do not materialize they get depressed and their self-esteem falls. As a result, they use alcohol and drugs to try to cope. Individuals who are leaving the program are concerned with the future but they realize that they have to live one day at a time (b). If they do not deal with their problems as they arise, then stress and old familiar feelings will re-surface.

17. What phrase best describes me:
   a. I am a cog in a machine
   b. I am a fish swimming upstream alone
   c. I am the maker of my destiny

   The people who are entering the program feel that they have no control over their lives or their future. They have given up on themselves. They are spiritually bankrupt (a & b). People who are graduating from the program understand that they are the makers of their destiny and that to a large extent they control what happens to them (c).
18. You have received a poor work evaluation. Do you feel:
   a. that you consider the evaluation and you'll have to do better
   b. like blaming somebody or something else
   c. that your boss was out to get you

   If the people entering the program receive a poor evaluation at work, 
they blame somebody else or feel that their boss was out to get them (b, & c). 
Alcoholics see everything as relating to themselves. The people graduating 
from the program consider the evaluation in a constructive light and recognize 
that they will have to do better. They come to the realization that at work 
everything does not relate to them and that they are part of a team or a small 
group (a).

Pie Chart Analysis

The pie chart was done by the people entering the program (respondents) as a measure of the degree of similarity between themselves and 
the collaborators as well as a measure of the time consumed by their addiction. 
The individuals were presented with a circle:

They were then asked to divide up the circle into pie slices of how they spent 
their time before they came to Brentwood. For example, if Wayne Gretzky 
was asked to divide up a circle into pie slices of how he spent his time playing 
hockey, he might do it in the following manner:
If the characteristics of the two samples (collaborators and respondents) are similar, then the percentages of time usage should be similar especially for the amount of time devoted to alcohol.

**Network Analysis**

The network analysis diagrams are used to gain insights into the relational patterns of the individuals. The collaborators' networks are different from when they enter the program and when they leave the program. As before in the data collection section (Chapter 4), the respondents were asked to write the initials of the person who best represented that circle to them. If the person was a wife, brother, girlfriend, sister, mother or father, they were asked to write that name in. For example, in the model circle they were asked to write the full name of the individual if it was a person like Wayne Gretzky. The respondents were also told that if they could not think of anyone or there was no one to fill that circle, they could leave it blank.

The network analysis diagrams are constructed around seven circles which are placed around a circle in the middle which represents the individual filling in the diagram. The seven outside circles are: models, close friends, challengers, referral agents, competence, foul-weather friends and referent group. (For a description of what was to be placed in each circle see Figure 6.1).
FIGURE 6.1 Network Diagram

Please read the descriptions beside each of the seven circles. Then in each circle write the initials of the people or person who represents that circle to you. For example in Models I might write the initials W.G. (Wayne Gretzky) as a model.

MODELS

Models are people you either know or do not know but they are someone you look up to, for example a sport's hero.

REFERENT GROUP

The Referent Group is the group of people you most closely identify with. For example friends, family, etc.

CLOSE FRIENDS

Close friends are just that, your closest friends.

FOUL-WEATHER FRIENDS

Foul-Weather friends are friends who you can count on when you need them the most for example in an emergency or when things are not going well for you.

ME


CHALLENGERS

Challengers are people who challenge the way or what you think about. You do not necessarily have to like that person.

COMPETENCE

Competence refers to people who believe in you and your abilities.

REFERRAL AGENTS

Referral Agents are people who have the resources to help you in some way. For example someone you could go to, to help you find a job.
FINDINGS OF TRIANGULATION

Values Clarification Exercise

The answers from the values clarification exercise were entered into a matrix. Along the vertical axis were the respondent's number and along the horizontal axis were the question numbers which were sub-divided into a, b and c categories. Each answer was recorded and a symbol was inserted for each respondent's choice for each of the situations. The first line for the respondents was an ideal respondent and the ideal choices. Patterns or trends quickly became apparent by reading down the columns under each question number.

In the first triangulation pattern (Figure 6.2), for the people entering the program, the matrix illustrates the diversity of the answers. Only three themes were chosen 100% (by all six respondents); escapism, rapid mood swings and negativism. Three themes were chosen by five of the respondents: shame, lack of trust and alienation. The themes of realization, alienation and escapism were in the top three of the themes from the collaborators' Interview Set One.

In Chapter Five, which dealt with the themes from Interview Set One, the collaborators discussion was spread over a number of smaller themes which would suggest that each individual entering the program is different and alcoholism is not as commonly based as believed. The triangulation matrix dealing with people entering the program would also suggest this. Some of the larger themes were supported by the values clarification exercise but as before their answers were spread out with many choosing the answer for people graduating from the program. This would indicate a great deal of heterogeneity among the individuals entering the program. I feel this triangulation matrix supports the indication that each individual entering the program is unique and it is difficult to indicate with any degree of accuracy,
FIGURE 6.2 Triangulation Patterns for Respondents Entering the Support Group

**Triangulation Patterns # 1-9**

<table>
<thead>
<tr>
<th>Respondents</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
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</thead>
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<tr>
<td>IDEAL RESPONDENT</td>
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<td>C</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
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<td>A</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>A</td>
<td>C</td>
</tr>
<tr>
<td>RESPONDENT 2</td>
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<td>B</td>
<td>C</td>
<td>A</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>RESPONDENT 3</td>
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<td>B</td>
<td>C</td>
<td>B</td>
<td>B</td>
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<td>B</td>
</tr>
<tr>
<td>RESPONDENT 4</td>
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<td>C</td>
<td>B</td>
<td>B</td>
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<td>B</td>
</tr>
<tr>
<td>RESPONDENT 5</td>
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<td>B</td>
<td>B</td>
<td>C</td>
<td>B</td>
<td>C</td>
<td>A</td>
</tr>
<tr>
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<td>A</td>
</tr>
</tbody>
</table>

1. A- Realization
2. A+C- Everything relates to self
3. A- Sharing with others
4. A- Everything relates to self
5. A+C- Disinformation
6. A- Patient work towards solutions
7. A+C- Deviousness
8. A+C- Alienation
9. A+C- Denial

B+C- Denial
B- Acceptance of flaws
B+C- Alienation
B+C- Tolerance of differences in others
B- Self-disclosure
B+C- Escapism
B- Tolerance of differences in others
B- Sharing with others
B- Realization
**FIGURE 6.2 Continued**

Triangulation Patterns Continued #.10-18

<table>
<thead>
<tr>
<th>RESPONDENTS</th>
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<th>11</th>
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<td>B</td>
<td>C</td>
<td>A</td>
<td>C</td>
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<td>C</td>
<td>C</td>
<td>B</td>
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<td>C</td>
</tr>
<tr>
<td>RESPONDENT 2</td>
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<td>3</td>
<td>A</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>A</td>
<td>C</td>
<td>A</td>
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<tr>
<td>RESPONDENT 3</td>
<td>B</td>
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<td>A</td>
<td>C</td>
<td>A</td>
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<td>C</td>
<td>C</td>
<td>A</td>
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<tr>
<td>RESPONDENT 4</td>
<td>C</td>
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<td>A</td>
<td>C</td>
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<td>B</td>
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<tr>
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<td>C</td>
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<td>A</td>
<td>C</td>
<td>A</td>
<td>C</td>
<td>C</td>
<td>C</td>
<td>C</td>
</tr>
<tr>
<td>RESPONDENT 6</td>
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<td>A</td>
<td>A</td>
<td>C</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>B</td>
<td>C</td>
</tr>
</tbody>
</table>

0. A+C- Shame and Fear
1. A- Lack of trust
2. A+B- Rapid mood swings
3. A- Sharing with others
4. A+C- Alienation
5. A+B- Confusion
6. A+C- Escapism
7. A+B- Spiritually bankrupt
8. A- Small group skills
B- Not alone with problem
B+C- Trust in others
C- Aware of feelings
B+C- Negativism
B- Aware of Projections
C- Patient work towards solutions
B- One day at a time
C- I cause my own fortunes
B+C- Everything relates to self
other than escapism, realization, and alienation, what smaller themes people are thinking of or are concerned with. This also means that for the phenomenon recognition check it will be difficult to come up with one composite diagram that will satisfy the differing realities of each individual.

The second triangulation matrix for the respondents graduating from the program was constructed in the same manner as the first one. The respondents were listed along the vertical axis, and the questions, sub-divided into a, b, and c, were indicated along the horizontal axis. Again, symbols were entered to indicate the respondents' choices for each situation (Figure 6.3).

In this case thirteen of the eighteen themes were confirmed with seven being confirmed 100%, and six being confirmed by four or five of the respondents. The themes that were confirmed 100% were: realization (confirmed twice), tolerance of differences in others (confirmed twice), acceptance of flaws, patient work towards solutions, and small group skills. The themes that were confirmed by four or five of the respondents were: acceptance of flaws, self-disclosure, patient work towards solutions, sharing with others, trust in others, and not alone with problem. This also means that it should be less difficult to devise a composite diagram that will satisfy each of the collaborators for the phenomenon recognition check for Interview Set One than for the phenomenon recognition check for Interview Set Two.

**Pie Chart Analysis**

The composite pie chart for the initial collaborators was obtained by measuring the number of degrees in each subject (defined by what the collaborators divided their circles up into). For example, a collaborator might indicate that he spends one quarter of his time working:
FIGURE 6.3 Triangulation Patterns for Respondents Graduating from the Support Group

**Triangulation Patterns # 1-9**

<table>
<thead>
<tr>
<th>RESPONDENT</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<td>B</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>IDEAL RESPONDENT</td>
<td>A</td>
<td>B</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
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<td>RESPONDENT 1</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>C</td>
<td>B</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>RESPONDENT 2</td>
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<td>B</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>RESPONDENT 3</td>
<td>A</td>
<td>A</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>RESPONDENT 4</td>
<td>A</td>
<td>B</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
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<tr>
<td>RESPONDENT 5</td>
<td>A</td>
<td>B</td>
<td>A</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>B</td>
</tr>
<tr>
<td>RESPONDENT 6</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>C</td>
<td>B</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
</tr>
</tbody>
</table>

1. A- Realization
2. A+C- Everything relates to self
3. A- Sharing with others
4. A- Everything relates to self
5. A+C- Disinformation
6. A- Patient work towards solutions
7. A+C- Deviousness
8. A+C- Alienation
9. A+C- Denial

B+C- Denial
B- Acceptance of flaws
B+C- Alienation
B+C- Tolerance of differences in others
B- Self-disclosure
B+C- Escapism
B- Tolerance of differences in others
B- Sharing with others
B- Realization
**Figure 6.3 Continued**

**Triangulation Patterns Continued # 10-18**

<table>
<thead>
<tr>
<th>Respondents</th>
<th>10</th>
<th>11</th>
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<th>17</th>
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<tbody>
<tr>
<td>IDEAL RESPONDENT</td>
<td>B</td>
<td>C</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>B</td>
<td>C</td>
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<tr>
<td>RESPONDENT 1</td>
<td>B</td>
<td>C</td>
<td>C</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>C</td>
<td>A</td>
</tr>
<tr>
<td>RESPONDENT 2</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>C</td>
<td>B</td>
<td>C</td>
<td>A</td>
</tr>
<tr>
<td>RESPONDENT 3</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>A</td>
</tr>
<tr>
<td>RESPONDENT 4</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>A</td>
</tr>
<tr>
<td>RESPONDENT 5</td>
<td>B</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>C</td>
<td>C</td>
<td>A</td>
<td>C</td>
<td>A</td>
</tr>
<tr>
<td>RESPONDENT 6</td>
<td>B</td>
<td>B</td>
<td>C</td>
<td>B</td>
<td>B</td>
<td>A</td>
<td>A</td>
<td>C</td>
<td>A</td>
</tr>
</tbody>
</table>

10. A+C- Shame and Fear
11. A- Lack of trust
12. A+B- Rapid mood swings
13. A- Sharing with others
14. A+C- Alienation
15. A+B- Confusion
16. A+C- Escapism
17. A+B- Spiritually bankrupt
18. A- Small group skills

B- Not alone with problem
B+C- Trust in others
C- Aware of feelings
B+C- Negativism
B- Aware of projections
C- Patient work towards solutions
B- One day at a time
C- I cause my own fortunes
B+C- Everything relates to self
If the degrees of his pie slice are measured, it becomes evident that this is 90°. This number is recorded under the title of work. This is repeated for all the categories the collaborators divide their circles into. Many of the subject categories were common, for example, the amount of time spent drinking, working, and not being with family. There is also an “other category” which contains time spent on activities unique to one individual. All the degrees were added up for each subject category and divided by the number of respondents which resulted in the mean degrees for a composite 360° chart. The mean degrees were then divided by 360° and multiplied by 100 for the percentage of time spent on an activity. These numbers were entered into a graphing program which automatically graphed the results. The results were displayed in standard bar graph format (Figure 6.4) because this allowed for an easier comparison of the two groups of data.

Both the data from Interview Set One and the data from the respondents is similar. The amount of time spent drinking was 51% for the collaborators and 52% for the respondents. The amount of time spent working is 22% to 32%. The amount of time spent sleeping was 13% to 5%. If one collapses these last two categories it then becomes 35% to 37%. The amount of time spent on other activities was 8% to 8%. The amount of time spent with family was 7% to 3% which could be accounted for by the number of children each person has, if
FIGURE 6.4 Comparison of Time Usage for Interview Set One - Collaborators and Triangulation Respondents Entering the Program

- Collaborators
- Respondents

Category
- Family
- Other
- Sleeping
- Working
- Drinking

Percentage of Time spent on Activity

0 10 20 30 40 50 60 70 80 90 100
they are married, divorced or separated. The pie chart and activities like work and family time are different because the socioeconomic backgrounds of the people involved vary widely. What is significant is the amount of time spent drinking. I feel that the pie graph shows that the sample of the respondents are the same as the sample of the collaborators and the findings of this study can be generalized to encompass people entering Brentwood.

Network Analysis

As in the previous analysis of the network diagrams (Chapter Four) the information that was contained in the network diagrams had to be presented in a manner that was both informative and also illustrative of the trends and patterns between the various categories and also between the different groups of people. In this exercise there were five groups: (1) the exemplars when they were entering the program, (2) the exemplars when they were graduating from the program, (3) the non-exemplars when they entered the program, (4) the triangulation respondents entering the program and (5) the triangulation respondents who were graduating from the program.

In order to display the data in an informative manner, each individual entry for both the collaborators and the respondents was noted and placed in its respective category. The categories were determined by the responses that the collaborators and the respondents gave; therefore, I had no input into which categories would exist. This was possible to do because the collaborators indicated friends by writing their initials out, their family members by writing "mother" or "father," and people in Brentwood by writing their initials and placing a star or circling their name. This made it possible to examine each circle and note the initials or people and then to place them in their respective category, for example, "family," "friends," "work," "professionals," or
“priest.” If the collaborator or a respondent left a circle blank this would be recorded in the category 'nobody' (i.e., the individual had nobody who gave them that type of support).

The results of the network are displayed in the forms of bar graphs allowing for the easy identification of which groups the respondents are relying on the most heavily. The first set of graphs (Figure 6.5) contains the results for the non-exemplars entering the program, the exemplars entering the program and the triangulation respondents entering the program. The categories include friends, family, nobody, work, professionals, and others. The triangulation sample has a more balanced reliance on friends and family (Figure 6.5). The exemplars’ graph and the triangulation respondents’ graphs both show a larger number of categories than the non-exemplars’ graph.

The second set of graphs (Figure 6.6) concerns exemplars and triangulation respondents graduating from the program. As before, the first four categories are in the same order: Brentwood people, friends, family, and Father Paul. The exemplars had three more categories but the percentages indicated by them were small. The triangulation people had a more balanced approach between Brentwood people and their own friends (which could indicate trouble if their old friends are heavy substance abusers; the respondent may be in danger of becoming trapped again) (Figure 6.6). This means that triangulation people have not been conditioned into accepting Brentwood’s ideology to the point where they disregard the people that they knew before they entered the group.

What the network diagram shows is the relational patterns that exist around different people in different stages of the support process. It also shows

---

2 Brentwood people refers to the people that the collaborators and the respondents met while they were in the program. Many times they would become friends.
FIGURE 6.5 Network Analysis for People Entering the Program

Where Support Came from Before the Support Group - Non-Exemplars

- Professionals: 6.3%
- Priest: 6.3%
- Family: 28.1%
- Friends: 59.4%

Where Support Came from Before the Support Group - Exemplars

- Other: 4.2%
- Professionals: 5.2%
- Work: 7.3%
- Nobody: 11.5%
- Family: 17.7%
- Friends: 54.2%
FIGURE 6.5 Continued

Where Support Came from for Triangulation Respondents Entering the Program

- Other: 5.3%
- Professionals: 7.9%
- Work: 7.9%
- Nobody: 10.5%
- Family: 31.6%
- Friends: 36.8%

Percentage Refined on for Support

Please note that the thickness of the bars in the graphs is not significant but is the result of the number of categories in each of the graphs.
FIGURE 6.6 Network Analysis for People Graduating from the Program

Where Support Came from for Exemplars Graduating from the Program

- Nobody: 0.6
- Professionals: 1.3
- Work: 1.9
- Other: 2.6
- Father Paul: 7.1
- Family: 15.4
- Friends: 22.4
- Brentwood: 48.7

Percentage Relyed on for Support

Where Support Came from for Triangulation Respondents Graduating from the Program

- Nobody: 1.9
- Father Paul: 13.5
- Family: 15.4
- Friends: 34.6
- Brentwood: 34.6

Percentage Relyed on for Support

†† Please note that the thickness of the bars in the graphs is not significant but is a result of the number of categories in each of the graphs.
that these patterns are to a certain degree similar, and that the support process has an effect on the people which is evident in the percentages given to Brentwood people.

SUMMARY

As was stated at the beginning of this chapter, triangulation will not confirm the researcher's findings 100%. However, triangulation will allow the researcher to state with a greater degree of accuracy which of his ideas and original findings have merit which areas could be the focus of further research, and which areas other researchers could probe and investigate.

The triangulation methods confirm that the information that was generated in the original interviews is valid. Individuals, regardless of when they enter the program, have thought worlds (themes from the interviews) which are general in nature. In other words, it is difficult to state with any degree of accuracy how someone is thinking about themselves and their situation, both when they enter the program and when they leave the program. But it is possible to say that the thought worlds represent, in general, the kind of things that the collaborators are concerned with. The differences between the respective groups seem to be a question of degree.

As the study progressed new information came to my attention which affected the direction of the research. As was stated in Chapter Two, it is difficult at the outset of a collaborative project to predict what information will be uncovered. Because of this the next chapter re-examines the initial propositions and looks at new bibliographic entries which had an impact on me and my research.
CHAPTER SEVEN
ADAPTING THE PROPOSITIONAL INVENTORY

INTRODUCTION

At the outset of this study, a number of propositions or initial thoughts were expressed. It was expected that as the study progressed that many of these propositions would change in the list of new information. The first part of the chapter re-examines the propositional inventory, and discusses the initial propositions and their relevance to the study. The latter part of the chapter discusses new bibliographic additions to the study.

THE PROPOSITIONS REVISITED

1. Social support is fundamentally a group process and is subject to the same conditions or development that other groups undergo concerning history, bonding and cohesiveness.

   It would appear that social support is partially a group process. The people entering the program bring a wide range of concerns to the group but when they leave the group they still discuss a wide range of themes. As I found in the network analysis diagrams, many of the circles for the individuals who have made it through the program contain the initials of people who have also made it through the program.

   At the same time, the social support process is also an individual experience. The individuals have to deal with many of their problems from an objective standpoint. They air their problems in a group but it is up to the individual to analyze the meaning and the implications of his actions for his life and for his families.
2. There are positive and negative aspects to social support. The positive aspects include helping the person overcome his original problem but the negative aspects occur when one dependency is replaced with another.

This proposition resulted from an article by Jurick (1987) on the negative aspects of social support groups. Some researchers suggest that social support groups are successful only if they do not replace one addiction with another or one dependency with another. For example, in the case of the alcoholics the group has only been successful if the alcoholics do not drink and can also walk away from the group. But I would argue, that because these individuals have sought out the formal support group and are alienated from the people around them and because they are missing a significant identity group - of other alcoholics - the support group which they have used to get their lives moving in a positive direction will play an important role for the rest of their lives. The alcoholic cannot live in a vacuum away from other alcoholics. Without the support group the networks and support structure that the alcoholic has built up will cease to exist and the recovered alcoholic is again in danger of becoming trapped in an addictive circle.

3. The alcoholics who are taking part in this study are looking for something in addition to help in solving their problem.

The alcoholics who have found their way to the group are in fact looking for something else besides help. They are looking for people who are like them and for hope to live. All their lives, including the point when they entered the support group, they have felt that they are the only ones with this problem. A central identity group which has been missing from their lives has suddenly and dramatically been filled in for them. It is this realization that they are not alone that enables the alcoholics to start to rebuild their lives.
4. Communication plays a central role in the social support process and acts as the link between the sender and receiver of support.

Communication does play a central role in the social support process. Without communication, alcoholics live in a vacuum as they did before they came to the support group. The alcoholics who were in this group no longer had the ability to effectively communicate with any one around them. Their perceptions were warped and the screening process that allows other people to communicate effectively no longer works for them. They cannot deal with incoming stimuli so they seek to deaden the stimuli with alcohol. The result is that they cannot communicate with anyone. In the support group, the alcoholics begin to learn how to communicate with people, first, by acknowledging their own feelings and perceptions and, secondly, by opening up to people.

One of the criticisms of support groups is that they do not affect the structural or external environment in which individuals exist but rather persuade members to adopt the group's ideology. But communication helps to change the external environment of the individual by establishing new relationships and strengthening old relationships.

5. Social support and the demand for it will not be decreasing in the next few years, rather, the demand for it will be increasing and it will become more and more important to people and society.

This proposition was not directly referred to in the study but with the rising costs of medical and treatment facilities, medical insurance, and the overall expenses of professionals, it will be difficult for everybody to receive the attention they need. Because of this, people will try to help themselves by means of support groups. Instead of treating the end result, society should be focusing on treating the symptoms before they become a problem.
6. People who are in a formal social support program are there of their own free will.

The majority of people come to the formal support group of their own free will. For the most part they are aware that their lives are not going the way they should. They feel trapped with nowhere to turn until they become aware of a place such as Brentwood.

7. If someone is in a support program then they want to help themselves.

On the average, it is true that most of the individuals who are in the support group do want to help themselves, but there are the individuals who cannot use the support group and hence withdraw before the program is over.

8. The changes that the alcoholics undergo as they go through the support program should be significant.

The changes that the alcoholics underwent were significant. Since the attitudes and feelings that were expressed in Interview Set One were not present in Interview Set Two, a new coding scheme had to be developed and utilized. The networks built by the exemplars prior to their graduating from the program were significantly different from those that the non-exemplars constructed after they left the program. The exemplars have a wider range of potential sources of support than do the non-exemplars.

9. From a communication perspective alcoholism can be seen as a form of psychological noise that interferes with the transmission and reception of messages.

In communication exchanges noise interferes with the smooth transmission and reception of messages. In the case of alcoholics the condition
of alcoholism is the cause of interference or psychological noise. The support group helps alcoholics become aware of the noise source and once they become aware of it they can begin to try and reduce it.

10. Interpersonal communication provides a link between alcoholics and their environment. However, in the alcoholics' case, interpersonal communication is hampered. This leads to damaged relationships, which in turn leads to isolation and negative feelings on the part of the alcoholic.

Interpersonal communication does provide a substantial link between alcoholics and their environment. As the alcoholics' problems gradually worsen, the amount of interpersonal communication and interaction between them and other individuals decreases to almost nothing. The communication channels or links that help to develop and maintain relationships between the alcoholics and other individuals disappear because of the interference caused by psychological noise. This leads to the alcoholics becoming isolated and alienated.

As the alcoholics work their way through the program, they learn how to communicate with people in an honest manner. First, they start to build ties with other people in the program, which establishes new ties to the recovering alcoholic culture, and then start to rebuild ties with their families and friends.

NEW BIBLIOGRAPHY

New information that arose as a result of bibliographic additions is discussed in the following section. In a collaborative inquiry the design of the project emerges. As the study continues the researcher reads new material. The purpose of this section is to highlight some bibliographic additions that influenced me in the course of the research.
CHAPTER SEVEN

Alcohol and Canadian Society

Alcohol has a significant place in Canadian society but Canadians do not consider the costs or damage that alcohol does to millions of Canadians a year. Why should they? The consumption of alcohol is not a crime nor is it a crime to be in the possession of alcohol. A 1987 Gallup Poll found that 78% of Canadians over the age of 18 drink alcoholic beverages. A similar poll found that 80% of Ontario's population over the age of 15 consume alcoholic beverages. In Ontario universities, 65% of university students drink moderately but more than 30% have 15 or more drinks a week. The Ontario Ministry of Health believes that one in five Ontarions drink at a level that poses a threat to their health and social well being (The Toronto Star, March 19 1989: B6).

What are the effects of alcohol consumption on Canadian society? In Canada there are close to 600,000 alcohol dependent people which translates into over $2.6 billion dollars in 1987 in medical and health care costs (The Toronto Star March 19 1989: B6). As the cost of medical treatment and insurance continues to increase, it can be expected that more money will have to be spent.

In terms of an individual's health, alcoholism damages muscles, causes hypertension, inflammation of the pancreas, loss of motor control, degeneration of the brain, memory loss, liver disease as well as weight loss (The Toronto Star, March 19 1989: B6). This information was evident in the collaborators taking part in this study. ²

² For example a 25 year old collaborator (who made it through the program) when asked how alcohol affected his life three years ago could not remember what year was being referred to. He had no idea of time and he would constantly forget what he was talking about.
In terms of business costs and effects on the workplace, Ontario businesses lost over $1.2 billion in 1987 as a result of alcohol and alcoholism (*The Toronto Star* March 19 1989:B6). Some businesses have taken steps to help their employees deal with alcohol and alcoholism. For example, Chrysler, Ford, and General Motors regularly send their employees to Brentwood to seek help. There are special Alumni meetings for graduates of Brentwood which are only for employees of those firms.

Alcohol also has a devastating affect on Canadian families. Over 200,000 Canadians are charged with alcohol related offences each year compared to 37,000 charged for possession of illicit drugs (*The Toronto Star* March 19 1989:B6). Many alcohol related crimes involve drunk drivers, who not only harm themselves but also often fatally injure innocent others. Many Canadian families have lost family members as a result of drunk driving accidents. In addition, over 2,000 divorces a year in Canada cite alcohol as a factor (*The Toronto Star* March 19 1989:B6). The other far reaching consequences on families are difficult to determine, but there are many families where abuse and neglect result from alcohol abuse and alcoholism.

The Selling of Alcohol

A great deal of effort and research is put into determining the effects of advertising on Canadians and ways in which alcohol advertising can be made more effective. In 1986, the Canadian Radio-television and Telecommunications Commission (CRTC), responding to pressures from health groups and Health Minister Jake Epp, devised a code of restrictions for alcohol advertisers. But a study done for Health and Welfare Canada found that the code is ineffective in stopping alcohol advertisers from using 'youth symbols'-- frisbees, skateboards, ice-cream carts, stuffed animals, and rock
music—to promote the sale of alcohol. In fact, 20% of Canadian advertisements for alcohol contain some kind of symbol of youth (*The Toronto Star* December 10 1988:H6). This battle will be waged between the federal government and the alcohol brewers and distillers for sometime to come.

**Codependency**

Most often the people around the alcoholic are subject to the negative attitudes and twisted thinking that influences alcoholics and their view of life. The adopting of such attitudes and behaviours is known as codependency.

Co-dependency is a specific condition that is characterized by preoccupation and extreme dependence (emotionally, socially, and sometimes physically), on a person or object. Eventually, this dependence on another person becomes a pathological condition that affects the co-dependent in all other relationships. (*Wegscheider-Cruse 1985:2*)

Codependents feel trapped by their situation. They feel powerless to do anything to solve their problems (*Wegscheider-Cruse 1985:3*). Moreover, codependents can internalize their spouses' addiction to such a degree that they relate to others in the same manner (*Friel and Friel 1988; Wegscheider-Cruse 1985*). In Table 7.1, some of the characteristics that form alcoholics' thinking are compared to the resulting attitudes which their spouses usually adopt in becoming codependents.

Society reinforces the codependent because of the pressure put on people to aid alcoholics. But the magnitude of alcoholism quickly overwhelms the codependent which results in that person adopting some kind of addiction whether it is to sex, drugs, alcohol or work. At especially high risk are the
Table 7.1: Characteristics of Codependency
(*Reprinted with permission from Dr. Thomas Carney)

Characteristics of the Addict

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Resulting in complementary traits in the Codependent</th>
</tr>
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<tbody>
<tr>
<td><strong>DENIAL</strong> - to cope with shame and pain</td>
<td><strong>LOW SELF-CONCEPT</strong></td>
</tr>
<tr>
<td>Confusion</td>
<td>Denial - to cope with shame and pain</td>
</tr>
<tr>
<td>Deviousness</td>
<td>Confusion</td>
</tr>
<tr>
<td>Defensiveness</td>
<td>Deviousness</td>
</tr>
<tr>
<td><strong>DISHonesty</strong> - to cover for self</td>
<td>Denial - to cope with shame and pain</td>
</tr>
<tr>
<td>&quot;Nice lies&quot;</td>
<td>Confusion</td>
</tr>
<tr>
<td>Broken promises</td>
<td>Deviousness</td>
</tr>
<tr>
<td>Lack of trust</td>
<td>Defensiveness</td>
</tr>
<tr>
<td><strong>Self Centredness</strong> - to reinforce the self-concept</td>
<td>Other-Centredness - to reinforce the self-concept by helping others</td>
</tr>
<tr>
<td>by blaming others</td>
<td>Paranoia</td>
</tr>
<tr>
<td>Paranoia</td>
<td>Don’t recognize own feelings</td>
</tr>
<tr>
<td>Don’t recognize any feelings</td>
<td>Self-sacrificing decisions</td>
</tr>
<tr>
<td>Cold-hearted decisions</td>
<td>Mood swings between sad and angry</td>
</tr>
<tr>
<td>Mood swings between ‘up’ and angry</td>
<td>Over-responsibility</td>
</tr>
<tr>
<td>Irresponsibility</td>
<td></td>
</tr>
<tr>
<td><strong>Compulsion to Control</strong> - to reinforce</td>
<td><strong>Compulsion to Control</strong> - to</td>
</tr>
<tr>
<td>the illusion of powerfullness</td>
<td>reform the addict and cope</td>
</tr>
<tr>
<td>Perfectionism - hard on others</td>
<td>with the chaos</td>
</tr>
<tr>
<td>Inflexibility (<em>My way</em>)</td>
<td>Perfectionism - hard on self</td>
</tr>
<tr>
<td>Dependence - on the fix</td>
<td>Inflexibility (<em>No, my way</em>)</td>
</tr>
<tr>
<td></td>
<td>Dependence - on fixing others</td>
</tr>
<tr>
<td><strong>Ethical Deterioration</strong></td>
<td></td>
</tr>
<tr>
<td>Fear and guilt</td>
<td><strong>Ethical Deterioration</strong></td>
</tr>
<tr>
<td>Shame</td>
<td>Fear and guilt</td>
</tr>
<tr>
<td>Depression</td>
<td>Shame</td>
</tr>
<tr>
<td>Spiritual bankruptcy</td>
<td>Depression</td>
</tr>
<tr>
<td></td>
<td>Spiritual bankruptcy</td>
</tr>
</tbody>
</table>
children of alcoholics before they become adult children of alcoholics (Friel and Friel 1988; Wegscheider-Cruse 1985).

There has been a great deal of attention focused on the effects alcoholics have on their families, especially their adult children, referred to as adult children of alcoholic parents (ACAPS). In the research that was carried out for this project, close to 85% of the people involved have a family history of alcoholism. Alcoholism is passed from one generation to the other. What ACAPS aims to do is to break the cycle, to aid the children of alcoholic parents to recognize behaviour patterns in themselves that could adversely affect them and to deal with their childhood. Janet Geringer Woititz has written a number of books on adult children of alcoholics. In Adult Children of Alcoholics, she lists thirteen perceptions that children of alcoholics hold to be true:

1. Adult children of alcoholics guess at what normal behaviour is.

2. Adult children of alcoholics have difficulty following a project through from beginning to end.

3. Adult children of alcoholics lie when it would be just as easy to tell the truth.

4. Adult children of alcoholics judge themselves without mercy.

5. Adult children of alcoholics have difficulty having fun.

6. Adult children of alcoholics take themselves very seriously.

7. Adult children have difficulty with intimate relationships.

8. Adult children of alcoholics overreact to changes over which they have no control.
9. Adult children of alcoholics constantly seek approval and affirmation.

10. Adult children of alcoholics usually feel that they are different from other people.

11. Adult children of alcoholics are super responsible or super irresponsible.

12. Adult children of alcoholics are extremely loyal, even in the face of evidence that the loyalty is undeserved.

13. Adult children of alcoholics are impulsive. They tend to lock themselves into a course of action without giving serious consideration to alternative behaviours or possible consequences. This impulsivity leads to confusion, self-loathing, and loss of control over their environment. In addition, they spend an excessive amount of energy cleaning up the mess. (Woititz 1983:4)

There is a compelling need to help individuals before the process of addiction takes control of them and before they find that they have to seek a treatment facility like Brentwood. It would appear that individuals could help themselves before they become like one or both of their parents.

In this study over 85% of the people are adult children of alcoholic parents. The literature on ACAPS helps to shed light on the background of the alcoholics and adds to the understanding of alcoholics' thought worlds.

Supportive Networks

In our lives we need contact with other people; people we care about and who care about us. We cannot survive in a vacuum. Our sense of self-worth is directly related to the people who are around us and with whom we seek ties (Carney 1988:123). A strong support network with a number of different ties
to a number of various people and groups allows individuals to be better able to cope with the stress that they encounter. For example, you need people who can help you in a crisis, intimate personal friends, people who respect you, mentors and teachers, reference groups, contacts and people who provide contacts, models you can use as a guide, and people who challenge you (Carney 1988:126). In this manner, the demands for support are spread over a large number of people so if one part of the network cannot provide the support you need, another can (Figure 7.2).

Conversely, a weak network has only few ties which can lead to the network being overwhelmed. The result is that individuals find themselves alone to deal with their problems. This type of network is called a fortress because the individual is as it were in a fortress, cut off from the outside world (Carney 1988:129) (Figure 7.3).

It is important for individuals to be able to recognize and develop networks because as they move or leave the place where their support network is, they will have to go about building and maintaining a new one which takes skill to achieve (Carney 1988:131). An understanding of what a healthy network consists of, helps in the analysis and understanding of the non-exemplars' and exemplars' networks.

**SUMMARY**

This chapter re-examined the initial propositional inventory and how the data uncovered changed my focus and understanding of the topic. The second part of the chapter dealt with with new information added as the study progressed dealing specifically with society and alcohol, co-dependency, adult children of alcoholics, and support networks.
FIGURE 7.3: The Fortress (reprinted with permission from Dr. Thomas Carney)
One of the criticisms of support groups is that they do not affect the structural or external environment in which individuals exist but rather persuade members to adopt the group's ideology. The Brentwood rehabilitation approach like the A.A. approach, concentrates on raising the individual's awareness of his/her responsibilities, for his/her plight, to get the person out of self pity and blaming others. It does not critically review the contribution of larger societal forces, such as advertising, to the individual's plight. Because of this criticism, it was necessary to have background information about the alcoholics' external world as well as an understanding of what defines a healthy support network. This information will make it possible to better understand the functioning of communication between the alcoholics' environment as well as providing a basis on which to analyze the network diagrams which are examined in Chapter Nine.

The next chapter draws on all the data collected to reconstruct the "deep structures" of the collaborators' reality. Three reconstructions are done for each interview set, one by me, one by the peer debriefer and one which is a composite of the two.
CHAPTER EIGHT
ANALYSIS STAGE III

INTRODUCTION

This chapter briefly examines the effects of emergent design on the study. The second section of the chapter focuses on reconstructing the collaborators’ reality, in the form of phenomenon recognition checks, which are based on the data that has been generated. Nine reconstructions are given, three for each of the interview sets (one done by myself, one by the peer debriefer and one which is a composite diagram of both our diagrams).

EMERGENT DESIGN: IMPACT ON THE RESEARCH

As stated in Chapter Two on new paradigm research, the design of this type of research project is flexible in order to deal with new data or findings. The evaluation of the project goes on continually, shaped and molded by the many people involved. This means that different perspectives are used and the criticism of the project comes early enough to be applied (Carney 1987:21). The researcher must remain open minded and flexible to deal with new insights and data that may arise from the peer debriefer or from bibliographical material.

For example, at the beginning of the study, it was decided that a significant other (a person who is emotionally close to the collaborators) would be interviewed by me. But it quickly became evident that this procedure was not worthwhile due to the amount of alienation between these significant others and the collaborators. The significant others who were initially interviewed had no idea of what the collaborators had gone through and rarely
communicated with them. Moreover, I was put into an unethical position because I usually knew more about what the collaborator had done and the lies they were telling than their significant others did. If I had been asked any questions about the collaborators, I would have had to lie, which directly contravenes the basic ethical tenet of this type of research: good research means never having to say you are sorry (Carney 1987:20). There are no tricks, deceit or manipulation of the respondents in any way. The researcher has to consider the consequences of his research and the impact that the research will have on all the people involved. It was possible to discontinue the significant other interviews because of the flexible nature of the research design. The collaborators' comments could be checked by other types of triangulation exercises.

Triangulation is also difficult to plan at the outset of the research project: “there is no telling at the outset which one (triangulation method) your situation will allow you to use” (Carney 1987:4). The first difficulty to overcome was to locate a sample that was similar to the two groups that took part in this study (people who were just entering the support group and people who were graduating from the support group). The Brentwood Recovery Home was again approached and asked whether a sample could be used from their population. Permission was granted but the people involved could not be taken out of the general population for more than half an hour. Because of this the triangulation methods that had to be used had to be done quickly while at the same time generating useful information. With this information, the values clarification exercise, the pie chart of time usage and the network analysis diagram were decided upon. Each of these three exercises could be done relatively quickly by a small sample and could generate a great deal of qualitative data.
The flexible nature of the project was also demonstrated in Interview Set Three. Immediately after these three individuals had left the program, they were contacted and a second interview took place. However, following a brief time away from the support group, contact with these individuals was lost. When contact was reestablished, they made it clear to the researcher that they no longer wanted to take part in the project. This also occurred with some of the individuals that made it through the support group. This was taken into consideration at the outset of the program, and explains why twenty people were asked to participate to ensure that at least six of those who successfully completed the program would stay involved with the project.

PHENOMENON RECOGNITION CHECK

The final aspect of the data analysis involves reconstructing the collaborators' reality and cross-checking the reconstruction. At this stage, there is enough cross-comparable data to be able to construct “deep structures” of the collaborators' views on the topic, i.e., the principles or trends that underlie the findings. Three reconstructions are made: one by the researcher, one by the peer debriefer and one which is a combination of these. The three reconstructions are then given to the collaborators to allow them to pick the one that best fits their reality with any alterations necessary. For the purposes of this research project, nine reconstructions were done, three for each of the interview sets (three for Interview Set One, three for Interview Set Two and three for Interview Set Three). The reconstructions for Interview Set Three could not be commented on because the collaborators involved in the study had withdrawn.
Reconstructing the Data

After collecting the data and extracting common themes for each of the interview sets, it is necessary to create a conceptual framework to integrate the data into a visual representation of the collaborators' reality. Such a representation makes it easy for the collaborators to respond.

To construct the diagrams of the collaborators' deep structures (the processes by which they view reality and their attitudes to their world) the person card technique was used.\(^1\) This technique is a simple straightforward method of grouping the themes from the interviews into families of common concepts. Each theme is written on a 2" x 1" piece of paper, which is small enough to allow the cards to be moved around. The families of concepts are then linked together to form clans, clans are linked to form tribes and tribes to form a community. A set of cards containing the themes is also given to the peer debriefer who does his/her own groupings. The researcher and the peer debriefer compose their phenomenon recognition checks from these groupings.

For my version of the person card technique, I used a graphics drafting program on an Apple\textsuperscript{TM} Macintosh\textsuperscript{TM} computer. I typed in each of the themes and using different font sizes indicated themes of greater importance. I then moved themes into families and clans, ordered from the most important themes to the least important based on the scores received in the matrix analysis. I then constructed circles to indicate the degree of importance and placed my clans into the appropriate circles to form tribes. All the circles as a whole form my community. Donna Hennessy, the peer debriefer, used the 2" x 1" paper cards to develop her patterns.

\(^1\) This discussion follows Chapter 8 of Dr. Carney's forthcoming book on collaborative inquiry.
Reconstructions for Interview Set One

*Researcher*

Interview Set one dealt with the collaborators when they were entering the support group. The themes that arose during the first series of interviews were used for the reconstruction. I saw the issues expanding outward from the most important themes to the least important. I arrived at the themes that were the most important by using the matrix analysis and the scores that each theme received. I decided that a series of concentric circles around the individual would best describe the situation. The first circle contained the themes that scored between ten and twenty in the matrix analysis (Chapter 4). The next circle contained the themes that scored between five and nine, and the outermost part of the diagram contained the themes that scored between one and four (Diagram 8.1A).

*Peer Debriefer*

The peer debriefer also used the matrix analysis to determine which themes or issues were the most important to the collaborators. However her reconstruction was different from my own. She saw the themes as a process moving from the most important, “the realization of a problem,” to the a of smaller themes such as “denial,” “mood swings,” “fear,” “nice lie,” “deviousness” and “shame.” Her diagram moves through the stage where the individual realizes he has a problem but is unable to deal with it because he is self-centred and alienated from everybody. In an attempt to deal with this; the individual seeks to escape his problems using drugs and alcohol which leads to confusion and spiritual bankruptcy (Diagram 8.1B)
Diagram 8.1 A: Phenomenon Recognition Check Interview Set One

- Lack of trust
- Deviousness
- External self-validation
- Confusion
- Negativism
- Everything seen relating to self

- Realization
- Progressive alienation
- Disinformation
- Spiritual bankruptcy

- Individual
- Escapism
- Fear
- Shame
- Perfectionism
- Rapid mood swings
- Quick fix
Diagram 8.1B Phenomenon Recognition Check Interview Set One

- Realization
  - Everything seen relating to self
  - Alienation
- Escapism
  - Confusion
    - Denial
    - Mood swings
    - Fear
  - Spiritual Bankruptcy
    - Nice lies
    - Deviousness
    - Shame
Combination

A peer-debriefing session was used to compare both diagrams and to come up with a composite diagram. It was agreed that the theme of realization was the most important out of all the themes that arose from Interview Set One and that the three next themes in terms of importance were; everything seen relating to self, alienation and escapism. These three themes were all connected to each other and the lesser themes were a result of the interaction between these three themes. Circles were used to help signify the degree of importance. In the center of the diagram are the themes of “everything seen relating to the self,” “alienation” and “escapism” which are all connected by arrows. The three themes are then surrounded by the smaller themes, “denial,” “rapid mood swings,” “fear,” “shame,” “spiritual bankruptcy,” “disinformation,” “confusion” and “deviousness.” The whole group of circles is then surrounded by a box which signifies the most important theme of realization (Diagram 8.1C).

Reconstructions for Interview Set Two

Researcher

The matrix analysis from Chapter Four was used to determine which of the themes was the most important for the collaborators who had made it through the program. I again used the concentric circle concept to place the themes around the individual from most important to least important. The most important in this case was the “awareness that the individual was not alone with the problem.” The second circle contained the next four most important themes of “patient work towards solutions,” “awareness of own feelings,” “awareness of own projections” and “a one day at a time attitude.” The third circle contained the themes of “acceptance of own flaws,” “spiritual needs” and
Diagram 8.1C Phenomenon Recognition Check Interview Set One

Realization

Denial

Deviousness

Everything seen relating to self

Confusion

Alienation

Escapism

Rapid Mood Swings

Fear

Disinformation

Shame

Spiritual Bankruptcy
“small group skills.” The outlying themes were “tolerance of differences in others,” “I cause my own fortunes” and “sharing with others” (Diagram 8.2A).

**Peer-Debriefer**

The peer debriefer again saw the themes connected as a process moving from the most important theme of “not alone with the problem” through the minor themes to “patient work towards solutions” which then was reconnected to “not alone with the problem.” The peer debriefer saw two main areas that were important, one was a group of themes concerned with external development and the second was a group of themes concerned with internal development. The external themes were “awareness of own projections,” “one day at a time” and “small group skills.” The internal themes were “awareness of own feelings,” “acceptance of own flaws” and an “awareness of spiritual needs.” These two groups then were connected to “skills in self-disclosure” and “listening” which leads to “patient work towards solutions” (Diagram 8.2B).

**Combination**

The combination diagram combined my circles with the process aspects of my peer’s. The two groups of external and internal themes were joined by an oval diagram which represents “patient work towards solutions.” At one end of this oval, was the theme of “acceptance of flaws” and at the other end were “small group skills,” “listening” and “self-disclosure.” This entire group was surrounded by the theme of “not alone with the problem.” The internal process and the external process culminates in the realization that the solutions to a problem such as alcoholism cannot be dealt with in any other way than patient work. This is possible because the collaborators have found a primary identity
Diagram 8.2A Phenomenon Recognition Check Interview Set Two

1. I cause my own fortunes
2. Spiritual needs
3. Awareness of own Projections
4. With Problem
5. Not Alone
6. Patient work towards solutions
7. Acceptance of own flaws
8. Sharing with others
9. Tolerance of differences in others
10. One day at a time
11. Small Group skills
12. Aware of Own Feelings
13. Individual
14. Not Alone
Diagram 8.2C Phenomenon Recognition Check Interview Set Two

Not Alone With Problem

Acceptance of own flaws

Aware of Feelings (Internal)

Aware of Projections (External)

Group skills/Listening self-disclosure

Patient work towards similarities

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group (other alcoholics) which gives them the ability to start to solve their problems by seeing other people who are doing it successfully (Diagram 8.2C).

**Reconstructions for Interview Set Three**

**Researcher**

The third set of reconstructions dealt with the three individuals that withdrew from the program before they had reached the end of the ninety days. When these individuals left the program, all three immersed themselves in work in an attempt to stop thinking about the support group and how they were now going to deal with a problem whose magnitude was only starting to become evident. I again used the circles centred on the individual. The first circle contained the theme of "external self-validation" (which means seeking something like work to determine their sense of self-worth). The next circle contained the theme of "confusion" and the outermost themes were "bad self-concept" and "alienation" (Diagram 8.3A).

**Peer-Debriefee**

The peer debriefer again saw the interaction between the themes as a process. The individual sought to lessen his fears by immersing himself in work, a form of external self-validation which led to confusion, bad self-concept, and alienation (Diagram 8.3B). This caused him to validate his self-worth through work.
CHAPTER EIGHT

Combination

The combination diagram was composed of the interaction between confusion, bad self-concept, and alienation. These three themes were placed in circles which were surrounded by a large circle representing external self-validation (Diagram 8.3C).

The seeking of an external form of self-validation led to the other themes. If an individual is spending a great deal of time at work, he is probably alienated from the people around him. Also he is likely to be confused as to the next step or move he should make in trying to deal with his problem, which further deepens his bad self-concept.

Issues

The chief difficulty which arose in attempting to reconstruct the various realities lay in the interconnectedness of the themes in the interview sets. These themes, while important in themselves, are only part of a larger and more complex phenomenon. Many times when individuals incorporate one of these themes into their reality, this opens the way for many more themes. This made it difficult to give one theme more importance than another; hence the peer's diagrams which were like flow charts, and mine which were circles of importance built upon inner circles. The combination diagrams feature both reconstructions in order to achieve a better reconstruction of the collaborators' reality.

Collaborators' Responses

The collaborators who responded reacted favourably to the diagrams. For Interview Set One they chose diagrams 8.1 A and 8.1 C. For Interview Set Two they chose 8.2A. Interview Set One, the majority chose 8.1A, and one
Diagram 8.3C Phenomenon Recognition Check Interview Set Three

External Self-Validation

Alienation

Confusion

Bad Self-Concept
collaborator chose 8.1C. He saw the themes of “alienation,” “escapism” and “everything seen relating to self” as being intertwined and causing the smaller themes. For Interview Set Two all the collaborators who responded chose 8.2A. They thought that this diagram was an accurate representation of how they felt.2

The collaborators responses to the diagrams serves as another form of triangulation and strengthens the reliability of the findings of the study. The phenomenon recognition checks draw on all the data and presents it in another form to the collaborators. The collaborators' agreement on the diagrams as a representation of their reality adds reliability to the researcher and to the findings.

SUMMARY

This chapter drew on all the data generated to reconstruct the deep structures of the collaborators' reality. First, the themes that were taken from the interviews were coded and arranged in rank order. The data was then triangulated as a method of testing myself and the reliability of the data uncovered. Finally, phenomenon recognition checks were constructed based on all the preceding information. Phenomenon recognition diagrams were done for each of the interview sets. For each set I did a diagram, my peer debriefer did one, and we constructed a composite diagram. The collaborators responded in a positive manner to the phenomenon recognition diagrams.

2 The diagrams for Interview Set Three could not be commented on because the non-exemplars had withdrawn from the study.
The following chapter will use the information generated by the research to apply it to communication theory and social support. First the thought worlds of people entering the program and people graduating from the program will be compared. The thought worlds will then be examined as a form of psychological noise which interferes with communication. Then a examination of the diffusion of support at Brentwood is given followed by an examination of the collaborators networks. The chapter ends with suggestions for further research.
INTRODUCTION

This chapter relates the data that we have been discussing to the concepts outlined in the propositional inventory (Chapter Three). The purpose of a collaborative method is to generalize to theory or the specific support group (in this case Brentwood), not to predict how support groups function.

The first part of the chapter explains pattern matching and its significance to this study (Yin 1984). The second section compares the thought worlds of alcoholics as they enter the support group and the program. The third part counters allegations that support groups persuade individuals to adopt the group’s ideology, while the fourth section discusses how alcoholics’ thought worlds change through six stages of interpersonal communication. The fifth part of the chapter presents a diffusion model of support for Brentwood. Finally, the chapter ends with some general conclusions.

Pattern Matching

Essentially what I have been doing throughout this study is matching my “patterns” or explanations and themes to other researchers’ interpretations of social support and alcoholics. Pattern matching “compares an empirically based pattern [this study] with a predicted one or with several predications)” [see Chapter Three] (Yin 1984:103). In this study I have been pattern matching my data and analysis to the thought worlds of alcoholics and to two models of social support.
THE THOUGHT WORLD OF ALCOHOLICS AT BRENTOOOD

In this study I have been pattern matching the themes that were generated from the interviews with Dr. Carney's adaptation of Schaef's and Fassel's discussion in *The Addictive Organization* (Figure 4.8). The data that I have obtained matched the information in Dr. Carney's diagram with one exception, I added the theme of escapism to the original diagram (Figure 9.1).

In Interview Set Two the original coding scheme that was used to code the data in Interview Set One did not match the data that was generated in Interview Set Two. In fact, the information was a mirror image of what was said in the first interview set. In order to code the diagrams a new pattern had to be developed (Figure 4.8). Figure 4.8 contained themes opposite to those that were discussed in Interview Set One with two exceptions, I added the themes of "realization" and "identity groups" (Figure 9.2). These two themes were new to the information I had collected.

In the interview sets the collaborators talked about a wide range of themes (17 in the first interview set and 16 in the second interview set). Jurick states that support groups persuade their members to adopt the group's ideology (Jurick 1987: 369). However, in the Brentwood model of social support, this is not the case. The thought worlds of the alcoholics both before and after are general in nature. The people who graduate from the program have had the common experience of the support group, but they have not developed into a homogeneous sect. If this were the case in the matrix analysis for Interview Set Two would have only a small number of themes, shared by all the collaborators. In the case of the alcoholics who have graduated from Brentwood the experience was positive, with positive results.

If we re-conceptualize Figure 9.1 as psychological noise, which distorts and interferes with communication, we can develop an alcoholic model of
FIGURE 9.2 Interview Set Two Coding Scheme
(Adapted from Anne Schaef & Diane Fassel, The Addictive Organization, by Dr. Thomas Carney)
CHAPTER NINE

communication. This model illustrates how an alcoholic's communication interactions are affected as the thought world from Interview Set One becomes dominant, and how the support group and the new thought world from Interview Set Two improve alcoholic communication.

INTERPERSONAL COMMUNICATION AND ALCOHOLICS

Interpersonal communication plays an important role in our lives. In fact, interpersonal communication helps us to define who we are and how we fit into the perceived scheme of things:

Much of the information we now have comes from interpersonal interactions. Although a great deal of information comes to us from the mass media, it is often discussed and ultimately "learned" or internalized through interpersonal communication interactions. In fact, our beliefs, attitudes, and values have probably been influenced more by interpersonal encounters than by the media or even by formal education. (Devito 1986: 15)

In order for interpersonal communication to take place a 'source' and a 'receiver' are required. The two people involved in the communication interaction perceive and understand as well as formulate and send messages, usually in a face to face encounter. The individuals involved will alternately (or simultaneously) take the role of source and receiver (Collins 1987:10). The messages involved and the stimuli for the receiver are sent by the source or sender. The source's act of translating ideas or meanings into recognizable symbols is referred to as "encoding". The receiver's process of translating the message into a form that he or she recognizes is called decoding.
Messages that are sent from the source to the receiver travel through a channel, for example, the vocal/audio or gestural/visual channel (Collins 1987: 10). As the receiver decodes messages, he will be giving feedback to the source. All messages that are sent in response to other messages are feedback. The whole interpersonal communication process takes place within a specific context or setting, either physical, social, or psychological (Devito 1986; Collins 1987:12).

Also present in the interpersonal communication transaction is noise. Noise may be physical, semantic, or psychological in nature. Physical noise hinders the actual physical transmission of the message, for example, if you are trying to talk to someone and I am standing behind you yelling loudly. Semantic problems arise from uses of language which cause the receiver to assign meanings which the source did not intend. Psychological noise refers to “any form of psychological interference and includes biases and prejudices in senders and receivers that lead to distortions in receiving and processing information” (Devito 1986: 9).

Interpersonal communication interactions, however, are much more complex than simply the inputting of messages and the outputting of responses. An interpersonal interaction is a dynamic, flowing, on-going process “whereby messages are interpreted according to the internal meaning structures of the individual, and responses are shaped” (Collins 1987:93).

Communication with the physical world or with other human beings, is not a thing, nor even a discrete act, but a continuing condition of life, a process that ebbs and flows with changes in the environment and fluctuations in our needs. (Barnlund 1970: 89)
Marshall Singer believes that individuals create and interpret (encode and decode) messages according to their own unique internal meaning structures. Because we all have had differing experiences, each of us can be considered culturally unique. Therefore, all interpersonal communication can be considered a form of intercultural communication to a greater or lesser extent (Singer 1987:2). Singer states that although individuals are not cultures unto themselves, each individual's world is unique because each individual interprets messages differently (Singer 1987:2). Some of the messages that we receive are examined closely while others are ignored based on “each individual's method of cognitive selection— or use of natural selection screens.” (Collins 1987:98). An individual’s meaning structures or “data storage bank” determines how messages will be selected and responded to (Singer 1987:87).

In the alcoholic model of interpersonal communication, noise plays a role in the distortion of the messages. While the focus of the interpersonal models of communication has been on the transactional, dynamic nature of communication, little has been said on the changing nature of noise and distortion as it relates to specific communication exchanges between particular groups of individuals.

In the alcoholic's case, the noise involved, primarily psychological is not static. Noise expands and becomes more significant and harmful as the alcoholic's condition worsens.

Incorporating Singer's ideas with the aspects of interpersonal communication mentioned previously (decoding, source, and receiver) we can begin to examine the role of interpersonal communication as it concerns alcoholics and the functioning of the support group (Figure 9.3). In Singer's model, interpersonal communication occurs simultaneously through a variety
FIGURE 9.3 Stage One Singer's Communication Model

PERSON A
(SENDER AND RECEIVER)

PERSON B
(SENDER AND RECEIVER)
ALCOHOLIC

Source: (Singer 1987: 70)
of channels. The individual who receives the message then decodes the message based on his past experiences, attitudes, perceptions and identity groups. But in the case of the alcoholic, the messages stop being decoded accurately and misunderstanding and alienation result. We can view the alcoholic's interpersonal communication as involving six stages, starting from normal communication, moving through ineffective communication, and ending with recovering communication.

Stage One: Singer's Model of Interpersonal Communication

In stage one, psychological noise is not playing a significant role in the functioning of the alcoholic's interpersonal communication interchanges, although some noise is present as a result of childhood experiences. For example, one or both parents may have or still suffer from alcoholism. The alcoholic has formed his family into an identity group which he considers normal (Figure 9.3). Messages are received from the source, decoded, acted upon, encoded and an appropriate response (feedback) is sent back to the source. The thought world from Interview Set One is not affecting the alcoholic yet.

Stage Two

During stage two, as a result of a gradually worsening condition or growing addiction to alcohol, the noise the alcoholic generates becomes larger. The noise is starting to interfere with the coding, decoding and feedback of messages. The addiction is causing a warping of the decoding and coding sequences as the attitudes and perceptions uncovered in Interview Set One become more prevalent (Figure 9.4). The noise and distortion generated by the alcoholic starts to interfere with the reception of incoming messages.
FIGURE 9.4 Stage Two of the Alcoholic Communication Model

PERSON A
(SENDER AND RECEIVER)

PERSON B
(SENDER AND RECEIVER)
ALCOHOLIC

Adapted from (Singer 1987:70)
Moreover, the data storage bank becomes increasingly fragmented as the alcohol dulls memory and perceptions (In Figure 9.4 this is illustrated by the dotted vertical lines in the data storage bank). Additionally, the noise is starting to narrow the channel through which feedback is occurring.

*Stage Three*

In stage three, the noise is impeding much of the communication that is sent to the alcoholic. Gestural/visual communication is becoming more difficult for the alcoholic to decipher, and if deciphered, is usually erroneous and magnified negatively. The alcoholic's condition is affecting every facet of interpersonal communication, and it becomes increasingly difficult for the alcoholic to decode and encode messages in a coherent manner.

Feedback has almost ceased to exist as the alcoholic draws into himself. Identity groups, rational thinking, and positive attitudes have been fragmented and are starting to play a decreasing role in the alcoholic's perceptions. He is starting to react and respond to situations and people without considering his actions (Figure 9.5).

*Stage Four*

By stage four, the alcoholic's condition has degenerated to a point where his psychological noise surrounds him and virtually shuts out any form of interpersonal communication. Any messages that do reach him are distorted and twisted to suit his needs. The alcoholic is not making rational decisions and can no longer decode and encode messages.

At this point feedback is non-existent. The alcoholic has lost touch with the people around him and with his environment. He can no longer use information and communication to gather meaning in an attempt to reduce
FIGURE 9.5 Stage Three of the Alcoholic Communication Model

Adapted from (Singer 1987:70)
uncertainty about his situation. This stage represents the critical point where the alcoholic seeks help in the form of the support group or his condition worsens to the point that he dies (Figure 9.6).

Stage Five

In stage five, the alcoholic has entered a support group. The support group helps the alcoholic re-establish ties to his environment, and also to reform his perceptions, attitudes, and identity groups into a reliable structure for base decisions and interpersonal interchanges and exchanges.

The support group decreases the noise so as to allow communication with people. It helps the alcoholic to decode information and messages, to re-establish his ties to his family and environment, and to open the channel for feedback (Figure 9.7). Between stages four and five the alcoholic starts to discard the themes from Interview Set One and adopts the themes from Interview Set Two.

Stage Six

Stage six is the recovery stage. The alcoholic will stay in this stage for the rest of his life. Any deterioration will take him back to stage two. The support group forms the alcoholic’s primary identity group and serves as a master template on which the alcoholic bases all his communication exchanges and interactions (Figure 9.8).

In the case of the alcoholic communication, noise is not a static phenomenon but one that changes and expands. As alcoholics try to ignore it, the noise develops to a point where all their communication is hampered and finally destroyed. Alcoholics find themselves alone, confused and desperate. They use interpersonal communication and the support group in an attempt to
FIGURE 9.6 Stage Four of the Alcoholic Communication Model

PERSON A
(SENDER AND RECEIVER)

PERSON B
(SENDER AND RECEIVER)
ALCOHOLIC

Human Messages & CHANNEL

NOISE

Nonhuman Messages

Sensory Receptions

Transmitters (verbal and nonverbal)

Psychological noise

Past (Learned) Experiences
Attitudes
Values
Perceptions
Identities
(Diss) Belief Systems
Data-Processing

Data Storage Bank

Sensory Receptors

Decoding
Decision
Making
Screen
Encoding

Transmitters (verbal and nonverbal)

Psychological noise

Data Storage Bank

Past Experiences
Attitudes
Values
Perceptions
(Diss) Belief Systems
Identities
Data-Processing

Psychological noise

NOISE

CHANNEL (Through which feedback may occur)
is nonexistent

Adapted from (Singer 1987:70)
FIGURE 9.8 Stage Six of the Alcoholic Communication Model

PERSON A  
(SENDER AND RECEIVER)

SUPPORT GROUP

NOISE

HUMAN MESSAGES

Conscious
Involuntary
Subliminal
Subconscious

DECISION-MAKING

TRANSMITTERS

VERBAL AND NONVERBAL

DATA STORAGE BANK

PAST (LEARNED) EXPERIENCES
Attitudes
Values
Perceptions
Identities
Disbelief Systems
Data-Processing

PERSON B  
(SENDER AND RECEIVER)  
RECOVERING ALCOHOLIC

SUPPORT GROUP

IDENTITY GROUP

NOISE

HUMAN MESSAGES

Conscious
Involuntary
Subliminal
Subconscious

DECISION-MAKING

TRANSMITTERS

VERBAL AND NONVERBAL

DATA STORAGE BANK

PAST EXPERIENCES
Attitudes
Values
Perceptions
Disbelief Systems
Identities
Data-Processing

NOISE

CHANNEL (Through which feedback may occur)
understand their world and their place in it. Also, they are searching for information to reduce the uncertainty and fear they feel about themselves and their relationships. Alcoholics need social support to become aware of the 'noise' that is affecting their interactions with other people.

In the next section I attempt to relate the two differing thought worlds and the six stages of alcoholic communication to a linear model of the support process at Brentwood.

THE PROCESS OF SUPPORT

At the beginning of the support process, the individuals who enter the support group bring a wide range of emotions and concerns to the group. As alcoholics enter the group, there are two sets of concerns: internal and external. Internal concerns deal with such issues as feelings, attitudes, moods -- any of the themes that concern the internal development of the individual. External concerns consist of projections to other people, self-centredness, external self-validation -- anything that affects the individual externally. The two sets of concerns are really two sides of the same coin. They are inseparable and cannot be dealt with singularly. As individuals are immersed in the support group, they are placed into a set routine which is designed to help them deal with both internal and external concerns.

Engaging in these common activities brings about a transformation of feelings and attitudes as the individuals experience many things in common. As time passes and the individual accepts the program and what it has to offer, he starts to develop a new set of attitudes and concerns. Most individuals accept this change. Those who do not, leave the support group before the program is finished. Nevertheless, each individual is faced with a choice to accept or reject what he has experienced. Rejection of either the internal or external
development takes the individual back to the beginning of the process. The internal and external development cannot be divorced from each other; to reject one is to reject both. If there is acceptance, the individual enters into the recovery stage (stage 6 of the communication model). He will stay in the recovery stage though at times he will need to experience some part of the support process to reinforce his internal or external development (Figure 9.9).

As individuals move through the support group they are developing new relationships with the people they meet. The alcoholics who graduate from the program construct new and stronger networks of relationships than those they had on entering, as we see below.

NETWORK ANALYSIS

Albrecht and Adelman state that the giving and receiving of support is:

a reciprocal process occurring in socially constructed networks of both strong (or primary) ties to family and friends, and weak ties to acquaintances, friends of friends, co-workers and general others in the community. (Albrecht and Adelman 1987:19)

In my study I had the collaborators fill in a network diagram, which was described and the results displayed in Chapter Four. In this section, I wish to discuss or compare the exemplar's networks with the non-exemplars.

In the case of the exemplars, before they entered the program they received much support from their friends and some from their families. The exemplars also found some support from work, professionals and a minor part from other sources. But they indicated that many times there was nobody to whom they could turn for support.
FIGURE 9.9 The Process of Support at Brentwood
When the exemplars completed the program, there was a change in their support patterns. Brentwood people\(^1\) and Father Paul made up the largest support component, and there was a balance between their families and their friends. The percentage who maintained that they had no one for support decreased to almost zero. The exemplars added two major new sources of support while at the same time almost eliminating the category of "nobody."

When the non-exemplars entered the program, they only had three groups on which they relied on for support compared to six for the exemplars, although, their pattern of seeking support mainly from friends, then family and professionals, was similar to the exemplars' pattern.

After the non-exemplars left the program their networks changed dramatically. Their ties to their families were weakened and the degree of reliance on their families decreased dramatically (almost 23%), while reliance on friends rose by almost 22%. People whom the non-exemplars met in Brentwood represented only a small percentage compared to the exemplars, 7% and 49% respectively. After leaving, the non-exemplars relied on work for some support which was consistent with the amount of time they spent seeking external self-validation.

The non-exemplars only received support from five primary sources while the exemplars are received support from eight. In addition, the relative weakness of the ties between the non-exemplars and people from Brentwood must be taken into account because the non-exemplars all stayed less than two weeks in the program.

The network diagrams suggest that if the exemplars maintain the ties and relationships they have established, they are on their way to developing a

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\(^1\) These are people whom they have met and become friends with in Brentwood.
strong and healthy support network. The non-exemplars are in a worse position than when they began the program and it appears that they will find themselves once again involved with a substance abuse problem. They are as they began: alone.

The networks of the alcoholics who graduated from the program are stronger and have a wide range of potential sources of support. These individuals do not withdraw into a ‘sect’ of graduates of the program but rather spread their reliance and need for support over a wider range of sources.

**Suggestions for Further Research**

One suggestion that I have for further research is to expand the values clarification exercise. If this is done Brentwood could use it to help predict which people would benefit the most from their program. The choices for the situations could be added to, so as to better cover the wide range of themes that the collaborators raised.

A second suggestion for further research is a longitudinal study on the strengths of network ties and also on the extent and diversification of the networks upon entry. Individuals could be re-interviewed a number of times to see if the networks that they have constructed at the end of the program remain intact or dissipate. A more precise method of analyzing the networks could also be developed, for example, by anticipating all the categories a person could use and devising a symbol so that a respondent could just enter a code instead of initials for people.

A third suggestion would be a longitudinal study on the collaborators’ reality and cognitive shifts. Are they dependent on time? How many old thought patterns and themes from Interview Set One re-emerge? Also the effects on individuals of staying in close contact with the support group could
be compared with individuals who have little contact with the group once they return home.

More research could be done on the individuals who leave the program before their treatment is finished. What are the problems they face in trying to readjust outside of the group? How many are repulsed by the Brentwood philosophy itself?

Finally, the alcoholic communication model which has been constructed could be refined and tested on actual cases and data. Thus the theoretical base of social support and alcoholic communication patterns could be expanded.

SUMMARY

In this chapter I generalized the data that was generated from this study to theories on interpersonal communication and social support. The thought worlds of alcoholics on entering the program were compared with those on exiting. These thought worlds were then related to interpersonal communication in an attempt to generate an alcoholic model of communication. A process model of support was then given for Brentwood to illustrate the changes in the thought worlds and the stages of alcoholic communication as alcoholics move through the support group. Finally the networks for the non-exemplars and exemplars were compared, and suggestions for further research were made.

CONCLUSIONS

I feel that this study uncovered useful information for Brentwood and support groups in general as well as for communication research. The characteristics of people who can successfully use a support group are found in their differing thought worlds and in their networks of relationships. I found
that the Brentwood experience is a positive one, in which individuals are not persuaded into blindly adopting the group's ideology. The networks diagrams and the thought world shows that individuals remain unique. They have discarded feelings and attitudes that were harmful in favour of positive attitudes and perceptions. Without Brentwood many of the collaborators would have continued with a self-destructive pattern of behaviour.

In the study, I found that the thought worlds of the non-exemplars and the exemplars are the same when they enter the program. But when the two groups exit the program there is a significant difference in their thought worlds. The exemplars have adopted a more positive attitude about themselves and other people, while the non-exemplars have started to adopt the same attitudes that led them to Brentwood.

The exemplars' networks are also significantly different from the non-exemplars. Upon entering the program the exemplars had a greater range of potential sources of support where the non-exemplars did not. When the exemplars graduated from the program they added to the range of potential sources of support which made their networks stronger. The non-exemplars' networks suffered when they exited from the program. They relied more on their friends which further alienated them from their families.

I also learned a great deal about research and the collaborative method in general. It was a great reward to have been taught a method and then to use that method for original research. The study from start to finish took me a year to complete. In that year I gained insights into interviewing techniques, matrix analysis and data reduction. I also gained expertise with computers and software. Everything I have learned I will use in the future.

In communication studies we are more often concerned with how the media is affecting people. We have not been concerned, to any large degree, of
how to help individuals lead fuller and richer lives through supportive communication. Supportive communication is not only a concern for individuals who communication interactions are damaged but to all of us who want to strengthen our own relationships. Through studying the suffering and healing of alcoholics we can all learn how to communicate better.

Personally, I have learned a great deal about myself and about others. I have examined my own life to see areas where I can become a better communicator. I have watched individuals with little hope become individuals with hopes and dreams and a willingness to live again. The collaborators' spirit and determination can be an inspiration to us all. If the reader only takes one thing away from this study, I hope it will be admiration for the individuals whose struggle and triumph it chronicles.
APPENDICES
### 3.1 LOG

<table>
<thead>
<tr>
<th>Log Page</th>
<th>Refers to Section</th>
<th>Date of Entry</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1.1</td>
<td>Propositional Inventory</td>
<td>May 1 1988</td>
</tr>
<tr>
<td>3.1.1</td>
<td>Interview Instruments 4.8</td>
<td>May 2 1988</td>
</tr>
</tbody>
</table>
3.2.1 The Journal

Entries:

Item no. 1  Addition to: Prop. Invent.  Addition from: Class  Date: 1/05/88
Summary of what was done and why:

Initial propositional inventory was started. I checked out some authors and reads in the library. Read Albrecht and Adleman on supportive communication.

Item no.  Addition to:  Addition from:  Date:
Summary of what was done and why:

Item no.  Addition to:  Addition from:  Date:
Summary of what was done and why:

Item no.  Addition to:  Addition from:  Date:
Summary of what was done and why:

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3.3.1 Diary

Date: 1/05/88
Summary:

Read Albrecht and Adleman, r.e., supportive communication. Interpersonal communication, I feel, acts somehow as a bridge between individuals and their environment. I will have to check up on interpersonal communication in more detail. Also I will have to do a computer check of social support and communication.
APPENDIX B
APPENDIX B

4.8 Face Sheet Interview Set One (& Three)

INTERVIEW # DATE: TIME: PLACE:

INTERVIEWEE'S NAME:

AGE: SEX: MALE

OCCUPATION:

OTHER NOTES OR COMMENTS:
4.8.2 COMMENT SHEET

INTERVIEW # B

NOTES AFTER THE RECORDER IS OFF:

POST INTERVIEW THOUGHTS:
4.8.1 INTERVIEWS

1. When you think about alcoholism, what thoughts come to mind?

Cues:

2. When you think about the future, what thoughts come to mind?

Cues:

3. How did alcoholism affect your life three years ago? Two years ago? One year ago?

Cues:

4. Was there any event that particularly influenced you in regards to seeking help?

Cues:

5. What advice would you give to someone who was about to become an alcoholic?

Cues:

6. Can you walk me through a typical day or week?

Cues:

7. Is there any other information you have not already discussed?

Cues:

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1. When you think about alcoholism, what thoughts come to mind? 
Cues: 

2. When you think about the future, what thoughts come to mind? 
Cues: 

3. How did alcoholism affect your life three years ago? Two years ago? One year ago? 
Cues: 

4. Was there any event that particularly influenced you in regards to seeking help? 
Cues: 

4B. Was there any event that particularly influenced you into staying in the program? 
Cues: 

5. What advice would you give to someone who was about to become an alcoholic? 
Cues: 

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6. Can you walk me through a typical day or week?

Cues:

7. Is there any other information you have not already discussed?

Cues:
4.8.1 INTERVIEWS_ ExitEd Program. INTERVIEW # B

1. When you think about alcoholism, what thoughts come to mind?
Cues:

2. When you think about the future, what thoughts come to mind?
Cues:

3. How did alcoholism affect your life three years ago? Two years ago? One year ago?
Cues:

4. Was there any event that particularly influenced you in regards to seeking help?
Cues:

4.B. Was there any event that particularly influenced you in regards to leaving the program?
Cues:

5. What advice would you give to someone who was about to become an alcoholic?
Cues:
6. Can you walk me through a typical day or week?
Cues:

7. Is there any other information you have not already discussed?
Cues:
4.9.3 BACKGROUND INFORMATION QUESTIONNAIRE

1. NAME: ____________________________________________

2. PERMANENT ADDRESS: ____________________________________________

3. TELEPHONE NUMBER: ____________________________________________

4. OCCUPATION: ____________________________________________

5. WHO DECIDED THAT YOU SHOULD SEEK PROFESSIONAL HELP?
   ____________________________________________

6. HOW LONG HAVE YOU KNOWN THAT YOU ARE AN ALCOHOLIC?
   ____________________________________________

7. WHAT IS YOUR OUTLOOK FOR THE FUTURE?
   ____________________________________________
8. IS THERE A HISTORY OF ADDICTION OR ABUSE IN YOUR FAMILY?

9. DIVIDE THIS CIRCLE UP INTO SEGMENTS THAT REPRESENT HOW YOU THINK YOU WILL SPEND YOUR TIME WHEN YOU LEAVE BRENTWOOD:
APPENDIX C
APPENDIX C

BRENTWOOD QUESTIONNAIRE

DATE: __________________

PERSON: 1. ENTERING PROGRAM  2. GRADUATING  

On the following page is a short questionnaire that you have been asked to fill out. Please fill out the questionnaire as quickly as possible. If you are just entering the program answer the questions from the perspective of how you would have acted before you came to Brentwood. If you are graduating or will be graduating in the next couple of weeks please answer the questions from the perspective of how you feel now.

PLEASE DO NOT PUT YOUR NAME ON ANY OF THE SHEETS.
Brentwood Values Exercise

1. I sought help because:
   a. I realized I needed help
   b. someone important in my life wanted me to come
   c. a professional (judge, doctor, etc.) told me to come

2. If my boss yells at me at work:
   a. he is centering me out
   b. it is my fault so I should take responsibility
   c. it is someone else's fault

3. You have a few free hours to spend with:
   a. your family or friends
   b. alone
   c. go out

4. When someone offers you advice to you, I usually:
   a. take it
   b. ignore it
   c. take it into consideration

5. You were to be home over two hours ago but you and your buddies went out after work. Do you:
   a. tell them you had to work overtime
   b. tell them where you were and why
   c. tell them it is none of their business

6. If your job or family is getting to you, do you:
   a. try and deal with the problems
   b. drink or smoke up
   c. think "who cares anyway"

7. When it comes to dealing with friends and family, do you find:
   a. that you always get what you want
   b. sometimes get what you want
   c. that never get what you want

8. When it comes to dealing with your family and friends, do you:
   a. leave
   b. communicate with them
   c. feel that you don't have any friends
9. When I think about why I am here, it is because:
   a. somebody else wanted me here
   b. I have a serious problem
   c. I don't know why

10. When I think about why I came here, I feel:
    a. ashamed
    b. good, positive
    c. depressed

11. When I think about trust, I feel:
    a. that I don't trust anyone
    b. I have to trust people
    c. trusting is part of normal relationships

12. When I am under stress, my moods:
    a. swing rapidly from one extreme to another
    b. generally feel like I am on an even keel
    c. I have learned to deal with my moods

13. When I start feeling negative, I will:
    a. call a friend
    b. try and deal with it alone
    c. use alcohol or drugs

14. When people react negatively towards me, it is because:
    a. they have a problem
    b. my attitude caused their reaction
    c. I am not aware of their reaction to me

15. I can usually solve my problems:
    a. quickly and effectively
    b. with difficulty and confusion
    c. with hard and patient work

16. When I think about the future:
    a. I live with an eye to the future
    b. concerns me but I do not think about it
    c. I plan a lot for the future
17. What phrase best describes me:
   a. I am a cog in a machine
   b. I am a fish swimming upstream alone
   c. I am the maker of my destiny

18. You have received a poor work evaluation do you feel:
   a. consider the evaluation and you'll have to do better
   b. blame somebody or something else
   c. your boss was out to get you
Network Diagram

Please read the descriptions beside each of the seven circles. Then in each circle write the initials of the people or person who represents that circle to you. For example in Models I might write the initials W.G. (Wayne Gretzky) as a model.

- **MODELS**
  - Models are people you either know or do not know but they are someone you look up to, for example a sport's hero.

- **REFERENT GROUP**
  - The Referent Group is the group of people you most closely identify with. For example friends, family, etc.

- **CLOSE FRIENDS**
  - Close friends are just that, your closest friends.

- **FOUL-WEATHER FRIENDS**
  - Foul-Weather friends are friends who you can count on when you need them the most for example in an emergency or when things are not going well for you.

- **ME**
  - 

- **CHALLENGERS**
  - Challengers are people who challenge the way or what you think about. You do not necessarily have to like that person.

- **COMPETENCE**
  - Competence refers to people who believe in you and your abilities.

- **REFERRAL AGENTS**
  - Referral Agents are people who have the resources to help you in some way. For example someone you could go to, to help you find a job.
In the circle at the bottom of the page you are to divide up the circle into pie slices of how you spend your time before you came to Brentwood. For example, Wayne Gretzky might divide up his circle on how he spends his time playing hockey in the following manner:

```
GAMES
PRACTICES
MEETINGS
TRAVELLING
```

Now please divide the circle up how you now spent your time before you came to Brentwood:
In the circle at the bottom of the page you are to divide up the circle into pie slices of how you spend your time at Brentwood. For example, Wayne Gretzky might divide up his circle on how he spends his time playing hockey in the following manner:

Now please divide the circle up how you now spend your time at Brentwood:
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VITA AUCTORIS

Gerald Samuel Edmonds was born on October 8, 1964 in Stratford, Ontario. He attended Stratford Central Secondary School and then enrolled at the University of Waterloo. After one year at Waterloo he transferred to York University in Toronto. He graduated from York in June 1987 with a Honours Bachelor of Arts degree with a double major in English and Mass Communication. Gerald then enrolled in the Graduate program in Communication Studies at the University of Windsor. During that time he was awarded three Graduate Assistantships. During the last two assistantships Gerald was given the opportunity to teach undergraduate labs in organizational communication.

While at Windsor, he became interested in computers and established a desktop publishing and printing business in Stratford. He plans to continue this business and one day to do a Ph.D.