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## **The Evolution of the Moderation Management Program: An Interview with Ana Kosok**

William L. White

### **Introduction**

In 2002, I had the opportunity to visit the offices of Moderation Management (MM) in New York City and interview many of the key figures in MM. Among those interviewed was Ana Kosok, who would go on to complete her PhD and publish one of the major studies on the MM program. In the fall of 2013, I had the opportunity to interview Ana again about the evolution of the MM program. Please join us in this conversation.

### **Early Involvement in MM**

**Bill White:** Ana, let me just begin by asking you to briefly summarize the history of your involvement with MM.

**Ana Kosok:** Okay. It began in 1996 when I was diagnosed with Hepatitis C. I was very ill and was told that I would die. Because I was so sick, my liver was no longer tolerating alcohol, and I knew I was drinking too much. I didn't want to stop drinking, but I did want to cut back. I didn't consider myself an alcoholic and I wasn't going to go to AA, which I was very familiar with because my father and sister had gotten sober in AA. People in my family either went to AA and stopped drinking or they died, so I was pretty familiar with it. Some years before, I'd checked out a few meetings myself, but wasn't welcomed because I wouldn't declare myself an alcoholic. This surprised me since I had been to meetings with my father in 1974 and thought they were marvelous.

I recalled some alternative program I'd vaguely heard about and a friend of mine found me Audrey Kishline's book, *Moderate Drinking*. I looked in the back of the book and found a meeting listed in New York. My impression from the book was that these were free but this one was a therapy group that cost money so I wasn't up for that. But I found another one, a Tuesday night meeting, which I ended up going to. I was very impressed by it. The people attending were smart and they talked about the research supporting MM, which I really liked.

The Tuesday meeting was run by an ex-AA guy who had been sober for nine years and remained committed to his own abstinence, but he felt that MM was worthwhile so he'd started this MM group. I didn't really think it was going to make a change in my drinking, and I discovered that I had been drinking a lot more than I realized. And to me, that is the first step—to really find out how much you're drinking. Wine drinkers just pour some wine in a glass and that's "a drink." Never mind if the glass holds eight ounces or twelve ounces. In MM, I began to learn the volume of one drink and to measure and count them. I'm pretty much a scientist. You

gotta have the baseline before you can measure any change. I realized I was drinking every day and I was drinking more than I had realized, and my body was certainly not handling it because of the hepatitis. At first, the only changes I made were measuring, counting, and learning.

The face-to-face support group was very important. At that time, there was a group of people who all came once a week, and we got to know each other and follow each other's progress. If somebody in the group drank so much that they fell down on the sidewalk, I'd think, "My God. I don't want to go there." Or conversely, if somebody else kind of got it and made changes, that was inspirational. As people made changes, you could see them look better and function better. So that was pretty powerful. Then, we would go out to dinner sometimes afterwards—a social experience with no drinking, which was also very helpful.

Because of my sick liver, I took the MM guidelines very seriously (for women, that's no more than nine drinks a week and no more than three drinks a day.) And I was religious about my charting. I began to have months where I didn't drink at all and didn't think about it. Drinking became, as we say, "a condiment." The hepatitis cleared completely too. Today, I have maybe three drinks a month and drink within and only within guidelines, though it's not something I need to pay conscious attention to. So that's the history of my personal change.

Around 1997, Bill, the longtime group leader who'd been in AA for so long decided that it was time for us to lead the meeting ourselves, and I took over leadership with one other person who had been an important MM member. When she became disenchanted with MM, I took over completely, but I did something that has since been adopted by other groups. I gathered a panel of people who were willing to lead meetings and every month, we would schedule who was going to lead what meeting, so it never had to fall on any one person alone.

So, at that point, I was involved in the New York meetings and then I joined the then-emerging and fledgling Listserv, which I understand Audrey Kishline had started in 1996. There were only about 100 people, 250 max, on it in 1997. I realized that mostly MM face-to-face group people are not the same ones as online people. Sometimes there's an overlap, but frequently not. Communicating online was a very new experience for me, and I was totally enchanted with getting to know these people who I'd never met. I was impressed with how powerful the medium was in helping people change, people who had never been to a face-to-face meeting and never would because there would never be one available to them. I've seen somewhere in the literature that at one point there were supposed to have been 52 MM meetings in the United States, but I have never seen that many meetings at one time. Meetings would pop up, operate for a while and then close. MM was quite fragile during that early period.

After 2001, as part of my administrative functions, I went on to lead MM start-up meetings all over the world whenever I traveled. Finally I was making conference presentations about MM's support group and harm reduction methods as they could be used in other communities and for other problems. Though I'm no longer involved with the MM organization, I now work as a behavior therapist with people with substance abuse problems.

## **MM Crises**

**Bill White:** MM faced perhaps its greatest challenges between 1998 and 2000.

**Ana Kosok:** Yes, in 1998, we had the Larry scandal [Larry Froistad, a member of MM's internet listserv, confessed online to murdering his five-year old daughter], and then in January 2000, Audrey [Kishline] announced that she was not able to keep within moderation guidelines

and would be pursuing an abstinence goal with the support of AA. Then in March, she drove drunk and killed two people. Dr. Alex DeLuca, then head of the Smithers treatment program, had let MM use after-hours meeting space, the same as for AA and other groups. Smithers was an abstinence-only program. Because of this “involvement” with MM, he was fired.

With the media frenzy surrounding these events, it looked like MM was going to go down for sure. My friend, [James] Cannon, who you’ve interviewed and who has since died, felt that MM was Audrey’s intellectual property and shouldn’t be co-opted by anyone else, so we moved in to protect it as it was. A group of the New York members got together and rented a car and went to Washington, DC and met with Fred Rotgers and Mark Kern. We put together a new board of directors that included MM members from different areas of the country. That’s how I got involved in the management of MM—in the middle of a crisis.

Cannon and I and some others—Kurt, of course—took over, but we had no idea what we were doing. We had to keep it alive, but we had no idea how to run a nonprofit organization or what we were going to do for money. Cannon was pretty much the Executive Director and did all kinds of things behind the scenes. He turned out to be very good at it, and Kurt, our computer genius, handled all the online tasks. I was Program Director, and I handled most of the issues related to group formation, although at that time, I was working full-time in multi-site clinical trials at Columbia University. I didn’t have very much time then and was mainly involved in running groups in New York.

In 2001, I took a leave of absence from my job to complete my dissertation. I also didn’t want any MM publicity with my name linked to it to have a negative effect on my research job. When I left, I was then free to take a much larger role in MM, and I did. I became very involved with Cannon in forming new groups, supporting existing groups and in representing MM at professional meetings—from APA to various harm reduction conferences. Rudy Hoeltzel, who was the third author of *Responsible Drinking*, also gave presentations at these conferences on how to start MM meetings. We just made sure that we always maintained a professional presence.

By 2010, we found that most everyone at these conferences now knew about MM and harm reduction. That was quite a change from the early days when either no one had ever heard of MM or we were considered an evil influence. From about 2001 to 2004, Cannon and I were guests on several radio call-in shows and the callers termed us “murderers” because they thought we encouraged alcoholics to drink again.

As the program expanded, more volunteers were needed, as Chat Room director, sub-group administrators, face-to-face group coordinator, listserv admin help and admin support for the very popular Abstar, a kind of online spreadsheet application for tracking daily numbers of drinks. As the organization grew, our roles grew and took up even more time. In 2006, Cannon disengaged and I became Executive Director. I continued in that role until 2010 when Jim Mergens took over as Executive Director. Jim had a lot of outside business experience and some with fundraising. I thought he was a good candidate to assume the MM Executive Director role and was grateful when he accepted the job.

## **The Question of MM Fit or Misfit**

**Bill White:** Over the course of your involvement with MM, have your views changed about what type of problem drinker is most appropriate for MM?

**Ana Kosok:** That's a good question, but I may have a surprising answer for you. I should add that what I'm about to say is my personal opinion only. I don't think there is a particular type of drinker who is most appropriate for MM. Even somebody who will never be able to achieve stable moderate drinking can benefit from MM by finding out whether they can or can't achieve such a goal. The key is for people to start taking steps to resolve drinking problems as early as possible and to explore their choices. For those who don't succeed at moderation, they might realize: "I really don't seem to be able to control this. It's making a mess of my life. I think I need to abstain. Let me look at my choices." And if they don't like AA, there are certainly a lot of other abstinence support choices. Another possibility is, "I don't seem to be able to make a change. I really like to drink. I really like to be drunk. I'm just going to keep on doing what I'm doing," and hopefully, they will have learned some elements of harm reduction to minimize injury to themselves and others. Hopefully, they will have figured out, "Okay, I'm never going to drive when I'm drinking. I'm not going to have the grandchildren over." Hopefully, they've incorporated those elements of how to at least drink safely and to me, that's a legitimate choice. If you want to keep drinking, then that's your life, as long as you do it and don't hurt others; we certainly don't like to see somebody wreck their lives, but, you know, that's their choice. That's not a stamp of approval. It's just recognition that everybody's responsible for their own behavior, and unless you lock them in the basement, you can't stop anyone else from drinking.

So, I don't think that there's any particular kind of person that MM is appropriate for. That being said, the type of person for whom learning to drink moderately works best is someone who hasn't been drinking steadily for a very long time, although I've seen people in their 50s who've been daily drinkers for a long time make these positive changes. I guess that's one reason I hesitate to sort of put limits on who can benefit from MM, though it's true that somebody who's been drinking from a very early age has a really hard time making changes. They don't have any adult life to compare what life was like before alcohol or drugs. Another group that I don't think does well in MM is the bender drinker—people who don't drink for a long period of time and then binge drink for weeks or months. MM will never work for them because there are long periods of time when they don't drink, so counting drinks and learning to drink moderately doesn't apply to them.

I've seen people who drink very heavily make significant and permanent changes. The MM program is not all or nothing; it's a progress of slow discovery. It's not just behavioral techniques. You learn a lot about yourself as you go.

## **MM Misconceptions**

**Bill White:** What do you think are the most misunderstood aspects of MM by professionals or by the public?

**Ana Kosok:** That MM encourages alcoholics to drink—that it encourages people who've already found a solution in AA to drink, that it will lure people into driving drunk and doing horrible things where those things could be avoided if they would just go to AA. A related misconception is that we are just kidding ourselves—that we are just a bunch of drunks sitting around still drinking and pretending that we're doing something about it.

When we get someone who's been in AA at one of our meetings, we welcome them to sit and listen, but we encourage them not to go home and begin drinking. We want them to listen and read the literature and think about this choice long and hard over a number of months. And

we say, “You’ve been abstinent already for this period of time. It’s not going to kill you to be abstinent for a few months more while you think this through very carefully.” We recommend that strongly and we repeat it many times. I have this horror of some AA person coming to our meeting, seeing how well some of us are doing and then starting to drink with “one drink, one drunk” in his head, and never being seen again. I have a horror of that.

## **MM Member Characteristics**

**Bill White:** In 2006, you published a survey of the characteristics of MM members. Could you summarize the result of that survey?

**Ana Kosok:** Yes. Members had a mean age of 44 years, and were 66% female, 98% white, 90% US residents, 80% employed, 54% married, and 94% college educated. Seventy-seven percent had an annual income over \$50,000 and 54% had not sought prior help of any kind for a drinking problem. The pre-MM mean number of drinks per week was 34 (SD 20, range 0–105), dependence score was 11 of a possible 39, and number of life problems was 1.9 of a possible 6. Members of face-to-face groups were significantly older and drank less at baseline than members of the MM online community. In general, MM members were largely white and upper middle class with less severe drinking problems than would usually be seen in AA or alcoholism treatment.

## **MM Program Components**

**Bill White:** Ana, the last time we talked, you mentioned that you’d been doing research on how people use the various program components of MM. Could you share any findings from that work you did?

**Ana Kosok:** That paper is still in progress, but what I discovered was that a high percentage of people in my survey were using program components. MM is not twelve-step. It’s not all or nothing. There’s a list of behavior changes like a Chinese menu: try a little of this, try a little of that. If that doesn’t work for you, fine, try this. I detailed a list of behavioral change techniques and asked about their use. Many of these techniques had developed informally, but had become standard practices and supports recommended by both the online and face-to-face groups. Some of these are: identifying triggering emotions, measuring drink volume, using non-alcoholic beverages, and beginning private counseling. At that time, most people discovered MM through Audrey’s book. By 2004, more than 50 percent had read *Responsible Drinking*. (I should note that this has changed. Now most people find MM through the internet.) Looking at various program components that I grouped together as “behavioral change techniques,” 98% reported having practiced some of these techniques. To say that I was surprised is an understatement.

The 30 days of initial abstinence was originally posited as a good key to who would do well in MM, but we really didn’t want to exclude people based on that alone. We came to realize more and more that it was the Chinese menu options that worked best and that different people had different timetables for change. I found that 59 percent of MM members had completed 30 days of abstinence, but we have a lot of people who have been successful with moderation who never did the 30 days of abstinence, or who didn’t do it at the beginning.

*Responsible Drinking* included more of the techniques that MM as a group had developed beyond just the steps outlined in *Moderate Drinking*. The MM membership has guided us in defining the components of the process that help achieve stable moderation. Two things I asked about in the 2004 survey were the use of Naltrexone and Antabuse. From the conversations on the list, I thought that we had a lot of members using each, but it turned out only six percent of our members used Naltrexone, and four percent had used Antabuse.

I should note that since 1996, we've developed a very successful sub-list for abstainers called the "Abs List." If someone has decided to abstain permanently, there's a place they can go and be with other MM members who have also made this decision. They use a variety of other supports too, including AA, Buddhism, SMART Recovery, and Mindful Meditation. We have this whole group now of online abstainers who have found a comfortable place to go within MM.

## **MM Growth**

**Bill White:** Ana, what factors have inhibited the growth of MM over its lifespan?

**Ana Kosok:** Money. Money. And money. For a very long time, Cannon gave over his life to MM, largely with no salary. I used up all of my personal savings to support myself while I worked with MM. We just never had any money to support a staff to lead this work. If we'd had money to pay staff, who knows what we could have done with MM? We've done great and grand things, given that we had no money. There were years when we ran MM on a \$14,000 a year budget, and we never had more than \$25,000. We operated for a long time on about \$700 a month through mostly member donations and also from the proceeds of interactive tools Reid Hester offered on the MM site. He has been very generous in offering us proceeds from his software. Our meager funds have limited growth but truth be known, growth could have killed us in those early years. We had little ability to keep up with demand as it was, particularly each time MM ended up in the headlines and more people found out about us.

The other growth-inhibiting factor is stigma. MM attracts high-level professionals who would be highly stigmatized if they admitted they had an alcohol problem. They say, "I'd love to start a meeting but I couldn't be associated with anything like that." The anonymity of the internet is the only thing that makes their participation possible.

And of course, MM is designed for people to come in, learn what we have to offer, and then go live their lives. There is a built-in limit on growth when you compare what we do to groups like AA that have an implicit expectation of participation for life.

## **Attempted MM Coup**

**Bill White:** Were there any periods in MM's history that were particularly challenging for you other than the 1998-2000 period we talked about earlier?

**Ana Kosok:** There was an almost successful attempt to bring MM down toward the end of 2006 and early 2007. It was internal, and it almost broke MM apart, which I never thought could happen. A person who had served as an Online Administrator began referring to Cannon, Kurt, and me as "the powers that be" and began creating an artificially contrived rebellion. Without going into sordid details, the whole thing got very ugly and very dirty, and was mended only with great difficulty.

## **MM Contributions**

**Bill White:** Ana, what do you see as MM's greatest contributions?

**Ana Kosok:** MM has made the concept of controlled drinking a reality. It has helped innumerable people at a personal level, and it has been very influential in changing the overall view of problem drinking and what can be done to resolve it.

**Bill White:** Ana, thank you for taking this time to share your experience within MM.

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