



A Q&A with Lisa Boucher, author of *Raising the Bottom*

1. In your book *Raising the Bottom*, you say we live in a “drinking culture” – can you give us some examples?

Drinking has become the new norm: wine and yoga, wine and art classes, wine at book club. Bridal and beauty salons serve wine—what about the little flower girls who tag along? At 4, 5, 6 years old, they’re already learning that “ladies drink wine.” You can’t go to a child’s sporting event without seeing all the coolers. Adults hoot and holler about how they can use vinyl wraps or “camouflage” koozies to hide the beer can so they can drink anywhere and people will think it’s a soda. Kids will learn to do this as well. You hear adults joke about “beer-thirty” and “wine o’clock.” Moms sit around drinking wine when they take their kids on play-dates. At toddler birthday parties parents are as focused on the adult beverages as they are on balloons and cupcakes. Parents take their kids to eat dinner in pubs and bars. Kids grow up in these environments and start to think it’s normal to have a beer or glass of wine every day and for every occasion.

2. How did you come up with the title for the book?

I can’t start a book until I have a title, and the idea for this book materialized out of the ethers. One day, it was just there. I said a prayer: *God if you want me to write that book you will have to give me a title.* Two days later, I had a visual of the title, *Raising the Bottom*. It was as if a banner slipped inside my head, and I knew that was the title. I know it sounds woo-woo, but that’s the truth. I like the title because it’s also a concept. There’s always some area in all of our lives that we can improve upon. We can all find some room for improvement, somewhere in our life. Right? “Raising the Bottom” ... the concept of becoming a better person. It’s timeless.

3. You write that the goal of *Raising the Bottom* is to “change the way we view drinking, recreational drug abuse and dependence and abuse of prescription medications.” What would be your desired outcome for readers of the book? What does this new view look like?

My hope is that women, especially, will understand that drinking 3-5 nights a week—or more—is not social drinking. People who are alcohol dependent, and many young women who are already alcoholics, continue to call themselves “social drinkers.” Society has lowered the bar so much. Daily, and constant, drinking has become acceptable.

Early alcoholism often manifests as anxiety and depression. I would like to encourage women and men to face the truth. If they struggle with anxiety and depression, but they refuse to cut out the alcohol, they are probably already in trouble with alcohol. Most people would rather take antidepressants than quit drinking. (That right there should tell them something.)

There is still a stigma about alcoholics, that they look like the homeless guy under the bridge, but people need to understand that alcoholics look like everyone. I’ve seen alcoholics as young as 14 years old. I would like for people to be mindful of what they model to kids. Kids hear our jokes about needing wine or the flippant comments about pharmaceuticals like Vicodin and Ativan. We need to start being mindful of our actions and start asking the hard questions: *Is this who I want to be? Do I want to be the drunk, fun, party mom, or the sane, sober, confident mom? Why do we glamorize the fun mom, and berate the sober mom for not being “fun” enough? We, as a society, need to flip the script.*

I also hope that readers will reevaluate their drinking patterns. The *Big Book of Alcoholics* Anonymous says the best way to diagnose whether you’re an alcoholic is by this: can you have 2

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drinks—and no more? If you even once lose control and drink more than two drinks, then you have already lost control of your drinking. People don't want to hear that, but if you have to drink more and more, and you lose control over the amount you drink, that's alcoholism.

4. In the book, you share your story of your recovery from alcoholism. What was the most difficult part to put onto paper?

The hardest part was to write about my childhood. Believe me, I toned it down. The insanity in our house as a result of my mother's alcoholism was tragic in many ways. Although we can look back and laugh at much of it now, my siblings and I were all very affected at the time. I wanted to paint a picture of what "family disease" means. No matter how you couch it, it's not pleasant to look at the mess that an active alcoholic or drug addict in a home can create. The alcoholic inflames everyone around them.

5. What inspired you to share your story now, at this point in your life?

It was time. For over twenty years, my mom wanted me to write a book about alcoholism. It just wasn't there. She died in 2011, and two or three years later, *Raising the Bottom* (the book and my cute logo) just hit me. I knew it was time to do a book for women about alcoholism. I know the subject intimately, from every angle. I knew what I had to write, and I knew that I was no longer embarrassed to talk about my alcoholism, or my mother's and my sister's, and I also found the courage to call it like I see it in the healthcare setting.

6. What role has Alcoholics Anonymous (AA) played in your life?

I'm a strong believer in the 12 Steps. I watched my mother transform because of them. She was a wreck of a human being for decades and the doctors did nothing but make things worse by throwing medication at her addiction. Once she found the 12 Steps, she came back to life. When I thought I might be drinking too much, I knew where to go. People are transformed through the 12 Steps, and that is something I have never seen medicine do for those suffering with alcoholism or addiction. The 12 Steps are a huge part of my life. I try to live by the principles: One day at a time. Faith. Hope. Love. I stay connected. I work with other women who are willing to. I love helping them—to get to see them rise up and resume their roles as wife, mother, employee or student. It's amazing to see people recover and get their lives back. I go to three AA meetings a week. I've been doing that for almost 28 years.

7. You include a number of essays from other women and men who are recovered alcoholics and addicts. How did you approach people about writing their stories for the book?

I know a lot of women. I've heard a lot of stories. I simply asked God to point me to the people he wanted in the book. There was only one person I approached about the book who didn't want to share her story.

I wanted a variety of stories that I thought would speak to women from all backgrounds and experiences. Most of the women in the book didn't hit "low" bottoms—they hadn't lost anything other than their self-respect. Our society equates materialism with success. Half of the women in the book had all sorts of material goods, but they were failing as people and as parents. One of the women had lost her baby. Grief can spur the frequent drinker right into alcoholism.

8. You've written four novels, and *Raising the Bottom* is your first non-fiction title. How different was it to write this book?

I still love to write fiction. I don't know if I'm any good at the craft part of fiction, but I think I can tell a damn good story, regardless. With fiction, the book and the characters go where they want. I love having that freedom. When I write fiction, I don't make outlines or do any sort of planning.

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With *Raising the Bottom*, I knew I would have to have a plan, or at least sketch an outline. I ended up laying it out similar to the *Big Book* in that I put the personal stories toward the back. It was important to me with this book to give the children of alcoholics a voice, as I did in the chapter “What Your Kids Say About You and Your Drinking.”

9. Who is the audience for your book, and who will benefit most from it?

My audience is primarily women ages 25-54, though I think it has an application for men as well. *Raising the Bottom* is for every woman, because everyone has “that friend,” or coworker, family member, mother, daughter, sister, BFF—most of us know someone who drinks too much and swears that she is fine.

10. What are some of the warning signs that you may be drinking too much?

- Anxiety and depression are the biggest warning signs
- Chaotic relationships
- An inability to finish things
- Frequent moves or geographical cures
- Floundering from job to job and relationship to relationship
- Suicidal thoughts
- Drinking 3-5 nights a week
- Multiple marriages
- Panic attacks
- A restless, lonely feeling

Someone who is perpetually resentful often turns to alcohol. People who are fearful about life or have a fear of failing—anyone who harbors these feelings intensely often looks to alcohol to lessen the discomfort. Women who drink alone at home, and women who watch the clock and can hardly wait “till 5” to have a drink probably have a drinking problem. Women who have no hobbies but “wine tasting” probably have a drinking problem. Another group of fast growing alcoholics are older retired adults, the “snowbirds” lolling around in Florida.

11. What are some of the consequences of drinking that people don't usually think of?

- Having angry, resentful children. People don't want to look at it, but believe me, your kids are sick of your drinking lifestyle. It makes them feel isolated, less than, and often they grow up with poor self-esteem and drinking problems of their own.
- Health problems.
- Divorce, usually after the affair that he or she had while drinking.
- The many times that someone who is drinking will put loved ones at risk while driving, not to mention the innocent people on the roads.
- Weight gain.
- Red skin (on the face) from drinking too much alcohol.
- Long-term effects of alcohol on one's health such as breast cancer, rectal cancer or liver cancer.

12. Your book has a strong focus on “parent guilt” – the guilt alcoholic parents felt for not being present with their kids, even when being in the same room with them. What message do you want to convey to parents and future parents?

The most important message for parents to take home is that you don't get a second chance to do the best you can with your kids—and you will do infinitely better if you are mostly sober.

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Secondly, people who are all about drinking are usually selfish. At some point, life can't be all about you. If you want to party, don't have kids. It's not fair to them. I think parents have forgotten that they set the example. Kids see them drinking every day, and then parents are shocked when they learn their 13- and 14-year-old kids are drinking.

13. You've been a registered nurse for over 24 years. What have you found to be the attitude from the medical community toward addicts?

I think the medical community is clueless about addiction, yet they continue to think they know best. It's created a perfect storm of poor results, and more addicts and alcoholics than ever before show up at the hospital. Most, not all, but a good deal of doctors and nurses continue to look at the addict/alcoholic as someone who has moral issues. They believe it's a choice (and in *some* ways it is), but the medical profession doesn't understand addiction. They have no idea what to say, they cannot see it when it's staring them in the face, so they continue to treat it the same old way and that is to throw prescription medication at it. It's not working!

14. What can people in the medical community do to better treat patients who are alcoholics or addicts?

They have to recognize them first. If you have a person comes in to the hospital for the fourth time this year and each time their BAL (blood alcohol level) is high or their urine shows benzos, opiates and amphetamines, you have your answer right there. But the doctors don't see it, or maybe they don't want to see it. Doctors have to stop treating depression by prescribing Buspar, Seroquel, Neurontin, Effexor, Abilify, without addressing the person's drug/alcohol abuse. We need more recovery houses. Tell the addict go to rehab/recovery house, or the homeless shelter. You'd see a lot more people get sober. A lot of patients love being in the hospital. They get drugs, they get fed, they get someone to listen to their sob stories, and they have zero accountability.

15. For anyone who is struggling with alcoholism or addiction, what is the first step you recommend they take?

There is nothing anyone can do unless that person is willing and ready for change. If they are willing and ready, depending on their situation and what drugs they're on—such as benzos (like Valium and Xanax), you have to detox more slowly from those or you can have a seizure. Rehab is always a good way to start, but I want to be clear that it's not necessary for everyone. I never went to rehab. It all depends on the person, their drinking/drug history, and what drugs they take and how much and how often they drink. You can die from detox complications, such as seizures and delirium tremens (DTs), so you do need to be careful. With heroin addicts, their withdrawal is awful, but it is NOT life threatening.

16. Are you available for speaking engagements about your book and the topic of "raising the bottom"?

Yes, I am available to talk to parents, medical professionals and nursing students, and corporations who need to understand addiction so they can better staff their employee assistance programs.

17. Tell us where we can find your book and more information about you.

The book is available online at places such as Amazon and through bookstores everywhere—you can find all of the places to purchase it on www.raisingthebottom.com.

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