La Última Copa: Alcoholics Anonymous as Behavioral Health Care in Puerto Rico’s
*Oso Blanco*, 1950s-1960s

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**Abstract**

Drawing from a prisoner-produced publication titled *Realidad* (Reality) as well as other sources, this article explores the history of Alcoholics Anonymous in Puerto Rico’s premier carceral institution in the mid-twentieth century, the Insular/State Penitentiary at Río Piedras. An analysis of the AA penitentiary group La Última Copa (The Last Drink) under colonial populism—an era in which Puerto Rican carceral care revolved around rehabilitation—shows that incarcerated people deemed the group’s activities and their magazine as viable, efficacious behavioral health care options. Socio-humanistic therapeutics like group therapy and testimonial writing were of particular consequence for inmates, who in turn produced multi-scalar knowledge about alcoholism and served as frontline practitioners.

**Keywords:** Alcoholics Anonymous; alcoholism; penitentiary; Puerto Rico; *Realidad*; rehabilitative medicine

**Resumen**

Basándose en una publicación producida por presos titulada *Realidad* y otras fuentes, este artículo explora la historia de Alcohólicos Anónimos en la principal institución carcelaria de Puerto Rico a mediados del siglo XX, la Penitenciaría Insular/Estatal de Río Piedras. Un análisis del grupo penitenciario AA La Última Copa durante el populismo colonial—una época en la cual el cuidado carcelario puertorriqueño giraba en torno a la rehabilitación—muestra que los encarcelados consideraban las actividades del grupo y su revista como opciones de salud comportamental viables y
eficaces. Terapias socio-humanísticas como la terapia de grupo y la escritura testimonial fueron de consecuencia particular para los reclusos, quienes a su vez produjeron conocimiento en varios niveles sobre el alcoholismo y sirvieron como practicantes de primera línea.

**Palabras clave:** Alcohólicos Anónimos; alcoholismo; penitenciaría; Puerto Rico; Realidad; medicina rehabilitadora

In October 1948, officials from the Classification and Treatment Board of the Insular Penitentiary (popularly known as Oso Blanco or White Bear) met with a young, Black, alcoholic prisoner from San Juan named Sotero Castro Torres.\(^1\) During the session, the “muscular” and “tough” but infirm convict explained to them that he had been incarcerated for recovering a debt owed to him by a prostitute. He and an acquaintance made her pay what she owed “in flesh” by “helping themselves” to her body near the Dos Hermanos Bridge connecting the Miramar section of Santurce to Puerta de Tierra. Castro Torres was from Humacao but had been living in the working-class “shanty or slum” of Coal in Puerta de Tierra since 1936. Like many other mid-century Puerto Ricans experiencing displacement due to the seasonality and broader contraction of the agriculture-based colonial economy, he arrived there as a teenager with his family when they acquired a house in the area.\(^2\) As for his social life, he told Classification and Treatment specialists that during his free time he caroused with friends who pressured him to attend parties and drink. His (ab)use of alcohol, specifically, was “excessive” and “habitual.” So involved was Castro Torres with urban drinking culture that he recounted at least ten brushes with law enforcement for alcohol-related violations (such as fights, trashing bars, the production and transport of clandestine liquor). In retrospect, he expressed to penitentiary social workers that he dedicated himself and his $21 in weekly earnings to “hanging out with friends and drinking rum.” Initially he tried to hide his “addiction,” but in conversation alcohol emerged as “the axis of his condition as a delinquent.”\(^3\)

Whereas in Castro Torres’s classification and treatment history, the anonymous social worker responsible for compiling the document indicated he was an “excellent” case for rehabilitation, in his rehabilitation program another member of the Classification and Treatment Board downgraded his prospects to “regular.” The reasoning for this is unclear, but generally, Classification and Treatment Board members did not always align in their interpretations of cases. Still, the latter Board member pinpointed that “social treatment” via “orientation interviews” might cure Castro Torres of his alcohol addiction by helping him see and address the factors that influenced his “amoral” behavior, principally his tendency to frequent “undesirable” environments.\(^4\) Embedded in his story and treatment program is the idea that social interaction and uplift could play
a role in arresting, if not totally undoing, alcohol addiction, and, by extension, insalubrious lifestyles. As of late 1948, Castro Torres and inmates in similar situations would have been limited to pursuing social therapeutics with Oso Blanco health professionals who were mostly female social workers. Since Castro Torres was scheduled to exit prison by no later than October 1949, he would miss out, albeit just barely, on the rise of peer group therapy in the early 1950s.

Penal institutions in Puerto Rico proliferated and diversified between 1917, when United States citizenship was imposed on Puerto Ricans, and the early 1950s, when the island ceased being a colony proper. The Partido Popular Democrático, or PPD, controlled the Puerto Rican state in the mid-twentieth century. Party leader and eventual long-term governor Luis Muñoz Marín helped reform the island’s colonial pact with the United States, resulting in commonwealth status in 1951 and a constitution in 1952. The colonial-populist state he led was reform-oriented and characterized by technocratic governance. This article explores the ascent of a group therapy option—Alcoholics Anonymous (AA)—inside the island’s premier mid-century carceral institution, the State Penitentiary at Río Piedras. Using the inmate-produced mimeographed periodical *Realidad* (Reality) and other sources, I trace the history of Oso Blanco’s AA chapter named La Última Copa to show how open-ended therapeutics like AA operated as behavioral health care. The recalibration of the impacts of alcoholism and how they might be confronted did not exclusively trickle down from Puerto Rico’s US-influenced colonial-populist state. Rather, as illustrated here, transnational AA currents flowed into the island from the US mainland and elsewhere in the world through local partners and were rescripted inside Oso Blanco by multiracial incarcerated “patients.” With the establishment of La Última Copa in the early 1950s and preliminary evidence of the group’s therapeutic efficacy, prison and state officials normalized AA’s presence in the penitentiary and collaborated with La Última Copa to advance what, after 1952, became Puerto Rico’s renewed project of rehabilitative carcerality. The state’s outsourcing of behavioral health care to AA and La Última Copa illustrates how medicalized social science was mutually forged and negotiated during an era of reformed colonialism and progressive penal reform.

**Bridging Historiographies**

This article centers imprisoned Puerto Rican men’s understandings and practices of care and healing in relation to alcoholism in the wake of mid-century cases like Castro Torres’s. These multiracial men contributed to stretching and rethinking the rehabilitation programs and behavioral therapies available to them.
Carceral studies developing these issues in Caribbean and Latin American context are still limited. Much of the work is interdisciplinary or socio-scientific and deals with contemporary matters. Most existing historical scholarship focuses on the criminalization-incarceration nexus. The new history of medicine in Latin America, on the other hand, is a growing field, especially in the areas of medical knowledge production, sociocultural intersections of disease, healing, and environment, and public health dynamics and processes. The present article bridges carceral studies and the histories of medicine and public health in the region by privileging “subaltern” meaning-making and its cultural applications in penitentiary behavioral health care, while troubling the assumption that state or colonial power and professional medicalization must drive such analysis. Nor do I view alcoholism through a body-mind prism that invariably leads back to the presumed corporeality of health care. Instead, I view alcoholism and the problem-solving it engendered through a behavioral health-care lens, taking seriously the “social” and “human” parts of the equation to shine a light on the history of medicalized social science in a United States colony.

The modern concept of alcoholism as a disease has been around for more than a century. Throughout the first half of the 1900s, public sanctions in the United States, for example, aimed to procure the abolition of alcohol(ism). By mid-century, self-organized groups like AA revived the focus on alcoholics as patients with a right to medical treatment. Behavioral health care, for its part, has long been connected to the body-mind and, therefore, to physical and mental conditions. In the mid-to-late nineteenth and early twentieth centuries, behavioral health patients were often institutionalized or sterilized. Around the same time, church-based psycho-spiritual therapy for the treatment of alcoholism commenced. Narcotic prison farms providing rehabilitative treatment to drug- and other addicts emerged in the 1930s. As deteriorating conditions in behavioral health institutions after World War II concerned the medical community in the U.S. and beyond, a wave of deinstitutionalization followed. Concurrently, behavioral health treatments anchored in experimental psychology and prescription drugs progressed. These included everything from group therapy to specific drug regimens. Both were important in mid-century Oso Blanco, but group therapy took precedence and set the tone for behavioral health care among alcoholics because of how fast socio-therapeutic models traveled and were activated by local practitioners, in comparison to new drugs.

Notwithstanding the publication of valuable studies on alcohol and alcoholism in Latin America, their social meanings and link to state formation remain elusive. Fewer scholars have situated alcohol in the region’s history of medicine and public health. Puerto Rico lends itself to an examination of alcohol(ism) in the context of rehabilitative carcerality, while also allowing us
to grasp transnational currents, given Puerto Rico’s colonial condition. There is a long history of elite and middle-class concerns about working peoples’ consumption of alcohol on the island, one that became more pronounced during the late nineteenth century only to grow stronger under the US colonial progressive movement and its prohibitionist organizations up until the 1930s. In the 1940s and 1950s, colonial-populist officials and creole health professionals inherited the preoccupation with addiction among the poor population (as in Castro Torres’s case).

By the mid-twentieth century, health care was at a tipping point in Puerto Rico. The health care system had already gone through a laboratorial phase under US colonial empire (1898-1930s) and a (re)turn to socio-scientific approaches to health and medicine (1940s-1950s) under the Partido Popular Democrático. Puerto Rican health care then entered an integrative period advanced by Guillermo Arbona, who during his tenure as Health Department Secretary between 1957 and 1966 expanded and fused the infrastructure for biomedicine, mental health, and public welfare and social services, resulting in the improvement of life expectancy.

Inside Oso Blanco, vertical biomedical and mind-science interventions prevailed in the 1930s and for much of the 1940s. Starting in the mid-1940s, a socio-humanistic turn increasingly defined penitentiary science and health care, chiefly through the labor of the Classification and Treatment Board. This turn was linked to an aspiration to treat the entirety of the delinquent person, a precept enshrined in Puerto Rico’s 1952 constitution. The multidimensional view of health that took shape and the collaborative ethos that imperfectly reigned in Oso Blanco contrasts with what transpired in Guatemalan prisons, for example, where US-led syphilis experiments were conducted and reflected a racialized, flat view of health and patients. The Classification and Treatment Board and the Puerto Rican colonial-populist state’s affirmation of rehabilitative carcerality through a constitutional mechanism reinforced holistic permutations of the talking cure inside the penitentiary in the 1950s and 1960s. One such manifestation—humanized, spiritualized group therapy—was promulgated by the AA penitentiary chapter, La Última Copa, and is documented in Realidad. In Puerto Rico, incarcerated people adopted the knowledge-producing and practitioner roles often assumed to only pertain to licensed doctors, counselors, social workers, and similarly positioned health professionals.

**AA in Puerto Rico and La Última Copa**

Alcoholics Anonymous and the group’s 12-step recovery plan and traditions arrived in Puerto Rico from West Texas. Whereas William Wilson and Robert
Smith are among those credited with establishing AA on the United States mainland, Ernest Goodman founded a chapter in San Juan circa 1947-48. Goodman, who died in 1955, advocated for the rehabilitation of those suffering from the “disease” of alcoholism. Thanks to Goodman, the AA movement spread to other corners of Puerto Rico (cities, carceral facilities, military bases, and so on). The San Juan chapter met the need for Spanish-language literature by translating and mimeographing pamphlet material for distribution in the tens of thousands of copies.22

Fifteen Puerto Ricans incarcerated at Oso Blanco co-established the AA chapter named La Última Copa, in December 1952.23 By the mid-1950s, more than 50 inmates belonged to the group.24 As of 1959 there were some 150 members.25 For perspective, the total number of Oso Blanco prisoners fluctuated between 2,198 in June 1952, 1,763 in June 1959, and 1,911 in June 1965.26 Although official AA members were a minority inside the penitentiary, their work touched more convicts’ lives than enrollment numbers suggest. Racially, light-skinned people predominated in Oso Blanco in the 1950s and 1960s, but they were not quite treated as white because of their colonial condition, poverty, and other markers of social difference.27 Still, the precise racial composition of La Última Copa’s founders and broader membership is unclear.

La Última Copa was not the first AA chapter to originate in a carceral facility. That honor went to California’s San Quentin State Prison a decade earlier, in 1942.28 The Oso Blanco chapter’s name, La última copa, is also the title of a famous song, first a tango in the late 1920s and by the 1950s a popular bolero locally interpreted by Felipe “La Voz” Rodríguez.29 The song versions of La última copa are a window into the bohemian male life of the era. They depict alcohol consumption as the panacea for unappreciated Hispanophone American masculinity. La Última Copa in Oso Blanco, meanwhile, similarly pursued the connected world that AA members wanted to build but in the register of benevolent patriarchy (i.e., responsible, industrialized masculinity in relation to family) and without recourse to excessive alcohol consumption.

Realidad was La Última Copa’s public relations arm. AA members in society at large, penitentiary administrators and staff, and non-alcoholic Oso Blanco prisoners supported the periodical’s production and dissemination, which by December 1957 numbered some 400 circulating copies.30 Realidad’s first director Victor M.C. saw it as a medium for exchange to generate “fraternal contact” with peers inside and beyond Oso Blanco’s walls. According to him, each edition was packed with “encouraging words” that benefited a wide readership (prisoners, government officials, radio personalities, other stakeholders).31 Over the years the content published in Realidad remained to a considerable degree stable, becoming more expressive as time passed. This is visible in the inclusion
of extensive poetry, transcribed letters, and English-language sections in later editions of *Realidad* compared to earlier ones, for instance.

La Última Copa used *Realidad* to construct and fortify an institutional AA culture. Tomás L.D.V., a fixture of the group’s leadership throughout the 1950s and 1960s, worked with New York AA staff secretary Hazel Rice to secure literature that would teach Puerto Ricans AA knowledge and precepts. Prison authorities lauded these efforts.  

Oso Blanco AA members also curated AA literature. They translated portions of *The Big Book* (the AA Bible) and other AA magazines, created questionnaires, penned commentaries, and debunked myths about the group and alcoholism. These interventions were designed to educate penitentiary members and hold them accountable in light of the very real problem of relapse. Translations of articles from the local press graced the pages of *Realidad* as well. These promoted the idea that alcoholism was a disease, speculated on how it might be addressed, and announced AA events and what ultimately became a bipartisan push for the establishment of rehabilitative centers for alcoholics in Puerto Rico. Other translations were drawn from the Christian Bible and *Chit Chat en Español*, *Rocinante* (Caguas), and *Bohemia* and *Carteles* (both from Cuba).

The Americas interfaced because of *Realidad*. One of Puerto Rico’s non-incarcerated AA chapters published *Sobriedad*, an “intergroup organ” that forged bonds with Oso Blanco and spread the AA message around Latin America and the “Hispanic world.” There is evidence that *Realidad* had readers in Mexico, Spain, and Saint Thomas, and of Ecuadorian and Salvadoran officials traveling to the penitentiary and interacting with La Última Copa. News of AA groups and activities from US prisons (California, Iowa, Florida, New York, etc.) was regularly announced in *Realidad*. A group based at the Soledad State Prison in California, for example, shared news of the launch of their magazine, *Future*, and communicated Mexican interest there in receiving Puerto Rican AA literature. Arizona State Prison AA members mailed their Caribbean peers a copy of their periodical, *Arizona Advocate*, segments of which were later published in *Realidad*. The literature of other island AA groups circulated in Oso Blanco, too (Monacillos’s *El Faro*, San Juan’s *Abece*, and Puerto Nuevo’s *Salvación* magazines). The Monacillos group requested copies of *Realidad*, as did social service professionals in the tuberculosis sanatorium located near the penitentiary.

Tomás L.D.V. reported in Winter 1957-58 that the group had already engaged some 1,000 inmates since its inception. That year island police had nearly 8,000 interactions with the public for alcohol-inspired incidents and crimes, and government statistics later in 1958 indicated that more than eighty percent of all incarcerated people in Puerto Rico were (in)directly affected by alcohol.
Society’s inability to manage alcohol (ab)use cascaded into Oso Blanco, validating La Última Copa’s existence. Therefore, the group’s activities spanned 11 areas: Sunday and extraordinary meetings; the publication of Realidad; Realidad’s local and transnational distribution; recruitment and orientation sessions at inmate central booking near Oso Blanco’s entrance; classroom visits; visits to local hospitals; annual AA conferences held on the US mainland; cultural activities; civic-social activities; the evangelistic practice of step 12 (i.e., helping and serving other alcoholics); and educational film screenings. Step 12 is perhaps best personified by the cover of an early 1960 edition of Realidad. It depicts a uniformed AA superhero lifting an alcoholic man from the bottomless chasm of alcoholism (Fig. 1).

Fig. 1: Inmate sketch of the embodiment of AA’s step 12. Realidad, 5:1 (January-March 1960): front cover.
La Última Copa held meetings on Sunday evenings in a penitentiary classroom. Those attending sought what Victor M.C. called a “thaumaturgic” rehabilitative formula. At meetings, members hoped to achieve sobriety together, improve in the moral and spiritual aspects of their lives, and assist other alcoholics unfamiliar with AA teachings. Meetings involved Oso Blanco residents and visitors and featured literature dissemination, testimonials, and panel discussions. These covered the basic precepts of AA—unity, recovery, and service—and presented incarcerated people with opportunities to work with penitentiary professionals to integrate AA efforts into the carceral curriculum.

One such Fall 1958 meeting concluded with the “Our Father” prayer (Matthew 6: 9-13; Luke 11: 2-4) followed by coffee and donuts amid guitar melodies. La Última Copa also visited peers beyond prison walls. Excursions underscored the common plight of alcoholics whether incarcerated or free, while revealing the added challenges faced by those free, particularly with regard to physical health vulnerability such as exposure to infectious disease. Ironically, being incarcerated in mid-twentieth-century Puerto Rico might have offered better living conditions to those behind bars than to the population at large. At the time many Puerto Ricans, especially rural-to-urban migrants, lived in poverty despite declining disease-related mortality rates. An added burden for these people were dwindling employment prospects triggered by the colonial-populist industrialization of the island economy (Operation Bootstrap).

While the production and distribution of Realidad were priorities for La Última Copa, the origins of the magazine title are not explicitly detailed in surviving editions. In the editions I have accessed, incarcerated authors liberally use the term ‘reality’ to shine a light on their shared truth: alcoholism was a tangible health reality for them, a disease that could only be arrested through sobriety, not cured. “Reality” conveyed other meanings as well. For more than a few it referred to spiritual awareness, namely the reality of “eternal life” in Jesus Christ as laid out in 1 John 5: 11-13; only with a clean heart was this possible, so alcoholics had to shed the symbolic “gangrene” of alcoholism by entering into an authentic relationship with God. For others, reality referred to their acute circumstances and the advancement of the Oso Blanco AA project.

Indeed, La Última Copa worked with penitentiary officials, teachers based in the prison, and other staff there to spread information about AA and its recovery plan and traditions. Social workers, Classification and Treatment specialists, and parole officers referred inmates to AA. The Oso Blanco chapter’s gains were attributable to this collaborative ethos, as well as working with Puerto Rico’s other AA groups. San Juan group member Jerry M., for example, exceeded expectations in this vein. He retrieved alcoholic inmates released from Oso Blanco, accompanied them to civilian meetings, helped them find jobs and
secure housing, and served as their advisor. In his own writings, he stressed that all recovering alcoholics needed was “WILL (an-honest-desire)-POWER (higher)” to stop drinking.

Notably, colonial-populist officials took cues from Realidad and developed legal projects focusing on alcoholism. Physician Pablo Morales Otero of the governing PPD sponsored one such project in early 1957. The project, which cast alcoholism as a public health problem, was “preventive,” “educational,” and “scientific” and aimed to be community-facing and “rehabilitate victims of alcohol through medical-psychiatric or any other kind of treatment.” It began as a small commission and later found a home in the Health Department’s Mental Hygiene Division. Colonial-populist investment in addressing alcoholism also echoed the concern that recidivism correlated with alcohol (ab)use. Not until summer 1960 did psychiatrists and clinicians implement a treatment program for alcoholics and, even then, AA remained involved. In light of all this, it was not an empty gesture when penitentiary warden Gerardo Delgado praised La Última Copa’s “prophylactic,” “fruitful,” and “therapeutically valuable” labor in Oso Blanco that had resulted in the social rehabilitation of more than 200 participating inmates as of late 1958.

Many prisoners entered La Última Copa’s orbit because of what the group preached. Mental desperation, the group’s social club dimensions, and the advice of respected incarcerated peers also proved crucial. This does not mean that the group avoided internal friction. Members decided to leave or otherwise complained about La Última Copa for different reasons (the apathy of collaborators, conflicts over democratic procedure, uncooperative interlocutors), but it is important to note that those who departed often returned to the flock. Despite the internal tensions and additional obstacles that La Última Copa encountered, such as parole-induced reductions in membership, the group remained relevant by pointing incarcerated alcoholics toward therapeutic options that the Puerto Rican government could not provide due to lack of resources or negligence. In the absence of behavioral care infrastructure—still very much in the making in the mid-twentieth century (revamped medical facilities and parole, penal encampments, peer mentors)—inmates met part of their own needs as “uncredentialed” health-knowledge producers and practitioners. La Última Copa’s success reflected the colonial-populist state’s embrace of rehabilitation and its struggle to materialize penal reforms, which in turn empowered a non-governmental, loosely religious organization within the island prison system.
Testimonial Writing

La Última Copa believed in the therapeutic power of testimony. Testimonials published in Realidad numbered in the dozens. Their authors came from all walks of life. Young and adult, “humble” jíbaros (highland peasants), the “suffering middle class,” the “well-off”—all were represented in Oso Blanco. Minus women, who were not incarcerated as much as men in mid-century Puerto Rico but might be temporarily detained in the penitentiary, Realidad confirmed these demographics, as its contributors were to be found among the poor, working, and nascent middle classes.

Self-reflective histories stressing personal circumstances and culpability over structural critique were the most common contribution Oso Blanco AA members made to Realidad. These accounts often reach back in time, into the childhoods of incarcerated people’s lives. In early 1957, for example, Tomás G.D. divulged having first encountered alcohol at age eight. Growing up, his father regularly took him to social events and had him drink a few cubic centimeters of liquor “for worms” four to five times per week. To support what became a daily drinking habit, he dropped out of high school and went to work at Roosevelt Roads, a United States military base built in northeast Puerto Rico during World War II. He fell into debt and used credit to drink at local bars while working to pay what he owed. Even after he was drafted by the US military in 1943, Tomás G.D. continued to struggle with alcoholism. On duty in Panama, authorities admitted him to the Fort Clayton mental ward, where he was diagnosed with moderate-advanced neurosis, a mental condition involving symptoms of stress like depression, anxiety, and hypochondria but not a radical loss of touch with reality. Tomás G.D. returned to Puerto Rico after World War II and although he got married, he persisted in drinking. His desperation to drink prompted him to forge checks, landing him in prison. While paroled, military and civilian psychiatrists recommended he attend AA meetings. But again, he succumbed to drinking and his parole was revoked. La Última Copa gave Tomás G.D. hope, however. He planned to start an AA chapter in the housing project his soon-to-be ex-wife lived in (Llorens Torres) upon his release.

While Tomás G.D.’s profile captures what a “typical” alcoholic prisoner’s experience was like in mid-century Puerto Rico, these inmates could be portrayed according to other criteria. Tomás L.D.V., for instance, underscored the best characteristics of an inmate named Lino—a caring, always smiling, helpful, and practical peer who rolled with the punches and fancied himself to be good-looking. He could take a joke and dish them out. “Due to his ugliness and many talents,” Tomás L.D.V. wrote, “the prison population considered him the typical prisoner.” A hearty laugh from this and other published jokes did not cure all
ailments endured by Realidad’s contributors and readers, but they surely had some effects, such as stimulating the body; increasing the endorphins released by the brain; relieving stress response; and improving mood.\(^71\)

Tomás L.D.V.’s humor is notable considering that incarcerated people possessed scientific knowledge about the impact that alcohol (ab)use could have on the human body. Hilario R.A. clarified that alcohol affected bodily organs, “putting our literal health at risk.”\(^72\) Julito G.M. prefaced an article with his medical status: “Diagnosis: Alcoholism; Prognosis: Delirium Tremens, Insanity, Premature death, Liver cirrhosis; Immediate Treatment: Sobriety; Therapy: Alcoholics Anonymous.”\(^73\) A “stark and painful reality” of severe alcohol withdrawal symptoms, among other unsavory effects, awaited him if he opted against sobriety.\(^74\) In contrast, Julito G.M.’s “total recovery” was attainable alongside family if he changed how he thought and lived.\(^75\)

For some convicts the shift in mindset steered by AA did more than medicine, psychiatry, religion, and repeated imprisonments ever could. Marcial, for instance, wrote about needing to accept being an “infirm alcoholic.”\(^76\) In and out of prison since 1946, he described how in 1952 he exited “disoriented, humiliated, and with an inferiority complex that discouraged me from undertaking any useful activity.”\(^77\) Despite having communal and kin support, it was not long before he returned to prison. This time, however, AA philosophy and solidarity filled him with confidence. Marcial felt younger, stronger, and mentally refreshed.\(^78\)

In their testimonies, incarcerated people pinpointed the causes of alcoholism. Guillermo H.C. believed alcoholics started drinking because they perceived it as a solution to problems—economic, family, and so on. These problems led to others, including criminal behavior.\(^79\) F.M. Bocachica put forward winning “street debates” and being a neighborhood “boss” as reasons why he took to drinking.\(^80\) A transactional attitude, drowning relationship sorrows, emotional turmoil, and psychological complexes were cited as potential causes.\(^81\) Peer pressure, trying to sustain alcohol-dependent friendships, or constituting part of a “family” of drinkers frustrated with their collective lot in life could lead to alcoholism, too.\(^82\)

Contributors also discussed repercussions. Hilario R.A. emphasized economic bankruptcy, broken homes, familial debacle in the form of abandoned and rebellious children, and hunger. The only way to break the cycle of alcoholism and its effects, to manage urges to drink, was through spiritual commitment.\(^83\) As Tomás L.D.V. put it, there were many consequences associated with drinking—the destruction of homes, crime, mental illness, and exposure to tuberculosis—but just a single diagnosis: alcoholic.\(^84\) Rufino V.L. considered alcohol “degenerative,” for it led to “economic and moral ruin” and even sapped artists of their “creative faculties.”\(^85\) Degeneration could impact the human body as
well. A sketch from the December 1957 edition of *Realidad* (Fig. 2) depicts the physiological fallout of alcoholism—premature aging—represented by a seated, balding, senile man, and contrasts it to sobriety, depicted as an energetic child or toddler.

![Fig. 2: Inmate sketch of the impact of alcoholism on aging. *Realidad*, 2:4 (December 1957-February 1958), p. 15.](image)

Inmates underscored the relevance of family to reshaping and reorienting their health realities. For this reason, Mario S.M. wrote about prioritizing sobriety over freedom. “Today’s mental sobriety is tomorrow’s happiness alongside family,” he remarked. A solution was within reach through the AA philosophy.86 Even family members had gendered responsibilities to fulfill, however. Marcial B.M. posited that wives needed to be “tolerant, sweet, caring and understanding” of their husbands to help them avoid falling into alcoholism. Alcoholic husbands were patients requiring treatment, and their wives considerate nurses.87 A pair of short, anonymous columns published in the Fall 1957 edition of *Realidad* elaborated on family further: Doing right by family should give alcoholics reason for pause and incite self-analysis leading to change.88 Repairing damaged relationships (familial and otherwise) was essential, Julio P.N. expressed.89 Only at that point, he continued, “can we say that we are born again; that we have risen from the tomb like Lazarus.”90
Such a rebirth occasioned a new understanding of time. Thinking in 24-hour increments permeates the testimonial literature of *Realidad*. M.S.M. insisted that every minute of every hour had to be seen as a “miracle.”91 Future president of La Última Copa M. Berrios endorsed this idea, writing that “Living in the present day has eased my life, has lifted the heavy burden of yesterday and tomorrow.”92 The 24-hour plan, Eugenio V.R. asserted, “is the best sword” to wield against alcohol.93 It entailed staying physically and mentally sober for 24-hours and repeating the cycle. Sergio R.R. likened the 24-hour plan to doses of insulin and penicillin, with the caveat that alcoholics were lifelong patients.94

*Realidad* testimonies provide glimpses of the type of consciousness-raising that prevailed among AA-affiliated incarcerated Puerto Ricans and the individual life challenges they faced, which they rarely blamed on structures beyond their control. Not all incarcerated people shared the same perception, of course. Those engaging group therapy, however, applied AA lessons to their routines. Through *Realidad* and broader AA culture and rituals, inmates tapped into therapeutic models and techniques anchored not only in medicine and social science but also in social interaction and humanities practices like reading, writing, and drawing. These humanized them and empowered them to reassert control over their lives, actions, and affairs.

**Socio-Humanistic Therapeutics**

Socio-humanistic therapeutics offered incarcerated Puerto Ricans options that amplified the priorities and goals of Oso Blanco’s Classification and Treatment Board and Puerto Rico’s colonial-populist state. Contributors to *Realidad* promoted the benefits of all kinds of carceral recreational activities.95 Group therapy sessions, or, as Julio P.N. called them, “salvific medicine,” were AA’s therapeutic bread and butter, however.96 They were “the key to sobriety,” which meant going without liquor and being happy about this.97 To be clear, sobriety did not only mean abstaining from drinking. Whereas medical experts thought that abstaining from alcohol might result in optimal physical and mental efficiency, incarcerated alcoholics understood this had to be accompanied by a specific state of mind and set of emotions.98

La Última Copa held weekly group therapy meetings, adhered to the 12-step recovery plan and traditions, and revered the individual histories of AA members.99 For Juan P.R., group therapy was wonderful because of how it brought people together to address behavioral and character deficiencies.100 AA was medicine for alcoholics, he observed, but it was also effective against ills such as depression and social isolation.101 Roberto V. noted that for AA’s therapeutic
potential to be realized, “it is necessary to regularly attend meetings and nourish oneself from others’ experiences [and vice versa].”

Using the 12-step plan to become a new man galvanized him, yet the “great medicine” for achieving sobriety were the meetings.

Religious diction and imagery pervaded Oso Blanco’s AA culture. Multiple editions of Realidad published inmate sketches of Jesus Christ (Fig. 3) and of God’s all-seeing eye looking down on AA from the sky.

Hilario R.A. highlighted prayer. Praying with “faith and sincerity,” he proposed, “cleanses our minds of malignant disturbances and produces marvelous effects in our lives, principally in the spirit.”

Ramón P.R. theorized that carceral institutions in Puerto Rico were full because of a societal moral crisis. Sociology, psychology, psychiatry, and psychosomatic medicine sought to calm and reverse social ills, but these epistemologies failed to incorporate spiritual tools in the battle against alcoholism. At the core of the proliferation of alcoholism, he claimed, was man’s attempt to deal with people’s contempt and “escape the reality of his problems.”

Citing German philosopher Friedrich Nietzsche, Ramón P.R. added that everyone distancing themselves from “the [divine] nature of the Creator” compounded the problem. As a result of this, “negative values” replaced “positive values,” with predictable results for society.

Realidad contributors detailed how they became acquainted with constellations of humanist thought. Contemplating what awaited him beyond prison walls once released, V.M.C. recalled the pridefulness and resentment he harbored when he first entered Oso Blanco. These led to “phobias, shyness, fear. A lot of fear. Fear of living. Fear of dying. I wanted to be around people, and I was always alone. Alone in a crowd. I felt ridiculous, and though not appearing as such, that is what I was. I thought I had gone crazy.”

What sustained him was not AA but the “magical” words of his mother, who told him “All is not lost, son[.]. You have God and me. Seek him out and he will help you.”

Herein began a “rehabilitative process” that would make him a “new Lazarus.”

Religion guided V.M.C. to books in Oso Blanco’s library—philosophical, didactic, theological, theosophical, and mystical literature. He read translations of works by André Maurois (France); Johan Wolfgang von Goethe (Germany); Samuel Smiles and Annie Besant (Britain); Dale Carnegie, Orison Swett Marden, Fulton Sheen, Prentice Mulford, Ralph Waldo Trine, and William Wilson (United States); and King Solomon and the apostles Matthew and Paul (Near East/Israel). These authors inspired V.M.C. to get familiar with humanity and himself and made him receptive to the messaging of La Última Copa. He anticipated hostility, rejection, exclusion, and ignorance in the free world because of the stigmas linked to carcerality but insisted he would demonstrate understanding, tolerance, and forgiveness in response, all of which he learned from literature
and La Última Copa. V.M.C. anticipated “confronting reality, no matter how cruel [or] harsh,” to flaunt the “universal love” of the Almighty regardless of class, race, or religion. At the core of this love were “cooperativism” and “mutual aid,” two elements for “a better world.”

Transnational solidarity writing in *Realidad* attested to the global struggle against alcoholism and drew from popular literature. From New Zealand’s Plymouth Prison, for example, affirmation traveled that AA could dull prisoners’ pain and awaken them to “reality” from the “spell” they were in. This left Oso Blanco readers optimistic about achieving “physical-mental sobriety.” Quoting author of French and Caribbean descent Alexandre Dumas’s *The Three Musketeers*, a book available in the penitentiary library, N. de R. spotlighted the mutual aid and uplift associated with AA group therapy. The expression “all for one and one for all” was a code by which to live.

Although *Realidad* writers acknowledged the therapeutic benefits of cultivating positive energy, they did not believe there was a cure for alcoholism. At best, only its symptoms could be arrested through the applied philosophy of
“salvific sobriety.” Tomás G.D. echoed this point in an essay in which he noted that sobriety was helping him manage frayed nerves and survive a divorce. Mario, for his part, thought that more prison time positioned him to achieve lasting sobriety, so he nudged legal officials to reincarcerate him. Hipólito G.C. went so far as to say that he and his family secured “happiness” because he encountered AA, which was changing him for the better. For Pablo C.O., were it not for AA, suicidal thoughts would have overwhelmed him. Alejandro F.R. clarified that alcoholics needed treatment, but not through medicinal potions, tonics, or patented interventions. Rather, positive self-determination and right thinking served as “psychological resource[s]” providing “an emotional escape.”

AA axioms informed the right-thinking philosophy referred to by Alejandro F.R. These included: “But for the grace of God”; “First things first”; “Little by little goes a long way”; “One is enough, a thousand are not”; “Live and let live”; and “Think.” Axioms were tools to achieve and maintain sobriety. Mario S. called them “palliative”—medical care that relieves symptoms without dealing with the cause of the condition, in this case alcoholism. AA was the only real therapeutic option available to incarcerated alcoholics, he contended.

Poetry afforded inmates opportunities to process their alcoholism and sobriety on their own terms. It functioned as an emotional sanctuary for spiritual and other kinds of revelations while supporting their mental health. Through poetry, Frank M. came to understand that a Higher Power saved him from “death or insanity.” Felipe M.B. escaped the yoke of his past by recognizing his cowardly errors and asking God for forgiveness. In Tomás L.D.V.’s “Forward,” he writes of a “singing” and “dancing” drunken moon symbolizing a lover who at one time had been on the receiving end of his “fiery,” “passionate” kisses. He wavers between desiring to resuscitate his relationship with the moon and bidding her farewell. The moon symbolizes both a woman and drinking. In the end, while the moon will continue in drunken stupor with other lovers, Tomás L.D.V.’s “grief” is “cured” and he moves on without her. A few years into its production, Realidad featured a regular poetry section that touched on various themes and topics suggestive of how prisoners sought to better understand their own and others’ feelings.

Musicians serving time in the penitentiary lent their talents to La Última Copa. The “Free Soul” ensemble provided a multicultural soundtrack for inmates’ therapeutic experiences. Radio and television stars and other acts performed in Oso Blanco, including the bolero group Trío Santurce, Pepito the ventriloquist, and multiple singers. Religious practitioners sang spiritual hymns during AA-related events. Rogelio Parrilla, who had been confined at the leper colony in Trujillo Alto since 1936, submitted his testimony to Realidad in late 1960. In his case, “songs of Zion fell as a healing balm” in his heart, lifting him up
“to the very heavens.” As several scholars have argued, music and singing behind bars can have therapeutic effects, such as the release of chemicals and hormones that boost the immune system and affective-mood states, as well as facilitate social bonding and restore one’s capacity to trust.

Socio-humanistic therapeutics thrived in Oso Blanco between the late 1940s and early 1960s. The mimeographed periodical *El Despertar* (The Awakening) chronicled the fleeting consolidation of rehabilitative carcerality in 1949-50 and documented prisoners’ belief in and critiques of penal reform. Political violence in Oso Blanco and Puerto Rico at the time prompted authorities to curtail such forums dedicated to socio-humanistic therapeutics. *Realidad*, which exhibited less of a critical edge compared to its predecessor, documented the revival of rehabilitative carcerality between 1956 and the 1960s. Across both periods, socio-humanistic logics and practices proved crucial for incarcerated people, who used them to self-narrate, learn, work within colonial-populist state power, build community, and improve their well-being.

**Conclusion**

Puerto Rico’s therapeutic infrastructure underwent significant transformations in the 1960s and thereafter. By the mid-1960s, contributors to *Realidad* routinely spoke of addiction to alcohol and drugs. The program “Pro-Rehabilitation Addicts,” for instance, began in 1962 and connected efforts in Oso Blanco to those implemented at the nearby psychiatric hospital’s Center for the Investigation of Addiction (CISLA, 1961-66). Physician Efrén Ramírez supervised a program there that emphasized “total rehabilitation” and aspired to prepare incarcerated people to return home. The establishment of the program came on the heels of new laws criminalizing narcotics possession/use and was followed by other (im)permanent initiatives transferring the treatment of addiction from Oso Blanco to the psychiatric hospital and CISLA. Press sources indicate the difficulties associated with such transfers, however.

Approaches centered on containment and enterprise displaced treatment in therapeutic thinking and practice between the 1970s and 1990s. It appears that the publication of *Realidad* ceased just as containment took off. Much of what the incarcerated people who contributed to *Realidad* deemed beneficial to their health in the 1950s and 1960s is now viewed in a more cynical light. Take the Alcoholics Anonymous program, which as recently as 2015 was branded by one journalist as “irrational.” In *The Atlantic*, Gabrielle Glaser claims that scientific researchers have debunked the central tenets of AA doctrine and found dozens of other treatments more effective. Yet, Glaser also admits that science cannot
fully explain why some heavy drinkers become physiologically dependent on alcohol and others do not, or why some of them recover and others fall short.\textsuperscript{142}

While modern science and medicine inform addiction treatment regimens in many cases, in others, peer group therapy and counseling, religion, or literature might prevail. Studies carried out between the 1980s and 2010s proving the efficacy of “discredited” ways of knowing and healing in (post)carceral care make this clear.\textsuperscript{143} For the case of Puerto Rico, anthropologists are uncovering how (ex)incarcerated men on the edge of citizenship have innovatively addressed addiction and societal reintegration in the recent past. They have done so by becoming active participants and vernacular professionals in neo-therapeutic communities and perpetuating the carceral state itself, both of which have origins in the style of behavioral health care introduced during the era of colonial-populist rehabilitation.\textsuperscript{144}

In mid-century Oso Blanco, medicine operated as a dialogue, not entirely as an imposition. \textit{Realidad} gave incarcerated Puerto Rican alcoholics room to process their predicaments and make decisions about their behavioral care. Drawing from psychology, philosophy, art, and so on, they rounded out their understanding of human health and documented their health realities to get by and get better. Socio-humanistic therapeutics were not just window dressing, but part of a model to sustain and build on, one that muted the relevance of longstanding colonialism and structural violence in the making of a common-wealth future. For several reasons (the end of uninterrupted PPD rule; narcotics laws; the resurgence of punitive incarceration and biomedical approaches to substance abuse; changes in resource allocation or divestment altogether within correctional budgets), the honeymoon would not last.

Regardless, the history of La Última Copa shows that incarcerated people were partners in forging novel standards for behavioral care. AA precepts, so-ciality, and culture reconfigured prisoners as indebted penitents charged with a moral duty to self-evaluate \textit{and} aid peers who had faltered but now assumed the responsibilities of colonial-populist citizenship. Without their participation as knowledge-producers and practitioners, Puerto Rico’s social and humanist turn in corrections would have stalled. \textit{Realidad} largely foreclosed the possibility of more profound critiques of state structures or disciplinary institutions and was fashioned within colonial constraints. Even so, it allowed incarcerated Puerto Rican men to create information networks across local, regional, and international boundaries, produce knowledge about their experience of alcoholism as an illness, and perhaps most important, devise strategies to seek and find healing.
Notes

1. For more on the Insular/State (pre/post commonwealth status) Penitentiary’s moniker, see Fernando Picó, El día menos pensado: historia de los presidiarios en Puerto Rico, 1793-1993 (Río Piedras, PR: Ediciones Huracán, 1994), p. 69; Alberto Ortiz Díaz, “Pathologizing the jíbaro: Mental and Social Health in Puerto Rico’s Oso Blanco (1930s-1950s),” The Americas, 77:3 (July 2020), p. 409fn1. The Classification and Treatment Board was an interdisciplinary medico-legal entity founded in the mid-1940s that engaged inmates to co-develop rehabilitation programs for them. Alberto Ortiz Díaz, Raising the Living Dead: Rehabilitative Corrections in Puerto Rico and the Caribbean (Chicago: University of Chicago Press, 2023), chs. 2-3.


3. Expediente del confinado Sotero Castro Torres, October 1948, Caja 65, Serie Junta de Libertad Bajo Palabra, Fondo Departamento de Justicia, Archivo General de Puerto Rico. The Oso Blanco professionals in frequent contact with imprisoned people were social workers, who often advocated for critical changes in the prison system. On the expansion of the profession of social work and what the field’s practitioners were doing in prisons at the time, see Ortiz Díaz, Raising the Living Dead, ch. 3.

4. Expediente del confinado Sotero Castro Torres.

5. On governance changes during the first two-thirds of the century and how they shaped correctional institutions like Oso Blanco, see Ortiz Díaz, Raising the Living Dead, pp. 16-18; Picó, El día menos pensado, pp. 72-73.


9. Armus and Gómez (eds.), Gray Zones of Medicine, p. 4.


18. Nicole Trujillo-Pagán, Modern Colonization by Medical Intervention: U.S. Medicine in Puerto Rico (Leiden, Netherlands: Brill, 2013); Francisco Scarano, “Jíbaros y médicos a comienzos del siglo XX: los cuerpos anémicos en la ecuación imperial,” in Francisco Scarano, La mascarada jíbara y otros ensayos (San Juan: Ediciones Laberinto, 2022); Ortiz Díaz, Raising the Living Dead.


20. The constitutional enshrinement of prisoners’ “rehabilitation” was accompanied by adjustments and changes to the broader criminal-legal system and classification and treatment inside carceral facilities. José Trías Monge, Annual Report of the Attorney General for the Fiscal Year Ending June 30, 1956 (San Juan: Department of the Treasury Printing Division, 1961), pp. 32, 95; José Trías Monge, El sistema judicial de Puerto Rico (San Juan: Editorial de la Universidad de Puerto Rico, 1988).


29. Pedro Malavet Vega, La vellonera está directa: Felipe Rodríguez (La Voz) y los años 50 (Santo Domingo: Editora Corripio, 1984).

42. “Los casos y las cosas,” p. 10.


47. “Los casos y las cosas,” p. 10.


49. “Reunión de la junta directiva del grupo ‘La Última Copa’ de AA de la Penitenciaria Estatal con el grupo de maestros de la institución,” Realidad, 2:3 (September-November 1957), p. 20.

50. Ibid.


52. Ibid.


60. Ibid.

61. Half the offenders whose crimes had originally involved alcohol or drugs violated their parole because of the same substances. Estado Libre Asociado de Puerto Rico, Departamento de Justicia, Evaluación de cuatro años de libertad bajo palabra en Puerto Rico, años 1955-56 a 1958-59 (San Juan: Departamento de Justicia, Sección de Estadísticas, 1960), pp. 21, 52.


74. Ibid.

75. Ibid. Another reference to “Delirium Tremens” is in Ramón S.M., “A la edad de 13 años comencé,” p. 10.


90. Ibid.
98. “¡Alerta!” p. 13.
107. Ibid.
109. Ibid.
110. Ibid.
111. V.M.C., “Mi partida,” p. 15.
112. Ibid.
115. Ibid.
116. Ibid.
126. Ibid.
144. Helena Hansen, Addicted to Christ: Remaking Men in Puerto Rican Pentecostal Drug Ministries (Oakland: University of California Press, 2018); Caroline Parker, Carceral Citizens: Labor and Confinement in Puerto Rico (forthcoming); Ortiz Díaz, Raising the Living Dead.