

Support Groups

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Traditional Medicine, as we define it just may **NOT** have all the answers for Addiction Treatment

Components of Comprehensive Drug Addiction Treatment



The best treatment programs provide a combination of therapies and other services to meet the needs of the individual patient.

There is no
"one-size-fits-all"
treatment for addiction



Alcoholic's Anonymous



Long Term Recovery

Recovery Programs:



Detoxification-Treatment-Rehabilitation-RECOVERY

Alcoholics Anonymous “The Preamble”

- Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.



Alcoholics Anonymous:



- The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

A Power Greater Than Ourselves

- Purposefully vague definition; individualized concept; all persons are spiritual.
- Personal relationship with Higher Power; influence on social interactions, employment and financial issues, family and love relationships, etc. Spiritual beliefs and values for everyday living.

AA is NOT affiliated with any religion



Religion and Spirituality

“Religion is for people who are afraid of going to hell; Spirituality is for those who have already been there.”

Ross V.
A.A. Member

“Alcoholics Anonymous has been called the most significant phenomenon in the history of ideas in the 20th Century”

Quote from Lasker Award Citation to AA, 1951.

The Integration for Addiction Treatment

- To integrate: 12-Step Spirituality,
 - Addiction Psychiatry,
 - Neurobiology,
 - Psychopharmacology.
-
- **Addiction Medicine**



HOPE
FOR
HEROIN
ADDICTS

Why the 12-Step Programs?

- They really work!
- The spiritual approach of AA and NA has helped millions of people who want to stop drinking and using drugs.
- Most effective way of staying sober.
- Essential source for clinicians.
- Know how to refer and support.
- 12-Steps adapted to deal with over 200 human problem behaviors.

TWO MODELS

Biopsychosocial Model

ABSTINENCE, SPIRITUALITY,
ACCOUNTABILITY, SERVICE;
HIGHER POWER AS A SPIRITUAL CONCEPT, FAITH AND BIG
BOOK AUTHORITY,
SPONSORSHIP, GROUP CONSCIENCE., 12-STEP
RECOVERY AS A WAY OF LIFE.

Psychiatric Model

DUAL DIAGNOSIS,
PERSONAL IDENTITY AS PSYCHIATRIC PATIENT, MEDICAL
AUTHORITY,
PRESCRIPTION AUTHORITY,
SCIENCE AND PSYCHOTHERAPY,
PSYCHOPHARMACOLOGY,
PSYCHIATRY (AND PSYCHIATRISTS) AS HIGHER POWER.

Estimated A.A. Membership and Group Info:

Groups in US.....	51,183
Members in US.....	1,166,927
Groups in Canada.....	5,257
Groups Overseas.....	39,804
Members Overseas.....	656,938
Internationalists.....	124
Groups in Correctional Facilities US/Canada... 	2,466
Lone Members.....	347
Total	
Members.....	1,989,124
Groups.....	98,710

Principles of Effective Treatment

- Addiction is a complex but treatable disease that affects brain function and behavior
- No single treatment is right for everyone
- People need QUICK access to treatment
- Staying in treatment, *long enough* is critical
- Psychological and behavioral therapies are the mainstay of treatment
- Medication is a crucial part of treatment, especially when used together with psychotherapy

12-Step Programs

Some of the Best Known:

- Alcoholics Anonymous (AA)
- Al-Anon
- Narcotics Anonymous (NA)
- Cocaine Anonymous (CA)
- Gamblers Anonymous (GA)
- Overeaters Anonymous (OA)
- Debtors Anonymous (DA)
- Sex and Love Addicts Anonymous (SLAA)

AA = Alcoholics Anonymous

ACA = Adult Children of Alcoholics

Al-Anon = Family and friends of alcoholics

CDA = Chemically Dependent Anonymous

CODA = Co-Dependents Anonymous

EA = Emotions Anonymous

GA = Gamblers Anonymous

MA = Marijuana Anonymous

NA = Narcotics Anonymous

NicA = Nicotine Anonymous

OA = Overeaters Anonymous

RFA = Recovery from Food Addiction

SA = Sexaholics Anonymous

S-Anon = Family and friends of sexaholics

SLAA = Sex and Love Addicts Anonymous



Recent growth of the NA Fellowship



History of AA

- 1935: Two hopeless individuals who couldn't stop drinking, Bill W. and Dr. Bob, managed to stay sober by talking to each other.
- Bill W. and Dr Bob decided to share their experience, strength and hope with other alcoholics, beginning in June 1935.
- 6/1936 – 5 recovered
- 6/1937 – 15 recovered
- 6/1938 – 40 recovered
- 6/1939 – 100 recovered (99 men, 1 woman)
- 1939 Big Book written by Bill W. with help of 3 groups. Separated from Oxford group, 1938

History of AA:

1941

Jack Alexander Article in
Saturday Evening Post



History of AA

- Non-alcoholics involved from the beginning
 - Cooperation with professionals
 - “AA wants to be friends with its friends.”
- Cooperation with the Professional Community (CPC) Committee grew out of desire to help suffering alcoholics.



History of AA

- Research in 1980's and 1990's
 - AA most effective way for alcoholics to maintain long term sobriety. (Vaillant, 1983 & 1995)
- AA/NA compatible with treatment of all medical and mental disorders.
- Should be considered essential in treatment of addictive disorders.

Differentiate

“Program”

from

“Fellowship”

Program

Prescribed beliefs, values and behaviors of 12-Step Organizations. The 12-Steps.

Fellowship

Practice, activities and experience of a 12-Step organization: e.g. service, helping others, sharing, “working the Steps” etc.

Going To Meetings

- Acceptance of newcomers is warm and genuine.
- The core activity is sharing of experience, strength and hope:
 - Honesty, Open-mindedness, and a Willingness to change

Going To Meetings

- Many meetings to choose from
 - Open vs. Closed
 - Speaker vs. Discussion
 - Beginners
 - 12-step, 12-traditions study
 - Big Book Study (AA)
 - Basic Text Study (NA)

12-Step Programs Emphasize

ACTION!

Advice to Give Patients About Meetings

- Go early and stay after meeting to talk with others who are setting up and cleaning up after the meeting, they are “Home Group” members.
- Speaker meetings are good places to start, one speaker will share his/her experience, strength, and hope. Your patient will not feel any pressure to speak at these meetings.
- If nervous about attending first meetings, go with a friend/relative; if the friend/relative doesn't have a problem with drinking or using, they will need to go to open meetings.
- If your patient goes to a discussion meeting and is not ready to speak, he/she can pass when it is his/her turn to talk
- Try several meetings: speaker, discussion, step study before deciding this isn't for you

Choosing a Home Group

- Home group is the meeting that person will go to essentially every week.
- Home group members help set up meetings, chair the meetings.
- Being part of home group introduces service and responsibility.
- Can serve as both an extended family and a recovery support system.
- A phone list is of great benefit
 - shown significantly to reduce the risk of relapse.

Choosing A Sponsor

- Until a sponsor is acquired, ask for a temporary sponsor who will introduce your patient to the Fellowship and take them to meetings.
- Main task of sponsor is to help work the steps and develop a personal program of recovery.
- Having a sponsor significantly reduces the risk of relapse (Sheeren, 1988)
- A sponsor will help the newcomer to work on being Honest, Open-minded, and Willing (H.O.W.)

Step One

We admitted we were powerless over alcohol (or drugs) - that our lives had become unmanageable.

- Addresses denial.
- Promotes honesty and self examination, resistance can be great.
- Accepts identity as an alcoholic or addict.
- Principle: Honesty.

Step Two

Came to believe that a power greater than ourselves could restore us to sanity.

- The person recognizes that they need help. “I alone can do it, but I can’t do it alone.”
- Sanity is the recognition that continued use of alcohol or other drugs will have continued negative effects.
- Helps open the person to new internal experience.
- **Principle: Hope.**

Step Three

Made a decision to turn our will and our lives over to the care of God as we understood Him.

- Can be difficult for atheists and/or agnostics; re-frame by thinking of an accepting and loving life-force within.
- Practicing “letting go” weakens the grip of obsessions, craving, worries, resentments.
- Principle: **Faith.**

Step Four

Made a searching and fearless moral inventory of ourselves.

- Done by many individuals as a fundamental part of psychotherapy.
- Arouses guilt, shame, grief, and other powerful negative emotions. A sponsor is necessary in working this step.
- Prepares person for honest sharing in human relationships.
- **Principle: Courage.**

Step Five

Admitted to G-d, to ourselves, and to another human being the exact nature of our wrongs.

- Arouses shame, anxiety, reactions of anger, disgust, and rejection.
- Usually given to one's sponsor, home group member, or clergy person. Shame reduction.
- Great relief that reaction not rejecting or punitive.
- Helps develop honesty with oneself and others.
- **Principle: Integrity.**

Step Six

Were entirely ready to have God remove all these defects of character.

- Characterologic and personality problems continue.
- Simply getting ready to have a Higher Power, something other than self, remove selfishness, dishonesty, impulsiveness, blaming, and other dysfunctional behaviors.
- **Principle: Willingness.**

Step Seven

Humbly asked Him to remove our shortcomings.

- Recognizes the fact that I am a fallible human being who needs help.
- Antisocial, narcissistic, avoidant, and borderline personality disorders slowly subside and even disappear.
- Principle: Humility.

Step Eight

Made a list of all persons we had harmed and became willing to make amends to them all.

- Painful, but a valuable preparation for repairing damaged relationships.
- A sponsor is necessary in working this step.
- “If you have an unresolvable resentment about someone, pray for the son of a bitch.”
- Essential part of capacity for empathy.
- Helps develop skill in maintain relationships.
- **Principle: Love and Reparation**

Step Nine

Made direct amends to such people wherever possible, except when to do so would injure them or others.

- Arouses anxiety which may be extreme.
- Sponsor support necessary.
- Helps repair damaged relationships.
- Restores the Balance of Justice.
- Principle: Amends and Restitution

Step Ten

Continued to take personal inventory and when we were wrong promptly admitted it.

- Self-observation, associational problem solving, and honesty with oneself and others.
- Self-observation and admission of problems.
- Principle: Perseverance

Step Eleven

Sought through prayer and meditation to improve our conscious contact with G-d as we understood Him, praying only for knowledge of His will for us and the power to carry that out.

- Emphasis on developing experience one is capable of.
- Knowledge & power are for taking responsibility for one's own life - solving one's own problems.
- Developing one's own experience leads to tolerance for others.
- Continuing Surrender of the Will.
- **Principle: Spiritual Awareness**

Step Twelve

Having had a spiritual awakening as a result of these steps, we tried to carry this message to alcoholics (or addicts), and to practice these principles in all our affairs.

- Refers to freedom from the bondage of self-centeredness.
- “Spirituality is the ability to get our minds off ourselves.”
- Action is carrying the message. Not a sermon, or even good advice. It is a personal sharing of the recovering person’s experience, strength, and hope.
- **Principle: Service**

Correlation of 12-Steps with Six Elements Important to the Success of Psychotherapy*

1. Release of emotional tension in the context of hope and expectation of receiving help.
2. Identification with the method.
3. Suggestion and persuasion.
4. Operant re-conditioning.
5. Repeated reality testing.
6. Cognitive learning about the basis for one's difficulties.

*Judd Marmor, M.D., American J. Psychiatry, April 1980

The Promises

1. We will know a new freedom and happiness.
2. We will not regret the past nor wish to shut the door on it.
3. Comprehend the word serenity and know peace.
4. Realize how our experience can benefit others.
5. The feeling of uselessness and self-pity will disappear.
6. We will lose interest in selfish things, and gain interest in our fellows.

The Promises

7. Self-seeking will slip away.
8. Our whole attitude and outlook on life will change.
9. Fear of people and economic insecurity will leave us.
10. We will intuitively know how to handle situations which used to baffle us.
11. We will suddenly realize that God is doing for us what we could not do for ourselves.

The Twelve Traditions

**THE TWELVE TRADITIONS
ARE TO THE GROUP WHAT THE
TWELVE STEPS ARE TO THE
INDIVIDUAL.**

**THEY ARE A UNIQUE SET OF
ORGANIZATIONAL PRINCIPLES
DESIGNED SPECIFICALLY TO PREVENT
THE GROUP FROM DESTROYING ITSELF!!**

The 12-Traditions

1. Our common welfare should come first; personal recovery depends upon A.A. unity.
2. For our group purpose there is but one ultimate authority – a loving God as He may express Himself in our group conscience. Our leaders are but trusted servants; they do not govern.
3. The only requirement for A.A. membership is a desire to stop drinking.
4. Each group should be autonomous except in matters affecting other groups or A.A. as a whole.

The 12-Traditions (cont'd)

5. Each group has but one primary purpose – to carry its message to the alcoholic who still suffers.
6. An A.A. group ought never endorse, finance, or lend the A.A. name to any related facility or outside enterprise, lest problems of money, property and prestige divert us from our primary purpose.
7. Every A.A. group ought to be fully self-supporting, declining outside contributions.
8. Alcoholics Anonymous should remain forever nonprofessional, but our service centers may employ special workers.

The 12-Traditions (cont'd)

9. A.A., as such, ought never be organized, but we may create service boards or committees directly responsible to those they serve.
10. Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy.
11. Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio and films.
12. Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities.

Respect the Traditions

- The 12 Traditions were developed to protect the 12-Step programs from external and internal influences. They deal with:
 1. Group unity
 2. Group conscience
 3. Membership
 4. Group autonomy
 5. Primary purpose
 6. Non-affiliation
 7. Self-support
 8. Non-professional
 9. Non-organized
 10. No opinion on outside
 11. Personal anonymity
 12. Principles before Personalities

Some Core 12-Step Concepts and Applications

**J. Scott Tonigan, et al. Spirituality and the 12-Step Programs: A Guide for Clinicians
in
Integrating Spirituality Into Treatment**

**William R. Miller, Ph.D. (Ed.)
American Psychological Association, Washington, D.C.**

Progression of 12-steps

- Steps 1-3: Admission and acceptance of powerlessness over alcohol, unmanageability of life, surrender of Will.
- Steps 4-10: Self-examination, amends and restitution.
- Steps 11-12: Service.

Amends and Restitution

- Steps 8 and 9
- Restoration of balance of justice from offenses, violations, and betrayals of others due to addiction.

Humility

- Steps 1, 3, 7, 9, 10, 12
- Antidote to shame, guilt, narcissism, grandiosity, omnipotence, immaturity, self-will run riot, etc

Serenity

- The capacity to Remain Serene in the face of Catastrophe.
- The Serenity Prayer.

Service

- Step 12
- Having had a spiritual awakening as a result of these steps we tried to carry the message to other alcoholics, and to practice these principles in all our affairs

The Great Tragedy And The Awful Truth

WE

ALCOHOLICS AND DRUG ADDICTS HURT

THE ONES

WE LOVE

THE MOST

Gratitude

- For relief from pain and suffering.
- For shelter from isolation, alienation and de-humanization.
- For the chance to heal.
- For restoration of hope and dignity in self and others whom one has blamed and harmed.

Service Work

- Begins with meetings
 - Setting up
 - Making coffee
 - Greeting people
 - Cleaning up
- Continues with home group
 - Secretary for meetings
 - Chairing meetings
 - 12-Step calls
- Committee work, e.g., GSR, CPC, IG, H & I, etc.

Service and Healing

- Altruistic - no expectation of recognition or reward.
- Exposes member to criticism.
 - Dealing with negative emotion.
- Discovers that my problems help others (sharing and 12th step).
- May reflect spirituality.
- Develops purpose in life.
 - “Whenever anyone anywhere reaches out I want the hand of AA to be there, and for that I am responsible.”

Slogans

- The man takes a drink; the drink takes a drink; the drink takes the man.
- Let go, let God!
- Easy does it, but do it!
- **One day at a time!**
- Utilize, don't analyze!
- Principles before personalities!
- Stinkin' thinkin'.



Alanon Clubs

- Owned and run by 12-Step members
- Not part of AA/NA/CA
- Valuable sober environments
- Usually many meetings
 - Including group business
- Provide a daytime sober environment
- Coffee shop, pool tables, etc.

Clinicians working with substance use disorders should become familiar with details of 12-Step program principles, locations, procedures and way of life by attending open meetings and reading the literature.

Negative Attitudes Towards 12-step Programs

- Substitute Dependency
- A Folk Movement
- Religious Bible Thumping
- A Cult
- “They make me want to drink.”
- “People are selling drugs in the parking lot.”
- “They don’t work”
- Hostile towards treatment
- Lacks Accountability
- “They just smoke and drink coffee”
- Non-intellectual

Negative Attitudes Toward Medications

- A Crutch
- Easier Softer Way
- Impede Spiritual Recovery
- Foster Dependency
- Substitute for Higher Power
- Violate AA Traditions
- Bad Example for Newcomers
- Ill-Trained Physicians
- Stupid Physicians
- Criminal Conduct by Docs

Conclusion

- Working a 12-Step program of recovery is not easy
- Requires help from others, especially a sponsor and a home group
- Cost of time and energy
- When we refer to a 12-Step program two benefits can be expected:
 1. Sobriety, which sets the stage for improved health, relationships, finances, and learning.

Conclusion

- When we refer to a 12-Step program two benefits can be expected:
 1. Sobriety, which sets the stage for improved health, relationships, finances, and learning.
 2. Tasks of adult growth and development
 - Intimacy, the ability to be genuine and open with others
 - Generativity, the ability to pass on what one has learned to others
 - Integrity, a sense of wholeness and acceptance of one's self
 - Goes beyond the usual goals of medical treatment, but one which any physician can support.

The Serenity Prayer

God grant US the Serenity to accept
The things WE cannot change,

The courage to change the things WE can,

And the Wisdom to know the difference.

Positive outcomes, RECOVERY



The slides after this point are studies attributable to AA/NA

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Referral To AA

- Successful referral to a 12-Step program requires support and contact.
- Systematic encouragement
 - Clinician called AA member
 - Patient/client talked briefly
 - Arranged meeting and ride
 - AA member called before meeting
- Result: 100% attendance (N = 10)
- Standard referral: 0% attendance

Sisson and Mallams: Am J Dr Alcoh Abuse, 8:371, 1981.

The Doctor's Voice: J Abnorm Psychol, 72:78, 1967

Research in the 1990's

- Two big multi-site studies
 - Project MATCH (N = 1726)
 - 10 sites
 - Department of Veterans Affairs (N = 3018)
 - 15 sites

Projects MATCH: J Stud Alcoh, 58:7, 1997.

Ouimette, et al: J Cons Clin Psych, 65:230, 1997.

Project MATCH

- 12 week, manual guided, individually delivered treatments
 - CBT - Cognitive Behavioral coping skills
 - MET - Motivational Enhancement Therapy
 - TSF - Twelve Step Facilitation
- Discriminable, high exposure.
- Similar therapist skill and therapeutic alliance. (Carroll, et al: J Cons Clin Psychol, 66:290, 1998)

TSF

1. Reading Assignments.
2. Review journal – urges, slips, and sober days.
3. Meeting attendance and reactions.
4. Sponsor - getting started.
5. Use Telephone list
6. Step work.

Project MATCH: Vol 1: TSF Manual, 1995.

Dual Diagnosis Research

- Outcome
 - 4 groups had comparable substance use outcomes
 - DD groups had same improvement in each of 3 treatment programs
 - 12-Step attendance associated with
 - less psychological distress
 - fewer psychiatric symptoms
- “These findings support the inclusion of 12-Step participation as a component of continuing care for dual diagnosis patients.

Ouimette, et al: *Alcoh Clin Exp Res*, 23:552, 1999.

How AA Changes Brain Function and Behavior

Alcoholic/Addicted Behavior

- Impulsive
- Antisocial
- Immature
- Painful to self and others
- Common defense mechanisms
 - Denial
 - Minimization
 - Projection
 - Grandiosity
 - Acting out

Behavior in an Active 12-Step Program of Recovery

- Thoughtful
- Honest
- Open to learning and change - humility
- Gratitude
- Common defense mechanisms
 - Altruism
 - Humor
 - Anticipation
 - Suppression
 - Sublimation
 - Hope

Research Conclusions

- Twelve Step groups are normative organizations that help members.
 - Experience, express, and manage feelings.
 - No negative feedback from others.
 - Help capacity for self-regulation.
 - Increase self efficacy and self care.
 - Improve relationship to others.
 - Find purpose and meaning.
 - Increase ability to listen to others.

Emrick: Text. *Substance Abuse Treatment*, p406, 1999.

12-Step Programs in Primary Care

1. Meeting schedules in each room.
2. AA and NA Pamphlets and Grapevine in waiting room.
3. Patients or staff with in recovery to take newcomers to a meeting.
4. Encourage staff to attend Alanon because some staff may have issues working with patients with addiction.
5. Don't tolerate negative attitudes and remarks towards patients with addictions.

Marron: Primary Care, 20;107, 1993.

Central Office of AA or NA

- The clinician's doorway to the 12-Step programs. Here you will find:
- INFORMATION – meeting schedules, other 12-Step meetings and contacts
- LITERATURE – Most of AA's and some of the other 12-Step programs
- TEMPORARY CONTACTS for your patients
- www.aa.org
- www.na.org

Examples of Literature By or About 12-Step Programs

1. *Alcoholics Anonymous* (Often referred to as “The Big Book”) Alcoholics Anonymous World Services Inc., Fourth Edition).
2. *Twelve Steps and Twelve Traditions*, Alcoholics Anonymous World Services Inc.
3. *Narcotics Anonymous* (Often referred to as “The Basic Text”) Narcotics Anonymous World Services Inc., Sixth Edition.
4. *It Works: How and Why* (24 essays on NA’s steps and traditions about the reasons NA works) Narcotics Anonymous World Services Inc.
5. *Clinical Guide to the Twelve Step Principles* by Marvin D. Seppala, Hazelden/McGraw Hill.
6. *Al-Anon Twelve Steps & Twelve Traditions*: Al-Anon Family Groups, Inc., New York 1993.