Introduction to Alcoholics Anonymous and Other Twelve Step Programs

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CRIT 2015

With special thanks to Sarah Bagley MD
I have attended an Alcoholics Anonymous or Narcotics Anonymous meeting in the past.

1. Never
2. Once
3. 2-5 times
4. 6-10 times
5. 11-25 times
6. 26+ times
Learning Objectives

1. Explain the value of offering 12-Step Programs as part of a “menu of options.”
2. Cite the research findings on effectiveness of mutual help groups
3. List at least 4 guidelines for visitors attending a meeting of a 12-Step Program.
Chapter 7
Making Effective Referrals to Alcoholics Anonymous and Other 12-step Programs

Maryann Amodeo and Luz Marilis López
Offering 12-Step Meetings as Part of “Menu of Options”

• Offer individualized treatment
• provide basic guidance
What is Alcoholics Anonymous?

• Founded in 1939 by Bill W. and Dr. Bob: reaching out to others to help stay sober
• Anonymous fellowship of members with a desire to stop drinking
• No central governing body
• Meetings have distinct composition
• Foundation of other mutual help groups
Therapeutic Elements

- 12 Steps: spiritual basis/necessary actions
- 12 Traditions: guidelines for meetings
- Sponsorship
- Sober environment of meetings
- Forum for telling story with no judgment
- Anniversaries
- Slogans
- Potential for social network outside of meetings
Process

• Admitting lack over control over addiction
• Recognition that higher power can give strength to achieve sobriety
• Examining past mistakes
• Making amends
• Learning to live new life with new code
• Helping others
Kinds of Meetings

- Open, closed
- Mixed, men-only, women-only, young peoples’
- Speakers, Big Book, Step Study, Discussion
- Smoking, non-smoking
Research has shown that:

1. AA attendance can reduce health care costs
2. Longer and more intensive AA involvement leads to better outcomes
3. Professional addiction treatment plus AA is superior to professional addiction treatment alone
4. All of the above
The Irrationality of Alcoholics Anonymous

Its faith-based 12-step program dominates treatment in the United States. But researchers have debunked central tenets of AA doctrine and found dozens of other treatments more effective.

By Gabrielle Glaser
Art by Dan Seelinger
Effectiveness of AA

• Effective in increasing abstinence rates both alone and in combination with other treatments

• Mechanism: self efficacy, increased coping skills and adaptive changes in social networks (Kelly et al, 2009)

• Cost-effective: increased cost savings because of lower treatment costs (Kelly et al, 2009)
Caveats Effectiveness of AA

• Challenging to study
• Depends on participant involvement (Kaskutas et al, 2005)
• Effectiveness likely related to both involvement and goodness of fit to the group
• Healthcare professionals can impact level of affiliation (Humphreys et al, 2004)
I have referred a patient to Alcoholics Anonymous or Narcotics Anonymous.

1. Never
2. Once
3. 2-5 times
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Referring a Patient

• Provide access to list of local meetings
• Encourage attending with a friend and trying multiple meetings
• Help choose among different types and locations of meetings (speaker, discussion, beginners’)
• Talk about possible conflicts
  – Religion
  – Medications
  – Powerlessness
Role of Provider

• Individuals who have sponsors and work the steps tend to do better in their recovery.

• Important to ask patients if they have a sponsor and if they are working the steps.

• Possible to find a temporary sponsor in the beginning if not ready to commit.
Find An AA Meeting

Any questions on how A.A. works—give us a call @ 617-426-9444 Mon-Fri 9-9; Sat/Sun/Hol. 12-9

249 Towns - 2,200 Meetings

Annual Dinner Dance - June 6 2015 - View Flyer

Hingham What's In A Name

Origin

Central Service Committee had its beginning in informal luncheon meetings of various Alcoholics Anonymous groups in and around Greater Boston in 1945.
Select By Day

Choose Day  Submit

Select By Town

Chatham  Submit

Select By Day & Town

Choose Day
Choose Town  Submit

Select By Meeting Type

Choose Code  Submit
OPEN SPEAKER (PUBLIC WELCOME)
CLOSED (A.A. members only, or for those who have a drinking problem and “have a desire to stop drinking.”)
OPEN DISCUSSION
CLOSED DISCUSSION
CLOSED SPEAKER MEETING
SPEAKER DISCUSSION
BIG BOOK DISCUSSION
12 STEP MEETING
12 TRADITION MEETING
MEN
WOMEN
BEGINNER’S MEETING (Approximately 1 1/2 hours before regular meeting time)
YOUNG PEOPLE
NO SMOKING at this meeting
GAY, LESBIAN, BISEXUAL & TRANSGENDER
J Must Sign to Enter
AT END OF ADDRESS INDICATES ACCESSIBLE TO PEOPLE WITH DISABILITIES (May not be toilet accessible)
<table>
<thead>
<tr>
<th>Code</th>
<th>Day</th>
<th>Town</th>
<th>Meeting</th>
<th>Location</th>
<th>Time</th>
<th>Handicap</th>
</tr>
</thead>
<tbody>
<tr>
<td>O12</td>
<td>Sun</td>
<td>Boston</td>
<td>Prado Sunday</td>
<td>Harbor Ch., 9 Salutation St.</td>
<td>9 - 10 am</td>
<td></td>
</tr>
<tr>
<td>OD#</td>
<td>Sun</td>
<td>Boston</td>
<td>Sun. Morn.</td>
<td>Lady of Victories, 27 Isabella St.</td>
<td>9:30 - 10:30 a.m.</td>
<td></td>
</tr>
<tr>
<td>ODG</td>
<td>Sun</td>
<td>Boston</td>
<td>Sober Sunday</td>
<td>74 Kilmarnock St.</td>
<td>10:00-11:00 a.m.</td>
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<tr>
<td>O12#</td>
<td>Sun</td>
<td>Boston</td>
<td>Steps in the City</td>
<td>Lindemann Center, Boston Rm., 25 Staniford St.</td>
<td>2 p.m.</td>
<td>Handicap Yes</td>
</tr>
<tr>
<td>O</td>
<td>Sun</td>
<td>Boston</td>
<td>Park Square</td>
<td>Morville Hse. Conf. Rm., 100 Norway St.</td>
<td>4:30-5:30 p.m.</td>
<td>Handicap Yes</td>
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<tr>
<td>CBB</td>
<td>Sun</td>
<td>Boston</td>
<td>Out of the Basement BB</td>
<td>Emmanuel Ch., 15 Newbury St.</td>
<td>6 p.m.</td>
<td></td>
</tr>
<tr>
<td>ODG</td>
<td>Sun</td>
<td>Boston</td>
<td>How Are You Today?</td>
<td>74 Kilmarnock St.</td>
<td>6 p.m.</td>
<td></td>
</tr>
<tr>
<td>O12</td>
<td>Sun</td>
<td>Boston</td>
<td>New Comm.</td>
<td>M.G.H., Thier 101 Conf. Room</td>
<td>6:00 p.m.</td>
<td></td>
</tr>
<tr>
<td>O</td>
<td>Sun</td>
<td>Boston</td>
<td>Not Forgotten</td>
<td>Vets shelter, 17 Court St.</td>
<td>6:45-7:45 p.m.</td>
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<tr>
<td>OD</td>
<td>Sun</td>
<td>Boston</td>
<td>Old Dogs New Tricks</td>
<td>Sacred Heart Ch., 9 Sun Court</td>
<td>7 p.m.</td>
<td></td>
</tr>
<tr>
<td>O12</td>
<td>Sun</td>
<td>Boston</td>
<td>Out Of The Basement</td>
<td>Emm. Ch., 15 Newbury St., 2nd Fl. Via ramp</td>
<td>7:30 - 8:45 p.m.</td>
<td></td>
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<tr>
<td>OSD</td>
<td>Mon</td>
<td>Boston</td>
<td>Rise &amp; Shine</td>
<td>St. Francis Hse. Shelter, 39 Boylston St.</td>
<td>7-8 a.m.</td>
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<tr>
<td>OBB</td>
<td>Mon</td>
<td>Boston</td>
<td>164 Upon Awakening</td>
<td>Our Lady of Victories, 27 Isabella St</td>
<td>7-8 am</td>
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<tr>
<td>O12</td>
<td>Mon</td>
<td>Boston</td>
<td>Back Bay Steps</td>
<td>Arlington St. Church</td>
<td>7:30 a.m., Trad. 1st Mon.</td>
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<tr>
<td>OSD</td>
<td>Mon</td>
<td>Boston</td>
<td>Sahara Sunrise</td>
<td>Harvard Vanguard, 147 Milk St., Conf. Rm. 1B</td>
<td>7:30-8:30 a.m.</td>
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<tr>
<td>OSD</td>
<td>Mon</td>
<td>Boston</td>
<td>Just For Todaq</td>
<td>Emmanuel Ch., 15 Newbury St. 2nd Fl.</td>
<td>Noon - 1p.m.</td>
<td></td>
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My primary concern about referring patients to Alcoholics Anonymous and Narcotics Anonymous is:

1. I don’t know much about the programs
2. The programs are too religious
3. The programs emphasize that members are powerless
4. I am not concerned about referring patients
Potential Conflicts

• Religion versus Spirituality

• Medications

• Powerlessness

• People using at the meetings
When You Visit a Meeting

• Contact: look up local AA website, call central service for more information
• Attend only “open” meetings
• Be honest and direct, introduce yourself to greeter if at door
• Respect confidentiality
• Feel free to join in prayer, give a few dollars if you feel comfortable
A Word About Families

• Families also affected by substance use and their involvement can improve treatment outcomes for the person with an alcohol or substance use disorder.

• Al-Anon, Nar-Anon and other mutual help groups can be a helpful resource in some cases.
Learn to Cope

• Non-professional support group for families affected by addiction
• Currently there are 17 meetings across MA and RI
• Guidelines the same as attending an AA meeting
Thanks

• Thoughts?
• Questions?
• Be sure to DESIGNATE someone to give your group’s reflections during the debrief
12 Steps

1. We admitted we were powerless over alcohol—that our lives had become unmanageable
2. Came to believe that a power greater than ourselves could restore us to sanity
3. Made a decision to turn our will and our lives to the care of God as we understood Him
4. Made a searching and fearless inventory of ourselves
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs
6. Were entirely ready to have God remove all these defects of character
7. Humbly asked Him to remove our shortcomings
12 Steps

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

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

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

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

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

• 1) Our common welfare should come first; personal recovery depends upon A.A. unity.
• 2) or 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.
12 Traditions

• 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 non-professional, but our service centers may employ special workers.
12 Traditions

- 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 opinions 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.