12 Step Models

Psychology 470
Introduction to Chemical Addictions
Steven E. Meier, Ph.D.

Listen to the audio lecture while viewing these slides

Psyc 470 – Introduction to Chemical Addictions

Background

- Is not really a theory
- Is more of a philosophy or model for living and recovering from addiction
- Initially developed through Alcoholics Anonymous
- Has been expanded to other models
  - Narcotics Anonymous
  - Gamblers Anonymous
  - Sexaholics Anonymous
- Has also been incorporated into standard treatment models
  - Pioneer House
  - Hazelden
  - Willmar State Hospital in Minnesota
  - Incorporates material from Pioneer House and Hazelden
  - Ultimately becomes known as the Minnesota Model

Psyc 470 – Introduction to Chemical Addictions

Alcoholics Anonymous

- Founded by Bill Wilson and Bob Smith
- Was originally similar to many other support groups
  - Washingtonian Movement
  - Ollapod Club
  - Keeley Leagues
- Was originally a rehabilitative moral model and partially derived from the Oxford Group
- Later in development emphasized the disease concept than moral approach.
- Became much larger than the others support groups
- Spread across the world
- Shaped alcoholism treatment
- Every later support group model is evaluated against AA

Psyc 470 – Introduction to Chemical Addictions

Underlying Concepts

- Alcoholism is an incurable, progressive, and often fatal disease
  - Is a body and mind disease
  - Alcoholism is also a spiritual problem
  - Alcoholics are emotionally impaired people.
    - Drink to compensate for their inadequacies
  - Due to biochemistry or genetics, the person becomes addicted to alcohol
  - Creates a circular process
    - more inadequacy – more drinking
    - Person then begins to have problems physically, mentally, spiritually.
    - Later – need to drink to prevent withdrawal symptoms

Psyc 470 – Introduction to Chemical Addictions

More Concepts

- Alcoholism is a permanent condition
- Alcoholism can be arrested but not cured.
- Must have A.A. or the prognosis is hopeless.

Psyc 470 – Introduction to Chemical Addictions

12 Steps of AA

- We admitted we were powerless over alcohol and that our lives had become unmanageable
- We came to believe that a Power greater than ourselves could restore us to sanity
- We made a decision to turn our will and our lives over to the care of God as we understood him.
- We made a searching and fearless moral inventory of ourselves
- Admitted to God, to ourselves, and another human being the exact nature of our wrongs
- Were entirely ready to have God remove all of these deficits of character
12 Steps of AA (cont.)

• Humbly asked him to remove our shortcomings
• Made a list of all persons we had harmed, and became willing to make amends to them all.
• Made direct amends to such people whenever possible, except when to do so would injure them or others.
• Continued to take personal inventory and when we were wrong promptly admitted it.
• 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
• Having had a spiritual awakening as a result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs.

12 Traditions of A.A.

• Our common welfare should come first, personal recovery depends upon A.A. unity.
• 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; but they do not govern.
• The only requirement for A.A. is to stop drinking.
• Each group should be autonomous except in matters affecting other groups of A.A. as a whole.
• Each group has but one primary purpose – to carry its message to the alcoholic who still suffers.
• An A.A. group ought never endorse, finance or lend the A.A. name to an related facility or outside enterprise, lest problems of money, property, and prestige divert us from our primary purpose.

12 Traditions of A.A. (cont.)

• Every A.A. group ought to be fully self-supporting, declining outside contributions.
• Alcoholics Anonymous should remain forever nonprofessional, but our service centers may employ special workers.
• A.A. as such, ought never to be organized, but we may create service boards or committees directly responsible to those they serve.
• A.A. has no opinion on outside issues; hence the name A.A. name ought never be drawn in to 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.
• Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities.

Issues

• Early examination of the model had minimal empirical support
• A.A. literature did not emphasize the disease or a medical model
• But was used to explain what was happening by counselors
  • At the time the disease model was still not clearly defined
• Later, incorporated the findings of Jellinek
  • Used the “X” factor at the underlying cause of alcoholism

Later

• Later, the “X” factor became a genetic problem
• The genetics models have problems with validity and reliability
• Did not stop A.A. and other models from contending the cause of addiction was genetics –
  • Correlation and causation are different
• Also many people just ignored the evidence relate to what caused alcoholism.

Empirically

• There was not much support for identifying the cause of addiction or the models success.
Psyc 470 – Introduction to Chemical Addictions

Practically
- Had a lot of advantages
- Gave reasons why a person became an alcoholic
- Gave a progression of steps that a person must undertake to resolve the addiction
- Developed as an advocacy group to work with individuals who had problems with addictions
- Impact on treatment has been huge

Psyc 470 – Introduction to Chemical Addictions

Problems
- For many 12 step persons, you must buy into the model for treatment to be successful
  - Must also buy in to the spirituality component of the model
- Other models or treatment approaches are irrelevant, misguided, just plain wrong, or even dangerous (e.g., controlled drinking)

Psyc 470 – Introduction to Chemical Addictions

Use of Correlational Evidence
- Lot of people have used A.A., so it must work for everyone
- Lots of buy in by politicians, judicial personnel, therapists, etc.
- Result
  - If you do not incorporate 12 step programs in your model, your approach must be bad.

Psyc 470 – Introduction to Chemical Addictions

Result
- Lots of people enter 12-step programs
- Lots of people also drop out
- Lots of people do not buy the spirituality component of the model
- So, if you do not go to A.A. or similar organization, you must not be serious about treatment
  - Serious legal consequences can result

Psyc 470 – Introduction to Chemical Addictions

Treatment Issues
- Must have permanent, continuous, involvement in A.A. for your program to be successful
  - Problem – Is not backed up by the data
- A.A. members must help others
  - Only recovering alcoholics can really treat alcoholics
  - Problem – Is not backed up by the data
- Also assumes that anyone who has gone through the program can counsel alcoholics without training
  - Problem – Lack of skills and knowledge can do more harm than good
    - Especially with dual diagnosis clients, or clients with other problems (e.g., marital).

Psyc 470 – Introduction to Chemical Addictions

Conclusions
- 12 step programs have been around a long time
- Minimal research due to the anonymity associated with the groups.
- From a causal aspect, 12 step models have minimal validity explaining what causes addiction.
- Most research and the focus of the model is associated with treatment
Empirically

- Basic underpinnings of what cause addiction (genetics) have problems with reliability and validity
- Correlational research
- Anonymity creates problems for empirical research
- Lots enter 12 step programs but lots drop out
- Has been used by various treatment agencies