12-STEP GROUPS 101:

WHAT THEY ARE, WHAT THEY AREN'T, AND HOW THEY FUNCTION

OVERVIEW

What are 12-step groups? 12-step groups are self-help support groups for those seeking recovery from addictions. Alcoholics Anonymous is the oldest, best known and largest group. However, there are many 12-step groups, as the model has been adapted widely by fellowships of people recovering from various addictions and compulsive behaviors, such as Overeaters Anonymous, Narcotics Anonymous, Debtors Anonymous, and Sex and Love Addicts Anonymous.

12-step groups can be hard to understand, because they are not organized or run in a way that is familiar to most of us in the helping professions. They don't have leaders and rules like churches, they don't offer professional help like a business, and there is no spokesperson. There is a high level of personal autonomy you are a member when you say you are a member. There are no dues or fees. Even all 12-step groups are independent and different. They all have some cultural norms in common, like anonymity (not identifying any member as someone in recovery), being abstinence based (meaning they consider recovery total abstinence from the substance), and sponsorship (having a mentor who is also in the 12-step process), however, each group also has its own distinct "feel", which is often reflective of the larger culture or community that the group is in. For example, in most communities, there are women's and men's groups, LSBTG groups, young people's groups, artists' groups, Spanish speaking groups, etc.

People who are members of 12-step groups typically go to meetings regularly, have a sponsor in the group, work the 12-steps, and often socialize or fellowship with other members.

WHAT 12 STEP GROUPS DON'T HAVE

• Rules. There are no rules in 12-step groups. There are no leaders, only rotating service positions. There is no professional help (therapists, certified drug and alcohol counselors, psychologists, psychiatrists, medical doctors, unless they are participants themselves) in 12-step groups and no one can be kicked out of 12-step groups.



- Opinions on outside issues. 12 step groups have no opinions on outside issues. There is no one who speaks for 12-step groups and there is a tradition of not identifying in a public forum (press, radio, films, etc.) if you are a member of a 12-step group. This is because the public might think that person "speaks" for, or represents, the 12-step group they are a part of, or all 12-step groups in their entirety, which of course they don't.
- One specific religious set of beliefs. 12-step groups are spiritual in nature, however, they are not explicitly Christian. The writings of the 12-step model do use the phrasing and pronouns of Christianity (God, "He", "Our Creator"), and most groups use the serenity prayer for the beginning or the end of the meeting, however 12-step literature also clearly talks about a "higher power of our own understanding". Agnostics, atheists, Buddhists, Hindus and Muslims are all part of 12-step groups. There is 12-step literature that talks in depth about the openness to all faiths and belief systems.

MEDICATIONS

12-step groups like AA or NA are not "against" members taking psychotropic medications for depression or other mental health issues, or even opioid agonists like methadone or buprenorphine (suboxone) for those recovering from opioid addiction. This is because there are no rules in AA and no one speaks for AA, so the group can't be "against" anything. Since all groups have different cultures and are autonomous, some 12-step group members may express opinions against this, however, this would not be the position of 12- step groups in general. There is 12 step literature that talks about medications in recovery, explicitly stating support for members getting 'outside help' when needed, including use of medications. Most people who identify as a member of a 12 step group do approach controlled substances with great caution though; often members self-disclose to their doctors and other healthcare providers that they are recovering from addiction, and want to avoid opioid or stimulant medications when at all possible. When members of 12 step groups do decide to take opioids for pain, for example after a surgery or acute injury, it is common that they take precautions for themselves, such as telling their sponsor and loved ones to administer the medications, and disposing of any left-over medications.

WHAT ACTUALLY HAPPENS IN MEETINGS

Meetings are usually either 60 or 90 minutes long. They start on time and end on time. Meetings also generally follow 3 different formats. In *speaker meetings* a member tells their story – what is was like in their addiction, what happened that caused them to get into recovery, and what their life is like now. Often, this is the whole meeting. In *literature study meetings*, members read a chapter from the AA Big Book or other programs texts and discuss. In lead



and share meetings, a member leads the meeting by sharing for 10 or 15 minutes then opens the meeting up for others to share. Members typically volunteer to share, or are called on (and can decline) to share if they want.

When members share in meetings, it is typically 3-5 minutes long and, while sharing is personal, it is uncommon for people to share on deeply vulnerable specifics. This is because 12-step groups are very different than group therapy- it is unknown who will be in the room, in what place someone is in their recovery, or if others will truly abide by the principle of anonymity (similar to confidentiality). Sponsors typically guide their new sponsees to share their own experience with strength and hope, and talk individually to their sponsors and other trusted members about deeply personal issues like infidelity or traumatic histories. 12-step groups are also different than group therapy in that no one responds to another's comments directly. When someone is done sharing, no one is to respond directly to that "share". Responding directly to a share is called "cross talk", and groups normally have guidelines they read at the beginning of the meeting, asking group members to refrain from this.

MAIN ASPECTS OF THE PROGRAM

- Sponsorship. New participants typically ask someone to help guide them through working the 12-steps. This is someone who can encourage and help them. Sponsors are not experts or therapists they are just another person recovering from addiction who helps another. Sponsors have sponsors too. The sponsor relationship is shoulder to shoulder "one alcoholic helping another" in AA parlance, "one overeater helping another" in Overeaters Anonymous, etc.
- The Steps. "Working the steps" refers to written work that a person in recovery shares with their sponsor. At the heart of the 12-steps is admitting that one is powerless over the substance or behavior they struggle with (unable to control use)- this is step 1 and 2. Also fundamental is turning oneself over to a higher power and engaging in some deep life-clean-up, include taking a moral inventory of oneself, making amends to those they may have harmed (steps 3-9), continuing to grow spiritually and focusing on being of service to others (steps 10-12).
- Fellowship. Fellowship in 12-step groups has the same connotation as in a church community spending time outside of meetings with other members of the 12-step group. Different sub groups of members often go out for meals before or after meetings or arrive early for meetings to socialize and stay after to drink coffee and talk with others. Program "birthdays" are celebrated to honor members' years abstinent and most groups even participate in recreational activities together such as playing in softball leagues or hosting Christmas parties, dances, picnics, game nights and other social events. Groups often come together for larger area conventions or retreats.



RESEARCH

Most research on 12-step programs indicate aspects of 12-step groups improve chances for recovery (recoveryanswers.org) has a good round up of this research). 12-step groups address "stinking thinking" in the same way CBT address thinking errors. This cognitive correcting is often part of what seems to be helpful in 12-step groups. Working the steps means sharing intimately with a sponsor or other trusted person, which helps people unload what is sometimes years of shame and secrecy. It also means taking action to rectify past wrongs, which often provides enormous relief for people. Fellowshipping with other people in recovery also appears to have helpful effects. Often those with addictive disorders have been judged harshly by health care professionals, family members, and society in general. Even therapists, who may not understand addictions, often convey subtle judgments when they convey that those with addictive disorders should be able to "control" their use or that they could stop if they wanted to badly enough. Negative judgment, bias and stigma are related to poor healthcare outcomes. So, for those in 12-step groups, being around people who accept and understand them and their addiction is likely one of the helping factors.

REFERRING

Helping professionals often have strong opinions about 12-step groups. Some may be members of groups themselves and hold the belief that participation in 12-step groups is mandatory for successful recovery. Others may not understand the nature of 12-step groups and their helpfulness. Still others might have heard negative things from clients about 12-step groups and refrain from suggesting others participate.

Like all interventions, the guiding principle is to listen closely to those we are trying to help, in our families and in our offices, and encourage them listen closely to themselves, to their own wisdom. Everyone is different in terms of what works for them, their values, beliefs and preferences. Referrals are more successful if we have elicited another's ideas, preferences and beliefs about the referral and they have indicated that they indeed want it.

Also, like all referrals, knowing what we are referring to is important. We can learn more about 12-step groups by attending meetings (look for "open" meetings on a schedule. "Closed" meetings are for only for those who have a desire to stop drinking/using/engaging in the behavior). Reading the program literature (the AA Big Book, the OA or NA text, etc.) and program websites, which are maintained by a central office are also good ways to get oriented to 12-step programs.



Although 12-step programs are not organized, they do cooperate loosely with professionals. You can contact the AA/NA chapter in your area and ask if there is someone that your client can call to discuss the meeting and 12-step process, which is a warmer hand off than just printing out a list of meetings and suggesting they go.

A note on court ordered or other mandates for 12 step meeting attendance: Often judges or employers mandate attendance at 12-step meetings for someone who has a substance-related infraction. While 12 step groups themselves have no opinion on this, members who are chairing meetings will sign paperwork to indicate the person attended a meeting. 12 step members are just as welcoming and supportive to those who want to be at meetings as to those that feel they have to be at meetings. In fact, many 12 step group members in long term recovery started out with a "nudge from the judge":

Lastly, if someone is referred or suggested to go to a 12 step meeting and they do not have a positive experience, it is important to remember that every group is different. 12 step groups are filled with members in long term recovery, who convinced themselves to try again, to try a different meeting, in a different town, at a different time in their lives.



