
12 Step and 12- Step Facilitation

OVERVIEW OF PRESENTATION

I. 12- Steps

- Introduction and brief history
- Premise and Structure:
 - Disease Model
 - Addictive Personality
 - Spirituality
 - Fellowship

OVERVIEW CONT.

II. 12- Step Facilitation

- **Introduction**
- **Principles and Structure**
- **Counseling Techniques**
- **Themes**

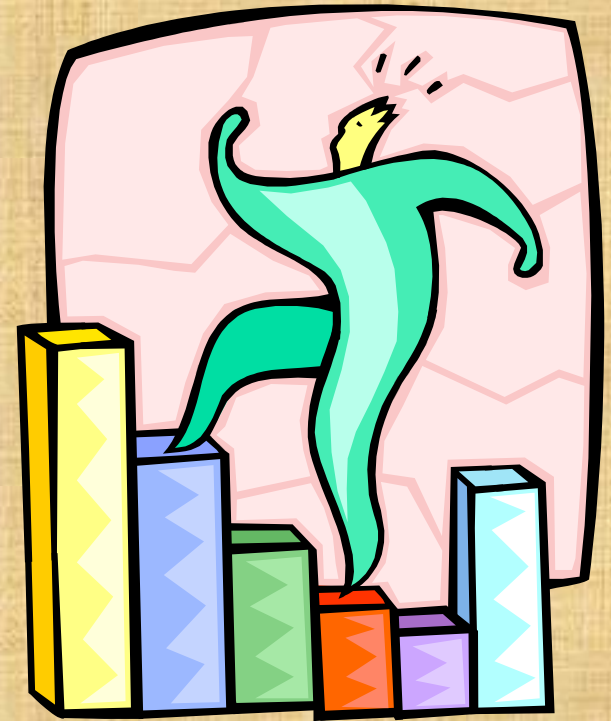
12 STEP

What are the 12 steps ?

AA, NA., CA are non-profit societies (no membership dues)

Core program of AA, NA., GA., etc.

Since Founded in 1935 AA membership (over 2 million) worldwide



Origin:

WILLIAM "BILL" GRIFFITH WILSON



ROBERT HOLBROOK SMITH "DR. BOB"



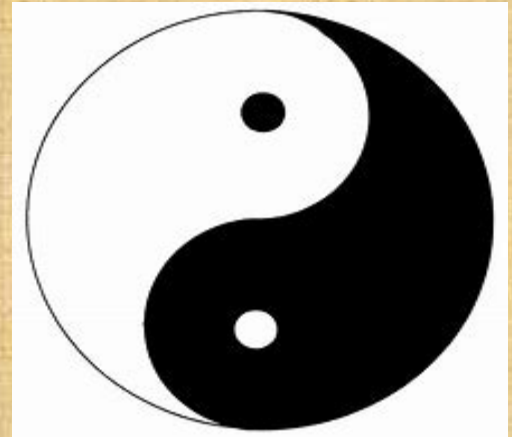
Premise and Structure

I. The challenge:

- Disease Model
- Addictive Personality

II. The Hope:

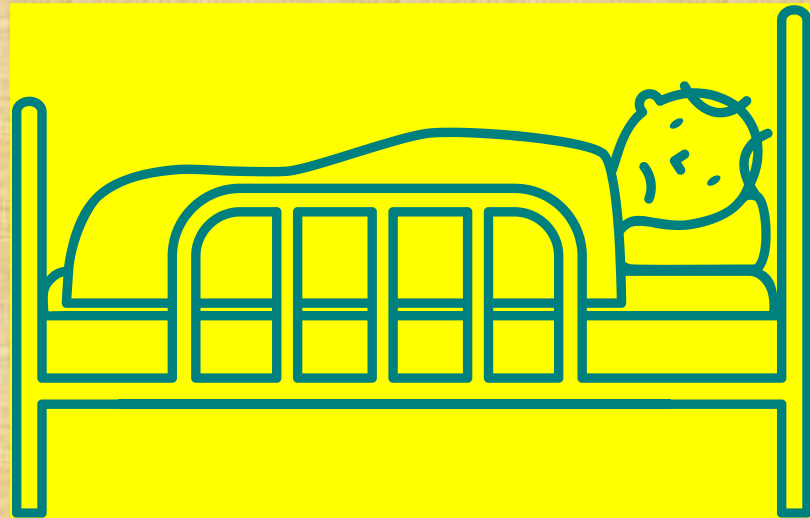
- Spirituality and Higher Power
- Fellowship



The Challenge (a):

Disease Model: not that different than medical diseases (e.g. diabetes) with the following 5 properties:

- Incurable (“there is no cure, only recovery”).
- Works through denial



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- **Disease of isolation: alone = vulnerable**
 - **Progressive: even after sustained sobriety**
 - **Fatal: by direct or indirect means**

The Challenge (B):

Addictive Personality:

Character Defects: negative qualities created and/or exacerbated by the disease such as greed arrogance, resentment and dishonesty.

Insanity: conscious compulsive behaviors

Denial: **Don't Even kNow I Am Lying**

The HOPE:

- Acceptance
- Surrendering
- Affirmations
- The Serenity Prayer:
- “God (as understood), grant me the serenity to accept the things I can not change, the courage to change the things I can and the wisdom to know the difference”

IV. Fellowship

Meetings: 90 in 90

Relationships: discouraged for 1st year of recovery

Honesty: (self and others)

Sponsorship: must have sustained recovery

Working and sharing: the Steps

The steps:

First four are the foundation and thus addressed during the first year of treatment:

1. Admit to be powerless
2. Come to believe...power greater than self can restore us to “sanity”
3. Turn it over to higher power
4. Moral inventory of self (managing regret)

Rest of steps

5. Admits (God as understood, self and other) nature of wrongs

6. Ready to have higher power help remove character defects / shortcomings

7. Humbly Ask higher power to remove shortcomings

8 and 9. Make amends

10. Personal Inventory

11. Prayer/Meditation to improve contact with higher power

12. Spiritual awakening: lifestyle and message to others

In sum: trust, order and help.

II. 12 STEP **FACILITATION**

I. Introduction

Active engagement strategy designed to increase the likelihood of an individual becoming affiliated and actively involved in 12 step self-help groups

Based upon 12 Step Philosophy and the following principles:

- Disease of addiction
- Therapist guides and educates
- Emphasis on abstinence through core and elective topics
- Participation in meetings highly encouraged

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- **Time limited with pre-determined number of sessions (50 minutes) structured as follows:**
 - **Greeting and journal update (10 minutes)**
 - **Introduction to session (30 minutes)**
 - **Closing and directives (10 minutes)**

II. Underpinnings:

Approach:

- Disease Oriented

Goal:

- Understand and internalize and manage the “Disease of Addiction”

Labeling:

- Encouraged

Control:

- Gain of control through surrendering

Responsibility:

- Recipient of the intervention

Structure:

- Highly Directive, highly behavioral at first

Cognitions and emotions:

- Manifestation of the Disease

Strategy:

- Pragmatic whatever works within the 12 step philosophy

III. Counseling Techniques

Therapist Authority / Advice

Using the OARS in support of 12 steps

Directives / Homework

Self-disclosures

Therapist Authority / Advice:

- **“...you have to call your sponsor daily and attend to your meetings.”**
- **“...try talking with them about this issue...I think it might help..”**
- **“We probably need to know more about your relationship with your employer...”**

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- **“I would like you to go to a meeting this week...perhaps we can look at the schedule together...”**
 - **“...I want you not to think about that today, remember, lets take it one day at a time. If it comes up, use the serenity prayer...”**
 - **“Lets take a look at the book, I would like to read from page 41 to 56 (Step Two) and in doing so think to yourself “what does it mean to me” . Next week when you return we will go over it....”**

OARS: Reflecting and Affirming:

- **“I hear you say that you feel frustrated and at a loss in trying to overcome your addiction”**
- **“It was difficult for you to walk away from a slippery situation”**
- **Good effort at staying sober; lets review it in detail**
- **“(Sounds like) You are feeling more confident about your ability to connect with your higher power”**
- **“Feeling angry and frustrated acts as a trigger for you. It activates your disease”**

Self-Disclosures:

- **“...I hear you. When I was looking for a sponsor I had to search for a while as well...”**
- **“...I have been sober for 15 years ..I relapsed a few times at first....but I persevered...I am here to help you do the same...”**
- **“...I don't have the disease; when I drink nothing happens, what is it like for you to hear this ?...”**

V. THEMES

I. Addictive Personality / Disease Concept

**II. Process of Recovery: Fellowship and Higher Power;
working the steps**

III. Denial

IV. People, Places, and Things

V. Surrendering and Slogans

VI. Termination

I. Addictive vs Recovery Personality

Definition of personality

Expression of personality
traits via addictive disease

“Lets talk about positive and negative traits and where your disease has taken you”



Discussion of Recovering Personality:



- healthy, positive, and balanced.

II. Process of Recovery

Discussion of Recovery

Recovery = Abstinence + Change

Change: External (lifestyle) and Internal (feelings and thoughts about self and other)

- **Examples of changes that persons have experienced (include physical, emotional, social, family, etc.)**

Three legged stool (e.g.):

- Counseling
- Medication Assisted Treatment
- 12 Step involvement (meetings, sponsor, etc.)

- What does the person's three legged stool look like ?



III. Denial

General Discussion of Denial

Response to limitations

Faces of Denial: anger, manipulative behaviors, acting on impulse ..etc...

IV. People, Places and Things

General Discussion about People, Places and Things

- Cravings
- Life Style contract

Cravings and dealing with “non beneficial” habits:

- Meetings
- Sponsorship
- Reading
- Write in journal

V. Surrendering and Slogans

General discussion, exploration and reframing of surrender as an affirmative acceptance of reality

Exploration and discussion of the Serenity Prayer and slogans

“FEAR”: Face Everything and Recover

“HALT”: Hungry, Angry, Lonely and Tired

“Don’t analyze, utilize”

“Today I have choices”

“We are only as sick as our secrets”

“It works if you work it”

“Live life in life’s terms”

“First things first”

“Stop, look, listen and learn”

“Stay in the now / People places and things”

“One day at a time”

**“To avoid slipping avoid slippery people, slippery places
and slippery things”**

VI. Termination:

Review of the concepts:

- Understanding of the disease model
- Understanding of denial

Experience and progress the NA/CA etc.

- Meetings attended
- Sponsorship
- Working the steps

Sources and resources

<http://www.aa.org/?Media=NoFlash>

<http://www.na.org/>

<http://www.gamblersanonymous.org/ga/index.php>

<http://www.oa.org/>

<http://www.ca.org/>

<http://emotionsanonymous.org/>

<https://womenforsobriety.org/>

<https://portal.ct.gov/DMHAS/Initiatives/Evidence-Based/12-Step-Facilitation>

[Project Match Volume 1: Twelve Step Facilitation Therapy Manual \(nih.gov\)](#)

<https://www.hazelden.org/store/item/370151?Integrating-the-Twelve-Steps-with-Medication-Assisted-Treatment-for-Opioid-Use-Disorder>

<https://www.hazelden.org/store/item/514183?Twelve-Step-Facilitation-for-Co-occurring-Disorders-Program>

<https://www.hazelden.org/store/item/308134?Integrating-Combined-Therapies-for-People-with-Co-occurring-Disorders>

<https://www.niaaa.nih.gov/publications/project-match-monograph-series>

[Integrated Care \(ct.gov\)](#)

Thank you

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