PRACTICAL INTERPRETATION OF THE ALCOHOLICS ANONYMOUS 12 STEPS OF ADDICTION RECOVERY

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Recovery from addiction has been described as a ‘voluntarily maintained lifestyle characterised by sobriety, personal health and citizenship’.1

While, in the right setting, such as a rehabilitation clinic, many addicts have little trouble stopping drinking or using drugs, most, if not all, find maintaining sobriety, especially after reintegration back into society and return to normal life, much more difficult. For the majority, without long-term support and constant vigilance to curtail impulsive behaviour, it is impossible. In some addicts incentive salience driven by changes in the limbic brain presents a lifelong vulnerability to relapse.2,3

Furthermore, the horrendous consequences and chaotic life created by years of active addiction, sometimes coupled with loss of family and social support, further compounds pre-existing low self-efficacy, low self-esteem, poor emotional regulation and hopelessness. If addicts are to remain sober, then these aspects of themselves need to be addressed and their thinking style and sociality need to change so that they are more functional.

The 12 steps of addiction recovery (Table 1), originally described by Alcoholics Anonymous in 1939, is a framework for a learned lifestyle characterised by self-awareness, self-compassion, self-development, improved resilience and enhanced psychological wellbeing.2,4-6 By encouraging social participation and working with other recovering addicts, the 12 step process provides the recovering addict with a sense of common humanity and belonging, motivation to remain sober and an opportunity to find meaning and purpose.

12 STEPS OF ADDICTION RECOVERY

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 over to the care of God as we understood Him.
4. Made a searching and fearless moral 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.
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 wherever 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.

Table 1
At first sight, the 12 steps appear to be overtly religious, as is the Christian-based approach of the original text.\(^4\) The process has been criticised for this, along with (inaccurate) perceptions that recovery through the 12 step process requires admissions of powerlessness and to moral character defects or failings.\(^7\) Nevertheless, a contemporary interpretation of the 12 step process does not necessitate religious identification or belief in a god. Furthermore, some of the words from the 1939 text are used differently in the present day and it is helpful to understand the original context in which they were intended.

The following is a brief non-religious interpretation of the 12 step process, which forms a practical adjunct to treatment of addiction to alcohol and other drugs and an ongoing lifestyle to help maintain a less chaotic life and long-term sobriety.

THE STEPS

STEP 1: Alcoholics Anonymous points out that alcoholism is characterised by two behaviours.\(^4\) Despite a conscious desire to abstain, the alcoholic is unable to leave alcohol alone for any extended period of time, and once they take a first drink, he/she cannot stop. The drinking episode culminates in a period of time, and once they take a first drink, he/she cannot stop drinking or how much to consume. This view is consistent with dopamine reward prediction error, incentive salience and post-use dysphoria mechanisms of addiction neurobiology.\(^3,6,8-14\) In contrast to being addicted to the high, in the absence of anticipated reward, the brain “wanting” (distinct from ‘liking’) the addictive substance and post-use dysphoria mechanisms of addiction neurobiology.\(^3,6,8-14\) In contrast to the concept of ‘powerlessness’ in general that is too often mentioned as a criticism of this step, step 1 does not suggest that the individual is powerless. Clearly one retains considerable efficacy over one’s own life, whether or not to seek and be open to assistance and whether to participate in the recovery process. Clearly the alcoholic’s life is unmanageable when they are drinking. However, due to poor coping skills, low self-efficacy and self-defeating thinking characteristic of the addictive psyche, and chaotic consequences of repeated intoxication, the alcoholic’s life is almost certainly unmanageable in between drinking episodes as well. This sets up a vicious cycle of adverse consequences and negative emotions, and drinking to escape those that further contributes to chronic alcohol use.

STEP 2: What is a power greater than myself? Simply put, it is not me. I need assistance to recover. Even if the alcoholic is able to sustain sobriety for short periods, they inevitably return to drinking. They may tell themselves that now they have it under control, that they will be able to moderate their drinking. The AA text describes this inability to learn from past experience and the conviction that, despite all evidence to the contrary, this time will be different, as ‘insanity’.\(^4,5\) There is no suggestion in the 12 steps that alcoholics should blindly accept from the outset that the 12 step process will enable them to recover. It is merely suggested that, with assistance, they give it a chance. Through seeing the benefits of the program in the sobriety of others, and in experiencing the positive changes that occur in their own lives as a consequence of implementing this lifestyle, they gradually come to understand (we came to believe) that a sober, rewarding life is achievable and sustainable.

STEP 3: If life is to change, and relationships and consequences of behaviour are to improve, and if one is to break the cycle of chaos and drinking, then it is intuitive that the alcoholic should have at their disposal a functional reference framework within which to act in future. Self-centered motives that inform impulsive decisions and behaviours need to be replaced with more mature functional thinking and actions. Step 3 offers the alcoholic a framework from which to start.

Although many alcoholics may identify with a God, others do not. The 12 step program refers to “God as I understood him”. Regardless of religious or spiritual convictions, alcoholics are invited to define for themselves what God, if he/she were to exist, might be like. A typical list of ‘godly’ characteristics (or principles) might look like that presented in Table 2. It is then suggested that they begin to make decisions and act based on these characteristics that they have identified as desirable. They are invited to “act like the person you want to become”.

STEP 4: In contrast to criticisms of this step that suggest that alcoholics are made to admit to “moral failings”, the ‘moral inventory’ referred to in step 4 is not intended as a judgement on character. Step 4 is an invitation to ‘discover the truth’ where unawareness and pursuing one’s own motives has led to negative consequences, dysfunctional relationships, resentment and reactionary drinking. The alcoholic is asked to identify episodes of past
anger, regret, guilt or embarrassment and where they were responsible in these situations. Note that they are not asked to identify their ‘part’. If I have a part, then you must have a part, and if you have a part, then my part is justified: “Putting out of our minds the wrongs the others had done, we resolutely looked for our own mistakes. Where had we been selfish, dishonest, self-seeking and frightened? Though a situation had not been entirely our fault, we tried to disregard the other person entirely.” 4 Through identification of self-seeking motives, the alcoholic is in a position to adjust future behaviour by substituting these motives with the principles identified in step 3. Introspective, carefully considered decision making based on principles rather than motives informs more functional behaviour with less chaotic consequences. Life becomes more manageable. Furthermore, compassion for others facilitated by step 4 may increase the capacity to accept compassion from others and the ability to show greater compassion to self.15

**STEP 5:** Talking to another person about the inventory established in step 4 is helpful in a number of ways. It helps to establish a sense of common humanity, to put events into perspective and to invite an opportunity for council. Addiction is characterised by dysfunctional thinking and behaviour, associated with shame and a sense of isolation. Talking to another (recovered) addict, discovering that one is not alone, is cathartic, reduces feelings of isolation, fosters self-acceptance and opens the door to healing. It engenders a sense that one can be forgiven and can forgive. It creates a sense of humility, honesty and willingness to change without descending into self-pity.6 Although there is no substitute for one addict talking to another, other appropriate people who may be helpful in step 5 include addiction counsellors, healthcare professionals, friends, family members and religious advisors. Steps 6 and 7 represent, with humility, a commitment to maintain the framework for decision-making that has been outlined in step 4.

**STEPS 8 AND 9:** Active addiction is characterised by behaviours that are self-centered and dishonest. Almost inevitably during that time others are maltreated, harmed or compromised in various ways. By carefully reviewing where their behaviour may have caused harm to others or society and, where possible making amends for that, the alcoholic is able to free themselves from associated guilt and shame and pre-empt or avoid repercussions of past activities that may adversely affect their life in future and compromise efforts at sobriety.

Decisions about who to approach, how to approach them and how it may be possible to make amends should be objective and carefully considered. Consequently, discussion with appropriate counsellors is encouraged before approaching others.

**STEPS 10 AND 11:** As previously implied, the steps, rather than being discrete actions, are a framework for a maintained lifestyle. They are separated and numbered so that the lifestyle can be taught, understood and learned. Steps 10 and 11 inform a daily practice of a non-judgemental, carefully considered review (meditation) of emotions, thoughts and events, and planning for the day ahead, based on the principles of steps 3, 4, 8 and 9.

“WHEN WE RETIRE AT NIGHT, WE CONSTRUCTIVELY REVIEW OUR DAY…;”

On awakening, let us think about the twenty-four hours ahead.4 The intention is to non-judgementally identify where motives rather than principles continue to inform behaviour and to proactively correct errors before they occur or are allowed to escalate.

**STEP 12:** The result of the 12 step lifestyle is a personality change (spiritual awakening) to a happier, more capable individual who is able to grow and flourish. Assisting and guiding other recovering alcoholics to achieve the same provides a sense of purpose and meaning that supports long-term sobriety.4,16

**FINAL WORDS**

Participation in 12 step-based social groups, such as Alcoholics Anonymous or Narcotics Anonymous, provides valuable support for long-term sobriety. Although a 12 step process may not be appropriate for all addicts, it is helpful for clinicians to have an informed working knowledge of the 12 step process so that they may encourage it where it is appropriate and support those who are already participating in such groups.

**References**