

# Understanding The Twelve Steps?

From A Clinical Perspective

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# Disclaimer

**The opinions presented in this workshop do not represent American Airlines/Optum or its' Employee Assistance Program. Neither do they represent Cornerstone or Alcoholics Anonymous.**

**Unless otherwise referenced, the presentation is a composit of information, observations and learnings by the presenter, from multiple perspectives, applied to support ongoing recovery from addiction.**

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# ADDICTION



A BIO PSYCHO SOCIAL DISEASE

*A Condition Which Impairs  
Normal Functioning*

Addiction must be understood from many different perspectives for **RECOVERY** to be **FULLY** integrated

# THE DISEASE OF ADDICTION

IS A COMBINED **GENETIC** AND **STRESS INDUCED** DEFECT IN THE MIDBRAIN AND PREFRONTAL CORTEX DOPAMINE AND GLUTAMATE REWARD SYSTEM RESULTING IN SYMPTOMS OF DECREASED FUNCTIONING INCLUDING:

- **LOSS OF CONTROL**
- **CRAVING**
- **PERSISTANT USE DESPITE NEGATIVE CONSEQUENCES**

Kevin McCauley, MD  
Institute for Addiction Study  
Salt Lake City, Utah

BIO

# ADDICTION IS ADDICTION

there are not different types but only different routes

- ▶ ALL ADDICTION releases the neurotransmitter DOPAMINE IN A CLUSTER OF NERVE CELLS IN THE Amygdala part of the brain which impact it's pleasure center by overloading it.
- ▶ ALL ADDICTION impacts the SURVIVAL part of the brain.
- ▶ Repeated use of an ADDICTIVE SUBSTANCE OR BEHAVIOR causes the nerve cells to communicate the need (drive) to repeat that source of pleasure

Information from the Harvard Newsletter



# ADDICTION IS A CHEMICAL IMBALANCE

impacting

- CHOICE .... motivation
- STRESS .... reward system
- MEMORY .... learning
- PLEASURE .... hedonic system
- GENES .... vulnerability

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# Consequentially

- ▶ ADDICTION IMPACTS EVERY THOUGHT...FEELING..REACTION
- ▶ AND BECOMES A WAY TO ACCOMMODATE ANXIETY..DEPRESSION...TRAUMA ...EMOTIONAL FLUCTUATION..AND BIOLOGICAL CRAVING
- ▶ AND ITSELF BECOMES A WAY OF LIFE

# FACTS

- ▶ 23 million Americans (1 in 10) are addicted to Alcohol or Other Drugs
- ▶ Two /Thirds of people with addiction abuse alcohol
- ▶ The TOP THREE DRUGS CAUSING ADDICTION ARE:
  - ▶ MARIJUANA
  - ▶ NARCARTIC PAIN RELIEVERS (OPIOIDS)
  - ▶ COCAINE

Information from the Harvard Newsletter



# SOCIOLOGICAL

## The Dysfunctional Family Learned Behavior Survival Roles Perspective

- ▶ Chemically Dependent      Mascot
- ▶ Enabler
- ▶ Hero
- ▶ Scapegoat
- ▶ Lost Child

# CHEMICALLY DEPENDENT

➤ IT IS THE NATURE OF DRUGS TO GIVE ONE A SENSE OF WELL BEING...AND CONTROL...

➤ WHILE THE OUTWARD MANIFESTATION IS

DENIAL AVOIDANCE ESCAPE

THE ROLE OF THE ADDICT BECOMES THAT OF A FRIGHTENED, ANGRY, DELUDED VICTIM

# Biological



- ▶ The chemically dependent persons brain is co-opted...
- ▶ The Drug has become a part of their physical make up
- ▶ Their brain believes it is required for its survival
- ▶ Survival in the midbrain sector is primary to the sociological constraints in the frontal sector



# CHEMICAL DEPENDENT

As the Family System tries to adapt

- ✓ BECOMES A BORDER IN THE HOUSEHOLD
- ✓ FAMILY ISOLATES THE ADDICT EXPECTING LITTLE AND GIVING LITTLE
- ✓ FAMILY VACILLATES BETWEEN ACCOMODATING AND ISOLATING DEPENDING ON ACTIVITY OF ADDICT
- ✓ FAMILY LIFE CENTERS AROUND RESPONDING TO THE CRISIS OF THE MOMENT AND THE SUBSTANCE USE OR NON USE
- ✓ FROM THE work of JOAN JACKSON

# ENABLER

## Visible Qualities

MARTYR .. SELF PITYING ...SELF BLAMING  
SUPER SENSE OF RESPONSIBILITY ... CONTROLLING  
MANIPULATING

## Inner Feelings

Anger.. Pain ... Fear... Guilt ...Rage

Fills Family Need for: ORGANIZATION..MEETING

SOCIAL BUT NOT EMOTIONAL RESPONSIBILITIES

# Biological impact on the Enabler

- ▶ PHYSICAL MANIFESTATIONS

  - ▶ DEPRESSION

- ▶ Stress related diseases

  - ▶ Fibromyalgia

  - ▶ Back pain

  - ▶ Gastro intestinal

  - ▶ Possibly leading to prescription drug  
dependence



# Family Hero

## Visible Qualities

OVER ACHIEVER  
OVER RESPONSIBLE  
OBSESIVELY RIGHT – 'GOOD'  
APPROVAL SEEKING

## Inner Feelings

PERFECTIONISTIC  
CONFUSED (ambivalent)  
GUILTY  
ANGRY  
FAILURE (to fix family)  
TOXIC SHAME

FOSTERS..NEED TO LEAD ALWAYS... CONTROL

Fills Family Need for: PRIDE OF ACHIEVEMENT... FAMILY VALUE

# SCAPEGOAT

## *Visible Qualities*

HOSTILE

DEFIANT

ANGRY

PEER ORIENTED

COMMANDS NEGATIVE ATTENTION

## *Inner Feelings*

LONLINESS ABANDONMENT

ANGER ANXIETY

REJECTION DISRESPECTED

FEARFUL

NEGATIVE SELF IMAGE

Fills Family Need by: Removes FOCUS from family problems by "becoming the problem". Consequently, the family has an investment in keeping the scapegoat sick.

# LOST CHILD

## *Visible Qualities*

WITHDRAWN DAY DREAMER

LONER REJECTS SPOTLIGHT

SHY – QUIET IGNORED and Uninvolved

DOES NOT MAKE DECISIONS

DOES NOT EXPRESS (OR KNOW) PERSONAL NEEDS

## *Inner Feelings*

LONLINESS POWERLESSNESS

UNIMPORTANT and HURT - Abandoned

FEARFUL /ANXIOUS

Fills Family Need for: Relief: One child not to  
worry about



# Biological

- ▶ Stress related illnesses
- ▶ Asthma
- ▶ Self Soothing.... Eating Disorders

# MASCOT

## *Visible Qualities*

### IMMATURE

SEEKS PROTECTION

SEEKS CONSTANT AFFIRMATION

FRAGILE

CAN BE HYPERACTIVE/LEARNING DISABLED

## *Inner Feelings*

LOW SELF ESTEEM LONELY

ANXIOUS INADEQUATE

TOLD WHAT TO HEAR OR SEE ("You don't know what you are talking about")

Terror of Losing Contact/Reality

Fills Family Need for: Defocus of problems providing Comic Relief – Fun - Humor

# Each One of the members of this family

- ▶ Are affected...in some way

Cognitively

Emotionally

Possibly Traumatically

**DEVELOPMENTALLY**

- ▶ In terms of abandonment
- ▶ In the development of process skills



# COPING STYLES ..work of JOAN JACKSON

## ▶ RESPONSIBLE ONE...

- ▶ ASSUMES RESPONSIBILITY
- ▶ TAKES OVER FAMILY CHORES
- ▶ COMPENSATES FOR INCONSISTANCY

## ▶ ADJUSTER

- ▶ ACCOMODATES EVERYONE IN THE FAMILY
- ▶ TAKES EVERYTHING IN STRIDE
- ▶ ACCEPTS THE UNACCEPTABLE

## THE PLACATER

MANAGES PHYSICAL AND EMOTIONAL AFFAIRS OF THE FAMILY

- ✓ VERY ATTUNED AND SENSITIVE TO OTHERS
- ✓ ALWAYS TRYING TO SOOTHE RUFFLED FEATHERS

# ADDICTIVE FAMILY SYSTEM is SOCIALLY DYSFUNCTIONAL

- REACTIVE
- CRISIS CENTERED
- NEGATIVE
- DISAPPOINTED...ANGRY

IT PRODUCES CHILDREN THAT ARE

POWERFUL

AVOIDENT

NARCISSTICALLY WOUNDED

- ▶ RESPONSES ARE Anxiety/Stress Induced
- ▶ No time or ability to learn process...Flight Fight Freeze

Dr. Tian Dayton

COMPARES FAMILY TO BOAT WITHOUT A  
RUDDER WITH ALL THE FAMILY MEMBERS IN  
FEAR FOR THEIR SURVIVAL..TRYING TO STAY  
ALIVE ...REACTIONS ARE POLARIZED

- 1) HIGH INTENSITY VS SHUTDOWN/DISSOCIATION
- 2) OVERFUNCTIONING VS UNDERFUNCTIONING
- 3) ENMESHMENT VS DISENGAGEMENT
- 4) IMPULSIVITY VS RIGIDITY
- 5) GRANDIOSITY VS LOW SELF WORTH
- 6) CARETAKING VS NEGLECT
- 7) ABUSE VS VICTIMIZATION



# Trauma Perspective

work of Johanna

O'Flaherty, PhD

*An event which is so unusual and extraordinary that it threatens to overwhelm the natural abilities people have to cope with difficult situations*

A shock, often having a lasting psychic effect

Growing up in a crisis focus setting not only overwhelms children but does not provide the resources for them to be able to deal with stress

▶ **TRAUMA is cumulative and does not TOUGHEN A PERSON**

▶ **IT TOUGHENS THEIR DEFENSE MECHANISM**

# DYSFUNCTIONAL FAMILY SYSTEMS ARE TRAUMATIZING

## ▶ RESPONSES...

▶ FIGHT ..... MOST EFFECTIVE

▶ FLIGHT .....PREFERABLE TO FREEZING

▶ FREEZE.....CHILDREN FREEZE

## FEAR CAUSES AN ADRENALIN RUSH

The Limbic System acts as a Circuit Breaker

Overwhelmed children shut down to minimize personal damage....

# SURVIVAL SKILLS CAN BECOME MALADAPTIVE LIFETIME PATTERNS

## ➤ RESULTING IN

- RESPONSE TO LOSS OF CONTROL
- FEAR OF CONFLICT
- OVERDEVELOPED SENSE OF RESPONSIBILITY
- GUILT WHEN STANDING UP FOR ONESELF
- SELF CRITICISM
- PROBLEMS WITH INTIMACY
- INABILITY TO RELAX
- MORE COMFORTABLE WITH CHAOS THAN SECURITY
- CONFUSION WITH LOVE AND PITY
- ALL OR NOTHING PERSPECTIVE
- REACTIVE RATHER THAN PROACTIVE RESPONSES



# DSM IV: Addiction & Trauma

## 303.90 Alcoholism

- Mood Liability
- Restricted affect
- Feelings of detachment
- Difficulty concentrating
- Outbursts of anger
- Acute
- Progressive
- Chronic

## ➤ 309.81 PTSD

- Mood Liability
- Restricted affect
- Feelings of detachment
- Difficulty concentrating
- Outbursts of anger
- Acute
- Progressive
- Chronic

# ATTACHMENT THEORY Perspective

RELATIONSHIPS ARE ALSO

*BIOLOGICAL and SOCIAL*

# LOVING IS .....



## ▶ A RECIPROCAL PSYCHOLOGICAL

INFLUENCE INVOLVING THE LIMBIC SYSTEM which:

- ▶ MODULATES EMOTIONS
- ▶ NEUROPHYSIOLOGY
- ▶ HORMONAL STATUS
- ▶ IMMUNE FUNCTION
- ▶ SLEEP RHYTHMS
- ▶ STABILITY



# ATTACHMENT THEORY

- Healthy (LOVE) (BONDING) is  
Simultaneous and Mutual (Lewis)  
and **REQUIRES** a
  - ✓ **CAPACITY FOR GIVING AND RECEIVING**
  - ✓ **HEALTHY NEED TO BE APPRECIATED**
  - ✓ **HEALTHY NEED FOR ATTENTION**
- **WHEN ATTACHMENTS ARE SHAPED BY  
THREAT AND THE NEED FOR SECURITY  
MALADAPTIVE RELATIONSHIP BASED ON THEIR  
REFLECTION THROUGH OTHERS  
...called CODEPENDENCY**

# Attachment Theory

- ???? The Myth ....human beings regulate their own emotions....

.....we are SOCIAL MAMMALS...

**BIOLOGICALLY HARDWIRED TO NEED PEOPLE**

"The stronger the earliest attachment experience, the less a person will require excessive sources of external affect regulation

"

....SECURE ATTACHMENTS LIBERATE

- ✓ MENTAL HEALTH ATTRACTS MIRRORS TO ITSELF
- ✓ HUMAN BEINGS..LOVED AND RESPONDED TO...HAVE THE CAPACITY TO INVOKE LOVE AND RESPONSIVENESS FROM OTHERS
- ▶ Addiction As An Attachment Disorder p 219



# HIGH RISK FOR REACTIVE ATTACHMENT DISORDER

## OCCURRING TO A CHILD UNDER 36 MONTHS


- ✓ Abuse – physical – emotional – sexual
- ✓ Sudden separation from primary caretaker  
(which includes invitro)
- ✓ Undiagnosed or painful illness (colic – ear infections)
- ✓ Inconsistent or inadequate day care
- ✓ Chronic MATERNAL DEPRESSION
- ✓ Several moves or placements (foster care)

✓

JOE

# Reactive Attachment Disorder

- DIFFICULTY FORMING LOVING LASTING RELATIONSHIPS
- LACK OF ABILITY TO BE GENUINELY AFFECTIONATE WITH OTHERS
- LACK OF TRUST IN OTHERS
- They do not think and feel like other people. Go to [www.attachment.org](http://www.attachment.org)



“Inability to establish Intimate long standing relationships are directly related to early attachment experiences”

- Dysfunctional or insecure attachments will be more vulnerable and more likely to turn to other sources of external regulation

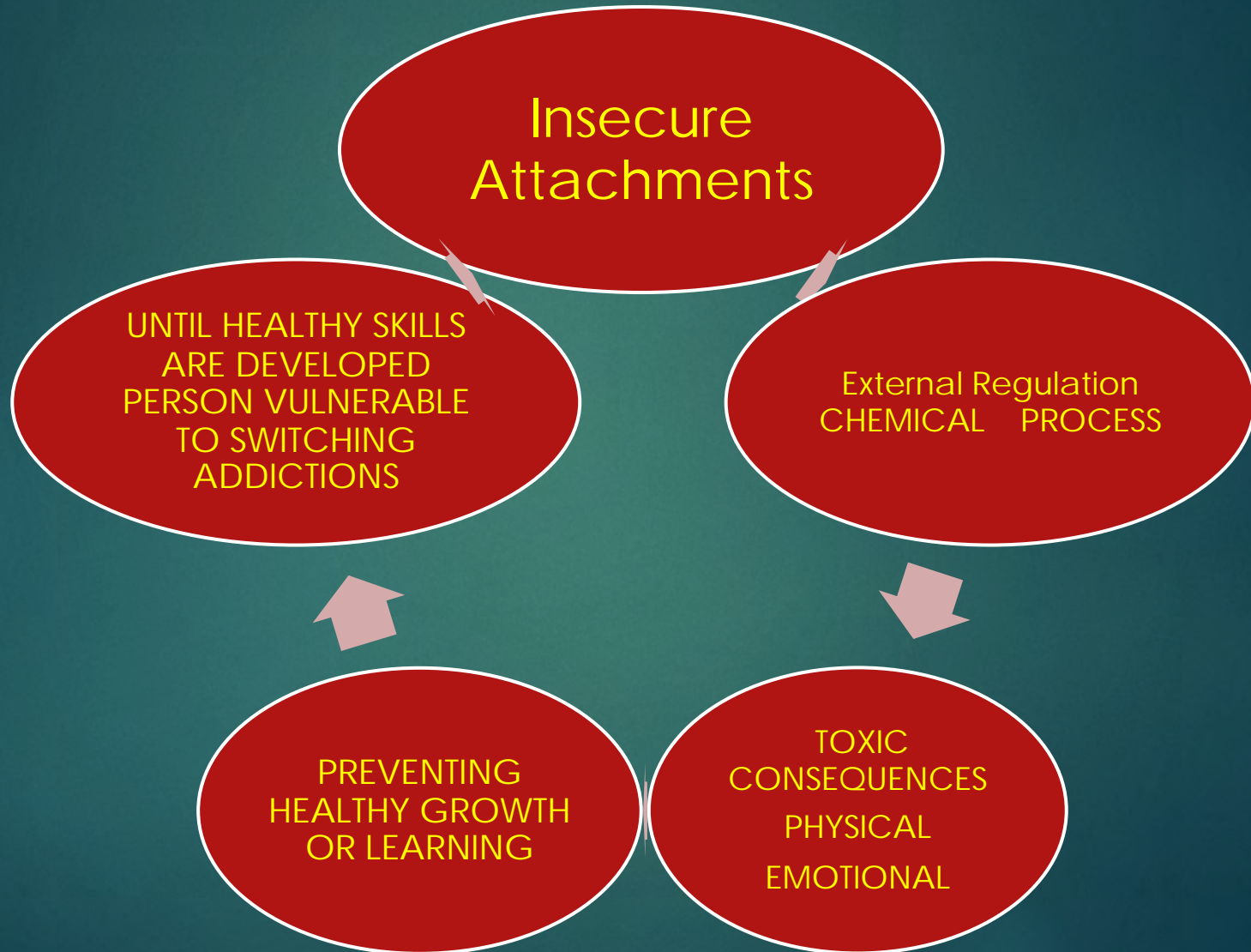
- Substances

- Obsessive-Compulsive Behaviors

- ▶ Addiction As An Attachment Disorder p 219



# Maladaptive Cycle



Addiction is a MALADAPTIVE

## Attachment


Addiction ... a retreat into a grandiose or false self as a way of AVOIDING THE NEED FOR ATTACHMENT or by attaching to something toxic, self defeating and inherently incapable of providing a healthy attachment but gives the addict the ILLUSION of

not being dependent when one is (addict)

Or

being in 'relationship' when the other party is toxic and incapable (codependency)

Addicts are emotionally two dimensional: exhibit grandiosity, superiority and self-sufficiency to deny shame, a sense of failure and being flawed, or overwhelmed. They have no middle ground or sense of being ENOUGH.



**Empathy**...allows people to perceive of themselves in relationship WITH others therefore they can live with failures and integrate.. and feel “good enough”.

... promotes boundaries  
... and self regulation

necessary to manage emotional injuries and disappointments which is the **building block of self esteem.**



# Narcissism



IS A WAY OF ATTEMPTING TO PROVIDE FOR  
ONESELF WHAT WAS NOT PROVIDED BY OTHERS

*NEED TO CONTROL..*

*... DEMONSTRATE IMPORTANCE*

*INABILITY TO DELAY* GRATIFICATION

*...CAUSED BY THE ANXIETY OR UNCERTAINTY*

THIS MANIFESTS AS AN.....  
**INDISCRIMINATE HUNGER** FOR APPRECIATION OR  
AFFECTION

**CONCERN** WITH APPROVAL

**CONTRADICTION** BETWEEN THE WISH FOR LOVE  
AND THE **CAPACITY** FOR  
FEELING...RECEIVING ...OR GIVING LOVE

**WHICH WE IDENTIFY AS CODEPENDENCY**

Addictive Family Cycle promotes a need for  
**SURVIVAL/SELF Preservation...it is not empathic**

# Yet Another Perspective

## ANXIETY AND STRESS RELATED PROBLEMS

STRESS RESPONSE in the impulse disordered person MUST BE IMMEDIATE

AND CAN BE PASSIVE OR AGGRESSIVE

BUT There MUST be activity of some kind....to stop the internal conflict/STRESS which can be MENTALLY AND PHYSICALLY PAINFUL

Chaos or other Diversions deflect from inward struggle which may be a clinical or spiritual depression



# DIVERSIONS

## PASSIVE .....ACTIVE

- VEG OUT WITH TV
- "KEPT COOL" (SHUT DOWN) WHEN SOMEONE IRRITATES THEM


- DEPRESSION
- LOW SELF ESTEEM
- Burying self i.e. EATING DISORDERS AND PASSIVE DRUGS

- heroin.. tranquilizers

- ✓ RETAIL "THERAPY"
- ✓ BE THE "DECISION MAKER"
- ✓ CAN'T WAIT TO SPEAK

- ✓ ANXIETY

- ✓ LOW SELF ESTEEM
  - ✓ AGGRESSIVE DRUGS
    - ✓ cocaine..amphetamine



DR. TIAN DAYTON (PARAPHRASED) EMOTIONAL PAIN AND TRAUMA SEEK A CULPRIT..BULLIES ACT OUT THEIR FEELINGS OF RAGE, HUMILIATION AND HELPLESSNESS BY BECOMING ABUSERS WHILE THE PERENNIAL VICTIM IS A RESULT OF LEARNED HELPLESSNESS.

NEED: EMOTIONAL SOBRIETY..WHERE INTENSE EMOTIONS CAN BE TOLERATED AND VENTED, HEALED AND THERE IS A INTERPERSONAL AWARENESS AND UNDERSTANDING

# SUPPORT SYSTEMS THAT PROVIDE:

- ▶ a transitional space where the misdirected attachment to a substance or an activity can be redirected
  - ▶ FOR THE ADDICT
- ▶ routines, rituals and support and attention in a safe environment
  - ▶ AND
  - ▶ FOR THE FAMILY MEMBERS
- ▶ a soothing environment which can sustain GROWTH AND CHANGE
- ▶ a safe haven with consistent and comforting care



# ADDICTION



- ▶ Addiction causes the cessation of the real self to consciously and pro-actively relate *physically, emotionally and spiritually* to life.
- ▶ Its recovery must also be addressed *physically, emotionally and spiritually*

# EARLY TREATMENT

## DETACHMENT FROM

### OBJECT OF ADDICTION

Physiological Habit

*Cycle of Compulsivity*

Biological Toxicity

*Chemical Craving*

# LONG TERM TREATMENT

## INTERNAL WORKING MODEL MUST CHANGE

### DEVELOPMENT OF

- CAPACITY FOR MUTUALITY AND CONFLICT RESOLUTION
- SELF IDENTITY
- SELF ESTEEM
- SHIFT FROM EXTERNAL TO INTERNAL LOCUS OF CONTROL
- SELF INTEGRATION
- SELF ACTUALIZATION



# ALCOHOLICS ANONYMOUS

PERCEIVED "issues":

- ▶ LABELING
- ▶ POWERLESSNESS
- ▶ NEED FOR BELIEF IN GOD
- ▶ NEED FOR SOMETHING OUTSIDE OF THE SELF

# STEP ONE

We admitted we were powerless over alcohol -- that our lives had become unmanageable

- ▶ In the First Step the alcoholic/addict admits the reality that their life has become *unmanageable* and that a *toxic substance has control over them* and not the other way around.
- ▶ **POWERLESSNESS is OVER A TOXIN...**  
NOT POWERLESS IN LIVING OR ACHIEVING
- ▶ **ADDICTION IS SUBJUGATING... POWERLESSNESS OVER DRUGS IS FREEING**

# STEP TWO

Came to believe that a Power greater than ourselves could restore us to sanity

There is something outside of the deluded self which can bring THE SELF INTO ALIGNMENT

Instilling EXTERNAL Locus of POWER/HOPE to augment low self esteem

Begin the concept of a safe external linkage to the disenfranchised

SANITY IS THE ABILITY TO FUNCTION IN MORAL CONTEXT WITH DELIBERATION



# THE CONCEPT OF GOD

CREATES THE IDEA OF GREATER POTENTIAL

ADDICTION MAGNIFIES FEAR.. AND DIMISHES HORIZONS...THE CONCEPT OF SPIRITUALITY IS SIMPLY ONES RELATIONSHIP TO THE WHOLE OF LIFE

LIFE IS CREATIVITY... POTENTIAL..ability for change

CREATES A SENSE OF BELONGING OR "FITTING IN" SOMEWHERE BEING RELEVANT (which is a major ACOA issue)

Begins a discussion of the Spiritual rather than the social control/punitive sense of god (tread lightly and work with belief system).... Note that ones image of their own father is often projected on to God

GOOD ORDERLY DIRECTION .....GOD ..... GROUP OF DRUNKS

# STEP THREE

Made a decision to turn our will and our lives over to the care of God as we understood Him

**TRUSTING..... BEGIN TO CHANGE PAST  
NEGATIVE EXPERIENCES AND CREATE**

**A NEW STORY**

AND CREATE A SAFETY IN A TRUSTWORTHY SELF AS  
OPPOSED TO RECREATING TRAUMA OF THE PAST....to  
separate from trauma and begin a grieving and  
growing process

...to move from a God of Control which is doomed  
to an understanding of reliance on self worth so that  
the *experience of being alive* can begin to happen

# STEPS 1 - 2 - 3

- ▶ STOPPING THE TOXIN
- ▶ STOPPING THE SPIRAL DOWN
- ▶ ACCEPTING HELP



# Biological Review

- ▶ This does not mean that the biological and physiological consequences will stop...
- ▶ In turning **oneself OVER** TO HOPE FOR REMISSION
- ▶ ONE IS ACTUALLY TAKING SELF RESPONSIBILITY
- ▶ THE ADDICT **BECOMES PROACTIVE**

Repetitive patterns of behaviors are used to: reenact the traumatic event or - ward off any reminders of the event or its effects.

We keep perpetuating violence on that part of ourselves that needs the most loving attention

What was done to me in the past, or what I've done to myself, doesn't have the final say in who I am. (J. Finley)

\* In early phases of sobriety, the experience of traumatic consequences may give participants a sense of identity..for that reason I suggest that newcomers be guided to closed meetings that focus on life changes and gratitude as soon as possible. EK

# STEP FOUR

Made a searching and fearless  
moral inventory of ourselves

PERCEIVED INJURIES, DISAPPOINTMENTS,  
ANGERS AND INSTANCES OF ABUSE ARE  
ACKNOWLEDGED

DEFENSE MECHANISMS BECOME CLEARER AS  
PATTERNS OF BEHAVIOR ARE REVEALED

ALLOWS THE ADDICT TO TAKE RESPONSIBILITY  
FOR **THEIR PART** IN RELATIONSHIPS AND  
BEHAVIOR CHOICES

SERENITY PRAYER: ABILITY TO CHANGE **WHAT I  
CAN**



At different stages in Recovery, the person is able to become aware of and handle information.

Denial is **DEFENSE** Mechanism

Unacknowledged/UNTreated TRAUMA may increase relapse potential but it may

be important to utilize **PROFESSIONALS**  
**IN AREAS OF THIS NATURE**

# Untreated Trauma

creates secret lives\*

- Re-enactment of trauma
- Sexual acting out
- Conflicted relationship to  
self and others
- Inability to negotiate a mutual relationship
- Life centered around hurt and malice
- Confusion between pain and pleasure

\*Johanna O'Flaherty PhD

# STEP FIVE

Admitted to God, to ourselves and to another human being the exact nature of our wrongs.

- ▶ **BEGINS BUILDING TRUST.... SENSE OF SAFETY IN RELATIONSHIP**
- ▶ ACKNOWLEDGES/ SHARES SHAME AND GUILT AND BEGINS A PROCESS FOR HEALING
- ▶ SELF UNDERSTANDING AND ACCEPTANCE ARE THE KEYS TO REALIZING THE AUTHENTIC SELF AND SEPARATING FROM THE DISEASED SELF
- ▶ THINKING BECOMES MORE REALITY BASED



# STEP SIX

Were entirely ready to have God (THE GOD OF OUR UNDERSTANDING) remove all these defects of character

Awareness is the backbone of readiness

Grieving for the Lost Self

Compassion in the face of \*Reactive Defenses which cause Shame /Loss of Self

- Emotional Freezing
- Avoidance of intimacy
- Alienation

Step SIX acknowledges The POSSIBILITY OF/FOR

CHANGE

# STEP SEVEN

Humbly asked (Him) to remove our shortcomings.

- ▶ Fosters respect for personal limitations and the need to engage the assistance of others
- ▶ Introduces the concept of *humility* which is *self-honesty*

Important to allow for honesty (truth) to be a variable with maturity and NOT a constant.

(This is where there is a great deal of confusion and where one is easily stuck)

# STEPS EIGHT and NINE

- ▶ 8. Made a list of all persons we had harmed, and became *willing* to make amends to them all.
- ▶ (Hard for an addict not to take an action to relieve anxiety..)

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

The GOAL is freedom and not fixing...

FREEDOM THAT COMES THROUGH ACCEPTANCE WITHOUT JUDGEMENT



# STEP TEN

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

- ▶ ALLOWS FOR IMPERFECTION...
- ▶ TEACHES PROCESS...
  - ▶ MORE THAN JUST A NEED FOR SELF PARENTING
  - ▶ IT GIVES THE INSTRUCTIONS..A METHOD
- ▶ REDUCES ANXIETY and Self Judgment
- ▶ PROMOTES UNDERSTANDING AND CONSEQUENTLY EMPATHY

# STEP ELEVEN



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

- ▶ An AWAKENING or re-evaluation of personal and therefore, meaningful connection (relationship) that can lead to a rebirthing of a psycho-spiritual (integrated) self

# STEP TWELVE

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**

SPIRITUAL MATURITY BASED ON RE-MEMBERING,  
REFLECTING AND SERVING AS AN EXAMPLE OF THE  
MIRACLE OF SOBRIETY

- IT IS AN ONGOING PROCESS
- IT IS POSSIBLE
- IT KEEPS IT "GREEN"
- BECOMING AN EXAMPLE IS A SPIRITUAL RESPONSIBILITY – CALLING FOR SELF TRUST



# AA WORKS because....



- OFFERS BOUNDARIES WITH ACCEPTANCE
- A SUPPORT SYSTEM TO IDENTIFY AND DEAL WITH EMOTIONS
- SELF ESTEEM BASED ON THE ADDICTS EXPERIENCE
- ARENA TO LEARN ABOUT MUTUAL SATISFYING RELATIONSHIPS
- ONGOING MAINTANCE AND SELF CARE

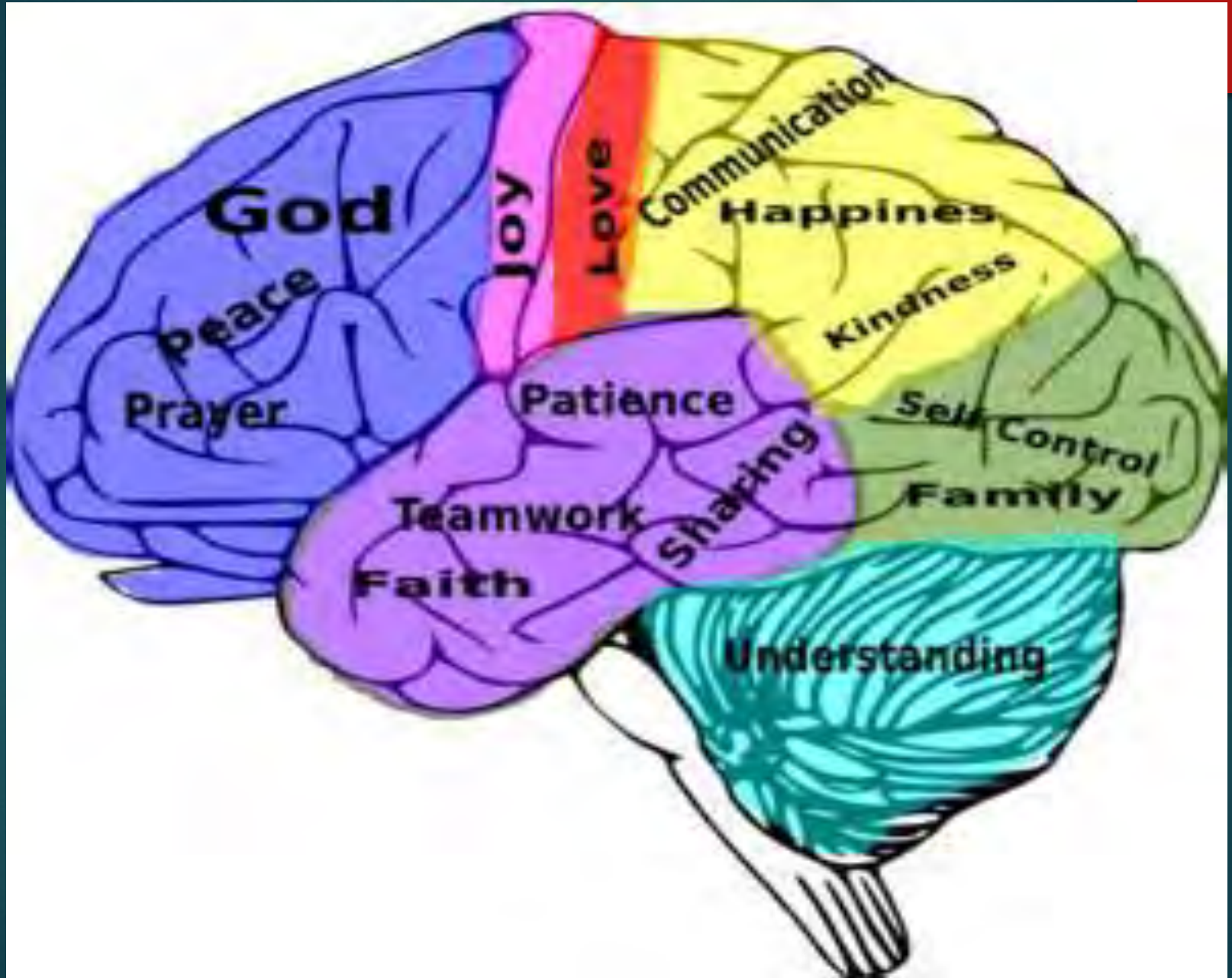
# ALCOHOLISM IS A BIO- PSYCHO-SOCIAL DISEASE OF

▶ IT CAN BE 'IN REMISSION' BIOLOGICALLY

THE BRAIN

- ▶ DUE TO IT'S MULTIPLE COMPONENTS ...THE PSYCHOLOGY AND SOCIOLOGICAL RAMIFICATIONS ARE A LIFE LONG WORK
- ▶ IT IS A POWERFUL FORCE THAT CAN BE UTILIZED AS A POSITIVE
- ▶ IT IS NOT A SHAME..IT IS A CONDITION AND A CONDITIONING
- ▶ IT IS IMPERATIVE THAT THE CLINICIAN NOT REPLICATE THE DISFUNCTIONAL FAMILY SYSTEM AND NOT INFANTANILIZE ITS MEMBERS... THE KEY TO RECOVERY IS EMPOWERMENT







# FROM AN AA MEMBER\*

\*

NO ONE PERSON SPEAKS FOR THE ORGANIZATION)

- "I always knew I was a child of God, but I never knew what it was like to be alive, to be a human being, to experience living. With Alcoholic's Anonymous as a part of my foundation, I have been able to utilize other tools, other paths which have all led to my ability to be an integrated human being. AA took me by the hand and helped me to trust who I was; helped prepare me to be powerful in the Spirit of which I am a reflection. Through understanding that I am power..less in fraud ...
- power-less by holding on to what I am not....I can be powerful in communion with myself and those around me."

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[www.attachment.org](http://www.attachment.org)

## In the Shadows of the Net

Patrick Carnes, PhD, David L. Delmonico, PhD, Elizabeth Griffin, MA

## The Correlation Between TRAUMA and ADDICTION

Johanna O'Flaherty, PhD, Presented at the NYC EAPA Meeting April 2014