

RECOVERY-ORIENTED MUTUAL SELF-HELP GROUPS

INTRODUCTION

Recovery-oriented mutual self-help groups can aid recovery from substance use disorders (SUDs) and facilitate personal growth through self-exploration and peer support. Although these groups are not a part of professional treatment, they can provide a rich source of support for recovery and complement other treatment. Mutual self-help groups provide a forum and opportunity for individuals in recovery to connect with others who have similar experiences and goals, allowing them to build relationships within a substance-free support network. These groups are typically free, anonymous, and easily accessible; as such, these groups can be readily available over the long-term trajectory of recovery. Mutual self-help groups include a variety of programs, with [12-step programs](#) (e.g. Alcoholics Anonymous, Narcotics Anonymous,) and Self-Management and Recovery Training (SMART Recovery) being the most common.

Clinicians who are knowledgeable about community-based recovery programs may be more successful in referring patients to these programs.[1] Different meetings have different “energies” or dynamics to them, and clinicians should encourage patients to attend several different meetings to identify the ones that feel most comfortable for them or where they find connection with the other members.[2] It may be helpful to inform patients that each meeting is unique and has its own character; if a patient has a negative experience in a particular meeting, he or she should try attending one or more different meetings to find the ones that feel “right.”

TWELVE-STEP RECOVERY PROGRAMS

Twelve-step recovery programs involve meetings in various public settings and follow “12 steps” (refer to Resource Box 1, below) that guide individuals in their recovery. These programs are described as fellowships of individuals who share their strength, hope, and experience with those who would like to stop drinking and/or drug use. Alcoholics Anonymous (AA) is the largest 12-step program that addresses alcohol use; Narcotics Anonymous (NA) is the second largest 12-step program, focused on substance use (*any kind of substance use*, including alcohol).[3] Twelve-step meetings are free and usually readily available, often multiple times per day (into the night), depending on geographic location. Meetings also are available online. Meetings generally run from 60 to 90 minutes and are chaired by a 12-step group member. During the meeting, members who choose to do so share experiences—one person at a time—related to their recovery, while others in the group listen. Public sharing of experience is voluntary—some members find benefit in just listening. An individual can become a member of a 12-step program simply by expressing a desire to stop using.[3]

Twelve-step programs have a general spiritual foundation, but do not require any specific spiritual or religious background for participation. They usually encourage members to

look outside themselves for a strength (a “higher power”), which each member defines for himself or herself.[3]

Twelve-step programs have been shown to provide their members with many benefits in addition to support for abstinence from substances. Benefits include the following: 1) feeling connected, a sense of belonging, and catharsis from being able to share experiences and have others relate; 2) increased self-awareness, humility and autonomy, personal growth and maturation; 3) experiencing empathy from others, feeling safe, and valued.[4]

Limited research suggests that spiritual or religious involvement can be a protective factor against SUDs and relapse.[1,5] It is important to clarify that 12-step groups are *spiritual but not religious*, as some patients may be uncomfortable with participation in 12-step groups if they view them to be “religiously oriented;” such a perception can constitute a barrier preventing patients from exploring these groups.

Stigma associated with 12-step groups can also create a barrier to attendance and engagement. Twelve-step group attendance can identify an individual as having addiction. It is important to address stigma and related fear, which may arise, and encourage engagement in mutual self-help groups. In addition to 12-step programs for those with SUDs, similar programs are available for the families and friends of the affected individuals; for example, Al-Anon (or Nar-Anon), Adult Children of Alcoholics/Dysfunctional Families, or Alateen, can become a source of support and valuable resource for adult and younger family members, respectively.[6] Refer to Resource Boxes 1-3, below, for additional information on 12-step programs.

SELF-MANAGEMENT AND SMART RECOVERY TRAINING SELF-HELP GROUPS[7]

SMART Recovery relies on a more scientifically-oriented approach and can provide an alternative to spiritually-focused 12-step groups. SMART Recovery provides support for recovery from all addictions, both chemical (e.g. alcohol or drugs) and behavioral (e.g. gambling). SMART Recovery’s focus is on improved self-management in four core areas: building and maintaining motivation for successful recovery; coping with urges; managing thoughts, feelings, and behaviors; and living a balanced life. For more information, refer to the [SMART Recovery website](#) and Resource Box 2, below).

RESEARCH EVIDENCE FOR RECOVERY-ORIENTED MUTUAL SELF-HELP GROUPS

It has been shown that those who *self-selected* to engage in mutual self-help programs benefited most; whereas those who were “coerced” did not show similar gains.[8] Therefore it is important to encourage and support patient interest in these groups. Research evidence supports the efficacy of recovery-oriented mutual self-help groups, especially 12-step programs. Participation in mutual self-help groups can improve outcomes for recovery from addiction.[9-14] Both the frequency of meeting attendance and the level and duration of involvement in prescribed 12-step activities—*especially during the earlier stages of recovery*—have been linked to better recovery outcomes, especially abstinence (Table 1).[10,11,13,15,16]

TABLE 1. ONE-YEAR ABSTINENCE RATES BY AA MEETING FREQUENCY [11]

AA Meeting Frequency	Abstinence Rates
“Nonattenders”	21.4%
2-4 meetings/week	42.7%
5+ meetings/week	61.1%

Several elements related to the mutual self-help group participation have been hypothesized as “active ingredients” facilitating recovery (refer to the section below). Personal factors may also influence (moderate) outcomes during recovery (refer to the section below). Awareness of potential “active ingredients” and patient-specific factors may help the clinician better assess how helpful these groups can be for a given patient and what other recovery support the patient may need (e.g. mental health treatment for the depressed patient).

Hypothesized “Active Ingredients” of Mutual Self-Help Groups[17]	Personal Factors—Possible Moderators of “Active Ingredients”[18]
<ul style="list-style-type: none"> • Provide support • Offer goal direction and structure • Provide role models for abstinence • Increase self-efficacy and healthier coping skills • Allow for opportunities to engage in rewarding activities, including substance-free social activities and helping others with substance abuse problems 	<ul style="list-style-type: none"> • Sex: Women may be more responsive to support • Spirituality/religiosity: May enhance engagement in the program • Untreated depression: May make it more difficult to engage with others and gain potential benefits from the program • Severity of SUD: SUD severity may impact potential gains from mutual self-help group participation

There are several components of group engagement that have been shown to improve recovery outcomes, especially abstinence. It is recommended to encourage patients who are attending a 12-step group to find and work with a sponsor (an experienced 12-step member who takes on the role of peer-mentor for 12-step-based recovery). Most sponsors have at least 1—preferably 2—years of sustained abstinence, regularly attend meetings, are familiar with the 12-step literature, and are available to meet and work one-on-one with individuals they sponsor. To find a sponsor, interested individuals can simply ask one of the group members about it and, ideally, find a sponsor with whom they feel comfortable. Research shows that meeting attendance and engagement, as well as having a sponsor, are the strongest predictors of abstinence over time.[15] Other 12-step-based activities, such as reading the related literature, sustained service work, and receiving support from 12-step members, are also beneficial for maintaining abstinence.[9,15,18]

Evidence indicates that, for optimum benefit, individuals should become involved in 12-step groups early in their recovery, and attend meetings frequently and regularly; a common 12-step group recommendation is to attend “90 meetings in 90 days,” especially at the beginning of the recovery process.

RESOURCE BOX 1. THE 12 STEPS NARCOTICS ANONYMOUS VERSION

1. *We admitted that we were powerless over [our addiction], that our lives had become unmanageable.*
2. *We came to believe that a Power greater than ourselves could restore us to sanity.*
3. *We made a decision to turn our will and our lives over to the care of God as we understood him.*
4. *We made a searching and fearless moral inventory of ourselves.*
5. *We admitted to God, to ourselves, and to another human being the exact nature of our wrongs.*
6. *We were entirely ready to have God remove all these defects of character.*
7. *We humbly asked him to remove our shortcomings.*
8. *We made a list of all persons we had harmed, and became willing to make amends to them all.*
9. *We made direct amends to such people wherever possible, except when to do so would injure them or others.*
10. *We continued to take personal inventory and when we were wrong promptly admitted it.*
11. *We 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 a result of these steps, we tried to carry this message to [addicts], and to practice these principles in all our affairs.[19]*

*Words in [brackets] can be changed based on the specific 12-step program.

THE SERENITY PRAYER

Reprinted with Permission from [AA](#) as adapted from Reinhold Niebuhr’s Serenity Prayer, and used during 12-step meetings[20]:

*God grant me the serenity to accept the things I cannot change,
courage to change the things I can,
and wisdom to know the difference...*

RESOURCE BOX 2. RECOVERY-ORIENTED MUTUAL SELF-HELP PROGRAMS: RESOURCES

Twelve-Step Programs for Individuals with Substance Use Disorders

- [Alcoholics Anonymous \(AA\)](#):
 - AA is the largest 12-step fellowship for alcohol problems,[3] with estimated over 2 million members worldwide.[21]
 - The primary focus of AA is alcohol use disorders.
- [Narcotics Anonymous \(NA\)](#):
 - NA is the largest 12-step fellowship primarily focused on drug addiction.[3]
 - NA is open to all drug (including alcohol) addictions, regardless of the particular drug or combination of drugs used.[3]
- Other programs:
 - [Cocaine Anonymous \(CA\)](#)
 - [Crystal Meth Anonymous \(CMA\)](#)
 - [Heroin Anonymous \(HA\)](#)
 - [Marijuana Anonymous \(MA\)](#)
 - [Nicotine Anonymous \(NicA\)](#)
 - [Pills Anonymous \(PA\)](#)
 - [Dual Recovery Anonymous \(DRA\)](#): This program is primarily for individuals with both addiction and mental health conditions.
 - [Gamblers Anonymous \(GA\)](#)

Twelve-Step Programs for Family and Friends of Individuals with Addiction

- [Adult Children of Alcoholics \(ACA\)/ Dysfunctional Families](#): This program focuses on supporting adult children of alcoholics.
- [Al-Anon \(and Alateen\)](#): This program provides help for those affected by someone else's drinking.
- [Nar-Anon](#): This program provides help for those affected by someone else's substance use.

Additional 12-Step Programs

- [Additional programs](#): Links to several 12-step groups as well as additional resources.

Additional Recovery Programs

- [SMART Recovery](#): This is a more scientifically (rather than spiritually) oriented program, which provides recovery support for all addictions, both chemical (e.g. alcohol or drugs) and behavioral (e.g. gambling).

RESOURCE BOX 3. ABOUT 12-STEP PROGRAMS

Membership and Organizational Structure

- Twelve-step programs[3] support the individual in achieving and maintaining abstinence from substances.
- An individual can become a member by simply expressing the desire to stop using.
- Meeting attendance is not recorded; anonymity is a key principle.
- Meetings are free, though groups often accept voluntary contributions to help offset expenses related to “running a group.”

Meeting Frequency and Location

- Meetings are usually readily available (especially AA) and can occur as often as 7 days per week, 24 hours per day (depending on geographic location).[3] Twelve-step program websites (refer to Resource Box 2, below) provide updated information on meeting type, time, and location.
- Meetings are typically held in public venues (e.g. libraries, places of worship, community centers, YMCAs) and are not affiliated with any organization.[3]
- Most meetings are 60-90 minutes long, but duration can vary.
- In addition to meetings, some fellowships (especially the larger ones, such as AA or NA) may organize substance-free events and other social activities for their members.

Types of Meeting

- No two meetings are the same, and the character of a meeting depends on its members; if an individual has a negative experience with one group, it is recommended that he or she participate in meetings of one or more different groups to find a group that feels more comfortable.
- The number of participants can range from few individuals to several hundred people, depending on the particular meeting, community, and geographic location.[3]
- The meetings typically are labeled as either **open** or **closed**
 - **Open**—they are open to *everyone*: the affected individual, friends, family members, the general public.
 - **Closed**—they are available *only* to those who have or think they may have a problem with substance use.
 - Larger groups (especially AA) may have population-specific meetings (e.g. only for women, men, LGBT, ethnic group, newcomers, old-timers, Veterans, or people with dual-diagnosis)[3] or groups designated as “nonsmoking.”

Meeting Format

- Meetings typically follow a prescribed structure, which usually includes 12-step-related readings and a recitation of the Serenity Prayer (refer to Resource Box 1, below), often at the beginning or the end of each meeting. There can be variations in the meeting structure, as determined by each group itself.[3]
- Within the context of the prescribed structure, there are different meeting formats,[3] with larger 12-step fellowships having a wider variety of formats available at a given time.
 - Discussion meetings focus on a discussion of a chosen recovery-related topic.
 - Speaker meetings invite guest speaker or speakers (1-3 volunteers) to share their personal experiences related to recovery.
 - Step meetings focus on a discussion of one of the 12 steps (refer to Resource Box 1, below,) or 12 traditions.
 - Literature meetings focus on a discussion of 12-step-related literature (e.g. texts, pamphlets, booklets).

Suggested 12-Step Program Engagement

- Attend meetings regularly—research shows that more is usually better:
 - A common suggestion from 12-step programs is to attend “90 meetings in 90 days.”
 - It is not uncommon for a person to attend more than one meeting per day, especially early in recovery.
- Read 12-step recovery-related literature.[3]
- Connect with other members outside of meetings.[3]
- Work through the 12 steps.[3]
- Find and work with a sponsor.[3]
- Engage in service work.[3] For people new to 12-step programs, “service work” can be as simple as helping set up for a meeting; for people who have been in recovery for a while, it could mean taking on a 12-step official service position or becoming a sponsor for others.)

RESOURCE LINKS

- [12-step programs](https://12step.org/): <https://12step.org/>
- [12-Step Additional programs](https://12step.org/references/12-step-versions/): <https://12step.org/references/12-step-versions/>
- [Adult Children of Alcoholics \(ACA\)/ Dysfunctional Families](https://adultchildren.org/): <https://adultchildren.org/>
- [Al-Anon \(and Alateen\)](https://www.al-anon.org/): <https://www.al-anon.org/>
- [Alcoholics Anonymous \(AA\)](https://www.aa.org/): <https://www.aa.org/>
- [Cocaine Anonymous \(CA\)](https://ca.org/): <https://ca.org/>
- [Crystal Meth Anonymous \(CMA\)](https://www.crystalmeth.org/): <https://www.crystalmeth.org/>
- [Dual Recovery Anonymous \(DRA\)](http://www.draonline.org): <http://www.draonline.org>

- [Gamblers Anonymous \(GA\)](http://www.gamblersanonymous.org/ga/): <http://www.gamblersanonymous.org/ga/>
- [Heroin Anonymous \(HA\)](http://heroinanonymous.org/): <http://heroinanonymous.org/>
- [Marijuana Anonymous \(MA\)](https://marijuana-anonymous.org/): <https://marijuana-anonymous.org/>
- [Nar-Anon](https://www.nar-anon.org/naranon): <https://www.nar-anon.org/naranon>
- [Narcotics Anonymous \(NA\)](https://www.na.org/): <https://www.na.org/>
- [Nicotine Anonymous \(NicA\)](http://nicotine-anonymous.org/): <http://nicotine-anonymous.org/>
- [Pills Anonymous \(PA\)](https://www.pillsanonymous.org/): <https://www.pillsanonymous.org/>
- [SMART Recovery website](https://www.smartrecovery.org/): <https://www.smartrecovery.org/>

AUTHOR(S)

“Recovery-Oriented Mutual Self-Help Groups” was written by [Cindy A. Burzinski](#), MS, CSAC, LPCT, and [Aleksandra E. Zgierska](#), MD, PhD (2014, updated 2019).

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