□□□ "I feel sorry for people who don't drink. When they wake up in the morning, that's as good as they're going to feel all day."—Frank Sinatra

Alcohol Anonymous, otherwise known as AA, became a popular 1950s intervention for those individuals seeking assistance in recovery from alcohol addiction. The 12-step program became an international organization, with most urban areas having multiple AA groups, each offering numerous sessions per day for convenience of the busy lifestyle.

In rural areas, where treatment resources are scarce, AA attendance is often a mandate for those enrolled in outpatient substance abuse programs.

The assumption that AA is an effective treatment modality for substance addiction remains apparent in both the treatment world and general public. For those who have personally benefited from AA, the idea that individuals can achieve sobriety without the support of AA is uncommon; AA supporters tend to be die-hard AA believers.

Few studies have focused on challenging this assumption. However, those who have bothered to question this status quo have found interesting results.

Duration of AA attendance appears to be related to longevity of abstinence. Thus, those who continue to participate in AA tend to have longer durations of sobriety.

At first glance, one could make the assumption that AA "works" and thus believe that all addicts should be mandated to its attendance. However, if we look closer, we find that the drop-out rate from AA is often as high as 80 percent.

What is different about the 20 percent that stick it out? Perhaps their motivation for abstinence? What if we consider that AA seems to fit a certain percentage of the population who identify spirituality and religion as important aspects of their recovery? AA certainly prioritizes spirituality in their 12-step model.

If we compare effectiveness of AA to other self-help programs and treatment approaches, we find equal success rate. Again, the golden rule appears to not be about which program to enroll in, but rather about the commitment to continue participation in whatever program fits best for the individual person.

It should be noted that despite the AA belief that early dropout guarantees relapse, research shows that 43 percent of individuals who limited AA attendance to 12 months following treatment enrollment had maintained sobriety at the five-year mark. This was compared to 79 percent success rate at five years for those attending 200-plus meetings per year.

Think about that. Two hundred meetings a year means going at least four times per week! There's no time for relapse.

What does all this mean? Basically, that individuals working toward recovery from addiction should be open to self-help programs that fit their life philosophies. The assumption that AA works better than other modalities or that AA is the solution for everybody is simply not true.

Any long-term enrollment in a self-help program improves the odds of continued sobriety. Even the recovery support group within the National Association of Beer Drinkers (an actual organization with membership caps) could be effective if its members were dedicated to lengthy meeting attendance.

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