

## Religious

### Recent Research Articles on this Topic:

***Exploring the additive effects of drug misuse treatment and Twelve-Step involvement: Does Twelve-Step ideology matter?*** Fiorentine R, Hillhouse MP, Subst Use Misuse 2000 Feb;35(3):367-97

Previous research revealed an additive effect of recovery activities in that those who attended Twelve-Step meetings on a weekly basis during and after outpatient drug-user treatment had higher rates of abstinence compared to those who participated in either treatment or Twelve-Step programs alone. The current investigation extends the previous research by examining the possible effects of Twelve-Step ideology on participation in Twelve-Step programs and abstinence from drug use. The findings from this treatment outcomes study indicate that the acceptance of Twelve-Step ideology, particularly strong agreement with the need for frequent, lifelong attendance at Twelve-Step meetings, and the need to surrender to a "higher power" are significant predictors of weekly or more frequent attendance at Twelve-Step meetings independent from other potentially mediating variables. Twelve-Step ideology, specifically the notion that controlled or non-problematic drug use is not possible, predicted abstinence independent from Twelve-Step participation and other potentially mediating variables. These findings often a number of implications concerning group process and recovery from drug misuse which are addressed in the Discussion section under the following topics: 1) spirituality and group cohesion, 2) spiritual transcendence, social transcendence, and recovery; 3) spirituality and the obstruction of recovery; 4) Twelve-Step ideology and learning; 5) perceived control of drug use, self-efficacy theory, and recovery; and 7) perceived control of drug use and optimistic illusions. Directions for future research are discussed.

***The Expanded Care for Healthy Outcomes (ECHO) Project: addressing the spiritual care needs of homeless men in recovery.*** Brush BL, McGee EM, Clin Excell Nurse Pract 1999 Mar;3(2):116-22

As the nation's homeless population continues to rise, new practice models will need to address the specific health care needs of the homeless while providing cost-effective wellness-oriented quality care. This article describes the early development of one such model. The Expanded Care for Healthy Outcomes (ECHO) Project is an interdisciplinary curriculum/practice model that explores the vital intersection of spiritual and primary care in promoting health among homeless guests at the Pine Street Inn Nurses Clinics in Boston, Massachusetts. The authors describe the incorporation of spiritual assessment and care in clinical practice with homeless men to maximize patients' physical, psychosocial, and spiritual wellness.

***Twelve-step and mutual-help programs for addictive disorders.*** Chappel JN, DuPont RL, Psychiatr Clin North Am 1999 Jun;22(2):425-46

Psychiatrists may wonder why both addiction treatment and the 12-step programs recommend abstinence. In his 50-year follow-up of two groups of alcoholics, Vaillant compared those who established secure abstinence with those who continued to drink.

*Secure abstinence was associated with:*

- Living longer
- Better mental health
- Better marriages

- Being more responsible parents
- Being successful employees

*In considering the various routes to secure recovery, Vaillant recommended that clinicians:*

- Offer the patient a non-chemical substitute for alcohol
- Remind the patient ritually that even one drink can lead to pain and relapse
- Repair the social and medical damage that the patient has experienced
- Restore the patient's self-esteem

The preponderance of the research data now available indicates that the 12-step programs of AA, NA, Cocaine Anonymous, and Al-Anon are most helpful for alcohol-dependent and other drug-addicted patients as they seek to achieve secure, long-term abstinence. A growing number of clinicians is recommending that physicians become more knowledgeable and skilled in referring and supporting patients in working 12-step programs of recovery.

Specific recommendations include:

1. Be familiar with 12-step activities and tools. These include meetings, home groups, sponsors, the Twelve Steps and Twelve Traditions, books, pamphlets, and slogans. To be able to discuss the meanings and applications of these tools for recovery is useful. Physicians can select those that are most suitable for the individual, recognizing that meeting attendance might not be the most important activity.
2. Support referral by facilitating a meeting between the patient and a temporary contact from the 12-step program. This means becoming familiar with local 12-step programs. Phoning the local AA or NA central office or hot line makes connecting patients to someone who will take them to a meeting that same day possible. AA and NA have committees whose members are interested in working with physicians to help get patients to meetings and to get information to physicians. These are the Cooperation with the Professional Community, Treatment Facilities, and Hospitals and Institutions committees.
3. Work with the resistance of patients. Many addicted patients are resistant to the idea of attending 12-step or mutual-help programs. Reminders of their painful personal database associated with the use of alcohol or other drugs can help break through denial. Involvement of family members and friends in the network therapy developed by Galanter can be effective in reducing resistance. Being patient and persistent in developing the therapeutic alliance helps to maintain contact during the first difficult year of recovery. Physicians should be prepared to work with patients as long as necessary to stabilize their sobriety. Zweiben has suggested ways psychotherapy can help deepen work with the steps.
4. Help dual diagnosis patients understand AA's and NA's singleness of purpose. These programs work only with addiction; they do not try in any way to deal with other mental disorders. All patients have to say is, "I want to stop drinking or using drugs," and they will be welcomed and accepted at meetings (see Tradition 3). If they talk only about their psychiatric symptoms or medications, someone may suggest that they go elsewhere for help. Occasionally, well-intentioned AA or NA members tell patients to stop taking their medications.

The authors always direct patients to the pamphlet *The AA Member: Medications and Other Drugs*. This pamphlet tells AA members not to play doctor and to take the medications their doctors prescribe. Copies of the pamphlet are widely available at many AA meetings, or they can be ordered by physicians from *Alcoholics Anonymous World Services, General Service Office, Box 459, Grand Central Station, New York, NY 10163 (212-870-3400)*.

5. Get comfortable with the spiritual dimensions of healing. Zweber and Brown offer good suggestions for getting com

***The effects of spiritual practices on recovery from substance abuse.*** Carter TM, J Psychiatr Ment Health Nurs 1998 Oct;5(5):409-13

Twelve-step programs have stressed the importance of spiritual practices for over four decades. The spiritual principles embodied in the twelve-step programs may be key in their success of recovering addicts/alcoholics with an overall recovery rate of 34%. A literature search revealed little available data on spiritual principles and practices and their effects on long-term recovery from substance abuse. This study compared two groups of recovering addicts, those with one year of recovery and those with less than one year and a history of relapse. Spiritual practices were measured using a five-point Likert scale questionnaire. The results of the study indicated a relationship between spiritual practices and long-term recovery from substance abuse.

***Recovery from alcoholism: a spiritual journey.*** Bowden JW, Issues Ment Health Nurs 1998 Jul-Aug;19(4):337-52

The purpose of this study was to discover the internal aspects of change in persons who are doing well living without alcohol. The heuristic research method, a qualitative phenomenological design, was used to investigate the experience of recovery. Eight recovering alcoholics were interviewed in depth. The process of recovery reflected a mythological journey comprising a departure from the shadowland of drinking, initiation into the world of sobriety, and knowledge gained along the way. New adaptive strategies were acquired, including strengthening the will, training the mind, and exercising spiritual qualities in one's daily life. The profile of doing well in recovery also reflected self-acceptance and an ongoing search for connecting with the transpersonal realm.

***Researching the spiritual dimensions of alcohol and other drug problems.*** Miller WR, Addiction 1998 Jul;93(7):979-90

Although religions have been far from silent on the use of psychoactive drugs, and spirituality has long been emphasized as an important factor in recovery from addiction, surprisingly little research has explored the relationships between these two phenomena. Current findings indicate that spiritual/religious involvement may be an important protective factor against alcohol/drug abuse. Individuals currently suffering from these problems are found to have a low level of religious involvement, and spiritual (re)engagement appears to be correlated with recovery. Reasons are explored for the lack of studies testing spiritual hypotheses, and promising avenues for future research are discussed. Comprehensive addictions research should include not only biomedical, psychological and socio-cultural factors but spiritual aspects of the individual as well.

***Stories of spiritual awakening. The nature of spirituality in recovery.*** Green LL, Fullilove MT, Fullilove RE, J Subst Abuse Treat 1998 Jul-Aug;15(4):325-31

Substance abuse has had a devastating impact on the lives of millions. As substance use

and abuse continues to ravage communities, researchers remain in the dark about what works to ensure successful recovery from addiction. In searching for the answers, researchers have often overlooked the role of religious and spiritual practices and beliefs in preventing use and relapse. The study reported here describes the process of spiritual awakenings experienced by some persons in recovery during their quest for sobriety. The data suggests that persons in recovery often undergo life-altering transformations as a result of embracing a power higher than one's self, that is, a Higher Power. The result is often an intense spiritual journey that leads to sustained abstinence. Given how widespread substance abuse is, research on the nature, implications, and limitations of a spiritual approach to addiction might offer new options for treatment.