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The 12 Steps of Alcoholics Anonymous and Adults with Persistent Mental Illness: An Expressive Arts Therapy Method

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The 12 Steps of Alcoholics Anonymous and Adults with Persistent Mental Illness:

An Expressive Arts Therapy Method

Capstone Thesis

Lesley University

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Expressive Arts Therapies

Dr. Rebecca Zarate
The 12 Steps of Alcoholics Anonymous and Adults with Persistent Mental Illness:

An Expressive Arts Therapy Method

Abstract

The problem under investigation is the lack of structured spiritual expressive arts therapy (ExAT) interventions, addressed by use of the twelve steps of Alcoholics Anonymous (AA) outside of the addictions community. The 12 steps assist recovery, and the expressive arts assist the 12 steps in that endeavor. A person is often the last to realize that they have a problem; they might lack insight into their mental illness. This is the first step of AA – to admit powerlessness, or in other words, develop some insight. In conjunction with an AA based program, expressive therapy groups help patients experience and crystalize the first four steps of AA (Potocek & Wilder, 1989). An ExAT method was implemented exploring AA principles in an adult male inpatient psychiatric setting from mixed racial and ethnic groups. The method provided a manner to connect with and make sense of the first few of the twelve steps through the expressive arts, as applied to mental health recovery. The method offered a potential way of working clinically in expressive arts therapies to introduce spirituality tangibly in the mental health recovery process.
Introduction

This thesis method project explored ExAT and the 12 steps of AA with psychiatric illnesses other than substance use disorder. The only research on this subject is specific to dual-diagnoses, and not regarding mental health recovery (Green, Yarborough, Polen, Janoff, & Yarborough, 2015; Kelly, McKellar, & Moos, 2003). People with persistent psychiatric illnesses could benefit from a starting point for the spiritual part of their mental health recovery.

AA is a community of people who help each other achieve and maintain wellness through twelve steps. AA is used internationally for people with Substance Use Disorder by focusing on the spiritual component of recovery. Substance Use Disorder is a psychiatric illness and it’s seen as a ‘spiritual malady,’ or spiritual sickness, in AA (Historical Data: The Birth of AA and Its Growth in the U.S./Canada). That is, it is a disease of the soul. Treatments for other psychiatric illnesses do not use a structured way to facilitate the spiritual component of recovery. Spirituality is sometimes mentioned as an aspect of mental health recovery for psychiatric illnesses, but there is not an open method offered for clients and patients to follow for spiritual wellness, regardless of their belief system. The 12 steps offer a structured way to approach spirituality of all kinds; a Higher Power can be God, but it can also be anything more powerful than us, like nature or the universe (Alcoholics Anonymous, 2001).

The 12 steps are used and function outside of AA and addictions treatment. However, the research does not explore the use of the 12 steps with persistent psychiatric disorders. Persistent, severe, or chronic psychiatric disorders or mental illnesses include those which are distressing to the point of inpatient hospitalization. Ruggeri, Leese, and
Thornicroft (2000) define severe mental illness as a broad term for serious disorders sharing intense symptomology and impairment. This includes, but is not limited to, schizophrenia, bipolar disorder, major depressive disorder, schizoaffective disorder, substance use disorder, and personality disorders.

The lack of research on the 12 steps as a treatment method for this population creates a gap in the body of knowledge and needs to be explored further. The 12 steps are effective with dual diagnoses of Substance Use Disorders and other persistent psychiatric disorders, so the twelve steps of AA might be helpful for both disorders (Green, Yarborough, Polen, Janoff, and Yarborough, 2015). Green, Yarborough, Polen, Janoff, and Yarborough (2015) even stated that AA is beneficial for the mental health of those with ‘serious mental illnesses.’

Of the research that does exist, a focused study on the twelve steps of AA and comorbid mental illness demonstrates that the twelve steps of AA approach positively affect people from this population in their mental health recovery. Mental health recovery, as defined by Ruggeri, Leese, and Thornicroft (2000), is how people with persistent mental illness grow and have meaningful lives, which contribute to society, despite symptoms. The use the twelve steps of AA in ExAT open the possibility for healing for those in recovery from persistent mental illness. Individuals who have a persistent mental illness, not limited to those with dual diagnoses, might find using the arts to understand the twelve steps of AA beneficial. People with persistent psychiatric disorders need more treatment modalities to further their recovery and prepare them for personal growth in the world, including discharge from hospitalization programs.
ExAT focuses on the healing power of being creative. Some of the founders in the field, Knill and McNiff, focus on the artistic process as the therapy, and the responsibility of the expressive arts therapist to hold the space for that creativity. (Knill, Barba, & Knill, 2004; McNiff & McNiff, 2009; McNiff, 2015). The arts can be used in therapy as well. Specific arts interventions and exercises can aid with therapeutic goals and objectives.

I anticipate that this study will spotlight spirituality as informed by the twelve steps of AA, in combination with ExAT as an accessible and useful tool of recovery for people with persistent psychiatric disorders. I hope to learn more about how the arts can be used to facilitate spiritual healing. It is intended to contribute a concrete form of providing treatment to address the spiritual facet of recovery in the clinical practice of expressive therapies.
Literature Review

Historical Context

**ExAT.** ExAT uses the creative arts, including music, writing, drama, visual art, and movement, in relation to each other in mental health counseling. Knill, one of the founders of the field, connects the healing power of the arts in relation to each other with their ability to communicate with and heal the soul (Knill, 2004).

This is a treatment modality which may be beneficial when incorporated with the twelve steps of AA. For example, art therapy helps people understand and experience the second and third step. This means that art therapy assists people in both coming to believe in a Higher Power (step two) and surrendering their will to that power (step three) (Julliard, 1995; Alcoholics Anonymous, 2001). One study (Hanes, 2007) demonstrated that spontaneous self-portraits performed by addicted patients in an inpatient psychiatric hospital assist the patient to understand and admit that they have a problem which they are powerless over, which is the first step (Alcoholics Anonymous, 2001). Potocek and Wilder (1989) found that art and movement therapy was effective in 12 step treatments.

**AA.** The twelve steps of AA began in 1935 when two men with alcoholism named Bill Wilson and Dr. Bob Smith met after each being in contact with the Oxford Group, a Christian organization. This group taught them to incorporate relationships with God in their daily life. In community with each other, they achieved contagious sobriety. Wilson and Smith developed a sequence of twelve steps and twelve traditions to be followed to achieve sobriety and mend the “spiritual malady”, or spiritual sickness, of the mental illness of Substance Use Disorder (Historical Data: The Birth of AA and Its Growth in the U.S./Canada).
Expressive Therapies and AA

Much of the literature in the field of expressive therapies (music, drama, art, dance/movement, expressive arts therapies) relate the elusive nature of art making with its connection to spirituality. It engages people in a way verbal therapy might not. When the artist engages in the creative process with different art forms, she utilizes parts of her brain that might normally not be activated (Knill, Barba, & Knill, 2004; McNiff & McNiff, 2009; McNiff, 2015). In processing the twelve steps of AA, the expressive therapies have the potential to deepen the understanding and meaning of how to practice each step. The expressive arts therefore can deepen the understanding of the results of such a method. There are several key projects that have been influential for generating new knowledge about ExAT and twelve steps of AA.

Potocek and Wilder (1989) studied the experiences of patients in recovery from Substance Use Disorder in groups exploring the first four of the twelve steps of AA through art and movement therapy. Patients were ages 14 to 75 at an inpatient AA based 28-day inpatient program. The art and movement therapy groups were one hour twice a week, with groups of four to ten participants. Specific art and movement based interventions were implemented related to each step. Potocek and Wilder (1989) provided narrative descriptions of observations of individuals’ experiences and processes in the art making, along with images of the movement and the visual art. The researchers concluded that the art and movement therapy provided in these groups proved to be effective in treatment. I am interested in replicating some of the interventions used in this study with patients with persistent mental disorders, as the interventions are intermodal in nature. However, the Higher Power aspect is simplified to the peers in the group, which is
not align entirely with AA; I would find a way to open the intervention to think about the patients’ perception of their Higher Power.

**Program development.** AA is healing (Austin, 2016). Integrated dual diagnosis treatment programs tailored to address the complex intersection of mental illness and substance use are likely to be more effective than separate programs (Green, Yarborough, Polen, Janoff, & Yarborough, 2015). A person is often the last to realize that they have a problem; they might lack insight into their mental illness. A spontaneous self-portrait may reflect the individual’s effort to face their nature. It is often a candid reflection refuting the individual’s false sense of self and distorted worldview. Self-portraits enable the individual to confront painful realities and acknowledge ill effects of mental illness (Hanes, 2007). Art therapy and role-play interventions increase individuals’ beliefs in the first step (Julliard, 1995). Research evidence accumulated over decades indicates that individuals who become involved in AA have better outcomes in multiple domains of functioning (Kelly, McKellar, & Moos, 2003). In conjunction with an AA based program, art/movement therapy groups provided help patients experience and crystalize the first four steps of AA (Potocek & Wilder, 1989).

**Success of Earlier Studies.** One study (Hanes, 2007) demonstrated that spontaneous self-portraits performed by addicted patients in an inpatient psychiatric hospital assist the patient to understand and admit that they have a problem which they are powerless over, which is the first step (Alcoholics Anonymous, 2001). Potocek and Wilder (1989) found that art and movement therapy was effective in 12 step treatments.

For example, Austin (2016) phenomenologically studied AA using a grounded theory method. The author experienced meetings by attending and participating in them,
and then artistically processed her experiences after each group. Austin used that artistic data, along with interviews with participants, to inspire a musical. The goal of the musical was for the audience to empathize with addicts’ lived experiences. In the article, Austin includes poems from the initial data collection process. These poems, along with other notes, writings, and artistic responses, were coded into themes and characters to share stories through songs in the musical. Austin includes the script to the musical within the article. The script from the musical uses some of the exact phrases found in the included poetry from Austin’s raw data collection. The arts based research and performance inspires the possible data collection method for my thesis. I can record my impressions in the form of any artistic response, as Austin did, with the possibility of it organically forming a larger artistic presentation or performance.

There is not much known about individuals’ perspectives regarding their dual recovery experiences (Green, Yarborough, Polen, Janoff, and Yarborough, 2015). Most people with dual diagnosis address substance use as part of their mental health recovery. Learning about the effects of drugs and alcohol provide motivation for sobriety. Achieving sobriety helps people initiate mental health recovery process. Achieving and maintaining sobriety builds self-efficacy, confidence, functioning and a sense of personal growth. Sobriety is important to continued mental health recovery, and AA can be helpful for people with persistent mental illnesses. The twelve steps of AA will be beneficial for those in recovery from persistent mental illness (Green, Yarborough, Polen, Janoff, and Yarborough, 2015).

The expressive therapies (ET) increase belief in the first three steps of AA, significantly so in steps two and three (Julliard, 1995). Step one is to admit powerlessness
over problem, step two is to come to believe in a power greater to restore us, and step 
three is to surrender our will to God as we understood Him (Alcoholics Anonymous, 
2001). Expressive therapy significantly increases the belief in a higher power and assists 
in turning one’s will over to God (Julliard, 1995). Further research into the use of ExAT 
to process the first three steps of AA will be useful (Julliard, 1995).
Method

The method involved two groups, each one-hour long. The group consisted of adult males with persistent mental illness. Both groups focused on a specific step of the first four of the twelve steps of AA. Each step was addressed through Expressive Arts interventions inspired by the work of Potocek and Wilder (1989). Potocek and Wilder (1989) demonstrated that intermodal Expressive Therapy assists patients in crystallizing the first four steps of AA. This research guided the design of the method.

Group One

For the first group, an intermodal intervention was chosen, transferring between visual art making and creative poetry writing. The first AA step was described to the group members, along with the objectives of the group. Once an understanding was gained about this part, the second AA step was described and worked with. The procedure of the method included a) group members consider their favorite place in or part of nature and b) illustrate it with markers, pastels, and paint, c) list words associated with this image and place, d) complete a poem describing themes of identity with the prompt, ‘you are’ poem, like an ‘I am….’ poem. An ‘I am’ poem is an intervention used to move people to deeper insights about identity and value systems. With ‘I am’ poems, participants are given a series of the beginnings of statements, such as, ‘I am….,’ ‘I want…’, ‘I see.’ In the ‘You are’ poems, participants were given a sheet of paper with a series of ‘You are’ statements, some of which were ‘You are,’ ‘You want,’ ‘You say…’

Once this procedure was completed, group members were given these starting points to the lines of their own poems, written as a prayer to their Higher Power, God, nature, or specific piece of nature they illustrated. The group closed with sharing pieces and poems.
As part of exploring the potential value of this exercise, I followed the procedure and wrote a ‘you are....’ poem alongside group members, and created my own image immediately following the group, while writing down clinical notes and observations about the process on the back of my poem.

**Group Two**

The second group started with a discussion of step work and another ‘you are....’ poem. The individual needed to reach the paper circle and mark it with an art medium. This person would only receive the specific help they asked for, not more, to practice naming needs. Similarly, in my method, the individual was tasked with listening to the voice of another group member who instructed them to draw something, but only with specific objective instructions. This practiced turning the will over and trusting, resisting temptation to take control or to listen to other urges (Alcoholics Anonymous, 2001).

An intermodal expressive arts process and procedure of authentic artistic reflection was used as a way to track the process after each group (Austin, 2016). The art reflected on and processed the groups in the forms of color, image, shape, words, and poems. Themes from these entries were used to create an arts-based project to conclude and present the research. Immediately after both group processes, I followed the protocol from that group in my own art, including creating my own favorite place in nature, the ocean. I then completed an “I AM” poem for each group, and did some freewriting to continue processing what happened.
Results

The clinical artistic data that I produced from Group one and Group two were analyzed separately using inductive analysis techniques. Themes that emerged were categorized. Taken together, the group data were then translated into findings that could be applied to clinical practice.

Group One

With many steps and intermodal transfers in my process, I noticed that various people moved at different paces, which was fine and ran smoothly. It felt serene to be in the group. After the group, I reflected on the idea of people moving at their own pace and related it back to spiritual growth and mental health recovery. During the group, I wrote my own ‘you are....’ poem, and after, wrote my thoughts and feelings. I created my own response to the intervention. All writing and visual art are included below.

YOU ARE unconditional Love
YOU HEAR my secret thoughts
YOU WANT the best for me
YOU ARE working in me
YOU FEEL my feelings
YOU CRY when I cry
YOU ARE smiling down on me and inside of me
YOU UNDERSTAND my heart’s desire
YOU SAY only what’s true
YOU ARE the beginning & end

Different journeys
Paces

Rhythms

We grow at different speeds

Dependent on where you plant seeds

We all have varying needs

We all can get it.

We all can recover.

We all are lost & can be found. Make Your divine appointments with the receptionist.

God shot.

White light.

This is like what we were talking about at AA.

I use it for everything… all tribulations. We all have tribulations.
Figure A. Includes visual reflections on group one; a favorite place in nature, the ocean. “From sunrise to sunset, I will not forget… from sunset to sunrise, I will lift my eyes,” a quote from the song “Sunrise to Sunset,” by Paul Wright. (Wright, 2005).

Group Two

During this group, I observed that to accomplish the task I had given to group members; they needed to rely on each other. For me, that feels like they trusted each other, and even surrendered to each other and to the unknown by following instructions with the choice of swaying. Group members could connect the activity to mental health recovery, taking suggestions from others, and surrendering to a Higher Power. Sometimes it was difficult for the artists to remain patient to see the results through or interpret what they should do. There were two roles: artist and guide. The artist drew on the white board with the guide’s objective instructions to construct something specific. Guides were always patient with their artists, explaining in other ways if the artist did not understand the first time. I wrote after the group, along with adding to the piece from the previous group. I considered the idea of “the bigger picture” which came from the end of my writing, and created a bigger picture.

YOU ARE here, with me now and always.

YOU HEAR my thought life whether I like it or not.

YOU WANT me to be like You – fruitful & overflowing with Your Spirit, free of sin

YOU ARE letting me have the privilege of doing Your work.

YOU FEEL all the feelings I have ever felt & more?

YOU CRY with me, sigh with me

YOU ARE MY GUIDE, leading me
YOU UNDERSTAND me. I want to understand You.

YOU SAY I am washed clean

YOU ARE Beside me, inside me

Lead me, guide me, walk beside me.

Frustrating

What do you mean?

Patient. Patience.

TRUST in You.

Letting go, letting God.

You explain in different ways & wait for me to understand.

You connect with me in a special way.

Uncomfortable. New. I haven’t done this before, but I am proud I stuck it through. I am not a quitter.

Rely.

Sometimes I have to interpret Your word.

What you want. You see me. you have forsaken Him.

THE BIG PICTURE
Figure B. Includes visual reflections on group two; the big picture, extending the work from group one.
Figure C. Includes visual reflections on group 2 with my Higher Power’s name written.
<table>
<thead>
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<th># of times it appears</th>
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<tr>
<td>“You” (outside of structured “YOU ARE…”)</td>
<td>14</td>
</tr>
<tr>
<td>“I”</td>
<td>13</td>
</tr>
<tr>
<td>“Have”</td>
<td>7</td>
</tr>
<tr>
<td>“We all”</td>
<td>7</td>
</tr>
<tr>
<td>“My”</td>
<td>6</td>
</tr>
<tr>
<td>“Me”</td>
<td>6</td>
</tr>
<tr>
<td>“Sun”</td>
<td>4</td>
</tr>
<tr>
<td>“Different”</td>
<td>3</td>
</tr>
<tr>
<td>“Letting”</td>
<td>3</td>
</tr>
<tr>
<td>“Thought”</td>
<td>2</td>
</tr>
<tr>
<td>“Work”</td>
<td>2</td>
</tr>
<tr>
<td>“Feelings”</td>
<td>2</td>
</tr>
<tr>
<td>“Inside”</td>
<td>2</td>
</tr>
<tr>
<td>“God”</td>
<td>2</td>
</tr>
<tr>
<td>“Tribulations”</td>
<td>2</td>
</tr>
<tr>
<td>“Will”</td>
<td>2</td>
</tr>
<tr>
<td>“Do”</td>
<td>2</td>
</tr>
<tr>
<td>“Guide”</td>
<td>2</td>
</tr>
<tr>
<td>“Lead”</td>
<td>2</td>
</tr>
<tr>
<td>“Want” (outside of structured “YOU WANT…”)</td>
<td>2</td>
</tr>
<tr>
<td>“Understand” (outside of structured “YOU UNDERSTAND…”)</td>
<td>2</td>
</tr>
<tr>
<td>“Beside me”</td>
<td>2</td>
</tr>
</tbody>
</table>
Created poem from most used words:

Sunrise
I Let You Have Me
You Want Me
I Have Different Thoughts and Feelings Inside
We All Do
Tribulations Will Do Work
Lead Me
Guide Me
Beside Me
My God Understands
Sunset

Created poem with same frequency of most used words:

Sun rise
You Thought of Me
You Guide Me
I – we all – Thought I Wanted Me
You! I Want You, My Guide
You Lead Me
We all have Work Inside
We all Have Feelings
We all Have Tribulations
Different Tribulations, Different Feelings
My God, beside me
I don’t Understand Me
My Sun inside Me, My Sun Beside me
I Understand You Differently
We all do
I have You
We all have You
I have You
We all have You
My Sun, I –
I am Letting You, I –
I am Letting God, I –
I am Letting You Work, You Lead
Your Will, not My Will

<table>
<thead>
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<th># of times it appears</th>
</tr>
</thead>
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<tr>
<td>I/Me/My</td>
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<tr>
<td>You/God</td>
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<tr>
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<td>10</td>
</tr>
<tr>
<td>Verbs (have, letting, understand, want)</td>
<td>9</td>
</tr>
<tr>
<td>Nouns (sun, feelings, tribulations)</td>
<td>8</td>
</tr>
<tr>
<td>Prepositions (inside, beside me)</td>
<td>4</td>
</tr>
<tr>
<td>Adjectives (Different)</td>
<td>3</td>
</tr>
</tbody>
</table>
**Discussion**

The project involved bringing the twelve steps of AA as a way of treatment in mental health recovery, with the vehicle bringing this form of treatment being the expressive arts. Throughout the group protocol, I found myself playing “Synesthesia” by Bethel, an instrumental worship album (Bethel Music, 2015). I consistently opened the group with a reminder of what the group is about, what we have covered, the step we are covering that week, and what that means, especially for mental health recovery.

The group continues as an option for people on the unit to address spiritual needs. A new patient moved into the unit and asked specifically for a group on spirituality. Because this group was in place, the unit could offer it to him as a resource. The group has since become small, but consistent, encouraging peer support, telling stories and sharing encouragement for real spiritual issues – including when a group member relapsed and was having trouble forgiving himself. This is the kind of fellowship offered in AA, but brought to a new setting and through ExAT (Historical Data: The Birth of AA and Its Growth in the U.S./Canada).

**Relationship and Recovery**

Repeated words found in my reflections after each group included, mostly, ‘You’ (talking to God), and ‘I.’ Other words were relational between these two subjects. I am translating the results into findings by relating the frequencies of the words back to themes. The words that came up the most were related to the relationship with a Higher Power. The poetry and imagery showed the benefits and potential of this method to be thinking about that relationship in a genuine and vulnerable way. This supports Julliard’s (1995) findings that art therapy assists people in both coming to believe in a Higher
Power (step two) and surrendering their will to that power (step three) (Julliard, 1995; Alcoholics Anonymous, 2001); focusing Higher Power, especially in surrender, is very intimate and relational in nature.

The impact of focusing on relationship is very powerful and obvious here with these results:

- “You” (outside of structured “YOU ARE…”) 14
- “I” 13
- “Have” 7
- “We all” 7
- “My” 6

The results are symbolic of an individual’s journey towards actualization. To actualize real relationships and manifest what they look like and feel like through the artistic process has been a striking characteristic of the words in the frequency charts. This supports Knill’s (2004) ideas that the arts connect with the soul in a relational way.

This suggests a very personal nature to the relationship with God, and a deep, personal, relational nature to this work. It points to the healing work being within a relationship with God, which is what sets AA apart from other sobriety programs (Historical Data: The Birth of AA and Its Growth in the U.S./Canada).

**Art process and Meaning Making**

In the artistic processes and presentations, it was clear that the concepts were understood and meaningful to the members. The thought processes on paper sometimes made more sense than the thought processes they verbalized. In their I AM poems, which I include an example of my own, they become vulnerable in praying to God, describing
how they understand Him, along with their relationship with Him, and how he helps them. This is even deeper than what Knill says, that the arts communicate with and heal the soul (Knill, 2004). These findings shed new light to Knill’s insights (2004) in that, not only do the arts communicate with the soul, but provide a means for the soul to communicate with its creator.

**Relevance for use in Expressive Therapies Treatment**

The identification transformations that occurred with relational constructs to Higher Power strengthens arguments that this method is useful in treatment (Potocek & Wilder, 1989), and that the twelve steps of AA are beneficial to those in mental health recovery (Green, Yarborough, Polen, Janoff, and Yarborough, 2015). This experience supports the argument that ExAT has the potential to increase belief by utilizing the various steps of AA (Julliard, 1995).

This method contributes towards a structured form of using spirituality in the clinical practice of expressive therapies. It also provides a possible starting point for those struggling with starting or sustaining the journey of mental health recovery. The method has the potential to be explored further with more specific populations of diagnoses within persistent mental illnesses.
References


THESIS APPROVAL FORM
Lesley University
Graduate School of Arts & Social Sciences
Expressive Therapies Division
Master of Arts in Clinical Mental Health Counseling: Expressive Arts Therapy, MA

Student's Name: Dena Kohner

Type of Project: Thesis

Title: The 12 Steps of Alcoholics Anonymous and Adults with Persistent Mental Illness: An Expressive Arts Therapy Method

Date of Graduation: 5/19/18

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: R. Zanite