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## 1. What is the purpose of these briefing papers?

This briefing paper is the third in a series. The first two are now available online:

1. [Briefing paper 1: Motivational Interviewing](#) (pdf)
2. [Briefing paper 2: Gay men – risky sex and drug use](#) (pdf)

Each paper focuses on an individual topic such as an intervention type or a specific target group of clients. The briefing papers will provide:

1. a short overview of the topic, produced with input from an expert
2. links to the best evidence-based research and findings from the [Skills Hub](#), the [Drug and Alcohol Research Matrices](#) and elsewhere
3. a wider resources section which contains less formal materials such as toolkits, news articles and videos.

They will be useful for any practitioner working in drug or alcohol treatment. Some will also be useful for service-managers.

## 2. What is mutual aid and how does it work?

Mutual aid is typically provided outside formal treatment agencies and is one of the most commonly travelled pathways to recovery. Mutual aid groups come in many different types, with the most widely provided being based on 12-Step principles, for example Narcotics Anonymous and Cocaine Anonymous. Other forms include SMART Recovery, Intuitive Recovery and locally derived peer support networks.

Engagement in peer-support for those in recovery can be encouraged by practitioners looking to help change behaviour and improve outcomes. NICE clearly recommends that the benefits of these groups can be further enhanced if keyworkers and other staff in services facilitate contact with them, for example by making an initial appointment, arranging transport or possibly accompanying patients to the first meeting and dealing with any subsequent concerns. These interventions can be of benefit to a wide range of people at different levels of the care and treatment system.

Practitioners may well themselves benefit by attending open mutual aid meetings when appropriate to further their understanding of how they work.

### 3. How can the Skills Hub and the Drug and Alcohol Matrices help me?

1. Skills Hub: [Turning evidence into practice: helping clients to access and engage with mutual aid](#) – National Treatment Agency

The first in a series of briefings to support commissioners and providers who want to improve the recovery orientation of their services as recommended by 'Medications in recovery: re-orientating drug dependence treatment', the final report of the John Strang-chaired Recovery Orientated Drug Treatment expert group.

2. Skills Hub: [Adult alcohol users: Volume 1 – 12-Step Facilitation Therapy Manual of Project MATCH](#) – National Institute of Alcohol Abuse and Alcoholism

Describes 12-Step facilitation therapy where the overall goal is to facilitate patients' active participation in the Fellowship of Alcoholics Anonymous. The therapy regards such active involvement as the primary factor responsible for sustained sobriety ('recovery') and therefore as the desired outcome of participation in this treatment program. This therapy is grounded in the concept of alcoholism as a spiritual and medical disease.

The manuals in this series are the result of the collaborative efforts of the Project MATCH investigators and are used as guides by the therapists involved in the trial. They are presented to the alcohol research community as standardized, well-documented intervention tools for alcoholism treatment research.

3. Skills Hub: [William White on treatment and mutual aid](#) - Film Education on Alcohol and Drugs

William White (Senior Research Consultant, Chestnut Health Systems) talks about the boundaries between mutual aid and treatment, and the work that needs to be done on 'role definition'.

4. Skills Hub: [Annette Dale-Perera: Looking Ahead 3: Mutual aid and the role of 12 steps](#) - Film Education on Alcohol and Drugs

Annette Dale-Perera talks about support, mentoring and mutual aid – particularly their ability to improve treatment outcomes and offer non-drug related social activities.

5. Skills Hub: [MAAEZ: making alcoholics anonymous easier](#) – Public Health Institute

MAAEZ is a six session group format 12-Step Facilitation Programme. This is a manual to support the group facilitator to deliver an effective group intervention. It is intended that at least one of the leading group facilitators has direct on-going 12 Step experience. MAAEZ was developed for use within the US treatment system and certain areas will need careful adaptation for use in the UK context.

The sessions are designed to be run on a weekly basis for 90 minutes duration with a 10 minute break. MAAEZ primarily focuses on Alcoholics Anonymous but also lends itself to supporting access to other 12-Step meetings. The primary aim of the group programme is to equip service users with an understanding of what they might experience in an AA or other 12-Step meeting, to address any

reservations service users might have to accessing this form of mutual aid. The group is not a 12-Step intervention in itself.

6. Matrices: [12-step mutual aid promises to plug the recovery resources deficit](#) – Drug and Alcohol Findings

This Findings Hot Topic page offers an overview of the 12-step model and how it might be used in times of economic hardship to provide cost-effective support. It also leads through to a Findings search on all the evidence and research on the site connected to 12-step.

7. Matrices: [The Alcohol Concern SMART Recovery Pilot Project final evaluation report](#) - Macgregor S, Herring R (Middlesex University, 2010)

This offers an overview of a SMART pilot in conjunction with Alcohol Concern. The pilot aimed to test whether non 12-step mutual aid can flourish and become self-sustaining with a view to facilitating take-up by areas across England. The overview offers multiple findings and conclusions from the pilot.

8. Matrices: [A randomized controlled trial of intensive referral to 12-step self-help groups: one-year outcomes](#) - Timko C, DeBenedetti A (Drug and Alcohol Dependence, 2007)

This study implemented and evaluated procedures to help clinicians make effective referrals to 12-step mutual aid groups. In this randomised controlled trial, 345 individuals with substance use disorders starting a new non-residential treatment episode were randomly assigned to a standard or intensive referral to 12-step groups. Compared with patients who received standard referral, patients who received intensive referral were more likely to attend and be involved with 12-step groups across the first and second six months of the follow-up period, and improved more on alcohol and drug use outcomes over the year. The authors concluded that intensive referral was associated with improved 12-step group attendance and involvement and substance use outcomes.

9. Matrices: [Peer-based addiction recovery support: history, theory, practice, and scientific evaluation](#) - White W.L. (Great Lakes Addiction Technology Transfer Center and Philadelphia Department of Behavioral Health and Mental Retardation Services, 2009)

This monograph is seventh in a series on recovery management and recovery-oriented systems of care and synthesises knowledge about the history, theoretical foundations, methods, and scientific status of peer-based recovery support for individuals with the most severe and complex alcohol and other drug problems. It was written primarily for people directly involved in planning, funding, delivering, supervising, and evaluating peer-based recovery support services, but will also be of interest to policymakers, purchasers of care, treatment programme administrators, addiction counsellors and other service professionals. Though rigorously researched, information is presented in a clear and accessible language.

## 4. Which wider resources can help me?

### 1. [The Big Book](#) – Alcoholics Anonymous

This seminal book originating in 1939 was written by the founders of AA, Bill W and Dr Bob, and has sold over 30 million copies to date. It covers how the 12-step method can be used and is furnished with personal stories and anecdotes. The Big Book had been updated and modernised and is now in its fourth edition and available in multiple languages.

### 2. [Paul O. "Acceptance is the Answer"](#) – Odomtology 12 Step Recovery Media

This is a comedic speech on a serious topic by Alcoholic Anonymous speaker Dr. Paul O. He talks about the 12-step recovery programme and its effects, and explains what it is like being an alcoholic.

### 3. [Self-help - don't leave it just to the patients](#) (pdf) – Keith Humphreys (Drug and Alcohol Findings)

This useful paper argues “self-help is so important that professionals should intervene to promote and support it and can do so without undermining self-help principles”. It offers evidence and a rationale to support this argument, as well as some top findings and points for practice.

### 4. [Alcoholics Anonymous: Cult or Cure?](#) (pdf) – Chaz Bufe

This book offers some opposing claims on AA and as well as discussing the disease model of alcoholism covers how AA is marketed and other models of recovery allegedly suppressed.

### 5. [Terminology and Mutual Aid engagement](#) (pdf) – Richard Phillips

This paper has been produced by Richard Phillips, the director of SMART Recovery, and aims to create debate and discussion on the terminology used around mutual aid and the varying roles of practitioners and peer supporters. It suggests that a previously agreed nomenclature would lead to a greater clarity in communication.