

PATHWAYS BETWEEN RELATIONAL SPIRITUAL PROCESSES, AA SPONSORSHIP
ALLIANCE, AND SPONSEE RECOVERY GOALS

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ABSTRACT

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This study contributes to research on Alcoholics Anonymous, a mutual help organization that is concerned with helping individuals who identify as alcoholics to maintain sobriety through a spiritually-based 12-step program. Specifically, 134 AA members, termed in this dissertation as “sponsees,” reported on relational spiritual processes between them and their current sponsor, including sanctification, spiritual intimacy, spiritual mediation, and spiritual one-upmanship. Sponsorship alliance was assessed as a dependent variable and mediator. Criterion variables included abstinence self-efficacy, craving for/obsessions with alcohol (termed “subjective experiences”), individual spiritual well-being, and emotion regulation skills. Hypotheses were partially supported. Greater sanctification, spiritual intimacy, and spiritual mediation were linked to stronger sponsorship alliance. Greater sanctification and spiritual mediation were uniquely tied to higher levels of spiritual well-being, and greater spiritual one-upmanship to lower abstinence self-efficacy after controlling for relevant demographic variables. Sponsees who endorsed a stronger sponsorship alliance also reported higher abstinence self-efficacy and spiritual well-being based on bivariate correlations and regression analyses. Additionally, the sponsorship alliance partially mediated the relationship between spiritual mediation and spiritual well-being. Bootstrapping was used for atemporal mediation analyses. The findings from the present study suggest that the three positive relational spiritual processes provide unique windows into how spirituality exists in and is tied to strength of the sponsorship bond. Spiritual one-upmanship may also be a risk factor for building abstinence self-efficacy. Sponsorship alliance could play a mediating role in a sponsee’s spiritual well-being goals. Implications of this study will be discussed.

I dedicate this dissertation to the members of Alcoholics Anonymous: Thank you for spending your time and energy informing me and psychological science about your AA journey, especially as it relates to your spiritual and sponsorship experiences. I know that your spirituality and close AA relationships are personal, special, and unique to you, which makes the information you've provided all the more privileged. I hope that I did well by you, not just in reflecting AA as an organization and program, but also by attempting to thoughtfully measure and synthesize your experiences as individuals so that we, as a clinical field, may better support you and those who seek your help. Your participation made it possible for me to add to the current body of knowledge that seeks to understand the nuts and bolts behind how AA works and how it doesn't – from a scientific perspective. While this project produced some compelling findings, it also left me with complex questions concerning the dynamic interplay of all the choices AA members make daily to maintain sobriety. I sincerely look forward to advancing my work in this field, should you continue to be willing to share your experience.

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Given the nature of this dissertation, as a final tribute, I feel compelled to end these notes thanking my connection to God, my own special relationship with a Higher Power. This spiritual energy has been with me in every moment as a friend and confidante, and whether I knew it or not, as the invisible glue keeping me in lock step mentally, physically, and spiritually on this doctoral path. My entire journey, and especially this research study, would not have been possible without the insights gained from prayer and meditation, contemplation with God and on spiritual reading and writings, and striving for my own spiritual development along the way.

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INTRODUCTION

“Alcoholics Anonymous is a fellowship of people who share their experience, strength, and hope with each other, so that they may solve their common problem and help others to recover from alcoholism. Our primary purpose is to stay sober, and help others achieve sobriety.” – AA

Preamble (AAWS, July 2021)

“A common problem with a common solution” is how Alcoholics Anonymous (AA) describes its 12-step program in a condensed soundbite (discussed in Chapter 2, p. 17, *The Big Book*, 2001). AA is a mutual help and 12-step recovery organization that was co-founded in 1935 by Bill Wilson and Dr. Bob Smith and relies heavily on the *Big Book* authored by these individuals and the first members of AA. AA is founded on the disease model of addiction, which heavily incorporates the belief that addiction stems from a spiritual malady, and therefore requires a spiritual solution for living free from substances. AA is estimated to have over two million members worldwide (AA World Services, 2018).

Shortly after the inception of Alcoholics Anonymous (AA) in 1935, major theoretical and empirical controversies over its effectiveness at solving the “common problem” of alcohol use disorders produced great skepticism and debate. The controversy stemmed from the fact that AA as a treatment for alcoholism was not created by educated and professional clinical scientists. Instead, it was founded and developed by ordinary people suffering from alcohol addiction who were continually failed by medical and psychological interventions (*The Big Book*, 2001). AA was not born from rigorous methodological design; it was not set up to be experimental, mechanized, or manualized by clinical professionals nor developed in such a way as to be compared to other substance use disorder (SUD) treatments. It was not created so that addiction researchers could easily identify its therapeutic components and substantiate AA—

scientifically—as a legitimate treatment option for patient referral. Instead, AA founders and its members simultaneously began a social movement and an extremely cheap, long-term treatment program for alcohol addicted individuals. Its rapid growth in membership led to intensive inquiry from the scientific community regarding how best to evaluate its utility, especially given that AA is a relatively closed off and self-protected community. It is easy to understand why studying AA has required great effort on the part of clinical scientists and why growth in this research literature base has been slow, though progressive.

Initial outcome studies on the overall effectiveness of AA were reviewed multiple times by various investigators who found mixed results and for good reason (see Tonigan, Toscova, & Miller, 1996; Emrick, Tonigan, Montgomery, & Little, 1993; Institute of Medicine, 1989). These reviewers heavily criticized the first 20 or so years of AA research, delineating how research up to that point lacked sound methodological practices, in that a bulk of studies were unable to provide strong internal and external validity. In short, it was difficult at that time to substantiate the positive or negative empirical findings associated with the effectiveness of the AA program. Eventually, however, methodologies were overhauled in later studies so that the field could more firmly establish the utility of and potential treatment referral to AA (see Ouimette, Moos, & Finney, 1998; Project MATCH Research Group, 1997; Ouimette, Finney, & Moos, 1997). By the early 2000's, AA as a treatment modality for alcoholism began to gain more consensual respect within the addiction research community, at which point research efforts were directed more toward understanding the finer elements or activities within the 12-step program that are fundamental to its success. Today, this work is still evolving. Nevertheless, AA is now accepted as an established and formidable resource for individuals seeking to recover their physical and mental health from the deleterious effects of alcohol addiction (see APA, 2006; Kaskutas, 2009;

Kelly, Magill, & Stout, 2009). The American Psychiatric Association documented their support for community 12-step programs like AA as early as 2006 by listing 12-step interventions as an effectual route to helping solve the mental health crisis of addiction (APA, 2006). As a group, mental health researchers and professionals have acknowledged the power and utility of AA without completely understanding it, which speaks to the clinical fascination many have acquired with the culture and program of AA.

Despite this recognition and praise, there are still important research gaps concerning how AA facilitates long-lasting change through participation in its various activities. One particularly fruitful area of research on AA that has been in periodic development since the early 1950's concerns the functional importance of sponsorship. Though it's assumed and suggested that AA members develop multiple supportive relationships in the AA community, the primary bond unanimously deemed responsible for helping AA members successfully adjust to sobriety and "work" the AA 12-step program is sponsorship (AAWS, 1983). Sponsorship is a helping relationship between two people, whereby one member is the helper or guide who typically has more time sober, has completed the 12-step program, and is actively involved in AA. Since sponsors are given the role of helping sponsees adopt a "new way of life" (p.99, the Big Book), they play a "key recovery-specific role" for their sponsees (Kelly, Green, Bergman, Hoepner, Slaymaker, 2016). According to AA, general sponsor duties include meeting with the sponsee regularly to read the Big Book together, taking the sponsee through the 12-steps in a consecutive and thorough manner over time, and being available for frequent support and guidance (AAWS, 1983).

Literature from AA provides suggested guidelines for sponsoring individuals. First, sponsorship is founded on a sponsor providing non-judgmental and empathic responses to the

sponsee's disclosures, while also engaging in purposeful self-disclosures about their own experiences. Thus, the sponsorship connection relies on the sponsor sharing their own "experience, strength, and hope" (AAWS, 1983) by relating their familiarity with alcoholism and tying it to the sponsee's current dilemmas on how to get and stay sober using the AA program. A sponsor's self-disclosure is used with the intent of providing an understanding of the sponsee's problem and potential corresponding solutions that allow the sponsee to "pick up" recovery tools instead of a drink. When a sponsor lacks experience with a particular problem, they might use another person's de-identified life story to relay a solution. The sponsor may also help set up channels of communication between the sponsee and another AA member who has had a similar experience, and therefore, a credible solution that relies on thinking or behaving differently from the sponsee's first and usually "misdirected instinct" (p. 42, Twelve and Twelve). Lastly, the sponsor may refer to a relevant section of the AA literature to help clarify the sponsee's issue and then suggest options for how to handle it (AAWS, 1983). In essence, sponsors are the human (rather than literary) resource tasked with helping the sponsee develop the psychological, social, and spiritual changes necessary for long-term recovery as outlined in the organization's two main texts, namely, the Big Book of Alcoholics Anonymous (2001) and the Twelve Steps and Twelve Traditions (Twelve and Twelve, 1953).

According to AA, sponsors are instrumental in helping the sponsee develop a personal sense and practice of spirituality by way of the sponsee building a connection with a "Higher Power" (i.e., God, universal power, spirit of the universe). This Higher Power can vary in how it is construed or experienced. AA is relatively flexible in people forming psychological attachments to a "Higher Power" that range from theistic deities to nontheistic transcendent forces (e.g., Spirit of the Universe, Great Spirit, Nature), any of which can vary in how personal

the Higher Power is for each individual who experiences this relationship. Regardless of one's conception of a Higher Power, AA's basic text, the Big Book, is explicit in its central purpose: to keep members sober by helping them connect to a power greater than themselves through working the 12-steps (pp. 25, 45, 56-60, 75, 83 of the Big Book mention this primary purpose). A direct quote from the Big Book illustrates this succinctly and firmly:

“Lack of power, that was our dilemma. We had to find a power by which we could live, and it had to be a Power greater than ourselves. Obviously. But where and how were we to find this Power?”

Well, that's exactly what this book is about. Its main object is to enable you to find a Power greater than yourself which will solve your problem. That means we have written a book which we believe to be spiritual as well as moral.”

(p. 45)

Thus, the primary texts suggest the steps are moral because each of them is designed with a principle or virtue in mind (e.g., humility, love, service, honesty, self-awareness). These steps are also considered spiritual because by acting in line with these principles, the sponsee is connecting to their Higher Power, which is thought of as the primary source of power that facilitates sobriety. It is the spiritual purpose of the 12-steps that is most emphasized in AA literature. This means that each step helps the sponsee to simultaneously build character (i.e., virtue, principle) while tying that character building to one's relationship with a Higher Power, making these two processes fused in the steps. More specifically, developing spiritual awareness and perspectives on life concerning sense of self and day-to-day functioning is achieved when sponsees ask themselves questions like, “What is God's will for me?”, “Who would God have me be?”, “What would God have me do?; it is also achieved when they implement spiritual

practices that build a relationship with a Higher Power, like when in prayer or meditation, or through a written inventory (i.e., reflection) that assesses how well they applied spiritual principles to their life in order to obtain answers to these questions. By taking each step then, the individual cultivates effective strategies on how to maintain access and connection to their Higher Power, which is the spiritual source that “solves” their alcoholic problem.

Given that a sponsor is tasked with taking a sponsee through the 12-steps, this human-divine relationship is a vital topic covered in sponsor-sponsee interactions. The Big Book appears methodically designed to both aid the sponsor in guiding the sponsee as well as directly gives general instructions to the sponsee on how to proceed on creating a relationship with a Higher Power. As the sponsor and sponsee discuss each step and its associated spiritual principle, the sponsor is integral in helping the sponsee learn what that principle means, how to practice it, and what personal barriers may be involved when trying to live each one out day-to-day. Naturally then, part of a sponsor sharing their experience, strength, and hope is disclosing their own personal journey from addiction to recovery. This sharing includes how they developed a relationship with a Higher Power, addressed their own personal barriers to spirituality, and came to discern where, when, and how to implement spiritual principles on a regular basis that they believe is imperative to successful recovery. In sum, the spiritual discussions between a sponsor and sponsee appear to be goal-oriented in the direction of helping the sponsee develop “along spiritual lines” (p. 80, Big Book), with the ultimate hope that creating and maintaining a connection with a Higher Power will result in the sponsee’s ability to stay sober.

Despite the empirical progress that has been made connecting “being sponsored” to a greater likelihood of abstinence, the degree to which the sponsorship relationship is characterized

by spiritual processes has not been empirically examined. Likewise, it is unknown whether these dyadic spiritual experiences contribute to the strength of the sponsorship alliance and a sponsee's recovery outcomes (e.g., abstinence-related variables, spiritual growth through the 12-steps, emotion regulation). This significant void in addiction research is likely a result of two related methodological factors. First, the literature review for this study revealed that researchers in the addiction field are evaluating an AA member's progress and success in AA using only the individual as the entity of analysis, thus neglecting that AA is set up as such that a sponsee's relationship with a sponsor is inseparable from the individual's progress. Second, because of this hyper-focus on individuals, spiritual processes that are relational have gone unexplored, while individual spiritual processes, such as frequency of prayer or having spiritual purpose in life, have been assessed for their ties to abstinence and emotional well-being and have shown mixed results.

More specifically, research concerning the function of spirituality in AA has been limited to individualistic indicators of spirituality, mostly global spiritual practices such as frequency of prayer and meditation (Montes & Tonigan, 2017; Wilcox, Pearson, & Tonigan, 2015; Tonigan, Rynes, McCrady, 2013; Kelly, Stout, Magill, Tonigan, & Pagano, 2011), though some studies have assessed other intrapersonal forms of spirituality, such as purpose in life and spirituality as a personality trait (Krentzman, 2017; Ando, 2016; Oakes, 2008; Zemore, 2007). One of the latter studies (Zemore, 2007) measured "experienced a spiritual awakening" and greater involvement in R/S behaviors at baseline and 12 months, creating a "spiritual change" variable, and found that both acted as partial mediators between 12-step involvement and abstinence. Contrastingly, a more recent literature review (Kelly, 2017), compared certain spiritual mediators, such as individual spiritual practices of prayer, reading scripture, and meditation, to non-spiritual

mediators (e.g., abstinence self-efficacy, adaptive social network changes) to examine how much variance each mediator accounted for in abstinence outcomes. The investigator found that these global indicators of an AA member's spiritual practices did not perform as robustly for all individuals compared to the other mediators and as AA claims it should. A conclusion was drawn that spirituality may be helpful for individuals with "more severe addiction histories" (p. 932). A couple of researchers have suggested that if it's important to the field to uncover more proximal spiritual processes and/or better understand how individuals recover in AA through use of spirituality, then they need to make relationships a primary entity of analysis as well (Young, 2011; Pearce, Rivinoja, & Koenig, 2008). Given that sponsorship is key in helping facilitate a sponsee's sobriety through use of the spiritually-based 12-steps, researchers will continue to struggle in understanding important spiritual processes that facilitate recovery if the various intersections between AA relationships, such as sponsorship, and spirituality go unexamined. The present study endeavors to address these critical empirical gaps.

The present study assessed the prevalence and impact of four specific relational spiritual processes – sanctification, spiritual intimacy, spiritual mediation, and spiritual one-upmanship – as they occur in the sponsorship relationship, as well as the degree to which such relational experiences were tied to sponsorship alliance, and lastly, whether or not the sponsorship alliance partially mediated the link between relational spiritual processes and the recovery outcomes of abstinence self-efficacy, craving for/thoughts of alcohol, spiritual well-being (i.e., connection to a Higher Power and practicing spiritual principles promoted by AA), and emotion regulation skills. Each of the four dyadic spiritual processes are considered relational because they are either perceptions of the sponsorship relationship (e.g., sanctification) or behaviors that occur between sponsor and sponsee (e.g., spiritual intimacy, spiritual mediation, spiritual one-

upmanship) that could be tied to the way a sponsee perceives or behaves within the relationship, for better or worse.

Goals and Objectives

The overarching goal of this dissertation project was to extend theory and research on understanding how specific spiritual dyadic perceptions and behaviors may be linked to desired progress in Alcoholics Anonymous. There were four primary objectives supporting this goal:

Objective #1: To assess the extent to which spirituality is manifest in the sponsorship bond using relational spirituality measures that focus on the dyadic exchange between sponsor and sponsee. This objective yields prevalence rates concerning the proximal spiritual variables of sanctification, spiritual intimacy, spiritual mediation, and spiritual one-upmanship as they may occur in the sponsorship relationship as reported on by the sponsee.

Objective #2: To assess the degree to which these four relational spirituality processes are directly linked to the quality of the sponsorship alliance, for better or worse.

Objective #3: To assess the extent to which these four relational spirituality processes are directly linked to recovery goals in line with AA's texts, including abstinence self-efficacy, craving for/thoughts of alcohol, a sponsee's spiritual well-being with particular attention paid to a sponsee's connection with a Higher Power and their practicing of spiritual principles, and emotion regulation skills.

Objective #4: To assess the extent to which sponsorship alliance is tied to the four recovery goals, as well as if sponsorship alliance mediates the relationship between the four relational spirituality processes and the four recovery goals.

Literature Review

An empirical void in the research on being sponsored, the sponsorship alliance, and a sponsee's recovery goals or outcomes concerns the possible role of spirituality as emphasized by AA. This is likely because the field of psychological science is still finding it difficult to understand how spiritual mechanisms function in the treatment of alcoholism within this self-help community (Kelly, 2017; Kuerbis & Tonigan, 2017; Dermatis & Galanter, 2016). In order to provide contextual background for this study and then address these critical research gaps, the literature review will begin with a section on AA's background, including AA as an organization and spiritual program, followed by an elaboration on the functional and relational importance of sponsorship according to AA, and lastly, two sections on what is empirically known about the effects of being sponsored on a sponsee's recovery outcomes. Then, the empirical void in research tying sponsorship to spirituality will be addressed, followed by a final section on how to permeate these empirical gaps by using the Relational Spirituality Framework (RSF) from the field of The Psychology of Religion and Spirituality. Lastly, the present study, along with its findings, is presented and discussed.

Alcoholics Anonymous

AA as an organization and spiritual program. AA is a mutual help and 12-step recovery organization that was co-founded by Bill Wilson and Dr. Bob Smith in 1935 (for more history on AA beginnings, please see Appendix A). Since the inception of AA, its co-founders and first members labeled alcoholism "a disease," though the organization does not conceptualize alcoholism from the same "disease model" that the medical or psychiatric communities might assume. The Diagnostic and Statistics Manual-V (DSM-5) defines problematic drinking as a substance use disorder (SUD) that is a "pattern of alcohol use" causing

“significant impairment or distress” and that may be marked by at least 2 of 11 symptoms listed under the diagnostic criteria (pp. 490–497, American Psychiatric Association, 2013). The DSM-5 also provides severity specifiers of mild, moderate, and severe, which are chosen based on the number of symptoms present at the time of assessment. The diagnostic criteria symptom list includes withdrawal, tolerance, alcohol cravings, alcohol usage despite the trouble it causes psychologically, at work/school, legally, or interpersonally, and that “despite knowledge of having a persistent” problem with alcohol, one continues to use.

Different portions of these criteria are mentioned in AA literature, but AA simplifies their definition of alcoholism as three-pronged. First, alcoholism is an allergy to alcohol (p. xvii, Big Book), whereby once one drink enters the body of an alcoholic, it triggers an insatiable craving to continue drinking that the individual is powerless over. This “phenomenon of craving” (p. xvii, Big Book), they write, has never been “permanently eradicated” (p. xx, Big Book) in anyone afflicted by it, which is why they suggest “entire abstinence” as part of the AA program (p. xx, Big Book). The second part is that alcoholism is a “mental obsession” where, even when alcoholics have the rational sense that they cannot drink normally, they find themselves obsessing about their next drink so much so that “drink planning” becomes “more important than any other plans” (p. 350, Big Book). These two prongs of alcoholism actually fit quite well within the DSM-5 framework. Where AA diverges from the DSM-5 is important. The third prong of alcoholism is that it is a spiritual malady according to AA (p. 64, Big Book). This label is not mentioned in the DSM-5 and has been a point of contention in the empirical field of addiction since AA’s inception. As a spiritual malady, alcoholism not only occurs when an alcoholic takes a drink or is obsessing about their next drink, but also rests in their extremely self-centered orientation to life, while sober or intoxicated, due to lacking a relationship with a

Higher Power and not living according to spiritual principles emphasized in the 12-steps. It is the belief and proposition of AA that the character trait of extreme self-centeredness could not be reduced “much by wishing or trying on our own power” (p. 60, Big Book). This means that, despite their human- and self-willed attempts to change themselves or their drinking habits, without spiritual help an alcoholic will regress back to self-centered ways of thinking, feeling, and behaving as well as addictive drinking patterns, often to the detriment of their relationships and other important domains of functioning. AA is not entirely clear on whether self-centeredness sets in *after* becoming addicted to alcohol or the degree to which this character flaw was present prior to one’s first sip of alcohol. Several stories in the narrative section of the Big Book, along with Bill’s story in the first chapter, allude to self-centeredness and a spiritual malady being present in the individual prior to active addiction. The Big Book, however, also provides examples of other types of alcoholics, after which it concludes that individuals should decide for themselves when and how self-centeredness became their primary orientation to life as well as how their self-centeredness relates to their spiritual malady (p. xix, Big Book). Nevertheless, AA is clear that once individuals cross the line into alcoholism, permanent cessation from alcohol and a spiritual aide as lifelong treatment is necessary to recover. The inability to recover on one’s own or by “human aid” (p. 24, Big Book) is why AA suggests that one must develop a relationship with a Higher Power, have “a spiritual awakening as a result of the steps” (p. 60), and continue to live a spiritual way of life that maintains a “daily reprieve” (p.85) from active alcoholism. Thus, the steps are spiritual because the principles that underlie them are considered spiritual standards by which AA members are taught to measure their recovery progress. This self-assessment includes frequently examining their thoughts, behaviors, and interactions with others and then deciding whether the degree to which these intrapersonal

and interpersonal experiences are (a) consistent with AA's spiritual principles, and (b) either connecting them to or disconnecting them from their Higher Power. There is a difference then, between purely moral standards and spiritual ones. While both are marked by discerning what is right and just, spiritual standards have an added component of being connected to something more than humans dealing with each other's moral compasses. Spiritual standards involve one's connection to a spiritual source and what that person deems as their spiritual compass.

The 12-steps are the spiritual compass for AA members because they are thought to be in line with how a Higher Power would want each individual to carry themselves in their day-to-day life. By acting in line with these spiritual standards, the individual experiences a connection to their Higher Power. When struggling or failing to uphold these standards, AA members may have a range of experiences from uncomfortable to painful discordance or may feel as if they have violated their spiritual identity. They could even feel their behavior was a violation against their Higher Power or Higher Power's will for them. They might experience a sense of separation between them and their Higher Power because of their misbehavior. If these experiences occur, they could be accompanied by negative affect and distressing cognitions related to the spiritual conflict. It's important to understand what this could mean for recovering alcoholics who follow the AA program as a path to both spirituality and sobriety. The consequence of an obstructed connection to one's Higher Power or spiritual way of life is an ominous warning according to Alcoholics Anonymous. It is a disconnect that needs to be remedied at once, lest the individual be on the road to relapse. When discussing steps 11 and 12, the Big Book affirms the interdependency among one's relationship with a Higher Power, one's assessment of spiritual fitness as defined by AA, and remaining abstinent:

“It’s easy to let up on the spiritual program of action and rest on our laurels. We are headed for trouble if we do, for alcohol is a subtle foe. We are not cured of alcoholism. What we really have is a daily reprieve contingent on the maintenance of our spiritual condition. Every day is a day when we must carry the vision of God’s will into all of our activities. ‘How can I best serve Thee—Thy will (not mine) be done.’ These are thoughts which must go with us constantly. We can exercise our will power along this line all we wish. It is the proper use of the will.” (p.85)

Regardless of whether God or the perception of spiritual properties in objects and relations is ontologically provable, the individual who feels they have violated a spiritual standard, or their Higher Power may feel that their relationship with that Higher Power is in jeopardy or that they are cut off from what they believe to be a spiritual experience in life. Possibly of more immediate concern is that one has cut themselves off from the source that keeps them sober. If experienced, these human-Divine struggles have the potential to open up a world of interrelated negative affect, stressful cognitions, and subsequent behavior changes, for better or worse, that are solely related to the spiritual aspect of a particular misbehavior or a failure to practice a principle. This means that a person may need to cope with more than psychological or relational conflicts, but also with spiritual conflicts requiring spiritual solutions that address the spiritual nature of the potential or real violation of their standard for living. This is relevant and important in AA as its literature states that growth, maintenance, and restoration of this spiritual connection with a Higher Power is imperative to maintaining abstinence. According to AA, it is only when “the spiritual malady is overcome” that alcoholics “straighten out mentally and physically” (p. 64, Big Book). Getting and staying sober, then, is contingent on this spiritual solution, or what AA

terms keeping in “fit spiritual condition” (p.85). For more information and examples from AA literature on how each of the 12 steps is spiritual, please see Appendix B. This appendix provides evidence through the use of AA passages that describe AA as a spiritual program upon which sobriety is built, not a program with a spiritual component. There is no step in the Big Book or Twelve and Twelve that goes without reference to one’s conception of or relationship with a Higher Power, or without tying the steps to practicing spiritual principles.

The disease of alcoholism and the spiritual solution is outlined in the organization’s “basic text,” the Big Book (first edition, 1939; fourth and most recent edition, 2001), as well as in their second popular and oft referred to as an important additional text, “The Twelve Steps and Twelve Traditions” (Twelve and Twelve, 1953). The core of the Big Book is considered its first 164 pages and has not been altered in any meaningful way since its creation in 1939. The core of the Big Book delineates the general cognitive, affective, behavioral, and spiritual deficits responsible for the addiction dilemma and then prescribes 12-steps for how to effectively solve it. These steps are the essential tenets of AA, which the text suggests each member should adopt as a “new way of life” (p.124) should they label themselves an alcoholic and want to “fully” (pp. 30 & 386) recover from their addiction. For reference throughout the rest of this review and to help readers understand just what is meant by “tenets,” “way of life,” and “principles” of AA, the short-form of the 12-steps are listed here with the spiritual principles that represent each step put in parentheses:

1. We admitted we were powerless over alcohol—that our lives had become unmanageable. (*honesty*)
2. Came to believe that a Power greater than ourselves could restore us to sanity. (*hope*)
3. Made a decision to turn our will and our lives over to the care of God as we understood Him. (*faith*)
4. Made a searching and fearless moral inventory of ourselves. (*courage*)

5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs. (*integrity*)
6. Were entirely ready to have God remove all these defects of character. (*willingness*)
7. Humbly asked Him to remove our shortcomings. (*humility*)
8. Made a list of all persons we had harmed, and became willing to make amends to them all. (*self-discipline*)
9. Made direct amends to such people wherever possible, except when to do so would injure them or others. (*love for others*)
10. Continued to take personal inventory and when we were wrong promptly admitted it. (*perseverance*)
11. 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. (*spiritual awareness/spirituality*)
12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs. (*service*)

While guidelines and suggestions for working each step is covered in the Big Book, they are further elaborated upon in the Twelve and Twelve (1953). This other popular text was written by co-founder Bill Wilson and is a collection of essays that provide in-depth interpretations of AA's twelve steps and twelve traditions. The half of the Twelve and Twelve that discusses the 12-steps elaborates on the psychological, social, and spiritual dilemmas that each step helps recovering alcoholics to solve in sobriety.

Newcomers to AA who have a desire to stop drinking and relate to AA's description of an alcoholic are not meant to read these two texts and practice their suggestions on their own accord. AA literature suggests that relying on supportive close connections with other AA members in order to "grow along spiritual lines" (p. 80) is paramount to longevity in sobriety. AA texts point readers to AA relationships time and again when outlining how positive psychological, social, and spiritual changes are to be made that bring individuals out of addiction

and into recovery. Explicitly, AA has only recognized one particular relationship within the fellowship as essential to maintaining recovery, and that is the bond created through sponsorship.

AA sponsorship. AA as an organization has a broad communal base (i.e., the fellowship) which is similar to the structure of religious organizations. AA, however, also emphasizes forming and sustaining close dyadic relationships with other AA members, such as by getting and then being a sponsor to other AA members once one has achieved a sufficient amount of progress and maturity in one's own sobriety journey. It is within the close, personal relationship of sponsorship that the sponsee's unique set of cognitive, affective, behavioral, and spiritual barriers to sobriety are assessed and then broken down through formally working the 12-steps over time. These regular sponsor interactions assist sponsees as they gradually build their competencies in practicing healthier habits. At the pace of one phone call or private meet-up at a time, a sponsee is able to pursue a sponsored direction and arrive at favorable, adaptive resolutions – a framework for living sober one day at a time.

More specifically, sponsors seem to take sponsees through the 12-steps using AA literature, during which each individual in the dyad shares a great deal of personal information concerning their own self-concepts, judgments of others and the world, their spiritual past and path, and how their internal and external experiences—such as their thoughts, feelings, relationships, circumstances, failures, and successes—have coalesced across time to shape their personhood in adaptive or maladjusted ways. In this way, sponsors are often the first confidante of a newer member. They are expected to be the designated person whom a sponsee can trust with very personal, often painful self-disclosures. The following paragraphs will delineate how sponsors appear to take sponsees through the 12-steps.

In step one, sponsors help the sponsee assess the degree to which they relate to AA's definition of alcoholism. Sponsors may help sponsees decide whether they can "concede" (p.42) to two propositions outlined in the Big Book: if they consider themselves an alcoholic and whether or not they can admit personal defeat and powerlessness over alcohol by committing to move forward with the rest of the 12-steps. In steps two and three, the sponsor and sponsee are in intimate discussions regarding one's relationship, if any, with a Higher Power. Chapters addressing these two steps in the Big Book discuss things like what it means to have faith, where faith has been misplaced and misunderstood, prejudices against religion, resentments toward God or issues with any spiritual belief system, and the extent to which the sponsee is willing to develop a workable conception of a Higher Power and begin practicing a spiritual way of life (pp. 44–63).

Steps four and five serve as the catalyst for intimate sharing of a very personal kind. These steps suggest that a sponsee make a structured and thorough list of every resentment they have towards others and then share it with their sponsor. With guidance from their sponsor, this list is meant to elucidate the sponsee's unhealthy or unwise patterns of thinking and behaving that have sustained active alcoholism. The point of such an arduous task is emphasized in the Big Book. The literature explains that the purpose of step four—writing down such an inventory—and step five—sharing it with someone else—helps a sponsee to (a) build insight concerning their maladaptive cognitive and behavioral cycles, (b) become mindful of and responsible for their personal triggers related to potential relapse or experienced "powerlessness" over alcohol, and then (c) make mental space to consider different, healthier thoughts and behaviors to develop in recovery (pp. 72–88). The ultimate goal of these two steps is to understand where their self-centered thinking has caused disturbances in both their relationships with others and in their

connection with a spiritual source that is meant to keep them sober. Across AA's texts, it is made unequivocal that this painstaking inventory must be aired to another human being—usually one's sponsor—or their work will not lead to the personal and spiritual transformations necessary for maintaining sobriety. The final paragraphs of the Big Book chapter covering step five indicate that disclosing one's "moral inventory" to another person is a life-changing experience: "Once we have taken this step, withholding nothing...we can look the world in the eye. We can be alone at perfect peace and ease...We may have had certain spiritual beliefs, but now we begin to have a spiritual experience. The feeling that the drink problem has disappeared will often come strongly...We feel we are...walking hand in hand with the Spirit of the Universe" (p.75). Given that the sponsor is an integral part of such a sensitive re-evaluation process, the sponsor is quite instrumental in helping the sponsee properly examine the degree to which their current ways of thinking and behaving are congruent with or eroding to a recovery way of life.

As the sponsee reveals their moral inventory (step 5), they're likely to be saturated with compassion by the sponsor (AAWS, 1983)—for who better understands and relates to such misguided attempts at living and the consequential loss of quality of life due to the insanity of alcoholism. The sponsor's role at this point is to communicate that the sponsee's suffering is not unique nor helpless but rather common and changeable in recovering alcoholics. As the sponsor discloses their own corresponding alcoholic "war stories" and then contrasts them with their current healthier lifestyle, their intimate sharing establishes relatability—a "me too" sentiment shared between them both (p. 46, Twelve and Twelve). This relatability serves to reduce the sponsee's personal shame and sense of being uniquely flawed, put their past in perspective, and instead, foster hope for the real possibility of a different way of life by working the 12-steps.

In steps six and seven, the sponsee finalizes a list of “character defects” drawn directly from their 4th and 5th steps (e.g., dishonesty, gluttony, greed), and then proceeds to make an amends for them in steps eight and nine to all people the sponsor and sponsee decide have been harmed by the sponsee. It’s important to note that there are specific 3rd and 7th step prayers, and not only do sponsee’s read them in the literature, but they have been referenced, at least in one AA newsletter, as a joint prayer activity with a sponsor: “John remembers kneeling with his sponsor in the visiting room and saying the Third and Seventh Step prayers oblivious to anyone who may have questioned the unusual sight (p.7, AAWS, Box 459, 2018). The importance of delineating character flaws in steps 6 and 7 is that these flaws tend to maintain the spiritual malady and are thus risk factors for drinking again. Once these character defects are known, the sponsee now has the ability to reflect on their past thoughts and behaviors, with the help of a sponsor, and decide how those defects have caused problems in their lives which require making amends to others. The sponsor’s role in steps eight and nine seems to be to help the sponsee categorize their amends, make them appropriately, and of course, provide their experience, strength, and hope regarding their own 8th and 9th step processes (pp. 76–84).

In steps 10 and 11, sponsees are encouraged to begin their day by keeping in mind who their Higher Power would have them be and what their Higher Power would have them do, contemplating throughout the day the degree to which they are practicing spiritual principles (pp. 84–88). At these step junctures, it appears that sponsors might help sponsees learn how to take daily moral inventories, what AA terms “spot-check inventories” (p.90, Twelve and Twelve) and involve their Higher Power in the process. Practicing the 10th step (principle of perseverance) may mean that the sponsee consults with their sponsor about their efforts at changing character defects (principles of willingness and humility) and whether or not they need to make amends

for harm done (principles of love and discipline): “Then there are those occasions when alone, or in the company of our sponsor or spiritual adviser, we make careful review of our progress...” (p.89, Twelve and Twelve). The sponsor may then help the sponsee, if they haven’t done so already, with how to pray, meditate, continue developing a “conscious contact with God,” and incorporate these spiritual practices and principles into their everyday strivings.

Lastly, the 12th step is concerned with two notions. First, the sponsee is preparing to become a sponsor themselves, which compared to other AA activities, AA purports that “nothing will so much insure immunity from drinking as intensive work with other alcoholics” (p.89, Big Book). Thus, reading sections on step 12 in AA texts concerns how to sponsor successfully.

Second, the 12th step is also concerned with the sponsee making a commitment to continue practicing the principles behind the steps, one day at a time, for the rest of their lives. In this step, the sponsor may provide suggestions and assistance on how to sponsor other members, keep “spiritually fit,” and maintain sobriety over time. In sum, since the steps are spiritual in nature, the sponsor not only helps the sponsee make the suggested psychological and social changes, but helps them connect those changes to the sponsee’s own development of spiritual well-being. Again, this includes building and maintaining a relationship with a Higher Power of their own conception, learning to regularly practice spiritual principles, and relaying to others just how their spiritual fitness is intimately linked to staying sober.

A note on how this researcher came to understand the sponsorship relationship. As you can glean from just these few pages on how the sponsor and sponsee create a bond through use of the 12-steps, sponsorship is an important part of the fellowship and AA program, so much so that most of AA’s texts reference using a sponsor. Fascinatingly enough, the Big Book does not actually use the term “sponsor” in its core pages because this text was written and published

before sponsorship was adequately defined. Nevertheless, the idea and practice of sponsorship has been established since the beginning of AA (AAWS, 2015). In the Twelve and Twelve (1953), Bill mentions the term sponsor 20 times, while other times he used labels like spiritual guide, advisor, or helper. In an AA newsletter, one member noted that “sponsorship is the silent legacy of our Fellowship, given to us by those who went before us. It can spell the difference between survival and stagnation” (p. 4, AAWS, Box 459, 2019). Further, when visiting the AA website, this researcher typed in “sponsor” to search the database for information on sponsorship. In newsletters alone, 362 results appeared, some of which were sifted through for the present study. Lastly, there are multiple AA pamphlets that cite sponsorship. Because the sponsor’s role is not always explicit, however, I have used careful wording such as “may” and “might” throughout this section, mostly when discussing steps ten through twelve, since the role of sponsors or spiritual guides are mentioned less. Instead, AA writings gives 12-step directives to the consumer of the texts (i.e., the sponsee) and only occasionally notes the importance of seeking information or guidance from other AA members or one’s spiritual guide. Thus, although merely reading the Big Book can make it difficult to infer fully the sponsor’s role, references and the depth of writing on sponsorship from multiple AA sources has led this researcher to be reasonably confident in identifying the critical role of the sponsor and how a sponsor might guide a sponsee through the Big Book.

Empirical Literature on Being Sponsored and a Sponsee’s Recovery Outcomes

Most of the quantitative empirical literature on how being sponsored affects a sponsee’s recovery has assessed sponsorship as a categorical event using the single item of checking yes or no in the box “Do you have a sponsor?” or “Do you engage in sponsor contact?” on self-report surveys. The first subsection of this literature review therefore deals with summarizing and

drawing inferences from these studies. But are sponsorship relationships for all the sponsee's who check "yes" in the sponsorship box the same? While decades ago, some researchers conducted qualitative work that detailed the differences that can exist in sponsorship quality, it's only recently that a handful of researchers have attempted to quantify relationship quality between a sponsor and sponsee. They've done so by examining how the sponsee's perceptions of the strength of the sponsorship alliance is related to the sponsee's recovery outcomes. The second subsection of this literature review will discuss these latter studies and their promising findings.

Research that uses categorical indices of "having a sponsor." A 1993 meta-analysis was performed on 107 studies assessing what was currently known about AA at the time, 16 of which correlated AA activities with drinking outcomes, and only four of the 16 looked specifically at sponsorship (Emrick et al., 1993). Investigators found that having a sponsor was the second largest predictor of better abstinence outcomes ($r=.26$) when compared to sharing or leading a meeting, frequency of meeting attendance, sponsoring others, doing 12-step work, and having worked steps 6-12 (range of r 's for these activities = $.07-.23$). The only predictor that performed better than sponsorship was "increased AA participation" ($r=.29$) as measured by comparing initial self-report of AA participation to a later assessment of such involvement. In this study, however, "increased AA participation" could encompass multiple AA activities, including the use of one's sponsor. Thus, the relative size of the correlation between this comprehensive index of AA activities and better drinking should be interpreted with caution when compared to the correlation between one specific AA activity (i.e., sponsorship) and drinking outcomes. One study from the meta-analysis was examined and is illustrative of the importance of the sponsorship relationship when compared to the practice of other specific AA

activities. Out of seven AA activities reported on by relapsers and non-relapsers, not utilizing one's sponsor was one of the top two distinguishing activities that predicted whether or not a member relapsed in the last two years (Sheeran, 1988). Overall, these meta-analysis findings are consistent with the ubiquitous saying in AA to "first get a sponsor and then work the steps."

Studies published after Emrick et al.'s (1993) meta-analysis have corroborated these findings, showing that amidst other possible AA activities, either having a sponsor or talking with a sponsor were critical to feeling emotional and functional support for or actually maintaining abstinence over time. Concerning abstinence, a handful of these investigations have connected an earlier rating of being sponsored to a greater likelihood of abstinence at a later time point (Johnson, Finney, & Moos, 2006; Kaskutas, Bond, & Delucchi, 2012; Kingree & Tompson, 2011; Subbaraman, Kaskutas, & Zemore, 2011; Tonigan & Rice, 2010; Witbrodt & Kaskutas, 2005). All but one of these six studies (Witbrodt et al., 2012) maintained methodological parameters of assessing individuals who were enrolled in some kind of SUD treatment program as opposed to recruiting from the AA community (e.g., a VA program, in-patient or out-patient, private or public) and followed them for only the first year of their sobriety with the goal of collecting data to track their 12-step involvement and recovery outcomes (N's ranging from 182 to 3,698). While not all studies from this list compared sponsorship to several other AA activities, Witbrodt & Kaskutas (2005) found that, compared to other AA activities, such as considering oneself an AA member, reading AA literature, engaging in AA service, reporting to have had a spiritual awakening, or relying on other members for help, having a sponsor was the only predictor of abstinence at both 6- and 12-month follow-ups. Tonigan and Rice (2010) controlled for AA involvement, AA attendance, treatment variables (e.g., intake SUD severity), and motivational factors (e.g., readiness for change) and found that having a

sponsor was still three times as likely to predict abstinence around 6 months sober. A complex finding from this study was that being sponsored at 9 months no longer predicted 12-month abstinence rates, possibly suggesting a change in sponsorship significance, sponsorship quality, or other unknown or unstudied factors. Johnson, Finney, and Moos (2006) found that, across 15 inpatient VA centers, continuing care options like the degree of participation in AA, was more predictive of abstinence than treatment effects alone. For example, they found that maintaining abstinence was partially mediated by patient reports of “having a sponsor” from 9-12 months sober in the year after treatment, though it was also partially mediated by two other AA activities (i.e., attending 12-step meetings and reading 12-step materials).

Two studies compared the predictive power of attendance versus sponsorship on later abstinence rates. One study found that sponsorship at 3 months predicted abstinence at 6 months, whereas meeting attendance failed to predict abstinence at any time point (Kingree and Thompson (2011)). The second study conducted by Witbrodt and colleagues (2012) went beyond both methodological parameters of assessing treatment-seeking individuals within the first year of sobriety, by instead assessing individuals at 1, 3, 5, and 7 years after baseline using a sample that consisted of treatment-seeking individuals *and* AA members from the general population in a Northern California County. They compared sponsorship to attendance effects on abstinence by classifying sponsorship, attendance, and abstinence into high, low, and descending classes across multiple time points and found that higher rates of sponsorship predicted better abstinence rates regardless of frequency of attendance at meetings. Additionally, members in the descending class of sponsorship were more likely to be in the descending abstinence class.

Concerning outcomes other than abstinence, a small number of studies on “being sponsored” assessed psychosocial outcomes related to recovery, while no studies examined

spiritual markers of sobriety at a single time point or over time. These three studies were drawn from AA communities rather than treatment samples. Two cross-sectional studies found that having a sponsor was tied to a perceived increase in social support specific to staying sober (N=100 sober living residents; Majer, Kason, Ferrari, Venable, & Olson, 2002), while one of these studies also connected sponsorship to perceived greater total support, which included availability, practical, emotional, as well as sobriety-related support (N=125; Rush, 2002). As reported on in Young's (2008) dissertation, Van Leer et al. (2003) conducted a three-phase longitudinal study and found that long-term emotional quality of life was predicted by sponsorship, but also by relationships with other close 12-step members. Young indicated that these investigators noted that studying a sponsor's impact on emotional quality of life was complex, in that being sponsored did not have a significant impact on a sponsee's current emotional state, but was important for long-term adaptation, such as helping reduce anger and resentment over time.

Quantitative research on the differences in sponsorship quality. While the aforementioned studies only assessed whether or not an AA member was sponsored, the three studies reviewed in this section quantitatively examined the sponsor-sponsee relationship quality and its impact on the sponsee's recovery. Aside from one quantitative study that assessed attachment styles to sponsors in 1995, investigators are just recently examining how specific differences in sponsorship may better distinguish recovery outcomes. Two of the three studies assessed individuals in the AA community and one recruited treatment-seeking individuals. In 1995, Miller conducted a quantitative investigation on self-reported attachment styles to sponsors and found that AA members felt more secure and comfortable with closeness with their sponsor's than they did other people inside and outside of AA. They also felt that their sponsors

were less likely to abandon or reject them compared to other AA members and other people in general. A perceived secure attachment to their sponsor was beneficial for their recovery, in that it was linked to less risk of relapse, less psychological distress, and greater life satisfaction when compared to sponsee's who reported an insecure attachment to their sponsors.

Almost 15 years later, more investigations were conducted regarding the quality of the sponsorship alliance. The first investigators to pick up this work again, Ello and Moser (2003), adapted the Revised Helping Alliance Questionnaire (HAQ-II) to assess the strength of the sponsorship bond (as cited and discussed in Young, 2008). The HAQ-II asked questions pertaining to trust, reliability, respect, likeability, dependence on, collaboration with, extent of agreement on problems and solutions, and closeness between sponsor and sponsee as reported on by the sponsee. They found that a strong sponsorship alliance was related to a sponsee's abstinence, and further, that out of 18 relapsers, all reported lower alliance scores and 13 of them did not have sponsors at the time of relapse. Kelly, Greene, and Bergman (2016) adapted a different measure, the Working Alliance Inventory, and created the Sponsor Alliance Inventory (SAI) to assess the strength of the bond between sponsor and sponsee and its effect on the sponsees recovery progress. At 3-, 6-, and 12-months post-treatment, the investigators assessed if young adults had a sponsor, had contact with a sponsor, the strength of the sponsorship alliance, and how those indicators were linked to AA meeting attendance, 12-step involvement, and abstinence. Throughout follow-up, on average, greater contact with a sponsor and a stronger alliance predicted 12-step participation and abstinence. Further, the more that a sponsee contacted their sponsor, the greater likelihood that they engaged in more 12-step involvement over time, whereas a stronger sponsorship alliance was linked with "increasingly greater abstinence" over time. This study established that while "having a sponsor" is beneficial, effects

on outcomes may differ depending on the degree of sponsor utilization as well as the strength of the sponsor-sponsee alliance.

In all, these three studies have initiated the process of examining sponsorship beyond categorical indicators, and instead, by finding nuances in the sponsor-sponsee bond of those who report being sponsored that provide a more detailed picture of how it relates to recovery outcomes.

Critical Research Gaps

The empirical studies on sponsorship have argued a strong case that being sponsored has important consequences for a sponsee's recovery. Three critical and related research gaps can be gleaned from the sponsorship literature review. First, factors that contribute to the strength of the sponsorship alliance are unknown. Second, completely void of mention in these studies concerns the role of spirituality, and more specifically for this study, the role of dyadic spiritual processes, in predicting the sponsorship alliance. Third, the extent to which the sponsorship alliance can account for spiritual well-being (i.e., relationship with a Higher Power and practicing spiritual principles) and emotion regulation skills is unknown even though both are mentioned as primary indicators of recovery progress in AA, and the latter of which is popularly termed "emotional sobriety" (Bill Wilson, 1958). These research gaps are interesting given AA's central focus on developing along spiritual lines, becoming emotionally grounded, and doing so with the help of a sponsor.

I am not the first to show interest in and suggest studying the intersection between sponsorship and spirituality and how it may be tied to recovery outcomes. A specific chapter in the 2008 handbook for alcoholism and recovery (Pearce, Rivinoja, & Koenig, 2008, Chapter 11) advocated that individual health in AA should be interpreted through the interconnected

dimensions of a bio-psycho-social-spiritual model (p. 206). The authors stated that AA members must rely on sponsors, a relationship with their Higher Power, and support from others in the AA community in order to stop drinking and remain abstinent when confronted by challenges to their sobriety and in the building of character. This allows us to acknowledge two things: (1) interpersonal connections may help facilitate outcomes – which we now know to be true given the literature on sponsorship, and (2) there are likely relationships among spirituality, interpersonal connections, and important recovery outcomes. This chapter as well as others in this volume do not appear to address just how those relationships exist; however, another researcher has taken it a step further by calling for empirical investigations into the importance of the relational aspects of AA – both spiritual and human relationships – in predicting an individual's recovery progress.

Young (2011) posited that the bulk of AA research has conceptualized and measured an individual's recovery in ways that over-focus on intrapersonal processes and outcomes, like motivation for staying sober and engaging in prayer, but more importantly, that this isn't necessarily the way AA conceptualizes recovery. He argued that, when people enter AA, their identity is meant to be reframed as relational, whereby sponsees must learn how to restructure their individual identities to have a greater interpersonal or relational emphasis and to do so with the help and support of other AA members. Thus, not only is the goal related to relational progress, such as building a relationship with a Higher Power and healthier relationships with others, but so is the intervention – that of sponsorship – which facilitates it. When tying together a relational identity, spirituality, and recovery outcomes, Young (2011) makes two suggestions to researchers interested in rightly conceptualizing and examining AA's mechanisms of change: to measure an AA member's ability to maintain healthy interpersonal relationships, such as one

with a sponsor, and to measure spirituality as an on-going dynamic and relational process, like one's relationship with a Higher Power, rather than as a "static [spiritual] belief" or practice. It follows that researchers may be more likely to predict abstinence rates over time when assessing recovery progress using relational terms, especially given the findings that being sponsored – a relational construct – more reliably predicts abstinence over intrapersonal factors like completing step-work, engaging in service, or frequency of meeting attendance, prayer, and meditation.

The interpersonal emphasis is ripe throughout the 12-steps. As can be recalled from an earlier section, a sponsor not only helps a sponsee connect to a Higher Power in steps one through three, but in the 4th and 5th steps, the sponsor and sponsee engage in an intimate relational process as the sponsee discloses their moral inventory – a list that is interpersonal in nature given that its content concerns resentments towards others. These ill-feelings and misperceptions that led the sponsee to treat others poorly are part of their interpersonal identity and are finely delineated in these steps in order to pinpoint errors in how they relate to others. Even the 6th and 7th steps are based in the sponsees relational identity since the character defects discussed and prayed about (i.e., 7th step prayer) are drawn from the list of that individual's resentments. When steps 8 and 9 are approached, the sponsee has a detailed list of their harms to others and the sponsee is directed to make amends to those individuals. A short section of the Big Book that discusses step nine cover this relational emphasis masterfully:

“The alcoholic is like a tornado roaring his way through the lives of others. Hearts are broken. Sweet relationships are dead. Affections have been uprooted. Selfish and inconsiderate habits have kept the home in turmoil. We feel a man is unthinking when he says that sobriety is enough. He is like the farmer who came up out of his cyclone cellar to find his home ruined. To his wife, he

remarked, ‘Don’t see anything the matter here, Ma. Ain’t it grand the wind stopped blowin’?’” (p.82).”

In this short paragraph, AA is implying that, because alcoholics are extremely self-centered, they lived their lives in a state of denial by undermining other people’s feelings and perceptions and pretending their actions and drinking habits have had no effect on loved ones. This state of denial is an act that must be kept up to continue living a self-centered and alcoholic lifestyle. Prior to this quoted section, the Big Book acknowledges that the alcoholic’s maladaptive relational identity enables their alcoholic identity: “The primary fact that we fail to recognize is our total inability to form a true partnership with another human being.” (p.53). The 12th step is largely fixed on the interpersonal: the sponsee is to carry the AA message to others by sharing their experience, strength, and hope, work with their own sponsees or do service for others in AA, and continue living the spiritual principles each day. All these actions allow them to maintain and deepen a practice of being both other-centered and Higher Power-centered – and each of these are relational concepts. Thus, by going through the 12-steps, the individual is removing the self-centered beliefs and behaviors “blocking” them from relationships with others and a Higher Power and is learning instead how to be in harmony with and useful to others through a relationship with a sponsor. Given this layout, it’s possible that spiritual processes may be evidenced within these interpersonal exchanges between sponsor and sponsee.

One such way of initiating a line of research that focuses on both the spiritual and the relational is to study relational spiritual processes occurring in the sponsorship relationship. Another empirical place to spotlight spirituality is in examining if the sponsorship relationship predicts a sponsee’s individual spiritual well-being as described by AA. A greater task would be to assess if their sponsorship alliance partially mediates the relationship between relational

spiritual processes and important recovery goals, like personal spiritual well-being marked by a close relationship with a Higher Power, but also abstinence self-efficacy, cravings for/thoughts about alcohol, and emotional regulation skills given AA's focus on all four of these as indicators of successful recovery. The present study seeks to address each of these empirical gaps. The next section will draw on one specific spiritual framework from the field of the Psychological Science of Religion and Spirituality (R/S) to provide structure to the relational spiritual processes that may be present in sponsorship.

Relational Spirituality Applied to the Sponsorship Bond

A small, but strong body of research that's been growing over the last 20 or so years concerns spiritual processes as they occur in or apply to relationships and how they might be tied to relational and individual well-being, for better and for worse (Mahoney, 2013; Mahoney, 2010). The bulk of research in the psychology of religion and spirituality (R/S) examines individual spiritual practices, such as how prayer, meditation, or scripture reading is connected to intrapersonal matters (e.g., subjective emotional well-being, character attributes). On the other hand, relational spirituality is concerned with day-to-day spiritual experiences or processes that are intrinsic to or formed in significant relationships between the self and supernatural entities or other people. In order to organize and promote the study of spirituality from an interpersonal perspective, Mahoney (2010) developed an empirical "relational spirituality framework" (RSF), which involves the spiritual interpersonal processes tied, for better or worse, to creating, maintaining, and transforming valued connections with others. This framework consists of three tiers: (1) one's relationship with God/Higher Power (i.e., the sacred core), (2) one's relationship with a significant other, and lastly, (3) one's relationship with a spiritual community. This framework has helped interested researchers conceptualize and develop measures on proximal

spiritual processes that often seem elusive or invisible, such as how an individual applies what they read in scripture to their relationships. Although RSF encompasses research that links general or distal indicators of spirituality (e.g., frequency of religious attendance) to relational well-being, emerging research highlights that in-depth investigations of constructs within Tiers 1-3 tended to yield more robust associations with outcomes. Perhaps more importantly, these nuanced assessments of specific psychospiritual processes help disentangle adaptive and maladaptive manifestations of spirituality. This, in turn, yields scientific findings about specific spiritual perceptions, attitudes, and motivations that may be more useful for prevention and intervention programs aimed to enhance interpersonal and personal functioning that targets people's thoughts about and behavior with others. The relational spirituality framework is presented in Appendix C.

Relational spirituality fits incredibly well with AA's worldview, the centrality of an alcoholic's relationships with a Higher Power (Tier 1), the practice of sponsorship (Tier 2), and with the AA community more broadly (Tier 3). A simplistic way to understand this framework is to imagine that the relationship with a Higher Power is at tier one because that is the spiritual source that is typically characterized by spiritual properties (e.g., timeless, boundless, connectivity, sacredness, highest love; Mahoney, 2013; Mahoney & Pargament, 2005). It is then from that sacred entity or conception (e.g., God, Spirit of the Universe, Nature) that spiritual properties can emanate to human relationships and be perceived to exist in them; and in this case, the human relationship is the sponsorship bond. It is also within tier two that dyadic spiritual behaviors take place, such as discussing spiritual matters that might concern one's relationship with a Higher Power (tier 1), what one believes the Spirit of the Universe has planned for their life, or where one is struggling to understand God's will (all of which are discussions about tier 1

or the connection between tier 1 and tier 2 or 3). Regarding sponsorship, AA literature encourages spiritual conversations such as these to occur between the two to with regularity. This dissertation focuses on tier two of the relational spiritual framework. It is concerned with the extent to which dyadic bonds, and in this case sponsorship, can be experienced as having spiritual properties or ways that sponsor-sponsee dyads bring spiritual matters into conversation, which in turn, may be tied to aspects of relational and individual functioning and well-being.

Research from tier two of the Relational Spirituality Framework (RSF). Mahoney and colleagues have been able to illuminate specific interpersonal spiritual processes in parent-child dyads, spousal and dating relationships, and recently, in close friendships. Moreover, the degree to which these dyadic R/S processes occur in important dyadic relationships have been linked to various indicators of healthier interpersonal well-being. In this dissertation, I extend the literature concerning relational spiritual processes to the sponsor-sponsee relationship. More specifically, the four spiritual processes of interest that may be occurring in sponsorship include sanctification, spiritual intimacy, spiritual mediation, and spiritual one-upmanship, and how they may be tied, for better or worse, to the health of the sponsorship alliance and a sponsee's recovery progress.

Sanctification. Sanctification is a cognitive psychospiritual construct and a lens through which individuals may perceive an object as possessing sacred status. From an interpersonal perspective, sanctification refers to individuals discerning God as manifested in the human relationship (i.e., theistic sanctification) and/or assigning sacred qualities to the human relationship (i.e., non-theistic sanctification). Examples of sacred qualities include a sense that the relationship is eternal, blessed, a miracle, or is revealing of the deepest truths. Theoretically speaking, an individual who discerns a particular relationship to hold sacred status will take

measurable actions to protect, preserve, maintain, or deepen that bond. This may include practicing more positive and less negative behaviors in the relationship, communicating thoughtfully and effectively, and sharing an affinity for and satisfaction with one another. Thus, viewing a union as sanctified may motivate an individual to act in ways that enhance relationship quality or their evaluations of the relationship in general. Overall sanctification has shown to be beneficial across important relationships, which will now be summarized in a literature review.

The initial sanctification measure was created by Mahoney, Pargament and colleagues (1999) for a study with married couples, though it has been slightly modified to assess the sanctity of other primary relationships. Concerning couples, sanctifying the relationship has been linked to several facets of relationship quality. Not only has this data been collected using cross-sectional self-reports, but also by incorporating rigorous observational methodology or by use of longitudinal design. The initial sanctification study found that individuals who endorsed higher marital sanctification (N=97 couples with children) were also more likely to experience marital satisfaction and greater global marital adjustment – importantly, this was for both spouses. Further, either the wives' or husbands' reports were tied to greater felt commitment and use of collaborative problem-solving strategies as well as to lower use of unhealthy communication strategies (e.g., verbal aggression, avoidance, stalemate). These results remained significant after controlling for demographic variables and self-reported general religiosity, indicating that the specific psychospiritual process of sanctifying one's partnership is discernable in predicting relationship quality beyond general religiosity and other influential non-religious individual factors.

Later studies with couples have bolstered and extended these original findings. In several studies, greater marital sanctification has been tied to higher ratings of subjective relationship

satisfaction (DeMaris, Mahoney, & Pargament, 2010; Ellison, Henderson, Glenn, & Harkrider 2011; Lichter & Carmalt, 2009; Rusu, Hilpert, Beach, Turluic, & Bodemann, 2015; Sabey, Rauer, & Jensen, 2014; Stafford, David, & McPherson, 2014). Also, two studies have tied higher marital sanctification to greater self-reported (N=433; Lichter & Carmalt, 2009) and observed (N=146, Padgett, 2016) emotional intimacy. Using both observational methods and longitudinal data, this latter study found that emotionally intimate behaviors increased over time, such that later emotional intimacy was predicted by earlier reports of sanctification. Marital commitment has been assessed using self-report measures in a cross-sectional study, which tied greater sanctification to greater felt commitment between spouses (N=1,227; Ellison et al., 2011).

Replications have also been conducted showing that marital sanctification has predicted better communication patterns and conflict resolution styles. For example, higher marital sanctification was tied not only to one's felt sense of ease during sensitive topics of conversation, but also to the amount of communication preceding important decision-making that could affect the marriage (Litcher & Carmalt, 2009). Lichter and Carmalt (2009) also found that higher sanctification was related to self-reported use of more positive conflict resolution strategies, behaviors, or experiences, including lower conflict intensity and less use of blame, yelling, or giving the silent treatment. Another investigation showed that couples who sanctified their marriage more were also more likely to report using "dyadic coping strategies," which included helping reframe difficult situations or finding solutions to their problems as well as lending more emotional support (N=215 couples; Rusu et al., 2015). In an observational study assessing 164 couples undergoing the transition to parenthood, higher self-reported marital sanctification was tied to observed behavioral differences during conversational exchanges involving conflict, including greater collaborative problem-solving and showing affection and less domineering-

coercive control, verbal aggression, complaining, nonverbal negative emotion, and invalidation (Kusner, Mahoney, Pargament, & DeMaris, 2014).

Parenting studies showed similar beneficial findings of sanctification and its connection to enhanced relationship quality. Higher ratings of sanctification from an adult child have been linked to both parent and adult child reports of greater relationship satisfaction (N=155 parent-child dyads) as well as the child's report that fathers engaged in more open communication (Brelsford, 2013). Parent reports of greater sanctification have also been linking to perceived relationship quality. Greater parental sanctification has been tied to both maternal and paternal reports that they use more positive communication strategies during child-parent conflict or communication (N=58 two-parent families with a preschool child; Volling, Mahoney, & Rauer, 2009) as well as to less use of verbal aggression toward children from both theologically liberal and conservative mothers (N= 74 mothers of 4–6-year-old toddlers, Murray-Swank, Mahoney, & Pargament, 2006). It has also been linked to the parent feeling a greater commitment to (Litcher & Carmalt, 2009) and investment in parenting (N=149 parents of preschoolers; Dumas & Nissley-Tsiopinis, 2006), as well as to Christian mother's perceptions of laughing with their children more, putting one another in a good mood, and their child showing more affection (Murray-Swank et al., 2006).

Only one study recently assessed sanctification in close friendships. This investigation (Riley, 2018) examined the effects of the two sanctification subscales separately and found that while both manifestation of God and sacred qualities predicted positivity in friendship (e.g., companionship, approval, satisfaction), greater sacred qualities also predicted greater emotional intimacy between close friends (e.g., emotional support and disclosures). In sum, these investigations suggest that when individuals sanctify their cherished relationships, they are more

likely to think about them in positive ways and engage in dyadic behavior that is protective of their bond as well as are less likely to engage in behaviors that threaten their commitment to and connection with one another.

So far, sanctification in the sponsorship relationship has gone unexplored. Although AA literature does not discuss sanctification of sponsorship, sponsors are deeply involved in sponsees intrapersonal and interpersonal development. Further, AA ties all forms of development to spiritual beliefs and practices, which means that spirituality is at the heart of any developmental concern addressed in the sponsorship relationship. Additionally, a sponsor is a go-to source to discuss spiritual dilemmas and resources. It's quite possible that as sponsors help sponsees grow in characterological and spiritual ways, sponsees may perceive their Higher Power as a part of that relationship or feel that the sponsorship bond is sacred. If the sponsee does sanctify their relationship, the sponsee may be more likely to trust the sponsor as a guide, develop an intimate relationship, and perceive that the two share mutual goals. Additionally, sanctification of the sponsorship bond may be linked to the sponsees recovery outcomes, given that previous studies have linked stronger sponsorship bonds to better recovery outcomes for sponsees. This makes it conceivable that sanctification is tied to a sponsee's recovery outcomes directly, but also indirectly through the sponsorship alliance.

Spiritual intimacy. While sanctification is a perceptual spiritual process, spiritual intimacy is a behavioral psychospiritual construct that has been defined as when two people share with one another and listen to each other, nonjudgmentally, as they each reveal their spiritual journey or identity, including the questions, doubts, practices, and revelations that may come along with it (Mahoney, 2013). One side of spiritual intimacy, then, is spiritual disclosure, while the other is termed spiritual support. So far, research to date on spiritual intimacy has tied

it to facets of relationship quality in married couples, parent-child bonds, and recently, in close friendships. Though the literature base is smaller than that of sanctification, findings are strong and consistent.

The initial studies on spiritual intimacy only assessed the spiritual disclosure aspect and tied it to better relational functioning. In two studies using adult or adolescent children, one assessed spiritual disclosure in mother-child bonds (N=300 adolescents and 180 mothers; Brelsford & Mahoney, 2008) and the other in father-child bonds (N=454 college students and 76 fathers; Brelsford, 2010). In mother-child bonds with adolescents, both the mother's and child's reports of the child's spiritual disclosures were linked to increased relationship satisfaction, higher general self-disclosures, less dysfunctional communication patterns, and greater use of more adaptive conflict resolution strategies, including higher collaboration and less verbal aggression. Even after general self-disclosure was controlled for in this study, spiritual disclosures still predicted unique variance in collaborative conflict resolution, demonstrating that the power of spiritual dialogue had a distinct effect in their interactions. As for father-child bonds, more spiritual disclosures from college-aged children to their fathers was connected to greater relationship satisfaction and more open family communication.

For this next study, the spiritual disclosure scale was extended to include reporting on the degree to which the self and other provided empathic spiritual support. With 164 married couples who were expecting their first child, Kusner and colleagues (2014) employed longitudinal and observational methods to assess relationship quality. They found that both spousal reports of spiritual intimacy predicted more positive and less negative observed behaviors by both spouses. Specifically, self-reported spiritual intimacy from both spouses led to more affection and collaborative problem-solving, and less domineering-coercive control, complaining, invalidation,

verbal aggression, and nonverbal negative emotion. Further, these results held after controlling for general religiousness as well as fixed factors over time, including demographics and personality traits. David and Stafford (2015) used four items taken from the Joint Religious Activity scale (Mahoney, Pargament, Jewell, Swank, Scott, Emery, & Rye, 1999) and labeled this index Joint Religious Communication (JRC). This index is very similar to spiritual intimacy because although one item assessed joint prayer, the rest of the items were explicit regarding a degree of spiritual disclosure and responding to that disclosure in conversations about spiritual topics. Their findings demonstrated that self-report, but not spousal report, of joint religious communication was tied to reports of higher marital satisfaction (N=342 couples). Padgett (2016) also studied spiritual intimacy in married couples, but she was interested in its relationship to direct observations of emotional intimacy between spouses (N=164 couples). She found that greater endorsement of spiritual intimacy at an initial time-point predicted greater observed emotional intimacy across time for couples who were expecting their first child.

In the only study assessing spiritual intimacy in close friendships, Riley (2018) found that close friends who reported greater spiritual intimacy in the relationship were more likely to experience positivity in the friendship (companionship, approval, and satisfaction), emotional intimacy (emotional disclosures and support), and less negativity in the friendship (i.e., pressure, dominance, conflict, criticism, and exclusion). After controlling for emotional intimacy, which was important given that some researchers suggest it's a component of spiritual intimacy, spiritual intimacy continued to predict less negative friendship quality. Again, intimacy about spiritual matters had a distinguishable effect on perceived friendship quality in close friendships.

The concept and practice of spiritual intimacy is in line with how AA describes spiritual talks between the sponsor and sponsee, so much so that it appears to be a fundamental

interpersonal aspect of sponsorship relationships. I could locate no empirical studies that examined spiritual intimacy between a sponsor and sponsee, nor in any sober relationship. Qualitative research by Alibrandi (1977) and Whelan and colleagues (2009), however, have backed AA literature by documenting that AA members report expecting to engage in conversations of a spiritual nature with their sponsor. Because of how fundamental spirituality is to the 12-steps and the sponsorship relationship, it's reasonable to think that the quality of their spiritual intimacy may be connected to a stronger sponsor-sponsee alliance. That is, the degree to which the sponsee and sponsor engage in spiritual intimacy may be tied to experiencing the bond as stronger, more stable, and the sponsee may perceive that the two are in sync with each other. It's also possible that the degree of spiritual intimacy could be tied to a sponsee's recovery outcomes, given that AA's message is that abstinence, a reduction in alcohol cravings, and emotional well-being are contingent on spiritual awareness and growth, which spiritual intimacy may help to achieve. Lastly, given the ties between (a) spiritual intimacy and relationship quality and then (b) sponsorship alliance and recovery goals, the sponsorship alliance may partially mediate the effect spiritual intimacy has on a sponsee's recovery outcomes.

Spiritual mediation. When in conflict with others, spiritual mediation (previously labeled theistic mediation) is an adaptive coping and communication strategy, whereby the dyad relies on God, their faith, or spiritual values for an effective resolution of disagreements (Brelsford & Mahoney, 2009; Mahoney, 2005). In other words, it is when members of the dyad find "positive ways to draw God" or aspects of their faith "into the dyadic conflict" (Brelsford & Mahoney, 2009). Spiritual mediation, then, is a behavioral psychospiritual process thought to have positive effects on perceptions of relational well-being.

In the first study to examine the prevalence rates and potential effects of spiritual mediation, Brelsford and Mahoney (2009) examined reports from both mothers and their college-aged children (N=116). They found that the family members who reported more of their own use of spiritual mediation or perceived the other to use spiritual mediation during conflict, were also more likely to endorse experiencing a healthy relationship, such as greater use of collaborating during conflict, more general self-disclosures (i.e., being emotionally vulnerable), or higher rates of relationship satisfaction. An interesting finding from this study was that the adult child's report of their mother's use of spiritual mediation was also positively tied to child's use of stonewalling during conflict. This latter finding could indicate that either the mother was unable to convey her positive intention of drawing faith into the conflict, or the child was unable to receive it at the time. A second study by Brelsford (2011) that examined spiritual mediation between fathers and their college-aged children (N=76 dyads) also found that spiritual mediation was associated with relationship benefits for both parties. Specifically, the child or father's report of their own or their adult-child's use of spiritual mediation was tied to greater relationship satisfaction, use of open communication, and/or the perception that the other was using constructive conflict resolution strategies. In general, the first two studies showed that perceiving one another as using R/S to constructively mediate conflict was tied to viewing that relationship as healthier as well as to both individuals viewing that the other was also engaging in behaviors that honored each person's perspective while protecting their bond.

One qualitative study assessed the formerly termed "theistic mediation" in their semi-structured interviews with 23 gay participants and their family members. The purpose of the study was to understand if the use of religion helped or hindered familial relationships during "post-coming out conflicts" (Etengoff & Daiute, 2014). For their more religious family members

who were perceived as using theistic mediation during conflict, the men shared positive perceptions of their family members, and further, indicated that their conflicts were “handled effectively.” Family members reportedly used certain religious tools to help them engage in conflict adaptively and “mediate theological difficulties.” For example, Christian family members went to God with their concerns, both Christian and Jewish individuals used prayer combined with seeking religious counsel, and family members’ of both faiths utilized spiritual values such as patience, tolerance, and love, which allowed them to think of their family member’s gay identity as a personal matter between them and God.

I could locate no studies that examined spiritual mediation in sponsorship nor other important relationships in AA, however it’s reasonable to think it could be prevalent in sponsor-ponsee communication given that AA literature notes the potential for this communication strategy to occur during conflict between sponsor and sponsee. When it comes time in the 2nd and 3rd step for sponsees to consider their willingness to begin a spiritual journey, an entire chapter, *We Agnostics* (pp. 44–77), is dedicated to discussing problems of faith or how to develop a working relationship with a Higher Power. *The Twelve and Twelve* book takes step two further by describing potential dialogue between sponsor and sponsee regarding conversations that may involve conflict when discussing spiritual matters (pp.24–25). Since AA literature suggests in these steps that each member is to develop their own conception of a Higher Power, there is ripe potential for disagreement, misunderstandings, and the need for resolution between a sponsor and sponsee when their goals and the pathways envisioned to reach them do not align with each other – especially because their conceptions of God may not be the same. In a secondary AA text, *Language of the Heart*, Bill further writes about sponsors in a way that incorporates the sponsor’s or dyad’s ability to navigate conflict successfully:

“Every sponsor is necessarily a leader...The stakes are huge...A human life, and usually the happiness of the whole family, hangs in the balance. What the sponsor does and says, how well he estimates the reactions of his prospects, how well he times and makes his presentation, how well he handles criticisms, and how well he leads his prospect on by personal spiritual example – well, these attributes of leadership can make all the difference, often the difference between life and death.” (p. 292).

The ways in which each member of the dyad draws spirituality into the conflict may need to be done carefully and sensitively for it to have a beneficial effect on the relationship. Given the abundance of positive associations between spiritual mediation and relational health, the present study posits that spiritual mediation will be tied to stronger sponsorship alliance, as well as to better recovery outcomes for sponsees. The present study also posits that the effects of spiritual mediation on a sponsee’s recovery outcomes will be partially mediated by the sponsorship alliance.

Spiritual one-upmanship. In psychological science, spiritual one-upmanship has been defined as explicitly using God or religion/spirituality (R/S) to support one’s own position during relational conflicts, thereby pulling God in as a third party or ally to help support one’s position (Brelsford, 2011; Brelsford & Mahoney, 2009; Mahoney, 2013; Padgett, 2016;). Engaging in spiritual one-upmanship as a conflict resolution strategy has been studied and found to be maladaptive to relational well-being, at least in married couples and in parent-child relationships with adult children. Brelsford and Mahoney (2009) found that spiritual one-upmanship (previously labeled theistic triangulation) was linked to both mothers and their daughters using more verbal aggression (e.g., yelling, name-calling, insults) and stonewalling during conflict

(N=116). In a study among fathers and their college-aged children, the adult child's report of their own use of spiritual one-upmanship was tied to greater levels of verbal aggression from both parties and further, their own reports of their fathers' usage of spiritual one-upmanship was tied to their own experience of less relationship satisfaction (N=76 dyads). A later study by Padgett (2016) assessed spiritual one-upmanship across four time-points in 164 married couples during the transition to parenthood. The investigator found that higher spiritual one-upmanship was unrelated to direct observation of emotional intimacy during videotaped marital interactions, however this may have been due to the very low base rate and lack of variability in this index in the sample of predominantly happily married couples.

While these are the only three studies to date that examined spiritual one-upmanship with the measure to be used in the present study, one qualitative investigation explored the harmful effects of misusing spirituality in relationships. The same qualitative study that assessed the positive effects of theistic mediation between gay male participants and their family members on the quality of their relationships also assessed the formerly termed "theistic triangulation" (N=23). Their findings were telling, in that 74% of gay men reported that relatives who were more religious used "theological tools directly based on concepts from religious doctrine and the Bible" to support their position during "post-coming out conflicts," 65% of which indicated that it worsened their family bonds. One participant disclosed that it had been five years since he visited his home or saw his mother after these experiences. Another participant indicated that he was no longer welcomed at home due to the family member using religious doctrine against his homosexuality. Some family members were not available for interview, but most of the gay participants indicated that non-interviewed family members have utilized theistic triangulation in an attempt to coerce that individual to "change sexual orientation." While not every participant

reported such extremes, 61% described that, since their “coming-out,” family relationships have been “strained” or “estranged” even years afterward. Finally, during the coming-out process, gay participants reported that experiences of theistic triangulation were the “primary source of family conflict and pain,” indicating that these relational spiritual processes have deleterious effects on their family dynamics.

I could locate no studies in 12-step program literature that assessed spiritual one-upmanship among AA members, however this phenomenon could be prevalent as well as important to the sponsorship connection. Although AA literature does not use the term “spiritual one-upmanship” to refer to using God’s favor or spiritual principles to coerce or pressure another individual, the Big Book appears to explicitly address this potentially problematic behavior. Further, it concludes that dyadic processes like spiritual one-upmanship are a threat to relationship harmony in the sponsorship connection. For example, in a chapter of the Big Book that outlines how a sponsor should help sponsees, it states to “stress the spiritual feature [of AA] freely...if the [individual] be agnostic or atheist, make it emphatic that he does not have to agree with your conception of God. He can choose any conception he likes, provided it makes sense to him” (p. 93). The book goes on to say, “Let [your protégé] see that you are not there to instruct him in religion...Never talk down to an alcoholic from a spiritual hilltop; simply lay out the spiritual tools for his inspection. Show him how they worked with you. Offer him friendship and fellowship” (p. 95). Thus, the Big Book differentiates between a sponsor sharing experience with how to use the spiritual tools or engage in a relationship with God, versus using God as a tool to pressure or coerce another individual to do what one wishes or believes to be an appropriate course of action.

In empirical qualitative studies, sponsors have expressed their own shortcomings when describing their role in this triadic relationship of sponsor, sponsee, and a Higher Power. These studies have reported that sponsees sometimes ended sponsorship relationships due to their poor sponsor-sponsee dynamic (6 dyads; Hollander, 1997) and sponsors themselves have admitted to sometimes overstepping or being too controlling by “imposing their will on their sponsees” (Whelan, Marshall, Ball, & Humphreys, 2009, p. 421). These poor relational dynamics or boundary crossings could refer to them acting as arbiters of God’s will or spiritual interpreters of human problems and solutions. Further, the line between psychological and spiritual problems and their respective solutions is hard to draw, likely making it difficult to stay within role boundaries. This difficulty has also been noted by theorists who examined psychotherapeutic and pastoral counseling relationships (Leech, 1992; Healey, 1990), which speaks to how difficult it is to maintain role boundaries as a type of “helper” even when one is trained in their respective roles on professional standards and ethical guidelines. Even though the sponsorship relationship, while seeming to have some level of a power differential, is reinforced by AA to be distinguishable from these more professional roles, sponsors do not undergo professional training or report to supervisors nor behavioral conduct committees. Even if the sponsor proved well-intentioned at the time, it seems reasonable to suspect that these sensitive spiritual conversations or potential disagreements may sometimes lead a sponsor to use God, their own experience with a Higher Power, or their personal application of spiritual principles in such a way as to support their own perspectives or suggestions. It follows that these boundary crossings may end up being detrimental to the sponsorship alliance or the sponsee’s recovery progress. Conversely, spiritual one-upmanship might be less of an issue, even if not a positive experience, if sponsees are more likely to listen to their counterparts because of how dependent they might feel on the sponsor or

the relationship for their spiritual compass, at least in the beginning of recovery. Nevertheless, given the findings to date, the present study posits that spiritual one-upmanship will be tied to a weaker sponsorship alliance as well as to lower scores or worse outcomes for a sponsee's recovery. This study also hypothesizes that sponsorship alliance will partially mediate the relationship between spiritual one-upmanship and recovery outcomes.

The Present Study

According to AA, sponsors are highly instrumental in helping newer AA members – their sponsees – achieve and maintain sobriety through working the 12-steps, which are founded on developing a relationship with a “Higher Power” (i.e., God, universal power) and cultivating a practice of spiritual awareness and principles on a regular basis. The primary goal of such spiritual endeavors is to sustain sobriety through relying on this divine connection. Using AA literature along with sharing their personal experience, strength, and hope, the sponsor is tasked with helping the sponsee understand and potentially relate with the three-pronged disease of alcoholism – the physical craving, mental obsession, and spiritual malady. Across AA literature, sponsorship is referred to time and again as the sponsee's personal resource and trusted support to achieve and maintain sobriety – something that the sponsee's life depends on according to the co-founder of AA, Bill Wilson. This makes sponsorship one of, if not the most important human connection for members of AA as they embark on a 12-step journey.

The sponsor is meant to know the most about the sponsee's selfhood and conceptualization of a Higher Power, thus, the sponsor becomes the helper during spiritual and other dilemmas. This process may naturally create a triadic relationship between sponsor, sponsee, and a Higher Power, even though AA does not explicitly state it as such. Because of these connections, it's possible that interpersonal spiritual processes occur in the sponsorship relationship and that the

strength of the sponsorship bond is connected to a sponsee's most cherished sobriety destinations – growing along spiritual lines (i.e., relationship with a Higher Power and practicing spiritual principles), developing emotion regulation skills, experiencing a reduction in cravings for and mental obsessions with alcohol, and efficacy in staying sober (i.e., abstinence or abstinence self-efficacy). The present study sought to assess the prevalence of four relational spiritual processes: sanctification, spiritual intimacy, spiritual mediation, and spiritual one-upmanship, and the degree to which they impact the sponsorship alliance and a sponsee's recovery, for better or worse. The present study also examined whether the effects of these relational spiritual processes on recovery outcomes are partially mediated by the strength of the sponsorship alliance. The present study addressed the following hypotheses:

1. Greater sanctification (1a), spiritual intimacy (1b), and spiritual mediation (1c), and less spiritual one-upmanship (1d) were each expected to be tied to a stronger sponsorship alliance. (Hypotheses 1a-1d).
2. Greater sanctification (group 2a), spiritual intimacy (group 2b), and spiritual mediation (group 2c) and less spiritual one-upmanship (group 2d) were each expected to be tied to better recovery goals, including a greater likelihood of abstinence self-efficacy (1), lower cravings for and obsessions about alcohol (2), higher spiritual well-being (3), and greater emotional regulation abilities (4). (Hypotheses groups 2a through 2d, e.g., 2a targets whether links between greater sanctification and recovery outcomes are significant).
3. Stronger sponsorship alliance was expected to be tied to better recovery goals, including (3a) a greater likelihood of abstinence self-efficacy, (3b) lower cravings for and obsessions with alcohol, (3c) greater emotion regulation abilities, and (3d) higher spiritual well-being. (Hypotheses 3a-3d).

4. The strength of the sponsorship alliance was expected to partially mediate the effects of the four relational spiritual processes on each of the four recovery goals. (Hypotheses groups 4a through 4d; e.g., hypotheses group 4a state that the effects of greater sanctification on better recovery goals will function through greater sponsorship alliance).

METHODS

Participants

This researcher recruited 134 participants who self-identified as members of Alcoholics Anonymous (AA). Inclusion criteria included being currently sponsored and considering oneself a member of Alcoholics Anonymous. The sample of 134 individuals (51.5% female-identified) ranged in ages from 20 to 81 ($M=45.7$, $SD=16.1$) and resided in several states across the U.S. Overall, the sample mostly described themselves as Caucasian (89.5%) and heterosexual (82%). A majority reported having an education range from some college to postgraduate college experience (85%); slightly over half were married (53%), while 27% described themselves as some degree of single and almost half had no children (46%); over half of the participants were from California (55.3% or 73 participants) with Ohio residents making up the second largest group of participants (18.2% or 24 participants), and the remaining participatory states were represented by western and eastern coastal regions with almost no participation from middle America states (except Texas and Kansas). This researcher asked participants if they had been formally diagnosed with a mental health problem other than addiction/substance abuse, and 47% (62 participants) denied any problems other than addiction, 35.2% (50 participants) endorsed a mood disorder (anxiety, depression, or bipolar), and the remaining diagnoses (some dually diagnosed with mood disorders) included PTSD, ADHD, OCD, Borderline, or an eating disorder (15.8%, 22 participants). Pertinent information related to individual/background demographics can be viewed in Table 1 (All tables can be found in Appendix M).

Concerning religious and spiritual demographics, 53% of participants defined themselves as “not at all” religious on a scale between “not at all” (1) and “extremely” (7) religious, while no participants defined themselves as “not at all” spiritual on an identically labeled scale, with

87.1% identifying themselves as more than somewhat to extremely spiritual (31% self-identified as “extremely” spiritual). 53% responded that they “never” attended religious services outside of weddings and funerals, about 69% prayed daily and about 20% prayed between once to several times a week; 29% meditated daily while another 48.5% meditated between once to several times a week. Regarding religious affiliation, 42.5% endorsed having “no religion,” 36% identified as a denomination or non-denomination of Catholic or as Christian, 6% were Jewish, 4.5% were Buddhist, and 4.5% were atheistic or agnostic (another 6% endorsed a non-specified religion). Interestingly, only 51.5% endorsed the belief that God exists “totally,” and 8.2% endorsed that God does not exist at all, indicating that while only 4.5% were atheistic or agnostic, another 5% or so may have defined spirituality in a way that excluded the experience or existence of a “God.” Concerning “closeness to God,” 6% reported not feeling close to God at all, 23.1% indicated feeling “somewhat close,” 50.7% were “very close,” and 20% were “as close as possible” to God. Pertinent information related to religious/spiritual constructs can be viewed in Table 3.

The following demographic information reflects Alcoholics Anonymous or substance use information for participants: time sober ranged from 14 days to 17,849 days sober (or almost 49 years sober; $M=15.2$ years, $SD=11.9$ years) with a mean classification of “severe alcohol dependence” according to the SADQ measure criteria ($M=1.83$, $SD=.73$). At the time of survey completion, 97.8% of participants had completed the 12 steps, 93.2% attended meetings at least once a week, 88.8% endorsed having a homegroup, and 86.6% endorsed being 100% motivated to stay sober while the remainder fell between the ranges of “pretty motivated” and very motivated” to stay sober; no individuals endorsed the three lower options that ranged from “not at all motivated” to “somewhat motivated.” Related to sponsorship, 100% of individuals had a

sponsor (as was the criteria for study participation), 76.8% spoke to their sponsor at least weekly, and 50.7% had been sponsored by the same person for more than five years while another 35.8% had the same sponsor for the last one to five years, and only 13.4% had their current sponsor for less than one year. Information on variables related to AA and substance use can be viewed in Table 2. The demographic questions can be viewed in Appendix D.

Procedure

Given the difficulty in creating a random sample of AA participants, the investigator used convenience and snowball sampling to enlist participants to complete an online Qualtrics survey. This survey was approved by the Institutional Review Board of a northwestern Ohio university (IRB# 1501933-2). First, AA members were recruited through online methods using Facebook and other social media sources (e.g., Instagram, Reddit) by posting an electronic flyer in AA or sobriety groups with an attached online survey link. Next, once participants sign up for the study, they were asked to forward the flyer and link in other online groups, through personal communication, or via e-mail. In this way, word-of-mouth was used to help increase the sample size. AA members known to the researcher were sent a direct email, text message, or were called via telephone to announce the study and invite them to send the flyer to others. Recruitment was attempted through online recovery bulletin boards, however no participants signed up through this method. Due to the unforeseen circumstances of the COVID-19 pandemic and strict lockdown protocols in the state of California where the principal researcher resides, no AA meetings were open in-person, thus recruitment in-person was not possible. Treatment centers were initially contacted March through May of 2020, however none responded to the request of distributing flyers; this may also be due to stressors surrounding COVID-19 pandemic and

lockdown protocols. The various flyers used for recruitment participation were approved by the BGSU Institutional Review Board.

Individuals who met inclusion criteria were asked to participate in an anonymous cross-sectional study that examines their experiences in AA and with sponsorship. Given the importance of anonymity to AA members and the organization as a whole, potential participants were informed of the measures taken to ensure their anonymity through a Qualtrics link that is detached from any personal information needed in order to send them the online survey.

Measures

Sanctification of Sponsorship

The sanctification of one's sponsorship relationship was investigated using the Revised Sanctification of Marriage measure (Mahoney et al., 2009), which contains two sanctification subscales. The measure was slightly adapted by replacing "marriage" with "sponsorship." The two subscales assess the extent to which sponsees see God as manifesting in the sponsorship bond and/or the degree to which they've imbued the bond with sacred qualities. The "Manifestation of God" subscale (MG) consists of 10 items that are theistic in nature, given that they explicitly mention God or a theistic being as being present in the sponsorship connection. The "Sacred Qualities" subscale (SQ) also consisted of 10 items, however these items can be perceived as non-theistic, as they lack the mention of a specific deity, but rather tap into prototypical attributes that tend to be assigned to the essence (e.g., timelessness, boundlessness, sacredness) of an individual's sacred core (e.g., deity, spirit of the universe, transcendent reality). All items were rated on a 7-point scale ranging from 1 (strongly disagree) to 7 (strongly agree). The subscale scores were combined for a total sanctification score by averaging responses to all 20 items. Higher internal consistency, convergent validity, and construct validity were found in

literature assessing sanctification in married couples. The alpha coefficients for manifestation of God ($\alpha=.98$) and sacred qualities ($\alpha=.94$) were strong. “Manifestation of God” and “Sacred Qualities” subscales were summed for the purpose of this study due to their high correlation ($r = .77, p < .01$). Alpha coefficient for the total Sanctification measure (combining MG and SQ) in this study was .97. This measure can be found in Appendix E.

Spiritual Intimacy between Sponsor and Sponsee

Spiritual intimacy in the sponsorship relationship was examined using an 8-item measure that was adapted from Kusner and colleagues (2014). The measure was slightly adapted by replacing the word “spouse” with “sponsor.” The items assess both spiritual disclosures and spiritual support (i.e., providing warmth and empathy while listening) as reported on by the sponsee about the self and on their sponsor. Examples of items directed at the self included, “I feel safe being completely open and honest with my sponsor about my spirituality,” and “I try not to be judgmental or critical when my sponsor shares his/her ideas about my spirituality.” Items directed at the assessment of one’s sponsor include, “My sponsor shares his/her spiritual questions or struggles with me” and “My sponsor really knows how to listen when I talk about my spiritual needs, thoughts and feelings.” Items were rated on a 4-point Likert scale from not at all (0) to a great deal (3). All items on the self and sponsor were averaged to create a total score on spiritual intimacy skills within the sponsorship relationship. Higher scores indicate that the sponsor and sponsee practice more spiritual intimacy according to the sponsee. Previous internal consistencies reported for spiritual disclosure was .96 and .95 for college students and their mothers, respectively (Brelsford & Mahoney, 2009); previous internal consistencies reported for spiritual support ranged from .67 to .70 across four time-points in a longitudinal study (Kusner et al., 2014). Inter-rater reliability between wives and their husbands was high, showing that both

the husbands and wives reports of spiritual intimacy predicted similar significant patterns in observed negativity and positivity in their reports of their spouse's behavior (Kusner et al., 2014). This finding that each spouses' perceptions were congruent with each another regarding their views of the other's behavior supports that the sponsee, too, may perceive the sponsors behavior accurately. Alpha co-efficient for this study was .70, thus in line with other studies. This measure can be found in Appendix F.

Spiritual Mediation and Spiritual One-upmanship in Sponsorship

Sponsees asked to rate their own and their sponsor's use of God and/or spirituality as forms of positive and/or negative communication strategies during conflict. Spiritual one-upmanship and spiritual mediation were assessed using a scale originally termed Theistic Mediation and Theistic Triangulation developed by Brelsford and Mahoney (2009). The second scale of the initial measure, theistic triangulation, was renamed Spiritual One-upmanship in later work with marital couples after Mahoney (2013) re-evaluated the measure and realized it contained both theistic (i.e., deity-centered) and non-theistic forms of triangulating spirituality into a relationship in potentially harmful ways (Mahoney, 2013; Padgett, 2016). Theistic mediation was relabeled Spiritual Mediation for the present study, as this label more accurately reflects the theistic and non-theistic language of items. The newest version of this measure was slightly adapted to refer to sponsors and sponsees as opposed to spouses. The current 24-item measure (6-items per subscale and 12-items per person in dyad as reported on by the sponsee) was rated on a 4-point Likert scale with responses being Never (0), Rarely (1), Sometimes (2), and Often (3). Example items of spiritual mediation include, "Suggest we turn to God to be patient with each other" and "Encourage us to rely on our spirituality to listen to each other." Examples items of spiritual one-upmanship include, "Suggest that the other is arguing or acting

against God's will” and “Suggest that own view is spiritually superior to other persons.” The sponsees reported on their perceptions of their own use and their sponsor’s use of spiritual one-upmanship. Scores were averaged independently for spiritual one-upmanship and spiritual mediation. Higher scores on spiritual mediation are indicative of practicing more adaptive communication strategies of engaging spirituality in the conflict, whereas higher scores on spiritual one-upmanship reflect practicing more maladaptive communication strategies attempting to coerce the other by using spirituality. There is no previous research on sponsor-sponsee experiences of spiritual mediation (SM) or spiritual one-upmanship (SO), however other relationship studies have shown reliability. Good internal consistency was found when husbands and wives rated the wife’s usage of SO ($\alpha=.81$ and $\alpha=.85$ respectively) and when they both rated the husband’s usage of SO ($\alpha=.82$ for self-report by husbands, $\alpha=.84$ for wives-report on husbands; Padgett, 2016). Internal consistencies were good for TM in past studies. Child and father reports of child’s use of TM were $\alpha=.92$ and $\alpha=.94$, respectively; child and father reports of father’s TM were $\alpha=.95$ and $\alpha=.94$, respectively (Brelsford, 2011). Internal consistencies for the current study included .96 for spiritual mediation and .87 for spiritual one-upmanship. This measure can be found in Appendix G.

Sponsorship Alliance

The degree to which the sponsee perceives the sponsorship bond as strong or weak was measured by the recently created Sponsor Alliance Inventory (SAI), a measure adapted by Kelly and colleagues from the Working Alliance Inventory – Short Form (WAI-S) that was originally created for measuring the therapeutic bond with clients (Kelly, et al., 2016). This is a 10-item measure and was rated on a 7-point Likert scale ranging from 1 (Not true at all) to 7 (Very true). This is a single dimension assessment with all items loading onto one factor. Example items

include, “My sponsor and I agree about the things I will need to do in AA to help improve my situation,” and “My sponsor and I trust one another.” All items were averaged to create a total sponsorship alliance score. Internal consistencies were high at three ($\alpha=.96$), six ($\alpha=.96$), and 12 ($\alpha=.95$) months sober during follow-up assessments in the original study, which was comprised of a sample of young, mostly male and Caucasian adults. Alpha coefficient for this study was .87. This measure can be found in Appendix H.

Alcohol Abstinence Self-Efficacy and Cravings or Thoughts about Alcohol

The extent to which individuals can report feeling confident that they would not drink alcohol across a variety of situations or internal experiences was measured using the Alcohol-Abstinence Self-Efficacy Scale (AASE; DiClemente, Carbonari, Montgomery, & Hughes, 1994; McKiernan, Cloud, Patterson, Golder, & Bessel, 2011). This 20-item measure was rated on a 5-point Likert scale from “not at all confident” (1) to “extremely confident” (5) and is a single dimension assessment. Internal consistency was .93.

Given that AA also discusses that going through the 12-steps with a sponsor should be tied to a reduction in craving for and thoughts about using alcohol, participants answered questions regarding the degree to which they crave or obsess over alcohol using the Subjective Experiences Questionnaire (SEQ-2A; Miller & Childress, 1994). This 7-item measure was rated on a 7-point Likert scale that ranged from “several times a day” (1) to never (7). This measure was created for research purposes by investigators who belong to the Center on Alcoholism, Substance Abuse, and Addiction (CASAA), which is a part of the National Institutes of Health (NIH). This researcher could not find studies that noted internal consistencies or reported validity; however, the present study recorded an alpha of .88. These two measures can be found in Appendix I and J.

Emotion Regulation Deficits

A sponsee's struggle to regulate their own emotions (i.e., emotion dysregulation) was assessed using the Difficulties in Emotion Regulation–Short Form (DERS-SF; Kaufman, Xia, Fosco, Yaptangco, Skidmore, & Crowell, 2016). This 18-item measure used a 5-point Likert scale that asked how frequently an item applies to an individual with selections that range from “almost never (0-10%)” to “most of the time (91-100%).” It assessed the degree to which sponsee's report emotion regulation deficits using six subscales, which include: nonacceptance, difficulties engaging in goal direct behavior, impulse control difficulties, lack of emotional awareness, limited access to emotion regulation strategies, and lack of emotional clarity. Example items include: “When I'm upset, I acknowledge my emotions,” “When I'm upset, I have difficulty focusing on other things,” “I am confused about how I feel,” and “When I'm upset, I believe there is nothing I can do to make myself feel better.” After reverse scoring items as needed, all items were averaged so that higher total scores are indicative of greater emotion regulation deficits. The DERS-SF has good subscale internal consistencies that range from .78 to .91, which were comparable to the range in the full-scale DERS. The DERS-SF has also demonstrated good concurrent validity with internalizing and externalizing symptomology in both adolescent and adult samples. For the purposes of this study, the DERS full scale (not the six subscales) was used to average overall emotion regulation difficulties. Internal consistency was high ($\alpha=.94$). This measure can be found in Appendix K.

Spiritual Well-being and Spiritual Practices

The degree to which sponsees incorporate or have the presence of spiritual experiences in their daily lives were assessed using the Daily Spiritual Experience Scale (DSES). This 16-item measure used a 6-point Likert scale with selections that range from “many times a day” (6) to

“never or almost never” (1). It assessed the frequency of daily spiritual experiences, such as how frequently sponsees feel God’s presence, turn to or feel guided by God on a daily basis, experience positive spiritual experiences, or experience a positive relationship with God. Sponsees reported on their spiritual experiences that are both theistic and non-theistic, which means some items include the label of God or a Higher Power. Other items assessed the extent to which the sponsee practices spiritual principles consistent with AA’s 12-steps, such as love, tolerance, and connection to others. Higher total scores on this measure are indicative of having more daily spiritual experiences and engaging in spiritual practices, both indicative of spiritual well-being. One item independent of the 16-item scale measures felt closeness to God and is rated on a 4-point Likert scale from “not close” (1) to “as close as possible” (4) but was not used in the total scale score measuring spiritual well-being/spiritual practices. The original study assessing DSES in males and females found good internal consistency, .94 and .95, respectively (Underwood & Teresi, 2002). Test-retest reliability across two days was also stable, with a Pearson’s correlation of .85 (Underwood & Teresi, 2002). This study found high internal consistency ($\alpha=.94$). This measure can be found in Appendix L.

RESULTS

My data analysis plan was as follows: SPSS version 25 (2017) was used for the analyses. First, preliminary analyses were run that include descriptive statistics to describe the sample and that provide information regarding primary constructs. Primary analyses include prevalence rates for relational spiritual processes, correlational analyses between key constructs and demographic variables as well as between independent and dependent variables, followed by multiple regressions with bootstrapping method analyses that test the degree to which the sponsorship alliance mediates the effects of each relational spiritual process on each outcome (16 potential mediations).

Missing Data

Missing data analyses were conducted, showing that, out of 193 potential participants who answered “yes” to having a sponsor, 28 participants (14.5%) stopped taking the survey prior to filling out measures on primary variables, leaving 165 participants for possible inclusion in the sample. Out of these 165 participants, 19 did not complete the survey, dropping off at some point while completing measures on primary variables. Overall, 47 participants who met inclusionary criteria of having a sponsor were excluded from the study due to excessive amounts of missing data (N=146 at this point).

Missing data was inputted for six participants so that these cases (included in the N=146 calculated above) could be retained. Specifically, from the SADQ measure (i.e., severity of addiction questionnaire), four of the five participants who did not fill out questions 17-20 had missing data inputted and one participant was dropped earlier due to not completing the rest of the survey. The four individuals who were retained had their average scores on items 1-16 used to fill in their missing data. Two other participants who completed the total survey each had one

item missing from either the Spiritual one-upmanship or the DERS (i.e., emotional regulation) measures. Their average scores from each measure were used to fill in their single missing data points. In total, six participants had missing data input for them using their average scores on each respective measure (four for SADQ, one for spiritual One-upmanship, and one for DERS).

Initially, 146 participants were considered for the present study. As explained in more detail below, another 12 cases were excluded from primary analyses due to being extreme outliers on one or more key constructs.

Preliminary Analyses

Descriptive Characteristics of the Sample

First, preliminary data analyses were conducted to collect descriptive statistics on the following sets of variables in order to adequately describe the sample: (1) demographic AA variables of (a) length of sobriety (in consecutive days sober) (b) dichotomous response of yes or no to whether an individual has completed the 12-steps, (c) length of current sponsorship relationship, (d) frequency of meeting attendance, (e) homegroup status, (f) primary substance of misuse, (g) motivation to stay sober, (h) frequency of sponsor communication, (i) whether one has relapsed, (j) age at which one began to drink, (k) age when problematic drinking began, (l) years drinking “alcoholically,” (m) consumption of alcohol on drinking days (average), severity of alcohol dependence using the SADQ measure which specifies severity using cut off scores. Meeting frequency and length of sponsorship relationship were used as potential control variables in later regression analyses given their potential for being third variable confounds; (2) various religious demographics such as religious affiliation, general religiousness and spirituality including degree of atheism and agnosticism, and the frequencies of engaging in R/S activities (e.g., how often one prays, meditates, and attends religious services), and (3) individual

demographic variables (see below for control variables and Appendix D for a complete list of questions). See Table 2 for AA demographics and Table 3 for R/S demographics.

Descriptive Characteristics of Primary Variables

Preliminary analyses were also conducted to assess the ranges, means, standard deviations, and alpha coefficients (i.e., internal consistencies) of all primary variables to determine whether the distributions of scores required transformations and/or to remove extreme outliers. Primary variables included: sanctification, spiritual intimacy, spiritual one-upmanship, spiritual mediation, sponsorship alliance, abstinence, emotion regulation skills, and spiritual well-being. Based on these analyses, all variables had an acceptable internal consistency (.70 – .97). See Table 4 for descriptive statistics on primary variables.

Statistical assumptions. Data were inspected to assess for adherence to statistical assumptions (following statistics books and instructions from Tabachnick and Fidell (2012) and Cohen, Cohen, Aiken, and West (2008)). First, potential outliers were explored using Cook's Distance, Mahlanobis' Distance, and Leverage Distance. If a participant exceeded two of the three cut-off parameters for each type of distance, then a participant was excluded from the analyses. Given this, a total of 12 outliers were removed from the data set. Outliers were removed from all data analyses even if the individual was only an outlier for one dependent variable. The reason for this was that, due to the overall sample size being small (N=134), this researcher wanted to ensure that all analyses could remain comparable with an identical group of participants and N's so that the samples were consistent.

Next, distributions were transformed if their skewness absolute values were greater than 2 and/or kurtosis absolute values were less than 3 (Field, 2013; George and Mallery, 2010). Transformations were performed for spiritual one-upmanship, sponsorship alliance, abstinence

self-efficacy, and subjective experiences (i.e., thoughts about and cravings for alcohol). More specifically, “sponsorship alliance” was transformed using square root; “subjective experiences” was transformed using a log₁₀; and transformations for both “abstinence self-efficacy” and “spiritual one-upmanship” were attempted using square root and then log₁₀ transformations, and although their skewness reduced, both still exceeded the acceptable absolute values. Instead, they were both transformed by creating categorical groups after inspecting their frequency distributions. For abstinence self-efficacy, scores ranged from 2.58 – 5 (scale ranged from 1 – 5) and were separated into two groups of “more confident” (between the ranges of 4.79 – 5; 72% of the data) and “less confident” (between the ranges of 2.58 – 4.74; 28% of the data). These cut off points were chosen based on what appeared to be natural changes in frequencies between scores. For spiritual one-upmanship, scores ranged from 1 to 3.33 (scale ranged from 1 – 5) and were separated into three groups of “none” (no spiritual one-upmanship was endorsed; 26% of the data), “some” (between the ranges of 1.08 – 1.42; 60% of the data), and “a lot” (between the ranges of 1.50 – 3.33; 14% of the data). These cut off points were chosen based on what appeared to be natural changes in frequencies between scores. Third, the assumption of homoscedasticity was shown to be met in some cases, but not in others, through visual inspection of scatter plots of predicted versus residual data that allowed for an examination of whether the data points tended to fall in a linear distribution (Field, 2013). To fix heteroscedasticity, the log of the dependent variable was taken for “subjective experiences” (as noted above for skewness). Homoscedasticity was then shown to be met in all cases. Fourth, the assumption of independent errors was met as the Durbin-Watson test values for the analysis reported below were within the accepted range of 1-3 (Field, 2013). Finally, the assumption of multicollinearity (that predictor

variables are not explaining the same variance) was met as the VIF scores for the regression analyses were less than 10 and the tolerance scores were greater than 0.2 (Field, 2013).

Bivariate Correlations among Relational Spiritual Constructs

To assess psychometric properties of relational spiritual processes used in the present study, correlational analyses were run between each of the independent variables to ensure that they can be treated as separate constructs. The correlations were acceptable, and variables were treated independently in primary analyses ($r = .02 - .44$).

Bivariate Correlations among Criterion Variables

To assess psychometric properties of recovery progress constructs used in the present study, correlational analyses were run between each of the outcome variables to ensure that they too can be treated as separate constructs ($r = .08 - .40$, with the maximum end of the range reflecting the correlation between “abstinence self-efficacy” and “subjective experiences of alcohol,” and expected association but not reflective of the same construct).

Bivariate Correlations between Demographic and Criterion Variables

To determine the demographic variables that needed to be controlled for, preliminary analyses also included conducting bivariate correlations between demographic variables and five major dependent variables. Demographic variables considered included age, gender, ethnicity, length of sponsorship relationship, and frequency of meeting attendance. Bivariate correlations tied age to alcohol subjective experiences, difficulty regulating emotions, and spiritual well-being ($r = -.29 - .23$, $p < .05$ or $p < .01$), meeting frequency was tied with spiritual well-being ($r = -.24$, $p < .01$), and length of sponsorship relationship to alcohol subjective experiences ($r = -.25$, $p < .01$). These significant associations were controlled in subsequent regression analyses.

Primary Analyses

Prevalence Rates of Relational Spiritual Constructs

The prevalence rates for the sanctification of one's sponsorship relationship, spiritual intimacy between sponsor-ponsee, and spiritual one-upmanship and spiritual mediation in the sponsorship relationship were collected, and as has been done with prior research, they are reported in tables in the following ways: (1) the percentage of cases at three anchor points of disagree, neutral, and agree are listed from the most to least endorsed for sanctification, and (2) the percentage of cases at each anchor point for spiritual intimacy, (3) spiritual one-upmanship, and (4) spiritual mediation. Tables 4, 5, 6 and 7 provide these prevalence rates with some salient findings highlighted here. The three highest sanctification prevalence rates include, "My sponsorship relationship ..." "connects my sponsor and me to something greater than ourselves" (88.3%), "...is part of a larger spiritual plan" (79.4%), and "My Higher Power/God played a role in how I ended up connecting to my sponsor (77.3%). The three lowest prevalence rates were, "My sponsorship relationship puts me in touch with the deepest mysteries of life (50.1%)" "When I am with my sponsor, there are moments when time stands still and I feel I am a part of something eternal" (37.7%), and "My sponsorship relationship is holy" (29.4%). Despite the latter two prevalence rates dropping below 50%, at least half of participants endorsed 18 out of the 20 items describing their sponsorship relationship as being sanctified to some degree, two-thirds of participants agreed that they imbue sanctification in their relationship for about 13 items, and at least three-fourths sanctified sponsorship endorsing seven of the sanctification descriptors.

Concerning spiritual intimacy, over 80% agreed that they feel safe being completely open with their sponsor about spiritual matters, with only 0.7% stating they don't at all feel safe. Only 26% noted that their sponsor shares about their own spiritual disclosures, potentially

indicating that sponsee's share and receive more feedback and that this difference is an expected characteristic of the relationship. Another interesting finding is that participants tended to rate their own and their sponsor's ability to be supportive and non-judgmental to a similar degree (71.2% to 69.2%, respectively).

Regarding spiritual one-upmanship, between 44.5% and 93.8% reported "never" to the twelve items, with the most unlikely behavior to be reported was reflected in the item "I suggest that God/HP is unhappy with my sponsor's opinion," followed by "I suggest God/HP is on my side, not my sponsor's," (93.2%) and "my sponsor suggests my HP/God is unhappy with my opinion" (90.4%). Given that the response "always" was either 0% or 0.7% for all items, the percentages for "always," "often," "sometimes," and "rarely," were summed to better understand which spiritual one-upmanship items were most experienced in the sponsorship dyad according to the sponsee. Two items emerged as being the most prevalent: "My sponsor suggests I am arguing/acting against my HP/AA's principles" (65.5%) and "My sponsors suggests that my HP/AA principles disagrees with my position" (41.1%). All other prevalence rates that combine percentages (excluding "never") did not reach more than a third in endorsement. Interestingly, these same two stand-out items showed that "sometimes" was endorsed 26% and 12.3% respectively, which is between 4 times and 17 times the percentages of other items at the same anchor point.

With respect to spiritual mediation, prevalence rates were more varied by item than for spiritual one-upmanship. For example, "never" responses ranged between 41.8% and 64.4%, and "always" responses ranged from 3.4% to 21.9%. The three highest endorsed were all in the "my sponsor suggests that..." section, and include, "...God/a HP loves us both when we are disagreeing" (21.9%), "...God/a HP wants us to listen to each other" (21.9%), and "...we rely on

spirituality to listen to each other.” Sponsee-directed items ranged from 3.4% (“I suggest we pray together to understand”) to 15.8% (“I suggest that God/HP loves us both when we disagree”) and sponsor-directed items ranged from 6.2% (“my sponsor suggests we pray together to understand”) to 21.9%; these ranges show that sponsors are more likely to engage in spiritual mediation behaviors. “We pray together to understand” was least likely to be a behavioral suggestion (highest “never” endorsement) according the sponsee, from either member of the dyad. See tables 5 through 8 for prevalence rates.

Correlations between Relational Spiritual Processes and the Sponsorship Alliance

Concerning the relationship between all independent variables of (a) sanctification, (b) spiritual intimacy, (c) spiritual one-upmanship, and (d) spiritual mediation and the mediation variable of sponsorship alliance, hypotheses 1a through 1d were partially supported. Higher scores on sanctification ($r=.41, p<.01$), spiritual intimacy ($r=.29, p<.01$), and spiritual mediation ($r=.20, p<.05$), were linked to higher sponsorship alliance scores. See Table 11 for all bivariate correlation analyses. Given the significant correlations, hierarchical regressions to control for demographic variables were substantiated.

Hypotheses 1a through 1d were tested by running separate linear regression analyses between the independent variables of (a) sanctification, (b) spiritual intimacy, (c) spiritual one-upmanship, and (d) spiritual mediation and the mediation variable of sponsorship alliance while controlling for significant demographic variables. Hypotheses 1a-1d were partially supported. After controlling for gender, sanctification ($\beta =.38, p<.001$) still predicted sponsorship alliance ($R^2 =.18, F=13.97 (2, 128) p<.001$) After controlling for gender, spiritual intimacy ($\beta =.25, p=.003$) still predicted sponsorship alliance ($R^2 =.10, F=7.21 (2, 128), p<.001$). After controlling for gender, spiritual mediation ($\beta =.23, p<.01$) continued to predict sponsorship alliance ($R^2 =.09,$

$F=6.47$ (2, 128) $p<.01$). Overall, three of the four independent variables – greater sanctification, spiritual intimacy, and spiritual mediation – were tied to reports of a stronger sponsorship alliance. Regressions can be found on Tables 12 through 14.

Correlations between Relational Spiritual Processes and Recovery Goals

Hypotheses groups 2a through 2d, concerning the connection between the four independent variables listed above and the four dependent variables of (a) abstinence self-efficacy, (b) subjective experiences of alcohol thoughts and cravings, (c) difficulty regulating emotions, and (d) spiritual well-being, were partially supported. Greater sanctification was tied to spiritual well-being ($r=.50$ $p<.01$); spiritual intimacy was not tied to any of the criterion variables; greater spiritual one-upmanship was associated with less abstinence self-efficacy ($r= -.24$, $p<.01$); greater spiritual mediation was linked to less difficulty regulating emotions ($r= -.18$, $p<.05$) and greater spiritual well-being ($r=.39$, $p<.01$). Given the significant correlations, regressions on the significant associations were substantiated.

Four linear regressions were conducted that controlled for significant demographic variables. After controlling for age and meeting frequency, sanctification ($\beta =.50$, $p<.001$) continued to predict spiritual well-being ($R^2=.34$, $F=21.98$ (3, 130) $p<.001$). Given that there were no relevant demographics significantly tied to abstinence self-efficacy, no controls were entered, and thus spiritual one-upmanship ($\beta = -.24$, $p<.01$) continued to predict abstinence self-efficacy ($R^2=.06$, $F=8.24$ (1, 132) $p<.01$). Greater spiritual mediation ($\beta =.35$, $p<.001$) still predicted greater spiritual well-being after controlling for age and meeting frequency ($R^2=.22$, $F=12.25$ (3, 130) $p<.001$), but no longer predicted difficulty regulating emotions after controlling for age. Overall and after controlling for significant covariates, lower abstinence self-efficacy was uniquely associated with greater spiritual one-upmanship; neither alcohol thoughts/cravings

nor difficulty regulating emotions were uniquely tied to the independent variables; and lastly, greater spiritual well-being was linked to greater sanctification and spiritual mediation (Tables 15 through 17).

Correlations between Sponsorship Alliance and Recovery Goals

Hypotheses 3a through 3d, regarding the connection between sponsorship alliance (the mediator) and the four dependent variables, were partially supported: greater sponsorship alliance was linked to greater abstinence self-efficacy ($r=.20$, $p<.05$) and spiritual well-being ($r=.23$, $p<.01$). Sponsorship alliance was not significantly linked with cravings/thoughts of alcohol or emotion dysregulation. Given the significant correlations, regressions were substantiated on the two significant correlations.

Separate regression analyses were run between the mediator variable of sponsorship alliance and the dependent variables of abstinence self-efficacy (hypothesis 3a) and spiritual well-being (hypothesis 3d), while controlling for significant demographic variables (Tables 18 through 21). These hypotheses stated that stronger sponsorship alliance was linked to greater abstinence self-efficacy and spiritual well-being. These hypotheses were fully supported. No significant demographic variables were tied to abstinence self-efficacy, thus sponsorship alliance still predicted it in the regression model ($R^2=.04$, $F=5.26$ (1,132), $p<.05$). After controlling for age ($\beta =.005$, $p<.01$) and frequency of meeting attendance ($\beta = -.20$, $p<.05$), sponsorship alliance ($\beta =.24$, $p<.01$) still predicted spiritual well-being ($R^2 =.16$, $F=8.07$ (3, 130) $p<.001$). Given the significant regressions, mediational analyses were substantiated for certain links among variables.

Mediational Links between Relational Spiritual Processes and Recovery Goals

Hypothesis groups 4a through 4d were tested with an atemporal partial mediation model (Winer, Cervone, Bryant, McKinner, Lui, Nardorff, 2016) that uses a bootstrapping technique method while running multiple regression analyses (Illustrative understanding of model in Figure 1). Being explicit about an “atemporal” model is important because, despite using mediational statistical analyses, the relationships among key constructs cannot be considered causal because there is no temporal justification for them even if they can be conceptualized as such. Thus, the findings will be presented as atemporal associations that are valuable because they warrant future, longitudinal data collection on the relationship among the three variables in each significant mediation finding. The bootstrapping method is appropriate for the present study since bootstrapping analyses are not reliant on a normal sampling distribution for indirect effects and because it tends to have higher power as well as lower Type I error compared to other mediation techniques (e.g., Baron & Kenney, 1986; Hayes & Scharkow, 2013). Bootstrapping assessed the extent that the sponsorship alliance partially mediated relational spiritual processes on the recovery outcome variables. There were initially 16 possible partial mediation models since there were four independent variables and four dependent variables (Figure 1), however mediation analysis was only performed when the independent variable (e.g., sanctification) was tied to sponsorship alliance, represented by paths a1 through a4, and when the independent variable was tied to the dependent variable (e.g., abstinence self-efficacy), represented by paths c1 through c4. See Figure 1 below for illustration. Specifically, sanctification was tied to both sponsorship alliance and spiritual well-being (one mediation), and spiritual mediation was linked to both sponsorship alliance and spiritual well-being (one mediation). Thus, a total of two mediation analyses were conducted.

Using the PROCESS Macro for SPSS (Hayes, 2012), two mediation analyses were conducted to test the following hypotheses: Sponsorship alliance was expected to mediate the relationship between sanctification and spiritual well-being (Hypotheses group 4a) and sponsorship alliance was expected to mediate the relationship between spiritual mediation and spiritual well-being (Hypotheses group 4d). The results indicated the following:

Figures 2 and 3 summarize the results of the analyses. To investigate the relationship between relational spiritual processes and spiritual well-being, the total effect of sanctification on spiritual well-being and of spiritual mediation on spiritual well-being was examined.

For sanctification and spiritual well-being: The results indicated that participants who reported higher levels of sanctification also reported higher levels of spiritual well-being ($\beta = .35$, $SE = .05$, $p < .001$; “Pathway c” in Figure 2). To examine the hypothesis that sponsorship alliance would mediate the relationship between sanctification and spiritual well-being, the path between the predictor variable (sanctification) and the mediator variable (sponsorship alliance) was examined (“pathway a” in Figure 2). Sanctification was positively associated with sponsorship alliance ($\beta = .06$, $SE = .01$, $p < .001$). The relationship between the mediator variable (sponsorship alliance) and the criterion variable (spiritual well-being) was examined next.

The standardized indirect effect of sanctification on spiritual well-being through sponsorship alliance was .02 ($SE \text{ Bootstrap} = .04$; $CI \text{ Bootstrap range} = -.05 - .10$). Because the bootstrapped confidence interval of the indirect effect includes zero, the indirect effect is considered unreliable (Field, 2013). These results indicate that sponsorship alliance did not explain a significant portion of the variance in the relationship between sanctification and spiritual well-being. Specifically, although higher levels of sanctification were associated with greater spiritual being, this connection did not function through greater sponsorship alliance,

even though all direct effects were significant (pathway B, the link between sponsorship alliance and spiritual mediation, was significant when not controlling for sanctification).

For spiritual mediation and spiritual well-being: The results indicate that participants who reported higher levels of spiritual mediation also reported higher levels of spiritual well-being ($\beta = .28$, $SE = .06$, $p < .001$; “pathway c” in Figure 2). To examine the hypothesis that sponsorship alliance would mediate the relationship between spiritual mediation and spiritual well-being, the path between the predictor variable (spiritual mediation) and the mediator variable (sponsorship alliance) was examined (“pathway a” in Figure 2). Spiritual mediation was positively associated with sponsorship alliance ($\beta = .04$, $SE = .02$, $p = .02$). The relationship between the mediator variable (sponsorship alliance) and the criterion variable (spiritual well-being) was examined next (“pathway b” in Figure 2). It was found that sponsorship alliance significantly predicted spiritual well-being ($\beta = .79$, $SE = .36$, $p = .03$).

The standardized indirect effect of spiritual mediation on spiritual well-being through sponsorship alliance was .04 (SE Bootstrap = .02; CI Bootstrap range = .001 - .09). Because the bootstrapped confidence interval of the indirect effect does not include zero, the indirect effect is considered reliable (Field, 2013). These results indicate that sponsorship alliance explained a significant portion of the variance in the relationship between spiritual mediation and spiritual well-being. Specifically, higher levels of spiritual mediation were associated with higher levels of sponsorship alliance, which in turn were tied to higher levels of spiritual well-being.

Overall, sponsorship alliance partially mediated and explained the relationship between spiritual mediation and spiritual well-being, but it did not explain the relationship between sanctification and spiritual well-being. These findings are illustrated in Figure 2 and Figure 3, respectively.

DISCUSSION

The central theme of this dissertation concerned the sponsorship bond and its importance to a sponsee's recovery. This theme was explored by examining spiritual and relational factors that may be linked to both the strength of the sponsorship alliance and important recovery goals. AA literature has detailed the intimate, dynamic, and important bond between sponsor and sponsee and maintains that sponsorship is a central relationship to AA members, with the primary objective of helping facilitate 12-step completion and then supporting sponsees to stay sober across their lifespan.

Another important layer to this study examined spiritual well-being of AA members since AA conceptualizes spirituality as the program's foundation and a necessary perspective when understanding both the alcoholic's problem and how to apply the 12-step solution. To date, quantitative research has maintained what this researcher believes is a narrow – even if important – measurement of a member's success in AA, by mostly concentrating on outcomes such as abstinence and 12-step completion, but largely sidelining what AA deems is the purpose of 12-step completion: to connect individuals to a power greater than themselves and to live by spiritual principles. AA purports it is this relationship with a Higher Power that keeps people sober. It stands to reason, then, that exploring spiritual thoughts and behaviors could be fruitful in understanding AA recovery progress or goals as outlined in AA literature. Spiritual processes were assessed in two ways: as independent variables that measured four types of spiritual thoughts or behaviors in the sponsorship relationship, and as a dependent variable measuring spiritual well-being. Further, this researcher sought to understand whether these spiritual processes were directly linked to favorable recovery goals, as well as indirectly linked to them through the sponsorship relationship.

In psychological research, conceptual discussions by Young (2011, 2008) suggested that studying relational identity in AA members is likely pivotal in understanding how individuals obtain and maintain a recovery status. Empirical research dating back to 1988 also indicated that the sponsorship relationship should not be overlooked; however, most quantitative psychological research on 12-step program outcomes since then have mostly assessed individual processes, such as AA meeting attendance and 12-step completion, without much consideration for the sponsorship relationship. A few exceptions over the last few decades concern studies that highlighted the importance of having or talking with a sponsor as being linked to important recovery outcomes. For example, one meta-analysis showed that having a sponsor was the second largest predictor of better abstinence outcomes, and studies that followed found that being sponsored at an earlier time point predicted abstinence at a later time point (Johnson, Finney, & Moos, 2006; Kaskutas, Bond, & Delucchi, 2012; Kingree & Tompson, 2011; Subbaraman, Kaskutas, & Zemore, 2011; Tonigan & Rice, 2010; Witbrodt & Kaskutas, 2005). Even though these initial studies assessed sponsorship interactions using simple dichotomous variables, their strong findings planted seeds for future research. Recently, a reliable and valid multi-item measure of the sponsorship relationship – as measured by sponsorship alliance – has been tied to important recovery outcomes, such as relapse prediction, 12-step participation, and abstinence (e.g., Ello and Moser, 2003; Kelly, Greene, Bergman, 2016). The present study sought to add to this body of literature.

There were a few interwoven purposes of this study. This researcher was interested in examining the degree to which certain members of Alcoholics Anonymous, known as “sponsees,” experienced: (1) sanctification, spiritual intimacy, spiritual mediation, and spiritual one-upmanship in the sponsorship relationship, (2) if those relational spiritual cognitions and/or

behaviors impacted their evaluation of sponsorship alliance, (3) the extent to which these relational spiritual constructs were directly linked to recovery goals of abstinence self-efficacy, cravings for /thoughts about alcohol, spiritual well-being, and emotion regulation, and finally, (4) whether the degree of sponsorship alliance mediated the relationship between each relational spiritual construct and each of the markers of recovery. These objectives were accomplished by: (a) collecting prevalence rates of the relational spiritual constructs in a sample of AA members who endorsed being sponsored at the time of the study, (b) conducting regression analyses between the (i) spiritual constructs and sponsorship alliance, (ii) spiritual constructs and recovery goals, and (iii) sponsorship alliance and recovery goals (all of which controlled for significant demographics); and (c) conducting mediation analyses, when appropriate, to examine if the relational spiritual constructs were linked to recovery variables through the strength of the sponsorship alliance. In important ways, the results of this study enriched the body of literature dedicated to understanding the effectiveness of 12-step recovery. This study was the first to assess the prevalence of specific relationally spiritual thoughts and behaviors within the sponsorship relationship, their potential linkages to both sponsorship alliance and important recovery goals, and the possible mediating role of sponsorship alliance.

Prevalence Rates

This was the first study of its kind to collect and examine prevalence rates of specific relational spiritual variables as they are experienced in the sponsorship relationship. This was of interest given AA's strong spiritual underpinnings combined with AA's focus on members' forming healthy relationships and learning how to be other-centered. Regarding the spiritual foundation, AA literature strongly encourages members to experience their Higher Power in ordinary day-to-day life through different methods, like with daily prayer and meditation

regarding “God’s will” for them and by practicing spiritual principles. So too does AA literature centralize relationships, both in terms of developing one with a Higher Power as well as learning how to build “true partnerships” with other individuals. It thus makes sense that spiritual thoughts and behaviors could occur within the context of the sponsorship relationship – the primary relationship that helps members effectively reach their recovery goals.

Sanctification

This study confirmed that sponsees sanctify their sponsorship relationship, with item endorsement that ranged from approximately 29% to 88%. It cannot be overstated that, even though this sample size was small, almost 90% of sponsees endorsed believing that the sponsorship relationship connects them to “something greater than themselves,” indicating that sponsorship appears overwhelmingly linked to a sponsee’s sense of their spiritual path and/or connection to their Higher Power. Further, more than 3/4ths of the sample endorsed seven items that mention God being intimately involved in the sponsorship bond (e.g., “I see God at work in my sponsorship relationship,” “I sense my Higher Power’s presence in my relationship with my sponsor”) and that the sponsor relationship connects the sponsee to important spiritual matters, such as the “deepest truths of life” and the “larger spiritual plan.” 13 of the 20 items were endorsed by at least 2/3rds of respondents, and 18 of the 20 by at least half of them. Overall, these findings suggest that sanctification of the sponsorship relationship is quite possibly a daily or regular experience for sponsees, where the relationships to a Higher Power and sponsor are interwoven, so far with potentially unknown consequences – for better or worse – to a sponsee’s recovery.

An additional note on sanctification concerns how to understand the variability in item prevalence rates. Given that AA considers itself a spiritual and not religious organization, it is

unsurprising that there appears to be less endorsement of items worded with more traditionally religious language for participants living in a predominantly Christian society. For example, the item with the highest endorsement states, “My sponsor relationship connects my sponsor and me to something greater than ourselves,” whereas the lowest endorsed item attaches sponsorship to the word “Holy” (29%). These prevalence rates do not assume that sponsees, or AA members in general, reject religion, though it’s possible that AA members have less contact with traditional religious language and/or less meaningful associations with them, and therefore are less likely to endorse having sanctifying thoughts with religious language. For example, a synonym for “Holy” is “sacred,” which may be more of a part of their spiritual everyday language and is thus more relatable and identifiable to them. The item with the word “sacred” in it carried a prevalence rate of 65%. The differences in these prevalence rates may suggest that the language used in measures that assess spiritual constructs is important if we expect to capture and properly delineate these processes and then tie them to outcomes of interest. See table 5 for all sanctification items prevalence rates.

Spiritual Intimacy

Spiritual intimacy was also a confirmed phenomenon as reported on by sponsees in the dyad. Of note, 81.5% of sponsees endorsed the highest level of feeling safe being completely open with their sponsors about their faith, with 95% of them reporting a 2 or 3 on the scale of this item (scale ranges from 0 – not at all to 3 – a great deal). An item that asked if sponsees keep their spiritual side private showed that almost 95% said either “not at all” (0) or 1. Combining information from these responses suggests that sponsees feel safe about being open and will practice that openness by not keeping spiritual matters to themselves. These findings are in line with the practice of sponsorship as defined by AA, which states that one of the sponsor’s tasks is

help sponsees process spiritual matters. Another interesting finding concerns the variability across anchor points in the item “My sponsor shares their spiritual questions and struggles with me,” where about 12% said “not at all,” 26% said “a great deal,” and 62% reported somewhere in the middle. While this could make sense for all sponsors, such that maybe the degree to which any sponsor self-discloses depends on other factors like the topic at hand, if their experience is relevant, or how long they’ve known each other, it’s also possible that there is no final rule or expectation about the sponsor’s level of disclosure, meaning that the observed variation equates to sponsors having different practices. This is a clear difference between sponsors and sponsees since the expectation for the sponsee is to be consistently open and forthcoming about their spiritual struggles. A qualitative study to understand sponsors in this way could provide more information on sponsor self-disclosure reasoning and could help in the development of quantitative measure related to level of openness and how it may impact the sponsorship bond.

Spiritual Mediation

This study indicated that, some sponsorship dyads explicitly involve God or a Higher Power in their relationship in positive ways when disagreeing, according to sponsees in this study. Overall, 47%-64% said that they “never” engaged in spiritual mediation and 41%-54% said that their sponsors “never” engaged in it either. The distribution of responses after “never” showed that sponsees were more likely to rate theirs or their sponsor’s use of spiritual mediation as “rarely” or “sometimes,” with the former varying between 8%-18% (rarely – sponsees) and 9%-15% (rarely – sponsors) and the latter varying between 12%-18% (sometimes – sponsees) and 16%-20.5% (sometimes – sponsors) across items. That being said, 22% of sponsees endorsed that their sponsors “always” engaged in two specific types of spiritual mediation: reminding the sponsee that God loves them both and that God wants them to listen to one

another during disagreements. Praying together as a form of spiritual mediation was the highest endorsed “never” choice and the lowest “always” choice for both sponsees and sponsors according to the sponsee (3.4% and 6.2% endorsed “always,” respectively). Overall, it appears that the use of spiritual mediation tactics to help solve conflict varies in each sponsorship relationship, regarding which person uses it and how often as well as in the type of mediation utilized. Both spiritual mediation and one-upmanship had a high level of “never” for items, ranging from 44.5%-94% (spiritual one-upmanship) and 42%-64% (spiritual mediation), suggesting that several sponsorship dyads did not leverage God or spiritual principles in negative or positive ways when disagreeing, indicating that they typically used other methods of conflict resolution. This may suggest that utilizing God as a third-party during conflict in any way is not a sanctioned AA method of sponsorship, but rather personal or unique to each dyad.

Spiritual One-upmanship

Like prevalence rates in other important relationships, spiritual one-upmanship does not appear to occur with great frequency in the sponsorship relationship, but it does exist according to sponsees in this study. On most items, prevalence rates seem similar for sponsors and sponsees who engage in spiritual one-upmanship, with a few exceptions. According to sponsees, sponsors are more likely to suggest that the sponsee is acting against their Higher Power or AA’s principles, with only 44.5% saying their sponsor’s never do this and 50% endorsing that one-upping in this way occurs “rarely” or “sometimes.” A similar pattern arises regarding the sponsor suggesting that the sponsee’s HP or AA principles disagrees with the sponsee’s position on a particular matter. On the other six items, 88% - 90% rated their sponsors as “never” engaging in spiritual one-upmanship behaviors (e.g., the sponsor suggesting their own view is superior or more mature, or that God is unhappy with the sponsees opinion). Sponsees too, mostly rated

themselves as “never” engaging in spiritual one-upmanship behaviors (89-94% for 4 out of 6 items). Sponsees were more likely to say that they “sometimes” or “rarely” suggest that their own sponsor is arguing against God’s will (32% of respondents). These highlights indicate that, when disagreements occur, sponsees perceive that both parties are more likely to use the one-upping method concerned with God or the spiritual principles being out of line with the other person’s views or behaviors – or more simply put, that the other person does not have the favor of a higher spiritual being or reasoning on their side. Given that spirituality is the foundation of AA, one-upping in this way could be an immensely powerful argumentative tool when used against another person depending on how it effects the individual, their relationship, or each person’s AA program. It’s possible that it’s use could make an AA member wonder if they are threatening their own sobriety, headed for relapse, or going against their commitment to the program that saved their lives. It could be worthwhile to better understand this phenomenon through qualitative and further quantitative research, as it might reveal the specific situations in which this form of one-upping occurs, and further, it’s potential effect on sponsorship or recovery progress for either party. Although this study found a low base rate for spiritual one-upmanship, that does not mean its practice is inconsequential to the sponsorship relationship or important recovery goals. As a reminder, the literature review for the present study found that spiritual one-upmanship tied to poorer individual adjustment and relational health.

To sum, these relational spiritual processes were found to exist in the sponsorship relationship to varying degrees, and this was the first study of its kind to assess the frequency and varied use of each process within sponsorship. These results provide the field with greater insight into how spirituality is specifically experienced and utilized in the sponsorship bond. These results may hopefully motivate researchers in the field to continue assessing their prevalence as

well as function in sponsorship and in the larger recovery context. In that vein, this study took the first step in understanding the potential functions of these relational spiritual processes, by attempting to tie them to the strength of the sponsorship alliance and to the quality of a sponsee's recovery, which will now be discussed.

Linkages between Spiritual Processes and Sponsorship Alliance

An even deeper dive of this project was to understand the importance, if any, of higher levels of these relational spiritual processes. Firstly, this study was the first of its kind to show that not only do sponsees engage in spiritually-based thoughts and behaviors within the sponsorship relationship, but these spiritual qualities are tied to the well-being of the sponsorship relationship. Specifically, sponsees who endorsed having more sacred thoughts and feelings about their relationship with sponsor, greater spiritual intimacy, and who were more likely to engage in adaptive spiritual behaviors during conflict with sponsors, were also more likely to experience stronger sponsorship alliances. These findings reveal that a sponsee's sense of spirituality is more than a denomination or orientation and is richer than general practices like prayer and meditation. For AA members, their spirituality is a dimension of life that permeates their regular and often intimate interactions with a sponsor, including how they see their Higher Power personally working in their lives and how their sponsor is a part of their spiritual path as well as integral to their spiritual growth. Moreover, these relational spiritual processes have insignificant to moderate correlations with one another, suggesting they each provide a unique window into how spirituality functions within the sponsorship relationship. It's important to note that reports on these spiritual processes and sponsorship evaluations were both assessed at a single time point, meaning that it's possible, and maybe even likely, that sponsorship alliance and spiritual practices within the relationship enhance one another rather than operating in a

unidirectional manner. This potential feedback loop of positive thoughts, feelings, and behaviors and experiencing a sense of alignment with one's sponsor makes sense in the context of important relationships.

Spiritual one-upmanship was unrelated to the strength of the sponsorship alliance. It's interesting that positively involving God in the relationship has a clearer relationship to sponsorship alliance than negatively involving God. It's possible that leveraging God in the sponsorship relationship doesn't have a consistently negative effect on sponsorship quality. It could be that sponsees feel dependent on their sponsors to access or experience a relationship with their Higher Power or they are less likely to take offense to a sponsor using God to influence their thought processes and behaviors. Another possibility is that "time sober" served a moderator between spiritual one-upmanship and sponsorship alliance. Members who have more time sober may be able to guard against a sponsor's spiritual one-upmanship tactics, whereas a newer program member who has a less developed spiritual identity may be more vulnerable to this kind of spiritual coercion. Not only could a member with more sobriety guard better against these tactics, but sponsors might also be hesitant to use spiritual one-upmanship with members who have more time sober and an established relationship with a Higher Power. It could also be that a limitation of this study made spiritual one-upmanship difficult to observe. Due to the small sample size and the subsequent need to transform spiritual one-upmanship into a dichotomized variable, the loss of variance could have been too substantial to find an effect. Future studies may do better to measure this spiritual behavior in a large enough and variance rich sample.

Ties between Sponsorship Alliance and Recovery Goals

Do stronger sponsorship bonds net sponsees an advantage in experiencing desired recovery outcomes? As a reminder, higher scores on sponsorship alliance mean that a sponsee

perceives a sense of alignment with their sponsor regarding the problems being discussed, that they work well together to understand, and the appropriate solution that will achieve recovery goals as laid out by the AA program. The degree of sponsorship alliance could have wide-ranging implications for the longevity of the sponsorship relationship and the sponsee's ability to maintain recovery when expected and unexpected challenges present over time. This study's results corroborate previous findings that sponsorship alliance matters to sobriety maintenance by tying stronger sponsorship bonds to a sponsee's report of greater abstinence self-efficacy and spiritual well-being.

Abstinence Self-efficacy

This construct measures a sponsee's confidence in not picking up a drink if or when they are plagued by certain negative or difficult life experiences (e.g., illness, cravings, depression) that are typically considered high risk or challenging situations. Although this variable does not measure abstinence itself, studies have found the two to be correlated. For example, sober individuals who reported higher self-efficacy or confidence when faced with urges to pick up a drink or drug were less likely to relapse (Brown and Ramo, 2006; Marlatt and Donovan, 2005; Shaw and DiClemente, 2015; Witkiewitz and Marlatt, 2004), including after successfully completing formal treatment for addiction (Solomon and Annis 1990; Burling, Reilly, Moltzen, and Ziff, 1989; Litt, Kadden, and Stephens, 2005). Further, Litt and colleagues (2005) showed that self-efficacy levels while in SUD treatment was a stronger predictor of less marijuana use over time than learning adaptive coping skills (Litt et al., 2005). So, while abstinence self-efficacy and abstinence are not perfectly correlated, it seems appropriate to suggest that abstinence self-efficacy is, at the very least, a protective factor and adaptive for staying sober. The present study supports the findings on the importance of being sponsored and on self-

efficacy by showing that, not only does contact with a sponsor count when it comes to matters of abstinence, but that the stronger their alliance, the more likely they'll experience adaptive levels of abstinence self-efficacy. This is important given that people in recovery or counselors in recovery centers could greatly benefit from knowing specific protective factors for remaining abstinent.

Spiritual Well-Being

According to AA, spiritual well-being is imperative to staying sober and maintaining recovery, but most empirical studies have struggled with capturing how this could be so. For example, studies have attempted to tie general or global religious/spiritual measures (i.e., prayer and meditation frequency, purpose in life/spirituality as a personality trait) to outcomes, but with mixed results. These findings – or lack thereof – have prompted some researchers to propose that, while AA stresses that spiritual experiences or well-being and a relationship with a Higher Power are vital to achieving sobriety, spirituality is not a primary or robust mechanism of change in AA given that it is not as strongly tied to program effectiveness as other AA components. While certainly possible, this researcher believes it's important to exhaust the measurement of spirituality, both as independent and dependent variables, as it exists in the daily lives of AA members prior to drawing a definitive conclusion of that kind. Therefore, one of the goals of the present study was to assess the recovery goal of “spiritual well-being” (e.g., frequency of spiritual experiences such as feeling God's presence/connection to all living things, gratitude for blessings, union with God) as a criterion variable, given how AA centralizes a relationship with a higher power and having spiritual experiences as integral to a member's ability to recover. Firstly, this study showed that stronger sponsorship alliance was tied to a greater sense of spiritual well-being, indicating that the sponsorship bond is likely performing the way it was

intended to – by helping the sponsee connect to a Higher Power as well as to enrich their spiritual lives. This evidence is hopefully motivating for researchers to begin including specific measures of spiritual well-being, growth, or development as either independent or dependent variables, so that the field can more assuredly establish if spiritual processes or gains are intimately tied to non-spiritual outcomes, like abstinence or abstinence self-efficacy.

In general, these results indicated that the strength of the sponsorship alliance is a phenomena worth explication, both in how it is influenced by individual and relational factors, as well as how it is tied to what AA members are desperately trying to attain: sobriety and recovery-related outcomes or goals that breed stability, security, and hope for the future.

Associations among Relational Spiritual Processes and Recovery Goals

Are relational spiritual processes directly tied to recovery goals that sponsees are striving to obtain? The present study suggests that it's possible. Findings from this study show that (a) lower abstinence self-efficacy was associated with greater spiritual one-upmanship and that (b) greater spiritual well-being was tied to greater sanctification and spiritual mediation.

Interestingly, while spiritual one-upmanship was not associated with sponsorship alliance, it was linked to the degree of confidence a sponsee exhibited when hypothetically faced with high-risk situations or challenging life circumstances. It suggests that, even if a sponsee maintains a reasonable alliance with their sponsor in the presence of one-upping behaviors, the sponsee's own belief in their ability to stay sober is undermined. It's possible that even relatively low doses of spiritual one-upmanship engender self-doubt in sponsees, or, by leveraging God and AA against a sponsee, that the sponsee may be less likely to feel they can depend on themselves or their own Higher Power to help them through tough times. Spiritual one-upmanship could also foster unnecessary or unwarranted dependence on a sponsor's perception and evaluation of a

sponsee's abilities to stay sober. Since spiritual one-upmanship combines both the sponsee's and sponsor's frequency of spiritual one-upmanship according to sponsees, it's possible that the sponsee's use of spiritual one-upmanship is also causing self-doubt or over-dependence on the sponsor. For instance, when the person who has less power in the relationship (e.g., a sponsee) attempts to use existential (e.g., God/Higher Power) or institutional power (e.g., AA or its principles) to leverage their mentor, they may do so with the need to have their sponsor on their side so that they can feel confident in their own course of action. In either instance of spiritual one-upmanship, these one-upping behaviors could stem from as well as lead to issues with developing the protective factor of abstinence self-efficacy. Also of note, positively involving God in conflict did not tie to abstinence self-efficacy, whereas negatively involving God did, indicating that there is more harm when the latter occurs, making it a risk factor, while spiritual mediation is not necessarily a protective factor.

Not only does imbuing sponsorship with sacred qualities and using God/AA principles adaptively during conflict tie to stronger sponsorship alliance, but those same two processes are tied to the sponsees report of greater spiritual well-being. The tie between spiritual mediation and spiritual well-being makes sense if adaptively involving God in sponsorship interactions provides positive experiences for the sponsee to associate with their Higher Power, more opportunities to have meaningful spiritual experiences overall, and could increase the sponsee's likelihood of further seeking spiritual experiences even when the sponsor is not present. Sanctifying the bond could also lead to the likelihood of greater spiritual experiences – especially if the sponsee believes that their sponsor is a part of God's plan for them – the sponsee may be more likely to attribute a sponsor's guidance during difficult times to the presence of a Higher Power caring for them.

Overall, these results fit nicely with the literature base that examines the connection between facets of spirituality and important recovery goals, while adding to the literature by using “spiritual well-being” as a desired and important recovery goal alongside the aim for abstinence.

Fascinatingly, emotional dysregulation and thoughts about/cravings for alcohol were unrelated to the relational spirituality variables and sponsorship alliance. This is interesting given that the 12-steps are designed to not only help sponsees develop spiritual well-being and remain abstinent, but to also reduce the presence of obsessive alcohol-related thinking patterns substantially and to increase emotional stability in a linear and predictable fashion. While there could be several reasons for this seeming absence of connection, a few are noted here: there was a lack of variability in a sponsee’s report of cravings and thoughts, such that 97% of scores were between a one and two on a seven-point scale, with no average total scores above 3.14 (mean=1.33, SD=.38). This lack of variation makes detecting a small effect difficult or impossible in a small sample unless the effect size is sizeable. Besides variability concerns, thoughts and cravings may be less proximally related to the sponsorship alliance and more related to completion of the 12-steps. This same line of thinking could be applied to emotional regulation abilities, such that a sponsee’s ability to emotionally regulate may be tied to more proximal predictors, like completing 12-steps or the sponsor’s own ability to regulate emotions and model it for sponsees. Notably, about 98% of participants in this study had completed the 12-steps and the average time sober was 15 years. Assessing moderators, such as length of recovery, in the relationship between sponsorship alliance and emotional regulation and cravings for alcohol could be a worthwhile line of research.

Mediation Analyses among Relational Spiritual Processes, Sponsorship Alliance, and Recovery Goals

This research went another step further by assessing if relational spiritual processes work through sponsorship alliance to help individuals achieve important recovery goals. Atemporal mediational analyses were conducted with spiritual mediation and sanctification onto spiritual well-being. Findings showed that sponsorship alliance did not mediate the relationship between sanctification and spiritual well-being, but it did mediate the relationship between spiritual mediation and spiritual well-being. This finding indicates that a stronger sponsorship relationship could be partially responsible for how a relational spiritual process is tied to a desired goal in recovery, namely, spiritual well-being. This is an important point to take in: spiritual well-being through a connection with a power greater than oneself and by having a spiritual orientation to day-to-day life is what AA would consider the most important “state of being” in order to secure one’s chances of staying sober. If the strength of the sponsorship bond can predict the extent of a sponsee’s daily sense of spirituality, then focusing on the several factors that could affect the quality of the sponsorship alliance is imperative. This research finding provides one window into how these factors are connected to one another. Although this finding is correlative in nature, it could serve as a jumping off point to spurn longitudinal studies to replicate this finding, tie other forms of spirituality within a sponsorship bond to different forms of spiritual growth/development, and assess spiritual well-being as a mediator between sponsorship alliance and abstinence-related recovery goals.

A Reflection on 12-step Research

The study of AA’s major components, sub-facets, or important relationships is a difficult undertaking, and at best limited, given how recursive and potentially interactive each factor is

with one another in the daily lives of AA members. For example, when an AA member attends an hour-long meeting, they could also “fellowship” with other alcoholics (i.e., gain social and emotional support), visit with their sponsors, be of service (i.e., help others), or pray and see a Higher Power working in their lives (i.e., opportunities for spiritual experiences and growth). Even more intricately, these AA behaviors could instigate one another rather than happen independently. The amalgam of these experiences can have varying inhibitory, enhancing, or neutral effects on recovery goals at any single time point or across time for members. Thus, it’s likely that each set of AA variables examined in a particular study is limited by study methods (not to mention access to participants), and thus may not permit the level of sophistication and complexity needed to capture the holistic AA experience that makes “working the program” successful. Because of this, it’s important to speak to the following: most research designs in 12-step studies appear as linear snapshots of how AA components may be linked to one another, so we must keep in mind that these relationships are likely cyclical or reciprocal as well as regularly repetitive, meaning AA factors serve as both independent and dependent variables at different time points and as determined by how a researcher is conceptualizing such linkages. So, even though correlative research, such as mine, can’t draw conclusions of causality, I stress that even longitudinal studies with more sophisticated designs (and that can build stronger causal cases) are still limited by linear methods of conceptualizing relationships among factors, and therefore, are also only providing snapshots of what are likely to be cyclical connections with repetitive features in the application of AA’s 12-step program. I stand in agreement with Young (2009) who suggests that future researchers should study “the recursive nature rather than strictly linear” of AA involvement, and add that researchers should also include the cyclical and interactive nature of AA components. As is true for most psychological science investigations, more

research is needed to understand the success of such a fascinatingly structured and complex program as Alcoholics Anonymous.

Limitations and Future Research

The present study supports and expands previous research by contributing a spiritual and relational perspective on how an AA members' sponsorship bond and their recovery goals are tied to dyadic thoughts of and behaviors with their AA sponsor. Still, several limitations should be noted. First, the results of this study are cross-sectional using a correlational research design. The mediation data is also atemporal. This means that, although theoretically and conceptually the interpretations are theoretically fitting, causality and directionality cannot be statistically deduced from the findings. Also, while this researcher collected information on a few known and potentially influential third variables (e.g., meeting frequency, individual demographics), the study's design does not eliminate a third variable effect on the findings. Thirdly, since this study was the first of its kind in some respects, findings need to be replicated in future studies so that these findings are generalizable and may be supported more firmly and across samples. Further, the sample size of this study was small and had restricted sampling methods, which naturally indicates a few limitations: Although this researcher attempted to find participants through larger organizations and who were more removed from this researcher, snowball and convenience sampling were the primary sampling methods, and thus, this was a small, non-random sample. Furthermore, unlike prior research on the role of AA sponsorship, most of the participants in this sample had a fairly long history of sobriety. Therefore, this sample and the subsequent findings could represent a subset of certain kinds of AA members, rather than being representative of all AA members. This possibility underscores the necessity to replicate findings. Because of the smaller sample along with less reliable and systematic sampling methods, it's possible that lack

of variability in responses exists, especially for low base rate phenomenon like spiritual one-upmanship, making linkages difficult to detect. In a similar vein, the sample is not representative in terms of individual and AA demographic variables of all AA members, especially not outside the US. For example, about 24% of participants were in their 30's, whereas the 2014 AA membership survey calculated that this age group makes up about 14% of AA members; the membership survey also found that almost 75% of members were over the age of 40, whereas the present has about 50% of participants above and below age 40. Following age, participation by gender was noticeably different as the AA survey recorded 38% of members as female and the present study was 51% female. Another difference comparing these two sources concerns length of sobriety. The membership survey found that 51% of members had 5 years sober or less compared to 21% in the present study. The present study also found that 30% of the data was derived from members who had 20 or more years sober, whereas the membership study noted 22% of U.S. members had achieved this length of sobriety. Therefore, the present study findings may at times reflect both a younger age group as well as members who have strung together more days sober compared to the typical AA members and to members early in recovery for whom the quality of their sponsorship relationship may be especially influential. Following that, this sample may differ from the general AA population in unknown but meaningful ways regarding the findings in this study. A nationally representative sample of the AA population is important to substantiate and generalize these findings.

Another limitation is related to the reporters in the sample. This researcher relied on the sponsee's self-report of their own and their sponsor's behavior. While previous research on spiritual intimacy, spiritual one-upmanship, and spiritual mediation in marital couples shows that one member's report on another's behavior is in line with the other-report of their own behavior,

this has never been studied in the sponsorship relationship, so it's unknown if this same pattern would exist, especially since there is a different power dynamic and the notion that newer AA members already struggle with relating appropriately with others. This could mean that their perceptions or evaluations of the sponsor are biased or inaccurate. Nevertheless, it's fascinating that the present study's findings suggest that the sponsee's evaluations are important predictors. Future studies would shed light on if the sponsor's evaluations significantly matter to the sponsee's recovery. There is also an inherent limitation in self-report. These behaviors were not observed and systematically analyzed by researchers, therefore each sponsee's report may vary in their ability to be aware of and evaluate their own and another's behaviors. Observational methods of studying a sponsor and sponsee interact, even if in a more structured laboratory setting, could help this field more accurately describe and explain the differences in sponsorship relationships.

A possible critique and potential limitation of this study involves the finding that spiritual intimacy is positively linked with sponsorship alliance. As noted in the literature review, some studies that examine ties between spiritual intimacy and outcomes report to conservatively control for emotional intimacy in an attempt to parcel out the emotional component of spiritual intimacy and to focus on the effect of the spiritual component itself. This researcher takes issue with this line of thinking for a couple of reasons. Firstly, if spiritual intimacy were to become insignificant once emotional intimacy is included in a regression analysis, there is more than one interpretation of such a phenomenon. While some would conclude that the spiritual component of intimacy must be irrelevant, another interpretation is that emotional intimacy is having a mediation effect on the relationship between spiritual intimacy and a particular outcome. If emotional closeness already exists, spiritual intimacy may be more likely, and then engaging in

spiritual intimacy may in turn feed greater emotional closeness. The former conclusion could be possible, but it is also a reductionist view of the spiritual dimension of people's lives. I wonder if some critics are making one of two mistakes. First is the mistake that all significant overlap between variables in the same category must be removed or controlled. I wonder how useful this is since several groupings of experiences (i.e., forms of intimacy) can be reduced down to their base components or generalized up to their umbrella categories, like the presence of positive or negative emotions or the extent of spiritual thoughts and behaviors being related to their level of religiosity, respectively. Of course, there is a relationship, sometimes even a significant one, but the analysis is at a different level based on the research question. Always reducing "down" or generalizing "up" is not particularly useful in predicting behaviors and outcomes, otherwise undertaking research on mediators and moderators or understanding facets or components of a larger variable would be needless. Critics may also be mistaking the presence of positive emotions for unique emotional intimacy (separate from the whole variable), and therefore think that those emotions should be removed from spiritually intimate matters; however, that in and of itself changes "spiritual intimacy" to something different, possibly just an assessment of the frequency with which two people use spiritual words – yet understanding that variable was never the goal, nor the research question. There may be no way to untangle positive emotions or even emotional closeness from spiritually intimate dialogue without changing the variable being measured, but I wonder, why would we? It's emotional closeness *about* spiritual matters. That's the definition of the phenomenon. All forms of intimacy are meant to have warm, connective, or positive components. These emotions are usually a part of the form of closeness being studied in a way that cannot and I argue should not be reduced to its mechanistic or transactional nature, especially if the semantic nature changes too. A parallel is this: when sexual intercourse is

reduced to its transactional nature, do we still consider it intimate? I would argue that we do not, in fact there is widely known and agreed upon jargon, at least in the American culture, that differentiates sexual experiences with and without emotional closeness. They become two different experiences with varying repercussions on important outcomes like sexual, relational, and individual health. Thus, conceptualizing the emotional component of a variable as *part of* the variable without controlling “out” the emotion seems important, otherwise we would actually change the variable itself in the process. It is this researcher’s suggestion to either treat them as different variables, different levels of analysis, or use the mediator/moderator conceptualization when linking these variables in a statistical model. This is simply done by making sure the measure has distinct wording for each item that requests a rating based on spiritual dialogue, with no item appearing to assess general emotional support and disclosures *without the spiritual component*. The measure in this study meets this criterion. If emotional closeness from spiritual matters were not occurring in the sponsorship relationship, participants had the option of responding with a degree of disagreement. The prevalence rates section of this research showed that spiritual intimacy is present, and the correlations showed that it’s meaningful. Nevertheless, this researcher still urges future research to study emotional and spiritual intimacy in the sponsorship relationship, not to pit them against one another, but to better understand the function and effect of each on the bond and a member’s recovery goals.

The present study has the potential to spurn several lines of future research. Firstly, continuing to use the sponsorship relationship as an important independent and mediating variable when assessing recovery goals of AA members is worthwhile. So too is measuring dyadic spiritual processes. An entirely new body of literature could be dedicated to uncovering the linear or cyclical nature of the spiritual side of a sponsee’s relationship to their sponsor,

including assessing for both the sponsee and sponsors' report of their spiritual experiences together. As mentioned earlier, longitudinal studies committed to understanding cyclical and recursive relationships among AA involvement practices could shed light on much more than just which isolated action has the greatest effect on recovery goals, but how they may or may not work together. Findings like this could help the field build a more comprehensive list of risk and protective factors beyond global or general indicators - information that could be well-used in treatment centers. For example, instead of listing "complete the 12 steps" as a protective factor in relapse prevention, information regarding what helps people complete the 12 steps is a more proximal protective factor that could also pinpoint barriers or strength in a member's approach to the 12-step program. Another fruitful line of research concerns regularly utilizing a measure of spiritual well-being, growth, or development as a mediator for important recovery goals. Zeng (2007) found that spiritual change mediated the relationship between 12-step work and abstinence, whereas the present study used spiritual well-being as a recovery goal. Both conceptualizations of spiritual experiences in AA (as a goal and mechanism) are warranted given that AA describes a connection to God/spiritual experiences as the culmination of 12-step work as well as implicates spirituality in facilitating abstinence. Continuing to utilize specific measures of spirituality as a mediator (beyond general religious and spiritual practices) when assessing sponsorship and recovery goals will help to support or oppose the suggestion that spiritual factors are important across all AA members and not just a certain subset of them. I also urge researchers to include recovery goals beyond abstinence or abstinence self-efficacy in order to have a better representation of AA's self-described mechanisms of change, so that conclusions of this nature – whether they agree with AA's beliefs or not - are more assuredly founded.

The scope of this research focused on independent factors that were spiritual and relational in nature when considering how the AA sponsorship bond may be strengthened or weakened. It also focused on several key goals of recovery, one of them being a proxy for abstinence known as abstinence self-efficacy, reduced cravings for/thoughts about alcohol, spiritual well-being, and what AA terms “emotional sobriety” (and what this present study measured as emotional regulation). It is this researcher’s hope that the findings in this study instigate more research that (a) treats the sponsorship relationship as a focal point in understanding recovery success beyond individual factors, and (b) uses more proximal measures of spirituality as independent variables as well as continues to use a measure of spiritual well-being or spiritual growth/change in outcome studies, in order to assess its functional importance for success in AA.

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APPENDIX A. HISTORY AND BACKGROUND OF ALCOHOLICS ANONYMOUS

AA as an Organization

In its basic text, Alcoholics Anonymous, fondly referred to its members as “the Big Book,” Bill described that the birth of AA was the result of one alcoholic talking to another in such a profound way that a non-alcoholic was incapable of doing. After being visited by his friend Ebby T., a man who claimed to “have religion” now and thus no longer needed to drink, Bill became intrigued by how Ebby established his new way of life. Bill embarked on a journey of finding how spirituality could keep him sober through his contact with the Oxford Group, which is a “mostly nonalcoholic fellowship that emphasized universal spiritual values in daily living.” While Bill managed to stay sober for a few months, there were critical points in his early sobriety where he realized he needed more than the current set of spiritual tools – he needed a spiritual toolkit that specifically addressed alcoholism combined with an other-centered practice of helping other alcoholics get and stay sober. In a memorable moment where Bill believed he was going to either pick up a drink or pick up the phone, Bill raced to the phone and called around to churches and hospitals in desperate need to be of service and relieve the grasp his alcoholism had on him – even sober. This is the point at which Bill recalled that he met Dr. Bob, the other co-founder of AA. Dr. Bob was the first alcoholic that didn’t pick up drink after working with Bill. In their discussions about alcoholism and recovery as well as through leaning on one another, both of them quickly realized that they needed to find more alcoholics to help. In recognizing that helping others was imperative to their own sobriety, they set out to “carry the message” to other alcoholics, who at that time, could be found in hospitals and institutions. Bill began to write the first draft of the Big Book around three and half years sober, and over the course of about a year, the book was edited by Dr. Bob and the early members (100 or so) of AA

(AA World Services, 2018). The early members of AA, including its cofounders, termed alcoholism a disease that had no cure, only a daily reprieve if certain conditions were met. These conditions are outlined as the 12-steps in the Big Book. The Big Book is a 581-page source that provides a detailed account of the alcoholic addiction problem as they define it, the prescribed “program of action” to obtain and maintain lifetime sobriety (the twelve steps), followed by 41 narratives from AA members who share their “experience, strength, and hope” as it relates to their personal transformation from addiction to abstinence by adopting AA’s recovery program and way of life.

AA as a Fellowship

The fellowship of AA is a group affiliation and personal experience, which makes it multi-layered and multi-faceted. Virtually every member can feel connected to one another by having in common their AA membership or by attending annual AA gatherings such as conferences and conventions that serve hundreds to thousands of members on a single day or weekend (AAWS, 2018). On a more regular basis, AA members typically derive a sense of belonging from their personal AA communities (AA World Services, The AA Group pamphlet, 2018). Weekly AA meetings – also known as AA groups – facilitate an experience of “the fellowship” through establishing a weekly time and space within their respective communities for “carrying the message” of AA. The message of AA is quite simple, in that there is a 12-step program to follow for alcoholics who wish to recover, and that “it works if you work it” (AA World Services, Inside AA, 2018). Since AA meetings are typically the contact point between existing members and new attendees, potential members often experience AA through first encountering “the fellowship” of AA rather than the Big Book (AAWS, Inside AA pamphlet, 2018). AA maintains that there are currently over 118,000 groups in more than 180 countries

(AAWS, Inside AA pamphlet, 2018). One of AA's pamphlets is emphatic about the significance of the AA group: "In AA, everything starts with the group — it is the basic building block of the entire Fellowship and the place where recovery begins for most alcoholics" (AAWS, Inside AA, 2018).

A 2008 literature review of 24 studies confirmed that the social networks of AA members—particularly support received from within the fellowship—are especially important for maintaining sobriety, though the study never used the term "fellowship" to label this module of AA (Groh, Jason, & Keys, 2008). The findings indicated that AA involvement provided multiple levels of assistance, including structural, functional, general, and alcohol-specific support, as well as the giving and receiving of 12-step recovery-based help. Most relevant to the topic of sponsorship is support based on giving and receiving help within AA social networks, such as through 12-step work, being a sponsor, providing motivation and encouragement, and intimately sharing about one's experience with addiction and recovery. All of these forms of 12-step support were related to better recovery outcomes.

In sum, it is this supportive leg of AA – the fellowship – that helps members feel strengthened in their emotional and practical efforts to stay sober. It provides opportunities to develop close relationships founded on the mutual understanding that there is a shared common suffering and a future direction that is recovery-based. The fellowship also serves as an integral part of meeting production, which unites members by facilitating their instrumental participation in one another's sober journey. It is also within local AA meetings, where fellowship is ripe, that members are exposed to a group of existing members from which they are likely to choose a sponsor.

APPENDIX B. THE SPIRITUAL ORIENTATION OF AA, STEP BY STEP

Multiple expressions in the Big Book emphatically address that self-development along spiritual lines is crucial to life-long sobriety. In Bill Wilson's story in Chapter 1 (part of step 1), the reader is oriented to the typical format of AA meetings: swapping stories and relating to one another by sharing one's experience, strength, and hope in narrative form. This narrative structure sets the stage for the 12-steps, allowing the reader to decide whether or not he or she relates to the disease of alcoholism as portrayed by Bill's life. In his writings, Bill connected maintaining sobriety to his own maintenance of spirituality. After several failed attempts at getting sober, Bill landed himself in the hospital due to alcoholic withdrawal. His turning point and ability to achieve solid footing in sobriety came when he realized that staying connected to his Higher Power and developing his character along spiritual lines was the supreme goal: "For if an alcoholic failed to perfect and enlarge his spiritual life through work and self-sacrifice for others, he could not survive the certain trials and low spots ahead. If he did not work, he would surely drink again, and if he drank he would surely die...with us it is just like that" (pp.14-15). It was this particular jumping off point—realizing that work on the self while helping others was a spiritual path and that spirituality was the medicine of addiction—that steered Bill for the rest of his sobriety as he helped other alcoholics and continued to write about the spiritual program of AA.

In the next chapter, "There is a Solution," a more elaborate discussion proceeds concerning the mind of an alcoholic and the experience of "rock bottom." The purpose of this chapter is to help readers decide if they relate to AA's definition and description of an alcoholic as put forth by AA. If they concede at this point, they are informed that the only way these people have solved the alcoholic problem is "to pick up the simple kit of spiritual tools laid at

our feet” (p.25). *A spiritual tool kit is the 12-steps and the 12-steps are their way of life.* Shortly after this statement, the Big Book drives the point home that spirituality is at the core of the 12-step program:

“The great fact is just this, and nothing less: That we have had deep and effective spiritual experiences* which have revolutionized our whole attitude toward life, toward our fellows and toward God’s universe. The central fact of our lives today is the absolute certainty that our Creator has entered into our hearts and lives in a way which is indeed miraculous. He has commenced to accomplish those things for us which we could never do by ourselves.”

In this passage, “spiritual experiences” and a spiritual way of life are what AA members seek. Then, once they feel their spiritual journey has begun, these daily spiritual experiences are the drivers for perceptual shifts as well as attitude and behavioral changes that are comprised of spiritual and psychological or social elements. Spiritual development is dubbed the primary mechanism that warrants the alcoholic with an ability to stay sober—something which they failed to do on their own time after time or “could never do by ourselves.” The grave consequences of attempting to stay sober unaided by this spiritual tool kit is presented in this same chapter:

“We are in a position where life was becoming impossible [in active addiction], and if we had passed into the region from which there is no return through human aid, we had but two alternatives: one was to go on to the bitter end, blotting out the consciousness of our intolerable situation as best we could; and the other, to accept spiritual help” (p.25).

When faced with this decision in Chapter 2—which incorporates steps one and two—potential alcoholics who relate to alcoholism as defined and described by the Big Book are presented with

one alternative to inevitably picking up a drink and living in addiction, and that choice is a spiritual way of life.

Step three deals greatly with spirituality as the aide to one's sobriety. The Big Book states that, at this point in the steps, recovering alcoholics are to become "willing to turn our will and our life over the care of God as we understand God." Exactly what this means is delineated at great length throughout the rest of the steps. The first suggestion mentioned for a member to successfully complete this step is that they must be "convinced that any life run on self-will can hardly be a success" (p. 60). When living only on self-will, a person is more likely to live based on "self-propulsion" even if their motives are good, which AA describes as seeking control over one's environment and other people to suit their self-centered agendas. By attempting to exert control where one has none, especially at the expense of others, the person is considered extremely "self-centered" or "ego centric," which AA deems "the root of our trouble" (pp.61-62). AA indicates that being run entirely by one's self-interests is to be "driven by a hundred forms of fear, self-delusion, self-seeking, and self-pity" and tends to result in an alcoholic making "decisions based on self which later placed us in a position to be hurt" (p.62). Thus, AA labels an alcoholic "an extreme example of self-will run riot." (p.62). What is the alternative? This step asserts that a relationship with God (as that member understands God) is *the* pathway to reducing self-centeredness: "...There often seems no way of entirely getting rid of self without His aid...neither could we reduce our self-centeredness much by wishing or trying on our own power. We had to have God's help" (p.62) In this passage, extreme self-will is tantamount to playing God. It is in this step that the alcoholic is to relinquish full control and allow their Higher Power to become "the Director" (p.62). By turning over one's will to a higher power, one is said

to be gaining spiritual access to the “keystone of the new and triumphant arch through which we passed to freedom” (p.62).

If an AA member can accept this pathway to sobriety as laid out in step 3, they are told that they will become less interested in their own wants and needs and more interested in contributing to others lives and the world around them by caring more for the well-being of others. Readers are told they will experience a “new power flow in” and “enjoy peace of mind” due to becoming “conscious of [God’s] presence.” This step goes so far as to say that when recovering alcoholics connect to their spiritual source, they will be reborn by getting a second chance at life. These passages are strongly worded, but it’s important to note that statements like this are continuously prefaced or followed by the notion that each member should feel empowered to create their own personal experience of and relationship with God—thus reinforcing that although the word “God” is used, they are encouraged to find whatever word and conception of a higher being or universal spirit works for them. No matter the conception, though, it is the intention and act of plugging into a spiritual source and operating according to spiritual principles that is the suggested pathway to recovery.

Another link in the Big Book between spirituality and AA tools or activities can be found in steps 4 and 5, which is concerned with the making of a moral inventory and sharing it with another AA member, usually one’s sponsor:

“But with the alcoholic, whose hope is the maintenance and growth of a spiritual experience, this business of resentment is infinitely grave. We found that it is fatal. For when harboring such feelings, we shut ourselves off from the sunlight of the Spirit. The insanity of alcohol returns and we drink again. And with us, to drink is to die” (p.66).

Noted again is that the hope for an alcoholic is in more than changing their maladaptive psychological patterns (e.g., holding onto resentment). It is that those psychological changes are necessary for spiritual development and in building a relationship to their spiritual source. Not only do maladaptive emotional experiences lead alcoholics to drink according to this passage, but they block members off from the “sunlight of the Spirit”—the connection between a person and the presence of and guidance from a spiritual source. When struggling to cope with negative emotional experiences, alcoholics are reminded that it was not the distress that necessarily caused them to drink but that reliance on self was eventually what led them to find contentment at the bottom of a bottle:

“Perhaps there is a better way [than self-reliance]—we think so. For we are now on a different basis; the basis of trusting and relying upon God. We trust infinite God rather than our finite selves. We are in the world to play the role He assigns. Just to the extent that we do as we think He would have us, and humbly rely on Him, does He enable us to match calamity with serenity.” (p.68).

By “trusting and relying on God,” the alcoholic is told that letting go of perceiving everything through a self-centered lens—which is what drove resentments towards others in the first place—and instead, viewing life through a spiritual lens, would be more adaptive for the recovering alcoholic. By so doing, they will get to experience inner peace and contentedness despite unideal life circumstances that present from time to time. This is what is meant by the matching of “calamity with serenity.” Recovering alcoholics will be able to handle what comes their way without having to do so in a manner than only considers their self-interests, thus protecting themselves from destructive ways of thinking and behaving that eventually lead back to active alcoholism.

Steps 6 and 7 are about making a list of the characterological flaws that support a self-centered lifestyle (6) and then being open and willing to take action to change them (7). These steps also explicitly refer to belief in and a relationship with a Higher Power as the source of strength to draw upon as the catalyst for change: “Are we now ready to let God remove from us all the things which we have admitted are objectionable?...If we still cling to something we will not let go, we ask God to help us be willing.” (p.97). While step six is a list gleaned from the moral inventory in step four, step seven is a simple prayer and takes up no more space than a paragraph in the Big Book.

“When ready, we say something like this: ‘My creator, I am now willing that you should have all of me, good and bad. I pray that you now remove from me every single defect of character which stands in the way of my usefulness to you and my fellows. Grant me strength, as I go out from here, to do your bidding. Amen.’ We have then completed *Step Seven*.”

These two steps are discussed the least in the core of the Big Book, and yet how they are discussed is solely within the context of spirituality. These steps are expanded upon in the 12x12. While there are several paragraphs discussing the spiritual foundation of these steps, the following are succinct examples:

Step 6:

“Since most of us are born with an abundance of natural desires, it isn’t strange that we often let these far exceed their intended purpose. When they drive us blindly, or we willfully demand that they supply us with more satisfactions or pleasures than are possible or due us, that is the point at which we depart from the degree of perfection that God wishes for us here on earth. That is the measure of our character defects, or if you wish, our sins.

If we ask, God will certainly forgive our derelictions. But in no case does He render us white as snow and keep us that way without our cooperation...He only ask that we try as best we know how to make progress in the building of character. So Step Six...is AA's way of stating the best possible attitude one can take in order to make a beginning on this lifetime job." (p. 65).

In this passage, God's help is proactively sought after on a regular basis for guidance, forgiveness, and redirection while the AA member is attempting to practice moderation and regulation of self as well as the spiritual principle of humility by admitting their flaws and attempting to do and be better. Another practice of humility lies in depending on their Higher Power for help to develop adaptive habits, which is noted in step seven:

Step 7:

"In all [our] strivings, so many of them well-intentioned, our crippling handicap had been our lack of humility. We had lacked the perspective to see that character-building and spiritual values had to come first, and that material satisfactions were not the purpose of living...

This lack of anchorage to any permanent values, this blindness to the true purpose of our lives, produced another bad result. For just so long as we were convinced that we could live exclusively by our own individual strength and intelligence, for just that long was a working faith in a Higher Power impossible. This was true even when we believed that God existed. We could actually have earnest religious beliefs which remained barren because we were still trying to play God ourselves. As long as we placed self-reliance first, a genuine reliance upon a Higher Power was out of the question. That basic ingredient of all humility, a desire to seek and do God's will, was missing."

Highlighted in step seven's passage is that seeking God's will is about being open to the right course of action, a key component of which is the practice of humility. Again, the steps were labeled "spiritual values" rather than just moral or psychological values of pursuit.

Steps eight and nine are concerned with making financial or relational amends for harms done while one was in an alcoholic and/or self-centered state of being. Step eight references the alcoholic's ability to cause "spiritual damage" to others on top of or instead of mental, emotional, or physical pain (12x12, pp82). At the very end of this step in the 12x12, it is marked by the following words: "Whenever our pencil falters, we can fortify and cheer ourselves by remembering what AA experience in this Step has meant to others. It is the beginning of the end of isolation from our fellows and from God" (p.82). From a spiritual perspective then, it is reasonable to suggest that members may be motivated by the assertion that making amends will remove blockages from their connection to a Higher Power and be synonymous with practicing a spiritual way of life. Further promised in these steps via the Big Book is that members will be rewarded with greater internal peace and contentedness along with less internal turmoil—and that these experiences are signs of becoming spiritually-centered:

Step 9:

"The spiritual life is not a theory...we have to live it. If we are painstaking about this phase of our development, we will be amazed before we are half way through. We are going to know a new freedom and a new happiness. We will not regret the past nor wish to shut the door on it. We will comprehend serenity and we will know peace" (p. 84).

Steps 10, 11, and 12 are referred to as the maintenance steps that incorporate all actions and principles suggested in the 12 steps. They are meant to be practiced on a daily basis. Step 10 is akin to a mini 4th step concerned with a daily inventory. The practice of doing a 10th step is

simultaneously an admission of powerlessness over addiction while surrendering to one's relationship with a Higher Power as a guide for continuing to form better habits and solidifying them into long-term adaptive patterns of thought and behavior. By continuing to search for self-centered beliefs and actions while being open to how one can become more other- and spiritually-centered, an individual is practicing steps one through four and is willing to practice five through nine and 11 and 12 should their daily inventory reveal that they need to seek counsel (5), make amends (8 &9), pray and/or meditation about what they've found on their inventory (11), or use what they've learned about themselves to help other recovering alcoholics who may have the same daily struggles. Together, these practices keep the channel open between them and their Higher Power. Steps 10 through 12 discuss the spiritual foundation of the steps very assertively:

Step 10:

“We have entered the world of the Spirit. Our next function is to grow in understanding and effectiveness. This is not an overnight matter. It should continue for our lifetime. We continue to watch for selfishness, dishonesty, resentment, and fear. When these crop up, we ask God at once to remove them. We discuss them with someone immediately and make amends quickly if we have harmed anyone. Then we resolutely turn our thoughts to someone we can help. Love and tolerance of others is our code.

We will seldom be interested in liquor. If tempted, we recoil from it as from a hot flame. That is our experience. That is how we react so long as we keep in fit spiritual condition.”

Step 11 is concerned with growing one's relationship with a Higher Power through prayer and meditation:

“On awakening, let us think of the twenty-four hours ahead. We consider our plans for the day. Before we begin, we ask God to direct our thinking, especially asking that it be divorced from self-pity, dishonest or self-seeking motives...Our thought-life will be placed on a much higher plane when our thinking is cleared of wrong motives.

In thinking about our day we may face indecision. We may not be able to determine which course to take. Here we ask God for inspiration, an intuitive thought or a decision. WE relax and take it easy...Being still inexperienced, and having just made contact with God, it is not probable that we are going to be inspired at all times...

We usually conclude the period of meditation with a prayer that we be shown all through the day what our next step is to be, that we be given whatever we need to take care of such problems. We ask especially for freedom from self - will, and are careful to make no request for ourselves only.

As we go through the day we pause, when agitated or doubtful, and ask [God] for the right thought or action. We constantly remind ourselves we are no longer running the show...

We alcoholics are undisciplined. So we let God discipline us in the simple way we have just outlined” (pp. 86–88, Big Book).

Meditation and prayer are forms of connecting with God and one’s spiritual center—the space from which they try to approach the day and make various decisions. During times of uncertainty, a person not only turns to a moral or spiritual code of thinking and behaving, but also turns to their Higher Power for inspiration, guidance, and whatever else may be needed in a given moment to make the best decision, be it courage, strength, motivation, or the like. In this way, spiritual practice throughout the day can power change through well-known mechanisms, such as efficacy, motivation, and commitment. While these mechanisms can be “turned on” by external forces or non-spiritual internal forces, this step is emphatic in its assertion that

motivation be drawn from a spiritual source—and this is important to keep in mind when reviewing empirical literature on the same topic in the upcoming section.

Step 12 is concerned with two things: a “spiritual awakening” or a newfound ability for the AA member to be on spiritual footing now that they have formally completed the 12-steps; and also, to carry the message by sharing their experience, strength, and hope to another “suffering alcoholic” (p. xii) – the message being that the 12-steps are the solution:

“Practical experience shows that nothing will so much ensure immunity from drinking as intensive work with other alcoholics...

When dealing with such a person [an alcoholic contemplating joining AA], you had better use everyday language to describe spiritual principles... He may be an example of the truth that faith alone is insufficient... We represent no particular faith or denomination... If he is to find God, the desire must come from within. If he thinks he can do the job in some other way, or prefers some other spiritual approach, encourage him to follow his own conscience. We have no monopoly on God... Both you and the new [alcoholic] must walk day by day in the path of spiritual progress. If you persist, remarkable things will happen. When we look back, we realize that the things which came to us when we put ourselves in God’s hands were better than anything we could have planned.” (Chapter 7: Working with Others).

Helping other alcoholics—or service work—is written about as the key spiritual principle that ensures abstinence as well as keeps one connected to their Higher Power. A note on the so-called “spiritual awakening” or “spiritual experiences” is important, as the Big Book has an appendix to help define these experiences for members. In Appendix II, a spiritual awakening is described as a “personality change sufficient to bring about recovery from alcoholism,” but it is asserted that this in no way means that the shift in personality must be sudden or profound even if it can be for some members. When describing how thousands of member experience this spiritual awakening,

the book indicates that many alcoholics experience a gradual change over time. This kind of spiritual experience is of the “educational variety,” in that change occurs over a period of months and it is only when a recovering alcoholic compares their past and present selves do they realize they have “undergone a profound alteration in his or her reaction to life” (p.567). As for the definition of spiritual experience, this appendix only goes so far as to define the “essence” of it, stating that “most of us think this awareness of a Power greater than ourselves is the essence of spiritual experience. Our more religious members call it ‘God-consciousness.’” Rather than attempting to make finite all the ways in which a person may apply God-consciousness to their daily lives, the appendix only suggests willingness, honesty, and open-mindedness as the initial ingredients for spiritual development in the AA program. A perception that one is having a spiritual experience, then, is a subjective rather than objective phenomenon. This is important because it means that if empirical measures are not assessing what experiences are spiritual for a member regarding their 12-step practice, then empirically, there is lack of measurement and awareness as to how spirituality ties into that person’s intentions, motivations, and behaviors. In sum, each step has spiritually active components that tie a person’s motivation for completing them to abstinence through connection with a Higher Power. *This does necessarily mean that every member’s motivations are only spiritual or in line with the way the Big Book presents the program*, but it does mean that the spiritual aspects of the program need to be rigorously assessed as valid predictors and mechanisms of change in these subtle and profound ways mentioned across the AA literature.

The final chapter in the core of the Big Book, “A Vision for You,” comes at the end of the 12-steps and describes the spiritual process and spiritual aim of the AA program. The Big Book mentions that, being newly sober, a spiritual way of life may have often felt unattainable or

unreliable due to the effect alcohol had on the body, mind, and spirit. Through the 12-steps however, the recovering alcoholic learns how to depend on their spiritual source and eventually sees it as a firm, directive, and trustworthy center—the space from which to make decisions and perceive objects in life. Stemming from their spiritual center is the “code” on how members carry out the AA way of life. This last chapter is largely devoted to reassuring the AA member who has just completed the 12-steps that he or she is fully capable of carrying the message *by drawing on their relationship with a Higher Power*. In its hopeful message, this chapter makes a few assertions:

- 1) “...You have just now tapped a source of power much greater than yourself” (p.163)”
- 2) “Life will mean something at last. The most satisfactory years of your existence lie ahead. Thus we find the fellowship, and so will you.” (p.152)
- 3) “[Alcoholics] must keep spiritually active.” (p.156)

Further, the final two paragraphs of this chapter, presented below, remind the alcoholic that their spiritual journey has not ended, that they must continue to practice the 12-steps (e.g., spiritual principles) in order to maintain their connection to a Higher Power and preserve and deepen their fairly new spiritual condition. Lastly, it asserts that the AA member must continue to work with other alcoholics to “insure immunity” from active alcoholism (p.89).

“Our book is meant to be suggestive only. We realize we know only a little. God will constantly disclose more to you and to us. Ask Him in your morning meditation what you can do each day for the man who is still sick. The answers will come, if your own house is in order. But obviously you cannot transmit something you haven’t got. See to it that your relationship with Him is right, and great events will come to pass for you and countless others. This is the Great Fact for us.

Abandon yourself to God as you understand God. Admit your faults to Him and to your fellows. Clear away the wreckage of your past. Give freely of

what you find and join us. We shall be with you in the Fellowship of the Spirit, and you will surely meet some of us as you trudge the Road of Happy Destiny.

May God bless you and keep you—until then.”

These final paragraphs of the 12-step process emphasize that it is one’s spiritual orientation that continues to support the persons’ ability to stay sober. More specifically, it mentions a regular connection with one’s Higher Power along with continual attempts to discern or be open to opportunities to practice spiritual principles. By keeping their “own house in order”—which is metaphor for practicing the 12-steps daily—a person can keep the channel open between them and their God as well as help others to open up this channel themselves. Additionally, the individual remains connected to the “Fellowship of the Spirit” in AA—the major supportive leg of the AA community.

Moreover, the 43 personal stories that make up the second half of the Big Book are about more than one’s journey from being a body soaked in alcohol to an experience of physical abstinence. Within their stories, each AA member “describes in his own language and from his own point of view the way he established his relationship with God” (p.29). Repeatedly, 12-step completion and abstinence are synonymous with spiritual development or maintaining a spiritual connection.

Knowing all that has been put forth regarding the spiritual orientation of AA, it is reasonable to think that a good portion of AA members have intentions, motivations, and purposes as well as behave according to standards that are principally based in their spiritual health, especially since it appears that AA deems “spiritual fitness” as the bedrock for maintaining other forms of well-being, including one’s psychological or social health. It’s possible that AA members are driven to attend meetings, maintain involvement in AA, deepen sponsorship relationships, do service work, and even engage in psychological and social change

for the primary purpose of discovering and maintaining a connection with their Higher Power and connection to what they believe is sacred in their lives. The difficulty researchers have in understanding AA as a spiritual program may partially come from not addressing these AA components through a spiritual lens or as spiritual pathways that lead to spiritual destinations for some members. Instead, psychological science minimizes or avoids the spiritual axioms presented in AA literature. The following section will delineate the ways in which this has occurred.

This section will end on a remark regarding the purpose of this appendix for this dissertation. While it may seem that delineating the spiritual premises throughout the core of the Big Book is more than redundant, this researcher believes it to be necessary. Given that spirituality is often relegated in psychological science or reduced to its secular components or parallels in such a convincing manner, it is important to elaborate, demonstrate, and thus make a clear case for better empirical study of what some people believe to be a spiritual dimension in their lives. As it pertains to AA, this section elaborated on and attempted to interpret the exact phraseology of AA's self-purported spiritual program. By doing so, it fulfilled a partial aim of this dissertation to help researchers interested in uncovering AA's spiritual mechanisms to return to the empirical drawing board by creating measures that embody AA's spiritual constructs, thereby studying them in these specific ways before coming to any empirical conclusions about how AA works from a clinical standpoint. The empirical portion of this dissertation helps support that aim by examining proximal spiritual factors in the relational context of sponsorship and by assessing the effects of these spiritual factors on multiple desired outcomes, including but not limited to abstinence.

APPENDIX C. RELATIONAL SPIRITUALITY FRAMEWORK

		STAGES OF RELATIONSHIPS		
		Discovery	Maintenance	Transformation
		Goals: Created & structure bond	Goal: Conserve & protect bond	Goal: Reform or exit distressed bond
THREE TIERS OF SPIRITUAL MECHANISMS (Illustrative mechanisms in italics)				
Tier 1: Relationship with God	Resources	<i>Support from God</i> <ul style="list-style-type: none"> • May motivate creation of committed union between two people. • May guide formation and strengthen commitments. 	<i>Prayer for partner's well-being</i> <ul style="list-style-type: none"> • Improves relationship quality. <i>Serenity prayer about relationship</i> <ul style="list-style-type: none"> • May aid good decisions and skills to mindfully accept or proactively address relationship imperfections. 	<i>Support from God to cope effectively</i> <ul style="list-style-type: none"> • Predicts less depression and more personal growth over time for post-divorce adjustment • May enhance coping with dyadic or familial crises or dysfunction.
	Struggles	<i>Struggles with God</i> <ul style="list-style-type: none"> • Over the creation or structure of unions – may weaken relationship commitment and stability 	<i>Display dyadic struggles onto God</i> <ul style="list-style-type: none"> • May undermine effective resolution of dyadic conflict. 	<i>Turn to God to forgive (TGF) struggles</i> <ul style="list-style-type: none"> • TGF struggles may predict less forgiveness of other person.
Tier 2: Relationship with a significant other invested with spiritual properties	Resources	<i>Sanctification of bond</i> <ul style="list-style-type: none"> • May motivate sponsees to act committed to 12-step duties. 	<i>Sanctification of bond</i> <ul style="list-style-type: none"> • May enhance relationship quality or alliance. <i>Spiritual Intimacy</i> <ul style="list-style-type: none"> • May enhance relationship quality and felt commitment <i>Spiritual mediation</i> <ul style="list-style-type: none"> • May bring dyad closer during times of conflict 	<i>Sanctification of bond</i> <ul style="list-style-type: none"> • May motivate efforts to repair a distressed relationship.
	Struggles	<i>Struggles over sanctification</i> <ul style="list-style-type: none"> • May trigger spiritual struggles as sponsor-sponsee bonds change over time. 	<i>Spiritual one-upmanship</i> <ul style="list-style-type: none"> • May be tied to greater relational discordance 	<i>Desecration or sacred loss</i> <ul style="list-style-type: none"> • View relationship ending as sacred injury may relate to greater personal distress
Tier 3:	Resources	<i>Support from R/S group</i> <ul style="list-style-type: none"> • May motivate public formation of committed bond and viewing it as sacred. 	<i>Support from R/S group</i> <ul style="list-style-type: none"> • May encourage helpful Tier 1 and Tier 2 spiritual mechanisms. 	<i>Support from R/S group</i> <ul style="list-style-type: none"> • May be tied to leaving or reconciling with partners, sponsors, etc.
	Struggles	<i>Struggles with R/S group</i> <ul style="list-style-type: none"> • Over the creation or structure of the bond – may decrease public formation and commitment to relationship. 	<i>Triangulation of R/S groups</i> <ul style="list-style-type: none"> • May reinforce harmful Tier 1 and Tier 2 spiritual mechanisms. 	<i>Struggles with R/S group</i> <ul style="list-style-type: none"> • May escalate blame, hostility, and aggression in a dyad.

APPENDIX D. DEMOGRAPHIC INFORMATION

Participant's Background:

1. **Age:** _____
2. **Ethnicity (choose one):**

American Indian	Black/African/African	White/Caucasian/Euro
Alaskan Native	American	pean, Multiethnic
Asian/South	Hispanic/Latino(a)/Chi	(please specify):
Asian/Asian American	cano(a), Middle _____	
Native Hawaiian	Eastern/Middle Eastern	
Caribbean/West Indian	American	
3. **Sexual Orientation (choose one):**

Asexual	Lesbian	Straight/Heter-	Other (please
Bisexual	Pansexual	osexual	specify)_____
Gay _____			
4. **Level of Education (choose one):**

Undergraduate
1st year, 2nd year, 3rd year, 4th year

Graduate
1st year, 2nd year, 3rd year, 4th year, 5th year.
5. **Gender (choose one):**
woman/ciswoman, man/cisman, _____ other (please specify)
genderqueer/gender nonconforming, _____
transgender
6. **What is the total estimate of your yearly household income. This would include income from your own employment, partner/spouse, parents, extended family, student loans, or other source of financial support.** (Select the option that best applies):

unemployed	\$50,001-\$75k	don't know
less than \$10k	\$75,001-100k	prefer not to respond.
\$10,000 - \$20k	\$100,001k or more	
\$20,001-\$50k		
7. **Current Relationship Status:**

Single, not dating	Single, dating	In relationship(s)
Cohabiting	Domestic partner (legal def.)	Engaged
Married	Separated	Other (please
		specify)_____
- 7a. If you are single, have you ever been divorced? Yes/No
- 7b. If you have been divorced, how many times? _____
- 7c. If you are single, have you ever been widowed? Yes/No
8. Do you have any children? Yes/No
9. If so, how many? _____

Participant's Religious Background:

10. Do you consider yourself religious or spiritual? (choose one) Yes/No

11. Religiosity: How religious do you consider yourself?

Not At All			Somewhat			Extremely
1	2	3	4	5	6	7

12. Spirituality: How spiritual do you consider yourself?

Not At All			Somewhat			Extremely
1	2	3	4	5	6	7

13. How often do you attend religious services?

Daily	Several times/week	Once/week	Monthly	Less than monthly	Not at all
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14. How often do you attend spiritual services/gatherings?

Daily	Several times/week	Once/week	Monthly	Less than monthly	Not at all
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15. How often do you pray?

Daily	Several times/week	Once/week	Monthly	Less than monthly	Not at all
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16. Why do you pray? (Choose one for each item):

Not At All	Occasionally	Frequently
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Y For help in solving problems

Y To be in communion with God

Y To express gratitude

Y For emotional strength

Y For forgiveness

Y To relieve the suffering of others.

17. How often do you meditate?

Daily	Several times/week	Once/week	Monthly	Less than monthly	Not at all
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18. How often do you read sacred texts (e.g., the Bible, Koran)?

Daily	Several times/week	Once/week	Monthly	Less than monthly	Not at all
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19. How often do you read other religious/spiritual texts?

Daily	Several times/week	Once/week	Monthly	Less than monthly	Not at all
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20. Religious Preferences:

Roman Catholic	Church of Christ	United Church of Christ	Jewish
Baptist	Episcopalian	Latter-Day Saints (Mormon)	No religion
Christian	Buddhist	7 th Day Adventist	
Methodist	Eastern Orthodox	Unitarian	
Lutheran	Hindu	Quaker	
Presbyterian	Islamic	Other Religion: please specify:	

Please answer the next two items below as they relate to you now. Items should be rated from 0 (not at all) to 10 (totally).

Not at All										Totally
0	1	2	3	4	5	6	7	8	9	10

21. To what extent do you believe that God exists?

22. Do you have doubts or questions about whether God exists?

23. Below, which statement comes closest to expressing what you believe about the existence of a God (or Gods)?

Response choices:

- I know that no God or Gods exist, and I have no doubts about it.
- While it is possible that a God or Gods exist, I do not believe in the existence of a God or Gods.
- I don't know whether there is a God or Gods, and I don't believe there is any way to find out.
- I don't know whether there is a God or Gods, it may be possible to find out.
- I find myself believing in a God or Gods sometimes, but not at other times.
- While I have doubts, I feel that I do believe in a God or Gods.
- I know that a God or Gods really exist, and I have no doubts about it.

24. OVER THE PAST MONTH, how close have you felt to God?

Not at all	Somewhat Close	Very Close	As Close As Possible
0	1	2	3

Sobriety, Sponsorship, and AA background:

25. How many previous sponsors have you had (prior to your current one)? _____

26. How long have you been sponsored by your current sponsor?
- Y Less than three months
 - Y Less than six months
 - Y Six months to one year
 - Y One to three years
 - Y Three to five years
 - Y More than five years
27. What is the earliest step this sponsor helped you work? (Drop down menu of 1-12)
28. What is the latest step this sponsor helped you work? (Drop down menu of 1-12)
29. Have you “completed” the 12-steps, which means you are now attempting to practice then “in all of your affairs?” Yes/No
30. How often do you communicate with this sponsor face to face, by phone, or by email?
- Y Daily
 - Y A few times a week
 - Y Once a week
 - Y A couple of times a month
 - Y Once a month or less
31. Are you and your sponsor the same sex? Yes/No
32. Relative to you, what is your sponsor’s age?
- Y More than five years younger than I am
 - Y Close to my age
 - Y More than five years older than I am
33. What is your current length of sobriety in consecutive days, months or years? (Drop down menu providing years, months, and days choices).
34. Have you ever relapsed before? Yes/No
35. If so, how many times have you relapsed? _____
36. First day of last relapse: (date drop down menu provided)
37. How long did your last relapse last for? (Drop down menu providing years, months, and days choices).
38. Did you have a sponsor when you relapsed? _____
39. Was your current sponsor your same sponsor during your last relapse? Yes/No

40. Have you ever sponsored another AA member? Yes/No
41. If so, how many sponsees have you had total? _____
42. How many sponsees do you currently have? _____
43. Has one of your sponsees ever completed the 12-steps with you as their sponsor? Yes/No
44. How were you introduced to Alcoholics Anonymous?
- Y Treatment facility
 - Y Health care provider
 - Y Another AA member
 - Y AA literature
 - Y Family member(s)
 - Y Non-AA-Friend or neighbor
 - Y Employer or fellow worker
 - Y Legal/court system required/correctional facility
 - Y Self-decision/self-referral/self-motivated
 - Y Newspaper, magazine, radio, or TV program
 - Y Member of the clergy
 - Y Other _____ .
45. What age did you first attend an A.A. meeting? _____
46. How many of the 12-steps have you completed? _____
47. In recent months, how often do you attend AA meetings?
- Y Daily
 - Y A few times a week
 - Y Once a week
 - Y A couple of times a month
 - Y Once a month or less
48. Do you have one group you consider your home group? Yes/No
49. How often do you read AA literature (like the Big Book) on your own?
- Y Daily
 - Y A few times a week
 - Y Once a week
 - Y A couple of times a month
 - Y Once a month or less
50. How often do you perform AA service work (like setting up for meetings, holding a service position, making coffee, going on 12-step calls/helping other alcoholics, or giving rides)?
- Y Daily

- Y A few times a week
- Y Once a week
- Y A couple of times a month
- Y Once a month or less

51. Do you consider yourself a member of AA? Yes/No/Undecided

52. How motivated are you to stay sober no matter what?

Not at All Motivated	A little motivated	Somewhat motivated	Pretty motivated	Very motivated	100% motivated
0	1	2	3	4	5

Severity of Alcohol and Drug Abuse:

53. At what age did you start drinking? ____

54. How many years did you drink? ____ (do not count extended periods of sobriety)

55. What is your primary drug of choice?

- Y Alcohol
- Y Stimulants: cocaine, amphetamines, Ritalin
- Y Depressants/Inhalants: Benzodiazepines, barbiturates, GHB, Rohypnol, Quaalude, Amyl
- Y Opioids: Heroin, methadone, codeine, morphine, pain pills, Demerol, Oxycontin
- Y Hallucinogens: LSD, acid, ecstasy, MDMA, mescaline, peyote, psilocybin, PCP
- Y Marijuana

56. In addition to alcohol, which of the following have you used repeatedly?

- Y Stimulants: cocaine, amphetamines, Ritalin
- Y Depressants/Inhalants: benzodiazepines, barbiturates, GHB, Rohypnol, Quaalude, amyl
- Y Opioids: heroin, methadone, codeine, morphine, pain pills, Demerol, Oxycontin
- Y Hallucinogens: LSD, acid, ecstasy, MDMA, mescaline, peyote, psilocybin, PCP
- Y Marijuana

57. Which pattern most closely fits your drinking and/or drug use?

- Y Drank or used all the time and was never sober.
- Y Drank or used on weekends or after work, but was sober at some point most days.
- Y Drank or used mainly during periodic sprees, but was otherwise sober.

58. Do you identify as an alcoholic based on AA's definition (i.e., powerless over alcohol due to insatiable craving, mental obsession, spiritual malady)? Yes/No

APPENDIX E. SANCTIFICATION

SANCTIFICATION OF THE SPONSORSHIP RELATIONSHIP							
Please indicate the degree to which you agree or disagree with each of the following statements:	Strongly Disagree			Neutral			Strongly Agree
1. My sponsor relationship seems like a miracle to me.	1	2	3	4	5	6	7
2. Being with my sponsor feels like a deeply spiritual experience.	1	2	3	4	5	6	7
3. This sponsor relationship is part of a larger spiritual plan.							
4. My sponsor relationship is holy.	1	2	3	4	5	6	7
5. My sponsor relationship is sacred to me.	1	2	3	4	5	6	7
6. My sponsor relationship puts me in touch with the deepest mysteries of life.	1	2	3	4	5	6	7
7. My sponsor relationship reveals the deepest truths of life to me.	1	2	3	4	5	6	7
8. My sponsor relationship connects my sponsor and me to something greater than ourselves.	1	2	3	4	5	6	7
9. When I am with my sponsor, there are moments when time stands still, and I feel I am part of something eternal.	1	2	3	4	5	6	7
10. At moments, my sponsor relationship makes me very aware of a creative power beyond us.	1	2	3	4	5	6	7
11. My Higher Power played a role in how I ended up connecting to my sponsor.	1	2	3	4	5	6	7
12. I sense my Higher Power's presence in my relationship with my sponsor.	1	2	3	4	5	6	7
13. I experience my Higher Power through my sponsor relationship.	1	2	3	4	5	6	7
14. My Higher Power lives through my sponsor relationship.	1	2	3	4	5	6	7
15. My sponsor relationship is a reflection of my Higher Power's will.	1	2	3	4	5	6	7
16. My Higher Power has been a guiding force in my sponsor relationship.	1	2	3	4	5	6	7
17. In mysterious ways, my Higher Power touches my sponsor relationship.	1	2	3	4	5	6	7
18. I feel my Higher Power at work in my sponsor relationship.	1	2	3	4	5	6	7
19. There are moments when I feel a strong connection with my Higher Power in my sponsor relationship.	1	2	3	4	5	6	7
20. I see God's handiwork in my sponsor relationship.	1	2	3	4	5	6	7

APPENDIX F. SPIRITUAL INTIMACY

SPIRITUAL INTIMACY				
Please indicate how true the following statements are for you.	Not at all	Some-what	Quite a bit	A great deal
1. I feel safe being completely open and honest with my sponsor about my faith.	0	1	2	3
2. I tend to keep my spiritual side private and separate from my sponsorship relationship.	0	1	2	3
3. My sponsor really knows how to listen when I talk about my spiritual needs, thoughts, and feelings.	0	1	2	3
4. My sponsor is supportive when I reveal my spiritual questions or struggles to him/her.	0	1	2	3
5. My sponsor doesn't disclose his/her thoughts or feelings about spirituality with me.	0	1	2	3
6. My sponsor shares his/her spiritual questions or struggles with me.	0	1	2	3
7. I try not to be judgmental or critical when my sponsor shares his ideas about spirituality.	0	1	2	3
8. I try to be supportive when my sponsor discloses spiritual questions or struggles.	0	1	2	3

APPENDIX G. SPIRITUAL MEDIATION AND SPIRITUAL ONE-UPMANSHIP

SPIRITUAL MEDIATION AND SPIRITUAL ONE-UPMANSHIP				
Part I. This first set of questions asks you about things that you might communicate to your sponsor when the two of you have a disagreement or conflictual interaction.				
Please indicate how often you do the following actions.	Never	Rarely	Sometimes	Often
1. Suggest that my sponsor is arguing or acting against God's will/spiritual principles.	0	1	2	3
2. Suggest that my own view is spiritually superior to my sponsor's.	0	1	2	3
3. Suggest that God/spiritual principles disagrees with my sponsor's position.	0	1	2	3
4. Suggest that my own view is more spiritually mature than my sponsor's.	0	1	2	3
5. Suggest that God/Higher Power is unhappy with my sponsor's opinion.	0	1	2	3
6. Suggest that God/Higher Power/spiritual principles is on my side, and not my sponsor's.	0	1	2	3
7. Suggest we turn to God to be patient with each other.	0	1	2	3
8. Suggest we pray together to understand one another.	0	1	2	3
9. Suggest that God would want us to come up with a solution that satisfies both of us.	0	1	2	3
10. I encourage us to rely on our spirituality to listen to each other.	0	1	2	3
11. I suggest that God loves us both when we disagree.	0	1	2	3
12. I suggest that God wants us to listen to each other's views.	0	1	2	3
Part II. The next set of questions asks you about things that you believe or observe that your sponsor does to handle disagreements and conflicts with you. If you are not sure about a question, please put your best guess. Circle one of the following choices:				
Please indicate how often your sponsor does the following actions.	Never	Rarely	Sometimes	Often
1. Suggests that I am arguing or acting against God's will/spiritual principles.	0	1	2	3
2. My sponsor suggests that their own view is spiritually superior to mine.	0	1	2	3
3. Suggests that God/spiritual principles disagrees with my position.	0	1	2	3
4. Suggests that their own view is more spiritually mature than mine.	0	1	2	3
5. Suggests that God is unhappy with my opinion.	0	1	2	3

6. Suggest that God/spiritual principles is/are on their side, and not mine.	0	1	2	3
7. Suggest we turn to God to be patient with one another.	0	1	2	3
8. Suggest we pray together to God to understand one another.	0	1	2	3
9. Suggest that God would want us to come up with a solution that satisfies both of us.	0	1	2	3
10. Encourage us to rely on our spirituality to listen to each other.	0	1	2	3
11. Suggests that God loves us both when we disagree.	0	1	2	3
12. Suggests that God wants us to listen to each other's views.	0	1	2	3

APPENDIX H. SPONSORSHIP ALLIANCE INVENTORY

SPONSORSHIP ALLIANCE INVENTORY							
Below is a list of statements about your relationship with your 12-step AA sponsor. Consider each item carefully and indicate your level of agreement for each of the following items on a scale from 1 = "not true at all" to 7 = "very true." Please choose only one.							
Please rate each statement as how frequently you have these experiences with your sponsor.	Not true at all			Some-what True			Very True
1. My sponsor and I agree about the things I will need to do in AA to help improve my situation.	1	2	3	4	5	6	7
2. What I am doing in AA gives me new ways of looking at my problem.	1	2	3	4	5	6	7
3. I believe my sponsor likes me.	1	2	3	4	5	6	7
4. I am confident in my sponsor's ability to help me.	1	2	3	4	5	6	7
5. My sponsor and I are working towards mutually agreed upon goals.	1	2	3	4	5	6	7
6. I feel that my sponsor appreciates me.	1	2	3	4	5	6	7
7. We agree on what is important for me to work on.	1	2	3	4	5	6	7
8. My sponsor and I trust one another.	1	2	3	4	5	6	7
9. We have established a good understanding of the kind of changes that would be good for me.	1	2	3	4	5	6	7
10. I believe the way we are working with my problem is correct.	1	2	3	4	5	6	7

APPENDIX I. ALCOHOL ABSTINENCE SELF-EFFICACY SCALE

Alcohol Abstinence Self-Efficacy Scale (ASES)					
<p align="center">LISTED BELOW ARE A NUMBER OF SITUATIONS THAT LEAD SOME PEOPLE TO USE ALCOHOL. WE WOULD LIKE TO KNOW <u>HOW CONFIDENT</u> YOU ARE THAT YOU WOULD <u>NOT DRINK ALCOHOL</u> IN EACH SITUATION. CHOOSE THE NUMBER THAT BEST DESCRIBES YOUR FEELINGS OF <u>CONFIDENCE TO NOT DRINK ALCOHOL</u> IN EACH SITUATION <u>DURING THE PAST WEEK</u> ACCORDING TO THE FOLLOWING SCALE: 1=Not at all confident</p> <p align="center">2=Not very confident</p> <p align="center">3=Moderately confident</p> <p align="center">4=Very confident</p> <p align="center">5=Extremely confident</p>					
Situation	Confidence Not Drinking Alcohol				
	Not at All	Not Very	Moderately	Very	Extremely
1. When I'm in agony because of stopping or withdrawing from alcohol use.	1	2	3	4	5
2. When I have a headache.	1	2	3	4	5
3. When I am feeling depressed.	1	2	3	4	5
4. When I am on vacation and want to relax.	1	2	3	4	5
5. When I am concerned about someone.	1	2	3	4	5
6. When I am worried.	1	2	3	4	5
7. When I have the urge to try just one drink to see what happens.	1	2	3	4	5
8. When I am being offered a drink in a social situation.	1	2	3	4	5
9. When I dream about taking a drink.	1	2	3	4	5
10. When I want to test my willpower over drinking.	1	2	3	4	5
11. When I am feeling a physical need or craving for alcohol.	1	2	3	4	5
12. When I am physically tired.	1	2	3	4	5
13. When I am experiencing some physical pain or injury.	1	2	3	4	5
14. When I feel like blowing up because of frustration.	1	2	3	4	5
15. When I see others drinking at a bar or a party.	1	2	3	4	5
16. When I sense everything is going wrong for me.	1	2	3	4	5

17. When people I used to drink with encourage me to drink.	1	2	3	4	5
18. When I am feeling angry inside.	1	2	3	4	5
19. When I experience an urge or impulse to take a drink that catches me unprepared.	1	2	3	4	5
20. When I am excited or celebrating with others.	1	2	3	4	5

DiClemente, C. C., Carbonari, J. P., Montgomery, R. P., & Hughes, S. O. (1994). The alcohol abstinence self-efficacy scale. *Journal of studies on alcohol*, 55(2), 141-148.

McKiernan, P., Cloud, R., Patterson, D. A., Golder, S., & Besel, K. (2011). Development of a brief abstinence self-efficacy measure. *Journal of social work practice in the addictions*, 11(3), 245-253.

APPENDIX J. SUBJECTIVE EXPERIENCES QUESTIONNAIRE

SUBJECTIVE EXPERIENCES QUESTIONNAIRE (SEQ-2A)							
IN THE PAST 60 DAYS HOW OFTEN DID YOU...	Several times a day	About once a day	Most days	Several times a week	About once a week	Rarely	Never
1. Think about drinking?	1	2	3	4	5	6	7
2. Want to have a drink?	1	2	3	4	5	6	7
3. Want to get drunk?	1	2	3	4	5	6	7
4. Feel a strong urge or craving for alcohol?	1	2	3	4	5	6	7
5. Wish you could drink to feel better?	1	2	3	4	5	6	7
6. Have to struggle to keep from drinking?	1	2	3	4	5	6	7
7. Feel like you were losing control of your drinking?	1	2	3	4	5	6	7

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APPENDIX K. DIFFICULTY IN EMOTION REGULATION SCALE - SHORT FORM

DIFFICULTY IN EMOTION REGULATION SCALE – SHORT FORM (DERS -SF)					
Please indicate how often the following apply to you:	Almost never (0-10%)	Sometimes (11-35%)	About Half of the Time (36-65%)	Most of the Time (66-90%)	Almost Always (91-100%)
1. I pay attention to how I feel.	1	2	3	4	5
2. I have no idea how I am feeling.	1	2	3	4	5
3. I care about what I am feeling.	1	2	3	4	5
4. I am confused about how I feel.	1	2	3	4	5
5. When I'm upset, I acknowledge my emotions.	1	2	3	4	5
6. When I'm upset, I acknowledge my emotions.	1	2	3	4	5
7. When I'm upset, I become embarrassed for feeling that way.	1	2	3	4	5
8. When I'm upset, I have difficulty getting work done.	1	2	3	4	5
9. When I'm upset, I become out of control.	1	2	3	4	5
10. When I'm upset, I believe that I will end up feeling very depressed.	1	2	3	4	5
11. When I'm upset, I have difficulty focusing on other things.	1	2	3	4	5
12. When I'm upset, I feel guilty for feeling that way.	1	2	3	4	5
13. When I'm upset, I have difficulty concentrating.	1	2	3	4	5
14. When I'm upset, I have difficulty controlling my behaviors.	1	2	3	4	5
15. When I'm upset, I believe there is nothing I can do to make myself feel better.	1	2	3	4	5
16. When I'm upset, I become irritated with myself for feeling that way.	1	2	3	4	5
17. When I'm upset, I lose control over my behavior.	1	2	3	4	5
18. When I'm upset, it takes me a long time to feel better.	1	2	3	4	5

Kaufman, E.A., Xia, M., Fosco, G., Yaptangco, M., Skidmore, C.R., & Cromwell, S.E. (2016). The difficulties in emotion regulation scale short form (DERS-SF): Validation and replication in adolescent and adult samples. *Journal of Psychopathological Behavioral Assessment*, 38, 443–455.

APPENDIX L. DAILY SPIRITUAL EXPERIENCES SCALE

DAILY SPIRITUAL EXPERIENCES SCALE (DSES)						
<p>“The list that follows includes items you may or may not experience. Please consider how often you directly have this experience, and try to disregard whether you feel you should or should not have these experiences. A number of items use the word ‘God.’ If this word is not a comfortable one for you, please substitute another word which calls to mind the divine or holy for you.”</p>						
Please indicate how true each statement is for you.	Many times a day	Every day	Most days	Some days	Once in a while	Never or almost never
1. I feel God’s presence.	6	5	4	3	2	1
2. I experience a connection to all of life.	6	5	4	3	2	1
3. During worship, or at other times when connecting to God, I feel joy which lifts me out of my daily concerns.	6	5	4	3	2	1
4. I find strength in my spirituality or religion.	6	5	4	3	2	1
5. I find comfort in my spirituality or religion.	6	5	4	3	2	1
6. I feel deep inner peace or harmony that I consider to be a spiritual experience.	6	5	4	3	2	1
7. I ask for God’s help in the midst of daily activities.	6	5	4	3	2	1
8. I feel guided by God in the midst of daily activities.	6	5	4	3	2	1
9. I feel God’s love for me, directly.	6	5	4	3	2	1
10. I feel God’s love for me, through others.	6	5	4	3	2	1
11. I am spiritually touched by the beauty of creation	6	5	4	3	2	1
12. I feel thankful for my	6	5	4	3	2	1

blessings.						
13. I feel a selfless caring for others.	6	5	4	3	2	1
14. I feel a selfless caring for others.	6	5	4	3	2	1
15. I accept others even when they do things I think are wrong.	6	5	4	3	2	1
16. I desire to be closer to God or in union with the divine.	6	5	4	3	2	1
17. In general, how close to do you feel to God?	Not at all	Some-what close	Very close	As close as possible	-	-

Underwood, L.G. (2011) The Daily Spiritual Experiences Scale: Overview and results. *Religions*, 2, 29–50.

APPENDIX M. TABLES

Table 1
Descriptives on Demographic Variables

Variables	Mean (sd)	Range
Age	45.7 (16.1)	20-81
	<u>%Endorsed</u>	
20 - 29	16.90%	
30 - 39	23.80%	
40 - 49	11.1%	
50 - 59	14.9%	
60 - 69	15.3%	
70 - 79	8.0%	
80 +	1.4%	
Sex/Gender		
<i>Cismale</i>	46.3%	
<i>Cisfemale</i>	51.5%	
<i>Genderqueer/nonconforming</i>	2.2%	
Ethnicity		
<i>Asian/South As./Am.Asian</i>	3.8%	
<i>Hispanic/Latino/Chicano</i>	1.5%	
<i>White/Caucasian/European</i>	89.5%	
<i>Multiethnic</i>	5.3%	
Sexuality		
<i>Heterosexual</i>	82.0%	
<i>Gay/Lesbian/Bisexual</i>	12.8%	
<i>Pansexual</i>	2.3%	
<i>Asexual</i>	1.5%	
<i>Other</i>	1.5%	
Children		
<i>None</i>	46.3%	
<i>1 Child</i>	17.2%	
<i>2 Children</i>	23.1%	
<i>3 Children</i>	7.5%	
<i>More than 3</i>	5.9%	
Relationship Status		
<i>Single, dating or not dating</i>	18.7%	
<i>In a relationship, not married</i>	20.2%	
<i>Married</i>	53%	
<i>Divorced/Separated/Widowed/Other</i>	8.2%	

Education Level

<i>High school incomplete</i>	0.7%
<i>High school graduate/GED</i>	7.5%
<i>Some college, no degree</i>	20.9%
<i>Two-year associate degree</i>	5.2%
<i>Four-year college degree</i>	24.6%
<i>Some postgraduate work</i>	9.0%
<i>Postgraduate degree</i>	25.4%
<i>Trade/Vocation school graduate</i>	6.7%

Table 2*Descriptives on AA Demographic Variables*

Variables	Mean (sd)	Range
Consecutive days sober	5,540 (4,355)	14 - 17,849
Age began to drink	14.4 (3.8)	2 - 45
Age when problematic drinking began	18.5 (6.6)	10 - 50
Years drinking "alcoholically"	11.4 (7.3)	1 - 42
Days a week drinking (average)	6.3 (1.3)	1 - 7
Consumption on drinking days (average)	10.9 (7.0)	1 - 44
Severity of Alcohol Dependence	1.83 (.73)	0 - 4
	% Endorsed	
Completed 12-steps	97.8%	
Length of current sponsorship		
<i>Less than 3 months</i>	3.7%	
<i>Less than 6 months</i>	6.0%	
<i>6 months to 1 year</i>	3.7%	
<i>1-3 years</i>	21.6%	
<i>3-5 years</i>	14.2%	
<i>>5 years</i>	50.7%	
Frequency of meeting attendance		
<i>Daily</i>	20.1%	
<i>A few times a week</i>	60.4%	
<i>Once a week</i>	12.7%	
<i>A couple of times a month</i>	4.5%	
<i>Once a month</i>	0.0%	
<i>Every few months</i>	0.0%	
<i>A few times a year</i>	0.7%	
<i>Less than a few times a year</i>	1.5%	
<i>Never</i>	0.0%	
Yes to homegroup	88.8%	

Primary Drug of Misuse	
<i>Alcohol</i>	79.1%
<i>Stimulants</i>	9.7%
<i>Depressants/Inhalants</i>	0.7%
<i>Opioids</i>	6.0%
<i>Hallucinogens</i>	0.0%
<i>Marijuana</i>	4.5%
Considers oneself an alcoholic	99.3%
Motivation to Stay Sober NMW	
<i>Not at all motivated</i>	0.0%
<i>A little motivated</i>	0.0%
<i>Somewhat motivated</i>	0.0%
<i>Pretty motivated</i>	1.5%
<i>Very motivated</i>	11.9%
<i>100% motivated</i>	86.6%
Frequency of Sponsor Communication	
<i>Daily</i>	6.7%
<i>A few times a week</i>	41.0%
<i>Once a week</i>	29.1%
<i>A couple of times a month</i>	17.9%
<i>Once a month or less</i>	5.2%
Yes to "has relapsed"	41.0%
<hr/>	
Time Sober	
<i>1 year or less</i>	3.7%
<i>1 to 5 years</i>	17.9%
<i>5 to 10 years</i>	21.6%
<i>10 to 15 years</i>	18.7%
<i>15 to 20 years</i>	8.2%
<i>20+ years</i>	29.9%

Table 3*Descriptives on R/S Demographic Variables*

<u>Variables</u>	<u>Mean (sd)</u>	<u>Range</u>
Religiosity	2.6 (1.8)	0 - 7
Spirituality	5.7 (1.2)	0 - 7
Belief in God's existence	8.6 (3.3)	0 - 10
Doubts in God's existence	3.7 (3.5)	0 - 10

%

Endorsed

Prayer Frequency

<i>Daily</i>	68.7%
<i>Several times a week</i>	18.7%
<i>Once a week</i>	1.5%
<i>Monthly</i>	0.7%
<i>Less than monthly</i>	4.5%
<i>Never</i>	6.0%
Meditation Frequency	
<i>Daily</i>	29.1%
<i>Several times a week</i>	33.6%
<i>Once a week</i>	14.9%
<i>Monthly</i>	9.0%
<i>Less than monthly</i>	9.7%
<i>Never</i>	3.7%
Religious Attendance	
<i>Daily</i>	0.7%
<i>Several times a week</i>	3.7%
<i>Once a week</i>	9.0%
<i>Monthly</i>	3.0%
<i>Less than monthly</i>	30.6%
<i>Never</i>	53.0%
Religious Affiliation	
<i>No Religion</i>	42.5%
<i>Catholic denomination</i>	23.0%
<i>Christian</i>	11.9%
<i>Non-denominational</i>	0.7%
<i>Jewish</i>	6.0%
<i>Buddhist</i>	4.5%
<i>Atheist</i>	1.5%
<i>Agnostic</i>	3.0%
<i>Other</i>	6.0%

Table 4*Descriptive Statistics on all Primary Variables*

Variables	Mean (sd)	Rang	Alphas	Skewness
Sanctification	5.2 (1.3)	1 - 7	0.97	-.58
Spiritual Intimacy	3.5 (.44)	1 - 4	0.70	-.88
Spiritual One-upmanship	1.2 (.25)	1 - 5	0.87	1.9
Spiritual Mediation	2.2 (1.2)	1 - 5	0.96	.77
Sponsorship Alliance	6.6 (.51)	1 - 7	0.87	-1.2
Abstinence Self-Efficacy	4.8 (.27)	1 - 5	0.93	-2.4
Subj. Experiences (C&O)	1.3 (.38)	1 - 7	0.88	1.4
Diff. Regulating Emo's	1.9 (.50)	1 - 5	0.89	.92
Daily Spiritual Life	4.3 (.93)	1 - 6	0.94	-.27

Table 5*Frequency of Sanctification Items (descending order)*

Item (from most to least endorsed)	Percentage (%) Endorsed		
	Disagree	Neutral	Agree
16. Something Greater	4.1%	7.5%	88.3%
3. Spiritual Plan	10.9%	9.6%	79.4%
11. God played a role	10.3%	12.3%	77.3%
18. God at work	13.6%	10.3%	76.0%
19. Strong Connection w/ God	13.7%	11.0%	75.4%
7. Deepest Truths	12.3%	12.3%	75.4%
12. God's presence	11.6%	13.7%	74.7%
20. God's handiwork	13.7%	13.7%	72.7%
10. Creative power	10.9%	16.4%	72.6%
1. Miracle	12.4%	20.5%	67.1%
2. Spiritual Exp.	14.4%	19.2%	66.4%
16. God guiding force	15.7%	17.8%	66.4%
17. Touched by God	16.5%	17.1%	66.4%
5. Sacred to me	17.8%	17.1%	65.1%
13. Experience God	16.4%	19.9%	63.7%
15. God's will	20.5%	19.9%	59.6%
14. God lives through	23.9%	19.2%	56.8%
6. Deepest mysteries	27.4%	22.6%	50.1%
9. Eternal	33.6%	28.8%	37.7%
4. Holy	40.3%	30.1%	29.4%

Table 6*Frequency of Spiritual Intimacy Items (descending order)*

Item (from most to least endorsed)	Percentage (%) Endorsed			
	Not at All (0)	1	2	A Great Deal (3)
1. I feel safe being completely open and honest...	0.7%	4.1%	13.7%	81.5%
2. I tend to keep my spiritual side private	78.1%	16.4%	1.4%	4.1%
4. I try to be supportive when my sponsor discloses	1.4%	5.5%	21.9%	71.2%
8. My sponsor is supportive when I reveal...	0.7%	5.5%	24.7%	69.2%
3. I try not to be judgmental or critical	6.8%	6.2%	19.9%	67.1%
6. My sponsor doesn't disclose...	64.4%	21.9%	7.5%	6.2%
7. My sponsor really knows how to listen...	0.0%	10.3%	26.0%	63.7%
5. My sponsor shares...	11.6%	28.1%	34.2%	26.0%

Table 7*Frequency of Spiritual One-upmanship (descending order)*

Item (from most to least endorsed as "always")	Percentage (%) Endorsed				
	Always	Often	Sometimes	Rarely	Never
I suggest...					
1. ...my sponsor is arguing against god's will	0.7	0.7	6.2	26	66.4
2. ...my view is spiritually superior	0	0	2.7	8.2	89.1
3. ...God/AA's spiritual principles disagrees	0	0	3.4	21	76
4. ...My view is more spiritually mature	0	0	1.4	9.6	89
5. ...HP/God unhappy w/ sponsor's opinion	0	0	1.4	4.8	93.8
6. ...God/HP is on my side, not sponsor's	0	0	2.1	4.8	93.2
My sponsor suggests...					
7I am arguing/acting against HP/AA's principles	0.7	4.1	26	24.7	44.5
8. ...their own view is spiritually superior to mine	0.7	0.7	3.4	6.2	89
9my HP/AA spiritual principles disagree with my position	0.7	4.1	12.3	24	58.9
10. ...their own view is more spiritually mature than mine	0.7	2.1	2.1	6.2	89
11. ...my HP/God is unhappy with my opinion	0.7	0.7	4.1	4.1	90.4
6. ...a HP/AA s/ps are on their side, not mine.	0.7	0.7	2.7	7.5	88.4

Table 8*Frequency of Spiritual Mediation (descending order)*

Item (from most to least endorsed as "always")	Percentage (%) Endorsed				
	Always	Often	Sometimes	Rarely	Never
I suggest/encourage...					
5. ...HP loves us both when disagree	15.8	9.6	12.3	8.2	54.1
6. ...HP wants us to listen to e/o	14.4	6.8	15.8	9.6	53.4
4. ...rely on our spirituality to listen	11.6	11.6	17.8	11.6	47.3
3. ...HP wants a solution satisfies us	7.5	5.5	15.1	11	61
1. ...we turn to HP to be patient	6.8	8.2	12.3	18.5	54.1
2. ...we pray together to understand	3.4	6.2	13.7	12.3	64.4
My sponsor suggests...					
7. ...we turn to a HP/God to be patient	8.9	9.6	17.8	15.1	48.6
8. ...we pray together to understand	6.2	6.2	18.5	15.1	54.1
9. ...HP/God wants solution satisfies us both	11.6	5.5	19.2	13	50.7
10. ...we rely on spirituality to listen to e/o	19.2	9.6	20.5	13.7	37
11. ...HP/God loves us both when disagreeing	21.9	8.9	13	13.7	42.5
12. ...HP/God wants us to listen to e/o.	21.9	11	15.8	9.6	41.8

Table 9*Intercorrelations among Demographic and Criterion Variables*

Variables	1	2	3	4	5	6	7	8
1. Ethnicity	-	.06	.19*	-.03	.03	-.02	-.16	-.09
2. Gender	.06	-	.17	.19*	-.05	.02	-.02	-.00
3. Age	.19*	.17	-	.05	.03	-.19*	-.28**	.23**
4. Sponsorship Alliance	-.03	-.19*	.05	-	.20*	.08	.14	.23**
5. Abstinence Self-efficacy	.03	-.05	.03	.20*	-	-.39**	-.25**	.11
6. Alcohol Cravings/Thoughts	-.02	.02	-.18*	.08	-.39**	-	.25**	-.08
7. Difficulty Regulating Emotions	-.16	-.02	-	.28**	.14	-.25**	.25**	-.36**
8. Daily Spiritual Experiences	-.09	-.00	.23**	.23**	.11	-.08	-.36**	-

$p < .05 = *$, $p < .01 = **$

Table 11

Primary intercorrelations between predictor and criterion variables

<i>Variables</i>	<i>Sanctification</i>	<i>Spiritual Intimacy</i>	<i>Spiritual Oneupmanship</i>	<i>Spiritual Mediation</i>	<i>Sponsorship Alliance</i>	<i>Abstinence SE</i>	<i>Cravings/Thoughts</i>	<i>Diff w/ Emotions</i>	<i>Spiritual Exp.</i>
1. Sanctification	-	.40**	.20*	.41**	.41**	.07	.09	-.02	.50**
2. Spiritual Intimacy	.40**	-	-.04	.10	.29**	.11	-.04	-.02	.04
3. Spiritual Oneupmanship	.20*	-.04	-	.17*	.10	-.24**	.09	.08	.03
4. Spiritual Mediation	.41**	.10	.17*	-	.20*	-.12	-.09	-.18*	.39**
5. Sponsorship Alliance	.41**	.29**	.10	.20*	-	-.20*	.08	.14	-.23**
6. Abstinence Self-efficacy	.07	.11	-.24**	-.12	.20*	-	-.40**	-.25**	.08
7. Alcohol Thoughts/Cravings	.09	-.04	.09	-.09	.08	-.40**	-	.25**	-.08
8. Diff. Regulating Emo's	-.02	-.02	.08	-.18*	.14	-.25**	.25**	-	-.36**
9. Daily Spiritual Exp.	.50**	.04	.03	.39**	.23**	.08	-.08	-.36**	-

$p < .05 = *$, $p < .01 = **$

Table 12

Hierarchical Regressions of Sanctification onto Sponsorship Alliance

Predictor variables	Criterion Factor	
	Sponsorship Alliance	
	Beta	R ²
Step 1	.18*** (F=13.97)	
Gender	-.16*	
Sanctification	.38***	

*=p<.05, **p<.01, ***=p<.001; N=131

Table 13

Hierarchical Regressions of Spiritual Intimacy onto Sponsorship Alliance

Predictor variables	Criterion Factor	
	Sponsorship Alliance	
	Beta	R ²
Step 1	.10*** (F=7.21)	
Gender	-.18*	
Spiritual Intimacy	.25**	

*=p<.05, **p<.01, ***=p<.001; N=131

Table 14

Hierarchical Regressions of Spiritual Mediation onto Sponsorship Alliance

Predictor variables	Criterion Factor	
	Sponsorship Alliance	
	Beta	R ²
Step 1	.09*** (F=6.47)	
Gender	-.21**	
Spiritual Mediation	.23**	

*=p<.05, **p<.01, ***=p<.001; N=131

Table 15*Hierarchical Regressions of Sanctification on Spiritual Well-being*

Predictor variables	Criterion Factor	
	Spiritual Well-being	
	Beta	R ²
Step 1	.34*** (F=21.98)	
Age	0.25***	
Meeting Frequency	-.11	
Sanctification	.50***	

*=p<.05, **p<.01, ***=p<.001; N=134

Table 16*Hierarchical Regressions of Spiritual Mediation on Diff. Regulating Emotions*

Predictor variables	Criterion Factor	
	Diff. Regulating Emotions	
	Beta	R ²
Step 1	.10** (F=7.46)	
Age	-.27***	
Spiritual Mediation	-.14	

*=p<.05, **p<.01, ***=p<.001; N=134

Table 17

Hierarchical Regressions of Spiritual Mediation on Spiritual Well-being

Predictor variables	Criterion Factor	
	Beta	R ²
Step 1	.22*** (F=12.25)	
Age	.16*	
Meeting Frequency	-.20**	
Spiritual Mediation	.35***	

*=p<.05, **p<.01, ***=p<.001; N=134

Table 18

Linear Regressions of Sponsorship Alliance on Abstinence Self-Efficacy

Predictor variables	Criterion Factor	
	Beta	R ²
Step 1 Sponsorship Alliance	.20*	.04* (F=5.26)

*=p<.05, **p<.01, ***=p<.001; N=134

Table 19

Hierarchical Regressions of Sponsorship Alliance on Subjective Experiences

Predictor variables	Criterion Factor	
	Beta	R ²
Step 1	.07* (F=3.45)	
Age	-.11	
Relation Length	-.19*	
Sponsorship Alliance	-.06	

*=p<.05, **p<.01, ***=p<.001; N=134

Table 20

Hierarchical Regressions of Sponsorship Alliance on Difficulty Regulating Emotions

Predictor variables	Criterion Factor	
	Difficulty Regulating Emotions	
	Beta	R ²
Step 1		.12*** (F=7.86)
Age	-.30***	
Sponsorship Alliance	-	

*=p<.05, **p<.01, ***=p<.001; N=134

Table 21

Hierarchical Regressions on Sponsorship Alliance and Spiritual Well-being

Predictor variables	Criterion Factor	
	Spiritual Well-being	
	Beta	R ²
Step 1		.16*** (F=8.07)
Age	.23**	
Meeting Frequency	-.20*	
Sponsorship Alliance	.24***	

*=p<.05, **p<.01, ***=p<.001; N=134

APPENDIX N. FIGURES

Figure 1

Illustrative Model of Sponsorship Alliance as a Mediator of Links between Relational Spiritual Processes and Recovery Goals

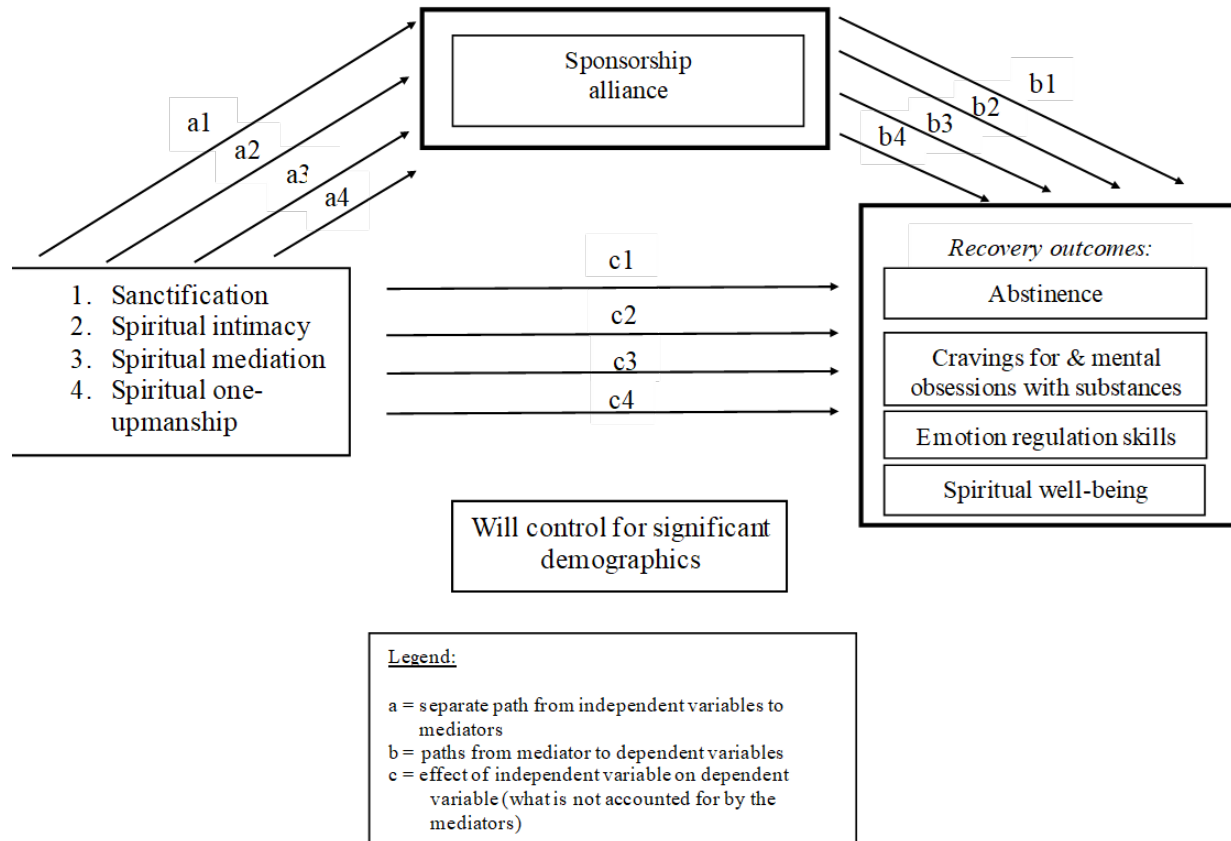


Figure 2

Model of Sponsorship Alliance as a Mediator between Sanctification and Spiritual Well-being

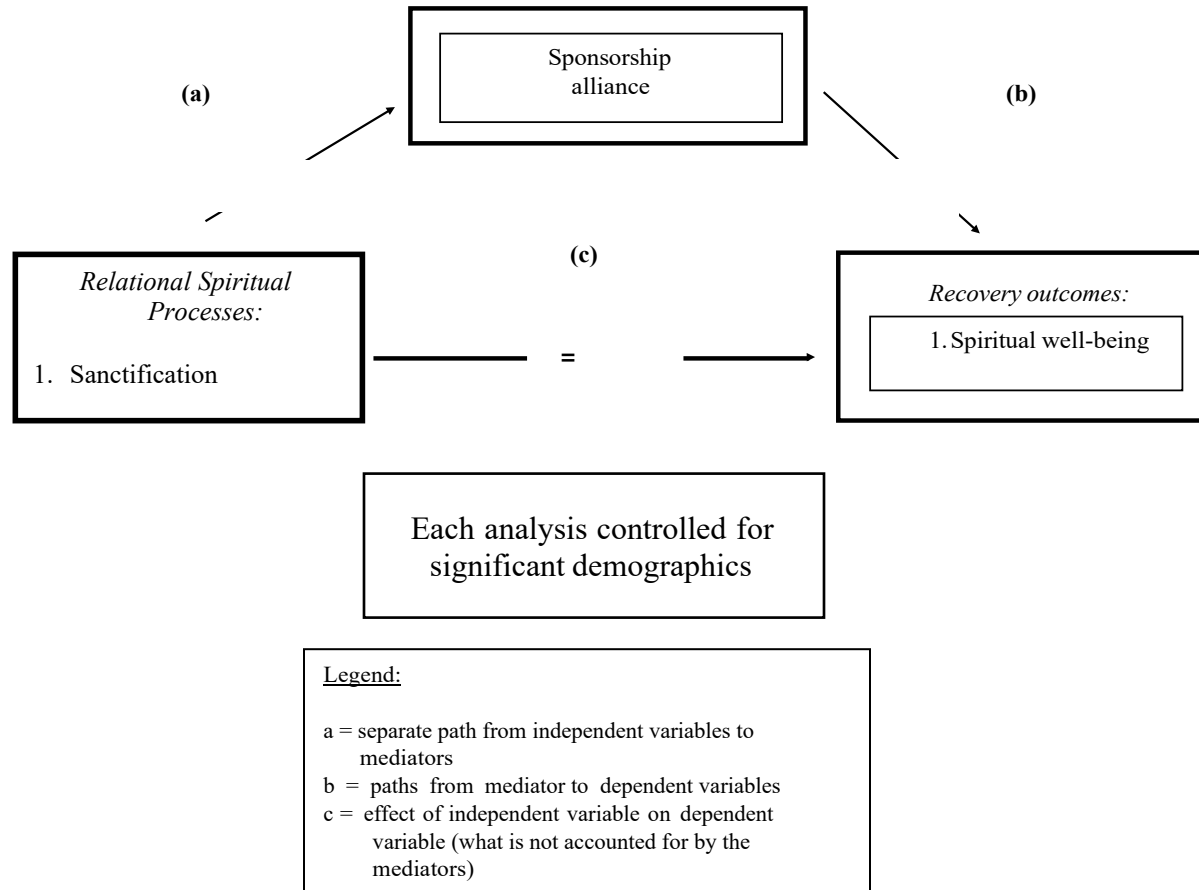
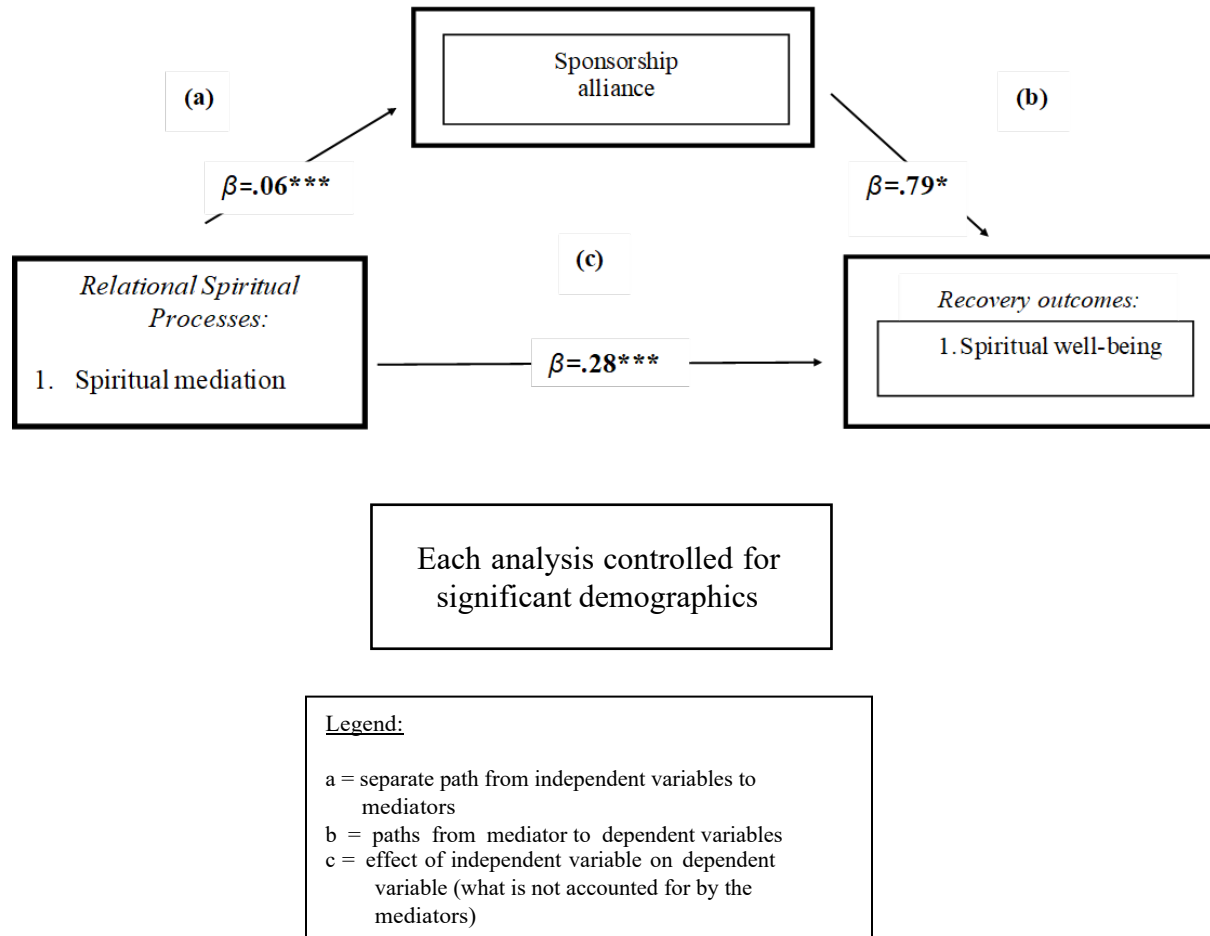


Figure 3

Model of Sponsorship Alliance as a Mediator between Spiritual Mediation and Spiritual Well-being



APPENDIX O. IRB APPROVAL

BOWLING GREEN STATE UNIVERSITY

Office of Research Compliance

DATE: February 21, 2020

TO: Allison Hart, MA
FROM: Bowling Green State University Institutional Review Board

PROJECT TITLE: [1501933-2] Understanding Sponsorship in Alcoholics Anonymous
SUBMISSION TYPE: Revision

ACTION: DETERMINATION OF EXEMPT STATUS
DECISION DATE: February 18, 2020

REVIEW CATEGORY: Exemption category # 2

Thank you for your submission of Revision materials for this project. The Bowling Green State University Institutional Review Board has determined this project is exempt from IRB review according to federal regulations AND that the proposed research has met the principles outlined in the Belmont Report. You may now begin the research activities.

Note that changes cannot be made to exempt research because of the possibility that proposed changes may change the research in such a way that it no longer meets the criteria for exemption. If you want to make changes to this project, contact the Office of Research Compliance for guidance.

We will retain a copy of this correspondence within our records.

If you have any questions, please contact the Office of Research Compliance at 419-372-7716 or orc@bgsu.edu. Please include your project title and reference number in all correspondence with this committee.

This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within Bowling Green State University Institutional Review Board's records.