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Strength & Hope

A message in support of emotional well-being.

Survey Results Show EA Supports Positive Mental Health Outcomes - Colleen C.

The results are in! The recent survey shows that most of those responding to a recent EA Fellowship Member survey achieved overall improved mental health while attending EA meetings; more than 83% said the program had a positive impact on their lives. Those of us who have been in the program for a while have known that all along, but it's good to have it confirmed by the first EA-related data produced by a U.S. university.

EAI worked with Dr. Beth Kotchick, a professor at Loyola University in Maryland, to create a member survey this past spring. The intent of the survey was to assess the effects of participating in the EA program. Dr. Kotchick developed a questionnaire in partnership with the Emotions Anonymous International Board of Trustees; 264 EA members participated in the survey.

Participants ranked how strongly they "felt" 20 different feelings on a scale from 1 (very slightly) to 5 (extremely) in two time periods: during the weeks when they first became involved with EA and the weeks prior to taking the survey. Results showed respondents' emotional reactivity decreased by about 30% as they actively used the program. Emotionally reactive individuals may have knee-jerk reactions to others and have difficulty maintaining playful, thoughtful, trusting relationships.

The survey also asked how the program affected various areas of respondents' lives such as family relationships, work, and overall mental health on a scale from 1 (lowest) to 5 (highest). The average positive level of impact of the EA program was a strong 4.16. Some of the most noted responses were in the areas of overall mental health, self-esteem, and general life satisfaction.

In addition, some individuals said EA had a positive impact in decreasing their use of prescribed medication and more than 73% of respondents said EA had a positive impact on their need to call crisis/emergency services.

While not a study that shows cause and effect (that would be a more complex clinical study), the results do provide a rationale for healthcare providers to consider making referrals to EA meetings. This is a very important statement about the value of EA in respondents' lives.

We are grateful to all who participated in the survey. More specific study results will be shared in upcoming issues; see a summary attached here.

QUICK TIP OF THE MONTH

If you cherry pick which steps or portions of the program you want to follow, you are free to do that, but you risk having a recovery that is not whole.

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AUGUST'S TOOLS FOR RECOVERY

STEP 8

Made a list of all persons we had harmed, and became willing to make amends to them all.

PROMISE 8

Our whole attitude and outlook upon life changes.

JUST FOR TODAY 8

I will stop saying, "If I had time." I never will *find time* for anything. If I want time, I must take it.

SLOGAN 8

Know Yourself – Be honest

HELPFUL CONCEPT 8

The steps suggest a belief in a Power greater than ourselves. This can be human love, a force for good, the group, nature, the universe, God, or any entity a member chooses as a personal Higher Power.

TRADITION 8

Emotions Anonymous should remain forever non-professional, but our service centers may employ special workers.

PRINCIPLE 8

Love

LIFE AS A LOOSE GARMENT — Claire

December 28—Reflection for Today

To love someone is to give them something of ourselves. We risk being vulnerable; we want to share so much of ourselves. That person learns a great deal about how we feel and what we think. Our openness has given this person the power to hurt us.

I have come to understand that in life, friends will come and some friends will go, and that's ok. Perhaps they have served the uni-

verse's purpose. Who am I to question the universe? So I accept it. There was a time when I could not accept it. Definitely with age and working 12 step programs comes wisdom.

I have learned to "wear life as a loose garment." I don't know who originated that quote that I have heard in the rooms. I am grateful for the wisdom and that I don't have to suffer anymore if the entire world isn't friendly to me.

WHAT HONESTY ALLOWS — LUZ M.

Knowing who I really am and being honest allow me to create and to build authentic relationships with myself, with others and with my Higher Power. It allows me to cope with my strengths and my weaknesses; my shortcomings and my assets.

It's an ongoing process to rediscovering myself with a different light each time. An adventure of self-acceptance and inner reconciliation which will make them more free and with a fuller life.

Thank you to everyone who made a contribution to EAI in the past fiscal year. Our new fiscal year began July 1. Your contributions allow us to offer free materials to those in need, scholarships to new groups, and make more materials available for free to everyone. Please consider making a donation to support EAI today.

You can find the Trustee Reflections on the website, www.emotionsanonymous.org.

This month we focus on Step 8.

CONTRIBUTION GRATITUDE

EAI could not operate without donations and we deeply appreciate your support! Recent gifts have been received from these groups and individuals:

Burlington, IA	Bend, OR
Virginia Beach, VA	Ukiah, CA
Midwest City, OK	Lombard, IL
Buffalo, MN Retreat	Fridley, MN
Saint Alban, UK	Wed

10 Anonymous Individuals

Jim J	Kathleen G	Leigh B
Kelley S	Tally N	Melvin J
Richard P	Nina W	Mireia C G
Mark D	Marilyn J	Rachel G
Ron L	Rachel F	Shannon U
Joyce M	Carmelita B	Bob W
Kathleen E	Colleen C	
Kathleen M	Larry W	
Louis M	Audrey L	

ADMINISTRATIVE NEWS

We are very pleased to welcome Sharon Boisselle to our office staff! Sharon replaces Carleen Schmidt, who retired in June. Sharon will be responsible for shipping and production.

We are also happy to announce the new slate of officers on the Board of Trustees. Paul Nouri takes on the role of President, Steve Bell is now Vice President, Colleen Coyne remains in the position of Secretary, and Derita Phippen steps into the Treasurers role. The Board will not meeting in August.

The Annual Membership Meeting is in the works for the fall. More information will be provided in the coming weeks. We plan to hold a hybrid meeting this year—open to individuals in the area who wish to attend in person as well as on a virtual platform so others throughout the world may join as well.

A TURNING POINT — Gail R.

I think for me, learning to believe in a higher power that to me felt "invisible" was very difficult. I was raised with no religion. My father was a lawyer so we believed in the "God of reason." That god was not helpful. I had been in and out of 12-step recovery for a while, and wasn't really using any of the tools, just went to a few meetings when things seemed tough. My life got to a point where I felt it was unmanageable, and I had friends who had spiritual lives and seemed to be happy, and I wasn't. I couldn't grasp the idea of a higher or greater power that I couldn't see, or understand. Finally one day I had a thought that felt like something that didn't come from me, telling me that it was ok if I didn't understand that power - the important thing was to learn to use that power. Wow! Where did that come from? and what did it mean? That was a turning point for me, where I started to move slowly from skepticism to belief.

IT WOULD HAVE HELPED to Know — Chris D.

While I was walking my dog today, I had this thought: "How you feel about me has nothing to do with me."

I think it's true--and I wish I had been raised to believe this and see my life this way. I feel like, perhaps, I would have had much greater peace in my life.

PLEASE WRITE!

We encourage member reflections! Thank you to members who send in their thoughts and allow us to publish them! Please consider making a submission of your writing to submissions@emotionsanonymous.org.

Reflections can be as short as you like! Try to keep them to no more than 300 words. Please note which step/promise/tradition etc. you are referencing.

OFFICE INFORMATION

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Assessing A 12 Step Approach to Mental Health

Introduction

Emotions Anonymous (EA) is a twelve-step program composed of people who come together in weekly meetings for the purpose of working toward recovery from emotional difficulties. The organization was founded in 1971 in St. Paul, Minnesota and has more than 300 registered support groups in each of the U.S. and Internationally. The program counts as its members both people who have and have not received a diagnosis of mental illness. The intent of this survey is to assess, based on self-reported outcomes, the effects of participation in the EA program on emotional health using clinically validated scales, as well as internally developed questionnaires.

Methods

Data was collected online in April and May, 2021, via an anonymous survey administered via Qualtrics. Invitations to participate in the survey were distributed to Emotions Anonymous members via email and advertised on the Emotions Anonymous website, social media and mobile app. Those completing the survey were provided the opportunity to request a promotional code for a nominal discount toward the purchase of Emotions Anonymous materials. A total of 264 respondents completed some portion of the survey; approximately 175 respondents provided enough data to be included in the analysis of participation in Emotions Anonymous and associated outcomes.

	Before starting EA		Current (after EA)		Difference* (change from before to after)	
	Mean	SD	Mean	SD	Mean	SD
Positive Affect† (n = 180)	2.57	0.85	3.36	0.85	↑ 0.79	1.02
Negative Affect† (n = 181)	3.16	0.95	2.14	0.96	↓ 1.02	1.03
Emotional Reactivity‡ (n = 186)	95.81	18.19	67.52	21.70	↓ 28.28	21.53

† Scores range from 1 (Very Slightly/Not at All) to 5 (Extremely)

‡ Score range from 26 to 130; higher scores indicating more emotional reactivity and poorer emotion management

* Statistically significant difference between before and after EA participation ($p < .001$)

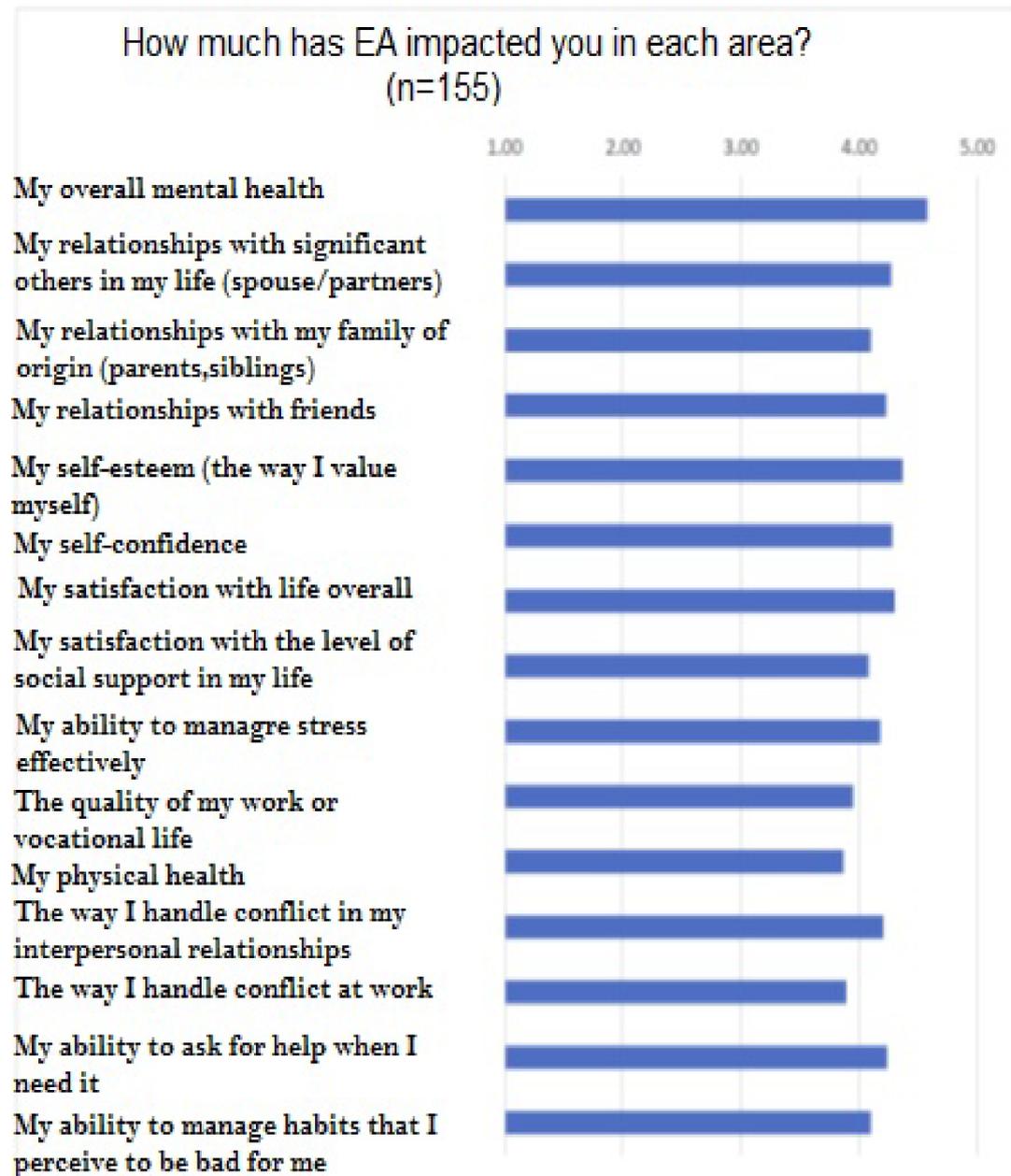
Results

The PANAS scale is a widely used measure of emotional experience that consists of two separate subscales that measure positive and negative affect. The participants were asked to rank how strongly they felt twenty different feelings on a scale from 1 (very slightly) to 5 (extremely) during two time periods: during the few weeks when they first became involved with EA and the few weeks before taking the survey. The results in table 1 show mean improvements in Positive and Negative Affect of 30.74% and 32.28%, respectively.

The emotional reactivity scale that was used (referenced in table 1) consisted of twenty-six situations when potentially strong feelings could arise. Participants were asked to rank how they reacted in each situation on a scale of 1 (not at all like me) to 5 (completely like me). The mean improvement in emotional reactivity was 30%.

Participants were also asked to fill out a fifteen-item questionnaire (figure 1) relating to how the program has impacted them in different areas of their life including family and friend relationships, work and overall mental health. The scale was from 1 (EA has had a significant negative impact) to 5 (EA has had a significant positive impact). The average level of impact across all areas was 4.16. Among those for whom it was applicable, 65% indicated that EA has a positive impact on their reliance on substances to manage emotions, 53.8% indicated that EA has a positive impact on their use of prescribed medication and 73.1% indicated that EA had a positive impact on their need to call crisis hotlines or emergency services.

Figure 1



Mean ratings on a 1 (EA has had a significant negative impact) to 5 (EA has had a significant positive impact) scale.

Conclusion

The survey results indicate that most (figure 2) members who took the survey experience overall improved emotional health while attending EA meetings. The proportion of participants who achieved positive affect, decreased negative affect, and decreased emotional reactivity were generally consistent across key demographic variables, including participant gender, ethnicity, education, employment, marital status, and geographic location of EA meetings. These results provide a rationale for mental health providers to consider making referrals to EA meetings. To attempt to establish causality, a more extensive study would need to take place that independently surveyed members at multiple intervals, starting with when they began the program and take into account a greater number of social and economic determinants of health.

Figure 2

