SUPPORTIVE RELATIONSHIPS WITHIN THE ACA COMMUNITY

Louis B - Presenter
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– BRB, Chapter 13
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Rules of Family Dysfunction:
Don’t Talk, Don’t Trust, & Don’t Feel
Reparenting Check-in:

1. **Ground** (body scan) – What do I feel in this moment?
2. **Who** – Who (inner part of me) needs my attention?
3. **What** – What activated or is activating that part of me?
4. **Tend** – What does that part of me need (now, or acknowledge and return to that part of me later)?
My most primary relationships are within me.

When my “inner relationships” are working well between my inner loving parent, inner critic, inner child(ren), and inner teen(s) -- then my outside relationships tend to work well, too.
Some experience, strength, and hope.
“In 1989, the ACA Sponsorship Committee recommended the “fellow traveler,” or co-sponsor approach based on fellowship input. The ACA model of sponsorship is a modification of the method used in Alcoholics Anonymous. The Sponsorship Committee did not believe the AA method adequately addressed the tendencies of the ACA personality, namely our over-reliance on others for direction and approval, and our tendency to try to manage someone else’s life.”

– BRB, Chapter 11
“equal footing”

“ACA uses the ‘fellow traveler’ or co-sponsor method of sponsorship in most cases . . . ACA sponsorship could be described as peer-to-peer help. The sponsor and sponsee are on equal footing, seeking answers and solutions together.”

- BRB, Chapter 11
What does “Fellow Travelers” mean?

• Fellow Travelers = co-sponsorship, no recovery “hierarchy,” or
• Fellow Travelers = traditional sponsor/sponsee framework, but on “equal footing,” or
• Fellow travelers are what we call ALL ACA members, or
• A Fellow Traveler is anyone with whom I do deeper recovery work?
Tendencies of the ACA Personality - 1989

• “our over-reliance on others for direction and approval”
• “our tendency to try to manage someone else’s life”
Tendencies of the ACA Personality - 1989

• “our over-reliance on others for direction and approval”
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Laundry List Traits & Other Laundry List Traits
A New Hope – “Fellow Travelers” Chapter

“In our dysfunctional home environments, we learned not to talk or feel . . . and we learned not to trust. In the absence of trust, many adult children developed a fear of authority in childhood (Traits 1 & 3), a desire to seek approval from those in authority (Trait 2), or reflexive reactions to fight against authority (Other Traits). Some of us tried to protect ourselves by using the power of authority and control against others (Other Traits). Perhaps we feared in ACA that we would find ourselves in similar unhealthy, exhausting relationships. Caught between the pain of isolation and paralyzing indecision, we may have wondered how we would ever learn to safely trust other people.”
Laundry List

1) We became isolated and afraid of people and authority figures.
2) We became approval seekers and lost our identity in the process.
3) We are frightened by angry people and any personal criticism.
4) We either become alcoholics, marry them or both, or find another compulsive personality such as a workaholic to fulfill our sick abandonment needs.
5) We live life from the viewpoint of victims and we are attracted by that weakness in our love and friendship relationships.
6) We have an overdeveloped sense of responsibility and it is easier for us to be concerned with others rather than ourselves; this enables us not to look too closely at our own faults, etc.
7) We get guilt feelings when we stand up for ourselves instead of giving in to others.
8) We became addicted to excitement.
9) We confuse love and pity and tend to “love” people we can “pity” and “rescue.”
10) We have “stuffed” our feelings from our traumatic childhoods and have lost the ability to feel or express our feelings because it hurts so much (Denial).
11) We judge ourselves harshly and have a very low sense of self-esteem.
12) We are dependent personalities who are terrified of abandonment and will do anything to hold on to a relationship in order not to experience painful abandonment feelings, which we received from living with sick people who were never there emotionally for us.
13) Alcoholism is a family disease; and we became para-alcoholics and took on the characteristics of that disease even though we did not pick up the drink.
14) Para-alcoholics are reactors rather than actors.

Other Laundry List

1) To cover our fear of people and our dread of isolation we tragically become the very authority figures who frighten others and cause them to withdraw.
2) To avoid becoming enmeshed and entangled with other people and losing ourselves in the process, we become rigidly self-sufficient. We disdain the approval of others.
3) We frighten people with our anger and threat of belittling criticism.
4) We dominate others and abandon them before they can abandon us or we avoid relationships with dependent people altogether. To avoid being hurt, we isolate and dissociate and thereby abandon ourselves.
5) We live life from the standpoint of a victimizer, and are attracted to people we can manipulate and control in our important relationships.
6) We are irresponsible and self-centered. Our inflated sense of self-worth and self-importance prevents us from seeing our deficiencies and shortcomings.
7) We make others feel guilty when they attempt to assert themselves.
8) We inhibit our fear by staying deadened and numb.
9) We hate people who “play” the victim and beg to be rescued.
10) We deny that we’ve been hurt and are suppressing our emotions by the dramatic expression of “pseudo” feelings.
11) To protect ourselves from self punishment for failing to “save” the family we project our self-hate onto others and punish them instead.
12) We “manage” the massive amount of deprivation we feel, coming from abandonment within the home, by quickly letting go of relationships that threaten our “independence” (not too close).
13) We refuse to admit we’ve been affected by family dysfunction or that there was dysfunction in the home or that we have internalized any of the family’s destructive attitudes and behaviors.
14) We act as if we are nothing like the dependent people who raised us.
Traits Exercise - Questions

• Shares Part 1: What Traits (and/or fears) have come up for you when you are actively seeking or receiving support from someone else in ACA? (being a “sponsee”)

(being a “sponsee”)
Traits Exercise - Questions

• Shares Part 2: What Traits (and/or fears) have come up for you when you are actively offering or providing support to someone else in the program?

(being a “sponsor”)
Laundry List

1. afraid of people and authority figures
2. became approval seekers - lost our identity
3. frightened by angry people and any personal criticism
6. overdeveloped sense of responsibility... concerned with others rather than ourselves
7. guilt feelings when we stand up for ourselves
9. tend to “love” people we can... “rescue”
10. “stuff” our feelings
12. do anything to hold on to a relationship

Other Laundry List

1. tragically become the very authority figures who frighten others and cause them to withdraw.
3. frighten people with our anger and threat of belittling criticism.
4. dominate others and abandon them before they can abandon us
5. attracted to people we can manipulate and control
7. make others feel guilty when they attempt to assert themselves.
11. project our self-hate onto others and punish them
A theory . . .

In ACA recovery relationships, the greater the difference in perceived power and authority between people . . .

. . . the more likely people are to get triggered or activated into their Traits behaviors.
Something to think about . . .

Just considering these terms on their own --
"sponsor" and "sponsee"

Which term indicates who is in charge?
Which term indicates who takes the lead?
Which term designates power/authority in the relationship?
Two roles or one relationship?

Two distinct roles (sponsor/sponsee):
One person provides support & the other receives support

or

One dynamic relationship between two people:
“I am someone who both needs and can accept support, and offer and provide support in a recovery relationship.”
A New Hope – “Fellow Travelers” Chapter

“As we bring our inner child into our lives, trusting another person with our most vulnerable selves can feel new and scary. When we connect with fellow travelers, it may be the first emotionally honest relationship we have ever had. So, we learn to trust others gradually and allow others to do the same. We share our experience, strength, and hope with one another . . . seeking answers and solutions together. We help each other understand program principles, language, and concepts. We encourage each other with reparenting work, Step work, and use of other program tools, techniques, and resources. Our most trusted fellow travelers support us in learning to feel our feelings deeply, to discover our authentic wants and needs, and to speak our truth and set boundaries. In our fellowship, we hold space for each other as we break the old rules of family dysfunction: Don’t talk - Don’t trust - Don’t feel.”
Potential for Predatory Behavior

• Newcomers to ACA looking for a “parent”
• 13th Step - Predatory behavior is not just about sex or money, but power and abuse of authority (Other Laundry List Traits – next slide)
• ACA resources for predatory behavior
• Small groupwork as an option (more on this to follow)
Other Laundry List

1. To cover our fear of people and our dread of isolation we tragically become the very authority figures who frighten others and cause them to withdraw.

3. We frighten people with our anger and threat of belittling criticism.

4. We dominate others and abandon them before they can abandon us or we avoid relationships with dependent people altogether. To avoid being hurt, we isolate and dissociate and thereby abandon ourselves.

5. We live life from the standpoint of a victimizer, and are attracted to people we can manipulate and control in our important relationships.

7. We make others feel guilty when they attempt to assert themselves.

11. To protect ourselves from self punishment for failing to “save” the family we project our self-hate onto others and punish them instead.
Building Trustworthy Connections in ACA

We seek to connect with other ACA fellow travelers who . . .

• can be supportive of us in our ACA reparenting/recovery work.
• can be responsible for their own reparenting/recovery and own boundaries.
• can be honest with themselves and others.
• can be accountable by following through on commitments.
• can be respectful by refraining from harsh judgment and personal criticism.
• can, if needed, utilize outside resources for directive accountability with their primary addictions, compulsions, and obsessions, or other acting out behaviors.
A New Hope – “Service” Chapter

“As we patiently practice reparenting in ACA, we learn to gently attune to our child within. By learning to connect deeply with our true self, we become increasingly available to support others, too. We more easily put down our phones, make eye contact longer, and fidget and daydream less. We practice the art of “holding space” and being a “witness” for our fellow travelers. We watch for our Laundry Lists Traits behaviors to arise through our false self expressions. We become better able to discern if our helping and giving is in alignment with the ACA Solution. We ask . . .

“What my approach to being of service right now support me and my fellow travelers in becoming our own loving parents?”
Codependency from a Reparenting Perspective

• Codependency = looking to another ACA member to protect, nurture, or guide one’s inner family members, or seeking to “parent” another ACA member’s inner family members.

• In ACA we learn not to take care of each other’s younger parts. Instead, we help each other re-anchor into our own inner loving parent when we struggle to access that part of us.
Primary vs. Secondary Caregiver in ACA

Primary Caregiver
*The ACA Solution - becoming our own loving parent*

Secondary Caregiver
*providing support in healthy ways to another member of ACA*
A New Hope – “Relationships” Chapter

“Our ACA fellow travelers can help us learn and practice new relationship skills, sharing their experience, strength, and hope and how they relate to our struggles and successes. They can be a mirror for us, reflecting back what they hear us say. They can help us identify when we’re caught in the critical parent’s distorted thinking, and explore ways to create breathing room. They can model their loving parent voice for us when ours is shaky or distant. As we learn to trust others and directly ask for the support we need, our inner loving parent grows stronger, and our emerging inner child feels safer.”

How “secondary caregivers” (fellow travelers) can support our inner “primary caregiver” (inner loving parent).
A New Hope – “Appendix C” (workgroups)

“Our original wounding occurred within a dysfunctional family, so it makes sense that we might find healing in a small workgroup with members of our ACA family. Communal attunement and consistent connection from a group of trusted others can be transformative in our recovery process. 12 Step workgroups can provide what the Big Red Book calls “indirect sponsorship” and gradually, we might come to rely on the group conscience for support and guidance. Additionally, members of our workgroup can form the foundation for our recovery support network . . . each a vital source of individual experience, strength, and hope.”
Creating / Joining ACA 12 Step Workgroups

- **Duration**: Length of meeting times & total length of commitment to the group.
- **Group Size**: Number of participants in the workgroup.
- **Location**: Where to meet - pluses and minus of different venues.
- **Format**: Workgroups involve reading, writing, sharing, and witnessing.
- **Other Laundry List Use**: Whether to include them, and suggestions on how.
- **Tony A’s 12 Steps Use**: Whether to include them, and suggestions on how.
- **Safety Guidelines**: Example guidelines provided.
- **Experience & “Expertise”**: Whether “veteran” step-workers inclusion is needed.
- **Questions, Conflict & Authority**: Resolving conflict in the spirit of the workgroup’s safety guidelines, adhering to ACA Traditions, and with as much gentleness, humor, love, and respect as possible. Support from others outside the group without breaching confidentiality.
Recovery Relationships = Relationships 101

Through the supportive relationships we form within the ACA community, we learn to break the rules of our childhood family dysfunction: **Don’t Talk, Don’t Trust, & Don’t Feel.**

ACA recovery relationships are a “practice ground,” where we can learn to have healthy relationships in all other areas of our lives.
“With patience and practice, we take our ACA recovery into the world. All our relationships can be different – friendship, work, family, and even romantic partnerships. We choose to bring people into our lives who have healthy boundaries and who can be responsible for themselves. We become willing to share our true self with others who can love responsibly in return. As adult children, we have lived a life of disconnection for too long. With support from ACA, our internal intimacy translates into outward connection, and we become fully human.”
A New Hope: Fellow Traveler Aspirations

- I can ask for help – I am not a burden.
- I can know when to offer help – I am not obligated.
- I can be open to others’ experience, strength, and hope without seeking advice.
- I can share my experience, strength, and hope instead of giving advice.
- I can refrain from trying to please others I want to impress.
- I can refrain from trying to intimidate others into seeking my approval.
- I can avoid trying to find others to fix, save, or rescue me.
- I can avoid trying to fix, save, or rescue others.
- I can learn from others without making them an all-knowing authority.
- I can share with others without thinking I am an all-knowing authority.
- I can be free from the burdens of inferiority and grandiosity.
- I can be equal in relationships with other people.
- I can say yes when I want/need to and no when I want/need to.
- I can maintain healthy boundaries.
- I can be capable of selecting healthy people with whom to work my program.