

Washington University School of Medicine

Digital Commons@Becker

---

Posters

2010: Disentangling the Genetics of Alcoholism:  
Understanding Pathophysiology and Improving  
Treatment

---

2010

## Do particular AA activities explain the effect of a 12-step facilitation program (MAAEZ) on alcohol and drug abstinence?

Meenakshi S. Subbaraman  
*University of California - Berkeley*

Lee Ann Kaskutas  
*University of California - Berkeley*

Sarah E. Zemore  
*University of California - Berkeley*

Follow this and additional works at: <https://digitalcommons.wustl.edu/guzeposter2010>



Part of the [Medicine and Health Sciences Commons](#)

---

### Recommended Citation

Subbaraman, Meenakshi S.; Kaskutas, Lee Ann; and Zemore, Sarah E., "Do particular AA activities explain the effect of a 12-step facilitation program (MAAEZ) on alcohol and drug abstinence?" (2010). *Posters*. Paper 34 Samuel B. Guze Symposium on Alcoholism.  
<https://digitalcommons.wustl.edu/guzeposter2010/34>

This Poster is brought to you for free and open access by the 2010: Disentangling the Genetics of Alcoholism: Understanding Pathophysiology and Improving Treatment at Digital Commons@Becker. It has been accepted for inclusion in Posters by an authorized administrator of Digital Commons@Becker. For more information, please contact [vanam@wustl.edu](mailto:vanam@wustl.edu).



# Do particular AA activities explain the effect of a 12-step facilitation program (MAAEZ) on alcohol and drug abstinence?



Meenakshi S. Subbaraman, M.S., Lee Ann Kaskutas, Dr.P.H., Sarah E. Zemore, Ph.D.  
Alcohol Research Group, Emeryville, CA; University of California Berkeley, School of Public Health

## BACKGROUND

### What is MAAEZ (Making Alcoholics Anonymous Easier)?

- Manualized, group-format intervention
- Designed for treatment centers
- Aimed at engaging participants in 12-step fellowship
- Prepares participants for 12-step culture

### Is MAAEZ effective?

- A recent trial showed that MAAEZ participants had increased odds of abstinence compared to the control group [OR = 1.58, p = 0.063; Kaskutas et al. (2009)]
- MAAEZ also appeared especially effective for participants with high prior AA attendance, as well as those with high psychological severity

## DESCRIPTION of MAAEZ TRIAL

### PARTICIPANTS: (N=508)

#### Sample overall:

- Anyone already in treatment was eligible for the MAAEZ trial
- 67% male, mean age 36, 20% African American, 52% White
- 312 in MAAEZ, 196 in usual care

#### High prior AA attendance (> 90 lifetime meetings):

- 69% male, mean age 39, 16% African American, 66% White
- 119 in MAAEZ, 84 in usual care

#### High psychological severity (> median ASI psych):

- 65% male, mean age 36, 20% African American, 55% White
- 140 in MAAEZ, 115 in usual care

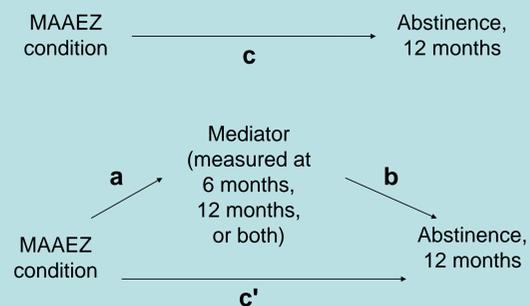
## MEASURES

- All variables measured at baseline, 7 weeks, 6 months, and 12 months after baseline
- Questions asked about social network composition, AA attitudes and involvement, psychological problems, psychological severity, and drinking and drug use

## PROCEDURES

- Usual care compared to MAAEZ intervention in health services trial
- Face to face and telephone interviews
- Urinalysis performed for abstinence verification

## METHODS: THE BARON & KENNY PATHS



## METHODS: SOBEL'S TEST

$$z = \frac{ab}{\sqrt{b^2 * se_a^2 + a^2 * se_b^2}}$$

## METHODS

- Analyses were identical in the sample overall and when performed within subgroups
- Because the goal of MAAEZ is to engage participants in 12-step culture, the potential pool of mediators included activities such as sponsoring, reading literature, attending meetings, doing service, comfort speaking and comfort being at meetings
  - Crosstabs and ANOVAs were used to empirically narrow this pool
- The Baron and Kenny (B&K) method was implemented controlling for marital status, treatment program type (long-term residential, short-term residential, outpatient), and length of stay in treatment in all models
  - These covariates were chosen because they related to treatment and outcome as well as several of the mediators
- Sobel's test was used to verify robustness of the Baron and Kenny method findings
- We also implemented a macro that allows for control of multiple continuous mediators: proportion of social network who supports sobriety, comfort being at meetings, and comfort speaking at meetings

## RESULTS:

### Significant paths a and b, mediators measured at 6 months



- \* p<0.05, sample overall
- \* p<0.05, high prior AA attendance
- \* p<0.05, high psych severity
- (\*) p<0.10, sample overall
- (\*) p<0.10, high prior AA attendance
- (\*) p<0.10, high psych severity

## RESULTS:

### Significant paths a and b, mediators measured at 12 months



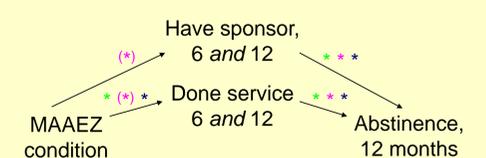
## RESULTS: B&K and Sobel's

Mediator	Overall		High Prior AA		High Psych Sev	
	6 mo	12 mo	6 mo	12 mo	6 mo	12 mo
Sponsor			B (S)			
Service	(S)	B (S)		B (S)		B (S)
Support			B (S)			B (S)
Comf speak		B (S)		B		
Comf @ mtg		B (S)				(S)
Sponsor, 6&12				B (S)		
Service, 6&12		(S)		B (S)		B (S)

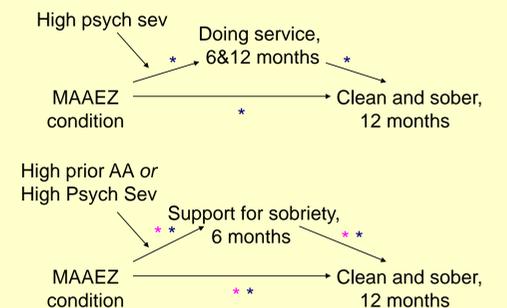
- B = meets Baron and Kenny criteria
- S = Sobel's statistic, p<0.05
- (S) = Sobel's statistic, p<0.1

## RESULTS:

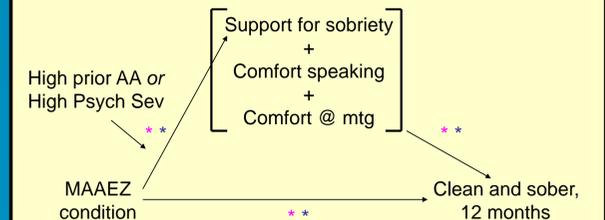
### Significant paths a and b, mediators measured at both 6 and 12 months



## RESULTS: Moderated mediation



## RESULTS: Multiple mediation, mediators measured at 6 months



## CONCLUSIONS

- AA activities, especially doing service, mediate the effects of MAAEZ in both the sample overall and within subgroups
- Having support for sobriety is especially important for those with high prior AA and those with high psychological severity
- Neither increased meeting attendance nor composite AA activity measures appeared to mediate MAAEZ effects
- Results suggest that MAAEZ works by connecting people with other AA members