Self-Esteem and Long-term Recovery from Substance Use Disorders

Mariah Brennan Nanni and Austin McNeill Brown

Recovery from alcohol use disorder (AUD) is a complex process that is difficult to define and even harder to quantify. Classic reliance on abstinence from alcohol or other drugs as evidence of recovery is not useful for determining recovery progress. This all-or-nothing mantra overlooks the fact that recovery from AUD, like all other chronic conditions, cannot be defined by symptom recurrences alone. Defining and tracking evidence of recovery has become increasingly important in recent years, with wide-ranging implications for treatment, criminal justice, and public health.

Self-esteem, defined as an evaluation of self-worth and importance, is a central construct in psychology. It encompasses the extent to which individuals’ value, approve of, appreciate, or like themselves. Self-esteem is an important intrapersonal variable, often underused in the study of substance use recovery.

In our research, we hypothesized that self-esteem correlates with validated recovery indicators, such as recovery capital, and personal values like gratitude and altruism. Recovery capital encompasses all the psychological, social, and environmental resources individuals can marshal in their efforts to initiate and sustain recovery. Gratitude and altruism can indicate that one has worked through the 12-Step process and lives a recovery lifestyle. Together these indicators serve as evidence of successful recovery. Previous research has established a positive link between self-esteem and recovery capital as well as a negative relationship between self-esteem and psychological distress. We hoped to confirm and expand on previous findings, capturing a snapshot of the variables related to self-esteem for people who are living in long-term, abstinence-based recovery.

This brief summarizes the results of our peer-reviewed study that analyzed an existing dataset of active members of 12-Step recovery groups. Our goal was to identify relationships between self-esteem, aspects of personality, personal values, and emotional health in a sample of people living in long-term, abstinence-based recovery from AUD (see Figure 1). This research adds to a growing body of studies that seek to measure the ways that people grow and change throughout their recovery journeys.

“Positive, Outgoing, Grateful, Selfless”

People often use terms like these to describe individuals in long-term recovery, identifying aspects of personality that are very different from individuals with active addiction. Success in 12-Step recovery relies on adopting new values and ways of living like selflessness, service to others, appreciation for life, and learning how to build trust and connect to people. The adage that one must love themselves in order to love others is particularly important for people in recovery.

Key Findings

- Self-esteem may be an important central variable to track recovery progress.
- Self-esteem is positively correlated with known substance use recovery variables such as gratitude, altruism, and extroversion.
- Shifting to strength-based measures of personal growth and health may more accurately reflect recovery progress.
A positive sense of self is necessary for developing healthy relationships and a prosocial outlook on life.\textsuperscript{5-6} Rebuilding one's life in recovery is a long-term, social reconstruction process with the primary goal of forming a positive connection to the world.\textsuperscript{7} Individuals in recovery achieve this through developing healthy personality traits, positive values, and prosocial behaviors.

In our research, we found a positive relationship between self-esteem and personal values like gratitude and altruism. Certain aspects of gratitude, like simple appreciation of life and a lack of feelings of deprivation, correlated with self-esteem. We also identified a positive connection between self-esteem and aspects of personality like extroversion and the sense of leadership or authority (a subcategory of positive narcissism). All of these positive correlations demonstrate healthy and measurable degrees of recovery success.

<table>
<thead>
<tr>
<th>Substance Use Recovery Indicators Related to Self-Esteem</th>
<th>Correlations</th>
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<tbody>
<tr>
<td>Recovery Capital</td>
<td>(+)</td>
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<tr>
<td>Personality Factors</td>
<td></td>
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<tr>
<td>Extroversion</td>
<td>(+)</td>
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<tr>
<td>Narcissism</td>
<td></td>
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<tr>
<td>- leadership/authority</td>
<td>(+)</td>
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<tr>
<td>- exploitative/entitlement</td>
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<tr>
<td>Personal Values</td>
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<tr>
<td>Gratitude</td>
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<td>- simple appreciation</td>
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<td>- lack of sense of deprivation</td>
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<td>Altruism</td>
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<td>Emotional Health</td>
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<td>Psychological Distress</td>
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<td>Attachment</td>
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<td>- anxiety</td>
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<td>- avoidance</td>
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Table 1. Comparing Abstinence Indicators of Substance Use Recovery with Nuanced Self-Esteem Based Indicators

Data Source: Self-Esteem in 12-Step Recovery: Theoretical History, Evidence, and Implications for Future Research

N=113 members of Alcoholics Anonymous 12-Step Program

“Living Life on Life’s Terms”

This is a popular expression in 12-Step groups. Accepting life “as is” and making positive adjustments are hallmark behaviors of individuals who “work the program.” Intentional humility, daily prayer or meditation, and keeping track of one’s emotional health are all central practices of 12-Step engagement.\textsuperscript{8} Active maintenance of emotional health is a distinctly important aspect of long-term recovery. We found that there is a significant negative relationship between self-esteem and indicators of poor emotional health, including psychological distress, attachment anxiety, and attachment avoidance. Additionally, we found a negative link between self-esteem and exploitative or entitled aspects of narcissism. Fortunately, these maladaptive connections to the world can decline with positive development of self-esteem.

Recovery Does not Mean Abstinence Only
The last ten years of recovery science has broadened theory and definitions, producing several reliable ways to measure recovery that go beyond testing urine samples and breathalyzers. The current misguided ways in which treatment protocols, the criminal justice system, and society-at-large approach substance use disorders lead to substantial misunderstanding about recovery. Recovery is far more complex than the simple cessation of use. Policymakers and the criminal justice system have been short-sighted in this regard for decades. Recovery from any chronic health condition requires multiple forms of support that are not provided through acute (e.g., 30 day) treatments or mandated legal interventions. Because recovery is an intentional, dynamic, and relational process, it is best viewed through longitudinal improvement in personal growth, relationships with others, and improved quality of life. As such, public health researchers and practitioners should adopt strength-based ways of measuring (and celebrating) the recovery progress of individuals with substance use issues.

Data and Methods
This study included secondary data analysis of 113 members of the Alcoholics Anonymous 12-step program. The study principal investigator collected measures on participant attendance, sponsorship, general health, spirituality, religiosity, living arrangement, and student status. The following scales were used to measure self-esteem and other interpersonal and intrapersonal factors related to recovery: Rosenberg Self-Esteem Scale, Altruistic Personality Scale, 13-item Narcissistic Personality Inventory, Experiences in Close Relationships Scale Short Form, Ten-Item Personality Inventory, Kessler non-specific psychological distress measure, and the Brief Assessment of Recovery Capital. For further details on the data and methods, please see the published study, Self-Esteem in 12-Step Recovery: Theoretical History, Evidence, and Implications for Future Research.

References

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