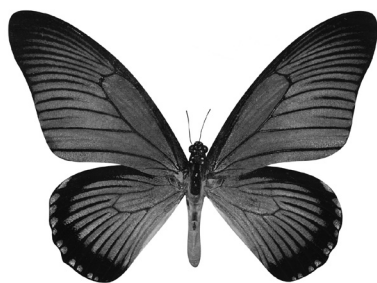


THE  
BROWN  
METHOD

Facilitation Guidelines



A Companion to  
*Addiction Is the Symptom*

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**The true teacher will never stand as the interpreter of truth for another. The true teacher is the one whose endeavor is to bring the one he teaches to a true knowledge of himself and hence of his own interior powers, that he may become his own interpreter.**

—Ralph Waldo Trine, *The Wisdom of Ralph Waldo Trine*

## Introduction

These guidelines are meant for professional therapists and counselors who seek to help clients who have addiction/control issues through my twelve-step method, which is based on the Twelve Steps of Alcoholics Anonymous. The Brown Method is essentially a spiritual process, but one with powerful psychological components.

The guidelines assume that you, the would-be facilitator, have read or will read my book *Addiction Is the Symptom*. Although written for the client/layperson, the book lays out the foundation of my work, my perspective on the Twelve Steps, and the specifics of my step method, which hinges on the Fourth Step Algorithm—a precise working of Step Four that I developed over three decades. The success of this twelve-step process depends on both how it is perceived and how it is executed.

My method is effective for anyone with control issues, which manifest on a spectrum from everyday relationship difficulties to overtly life-threatening chemical addictions. As discussed in *Addiction Is the Symptom*, it makes no difference whether the client is addicted to alcohol, illegal drugs, prescription drugs, nicotine, a person, gambling, food, work, sex . . . All of these addictions and more stem from control issues.

Thank you for your interest in my work—and in the healing of your clients.

Rosemary Ellsworth Brown, PhD  
March 2015

## Key Concepts

The concepts that underlie my work, described in detail in *Addiction Is the Symptom*, can be outlined quite succinctly:

- The premise that addiction is chronic and relapse is to be expected (based primarily on single-addiction treatment's high rate of relapse) is false.
- Single-addiction treatment inevitably results in some form of relapse, because addictive behavior is the symptom, not the problem.
- The underlying problem—common to all addictions—is emotional dependency.
- A survival mechanism of fear, control, and manipulation (aka addictive behavior) is triggered when the object of the emotional dependency is threatened or believed to be threatened.
- Emotional dependency is conditioned, through rewards and punishments, by our parenting system, the objective of which is control—the original addiction.
- Given that emotional dependency is learned, it can be unlearned; i.e., addiction is not chronic but rather can be healed.
- This unlearning can be effected through my twelve-step method, a cause-oriented modification of the Twelve Steps of Alcoholics Anonymous, primarily through a precise and intensive working of Step Four that I call the Fourth Step Algorithm (followed by the associated Step Five).

## Key Departures from the Traditional Steps

The Brown Method . . .

**Assumes that healing is possible.** It's become doctrine that you will always be “in recovery,” never recovered. However, the labeling of a disease as “chronic” or “incurable” does not mean that it can't be healed, only that no one has yet figured out how to do it.

**Focuses on cause rather than symptom.** The symptom focus of *Alcoholics Anonymous* (aka the Big Book) is a fundamental error. My step method tackles the cause of addictive behavior—emotional dependency—and thus works better, and works for everyone, regardless of the form the addiction takes.

**Eliminates trial and error.** One reason for the high rate of relapse, I believe, is the practice of doing the steps, in particular Step Four, by personal interpretation. My Fourth Step Algorithm comprises a set of practical, well-researched instructions that eliminate trial and error. It addresses the fear, control, and manipulation that drive addictive behavior, with consistent results.

**Focuses on empowerment, not powerlessness.** While my Step One asks that we accept our powerlessness over *all of life*, not just our drug of choice (as the traditional steps instruct), this acceptance is ultimately about recognizing, reclaiming, and acting on the power we *do* have.

**Focuses on the wrongs the addicted person has suffered.** Traditionally, the Step Four inventory is largely a collection of wrongs committed. In my method, it is an inventory of the wrongs the addicted person him- or herself has suffered, including self-inflicted wrongs. It reveals and reexamines the lifetime of emotional trauma that has conditioned the addictive behavior.

**Assumes everyone's inherent goodness.** The Big Book's premise is that people suffering from addictions are flawed. In my view, this is another fundamental error. My work assumes that it is the conditioning imposed on us that is defective.

**Utilizes professional help.** While the program relies on sponsorship, I recommend that only professional therapists or counselors facilitate my step method. This is discussed in detail in chapter 8 of my book.

## Client Screening

Allow two hours for an initial evaluation. Key considerations and points to cover:

- 1. Presenting symptoms** This transformational therapeutic process is effective for anyone with control issues. Control issues manifest in myriad ways: from everyday relationship difficulties to overtly life-threatening chemical addictions.
- 2. Eligibility** The client must be willing and able to suspend his or her control and manipulation mechanism long enough to finish the work—meaning that you should work only with those who are willing and able to do the steps precisely as described in *Addiction Is the Symptom*.  
This process is simple but intensive; it requires a strong desire and commitment to change. In my experience, the majority of people are either unwilling or unable to do the work, even when they express a sincere desire to do so before they begin. This is self-protective; one should not attach a negative judgment to it. So be selective. It is better to screen people out than to terminate the relationship after it has begun.
- 3. Requirement to follow the directions** Both parties should understand and agree that to get the desired result—healing—the steps, and in particular the Fourth Step Algorithm, must be worked precisely as set forth in *Addiction Is the Symptom*.
- 4. Requirement of abstinence** The client's willingness and ability to commit to this entire twelve-step process are prerequisite to its successful completion—and to healing. Part of this commitment is abstinence from chemicals for the duration of the therapy; participation in a twelve-step group can be critical to maintaining abstinence in the short term. The client should also be free of any mood-altering substances, including antidepressants. Clients who are not able to discontinue such drugs should hold off on doing the work until they are. *Obviously, no one should stop taking prescribed drugs without consulting with the prescribing physician or psychiatrist.*
- 5. Rapport** While it is the process, not the relationship between client and therapist, that is primary in this work, you must have a good rapport with the client. If, for any reason, you intuitively feel the least bit of reluctance to embark on the therapeutic relationship—

or to continue once you begin—it is best to go no further. It should go without saying, but you must not work with anyone to whom you are at all close; you will have too much shared history.

6. **Work therapy, not talk therapy** The client should understand that talking about problems is not the focus here; you will be maintaining a direct focus on the step process. This does not mean that life issues can never be discussed. It does mean that every time the client raises a problem, you will direct the conversation toward working the steps on it, or simply back to the work of Fourth Step Algorithm. The goal of this process is for clients to find their own answers, from within rather than from without—to shift from dependence to independence.
7. **Honesty** The client is responsible for being honest with you about how the work is going and about what he or she is thinking and feeling.
8. **Short-term commitment** This process should be approached as short-term therapy. One of the objectives is to eliminate the need for further therapy. The time frame is from three to eleven months and is dependent on whether the client has done any or all of the steps before, how much emotional trauma must be addressed, the age of the client (older clients, having accumulated more relationships and experiences, generally need more time than younger ones), and how diligently the client applies him- or herself to the Fourth Step Algorithm. It should be understood by both parties that the client will set the pace.
9. **Long-term commitment** The client must be prepared to make certain commitments after completion of the step process.
  - Working the steps as needed. In this way, the conditioned impulse to control is gradually eliminated.
  - Formulating and practicing a plan for independent living, which includes a self-determined, evolving spiritual life (see chapter 9 of *Addiction Is the Symptom*).
  - Doing Steps Four and Five, Eight, and Nine annually. The time

required is of course nominal in comparison to that required initially.

10. **Daily time commitment** The work of healing must come first in the client's life. The client is required to apply him- or herself to the Fourth Step Algorithm for twenty to thirty minutes every day. At the same time, it is unwise to do more than two work sessions in one day.
11. **Daily contact** The client must understand that daily contact (or as agreed) with you, the facilitator, is required. This brief check-in of five to fifteen minutes provides motivation, support, and the opportunity to ask questions. It's a daily reminder of the importance of the work, its purpose, and its simplicity. Clients frequently need to be reminded to not overthink the process and make it more complicated than it is. **If you are spending more than five to fifteen minutes on check-ins, you are probably slipping into talk therapy and/or inserting yourself into and complicating the process.** *More on check-ins below.*
12. **Progress** Progress is determined very easily. Is the client working twenty to thirty minutes daily on the Fourth Step Algorithm? Checking in as agreed? All that is expected is forward movement. Change may not be evident until Step Five is complete.
13. **Fees** Whatever fee and payment schedule you arrive at, it must be clear and agreed to before the work begins. *More on fees below.*
14. **Termination** The client must understand that, unless previously arranged with you, a lapse of three days in the work will result in termination of the relationship, and further, that you will not be available if he or she decides in the future to resume the work. This is for the client's own protection. Such a lapse strongly indicates an inability and/or unwillingness to complete the process (sometimes because deep exploration of the past is truly more than the client can bear), and to proceed would be a waste of time and money. Failure to pay should also result in termination of the relationship, for the same reasons. *More on termination below.*

**15. Spiritual connection** This step process should be understood as a spiritual answer to a fundamentally spiritual problem. As such, it requires a spirit-based relationship between therapist and client. Once the work contract has been agreed upon, a psychic/soul connection is in place, and from that moment until the relationship is discontinued by either person, the client is upheld and supported in your thoughts.

**16. Definition of success** Within the context of addictive behavior, healing is a process that produces a qualitative change in consciousness. This change restores choice: a decision-making ability to dismiss addictive behavior as it surfaces. This in no way implies that a person addicted to chemicals can return to using those or any other chemicals. Success also manifests as the ability to create a new life of self-reliance, creativity, and fulfillment.

**17. Initial steps** Some clients will require another session for this, but my experience is that after all of the above is understood and agreed to, there is usually time to run through the first three steps and the instructions for phase one of the Fourth Step Algorithm. Work on the algorithm should begin the next day. It should be understood that Steps One, Two, and Three—which begin the return to personal power—are to be reviewed every morning and practiced any time the client feels fear and attempts to control someone or something, or experiences someone trying to control him or her. The key for the client is to be receptive and ready: each step must be understood and accepted before going on to the next.

## The Algorithm: Notes and Advice

### One phase at a time

Before writing *Addiction Is the Symptom*, it was my practice to *not* describe all seven phases of the algorithm to clients before beginning the work. Rather, I provided a sheet with the instructions for the phase at hand only. My concern has always been to not overwhelm the client with what can appear to be a huge amount of work. Yet it was

of course impossible to write a book that did not explain the entire process. Suffice it to say, it is critical to keep the client focused on the phase at hand—on the daily but simple work it requires. Clients who feel overwhelmed may find it helpful to refer to appendix A in the book, which comprises a simple outline of my step process, including the algorithm, or to refer to a worksheet (which you can provide) that describes only the phase they are on.

### Dependency transferal

It may seem as if the client is just transferring his or her emotional dependency to you. However, it is the process that is the focus of the therapeutic relationship, so the client becomes dependent not on you but rather on the steps—the working of which promotes the desired outcome of self-reliance.

### Check-ins

**Frequency** Use your judgment. Literal daily contact—as in seven days a week—may be necessary for some clients, especially in the beginning. In a few cases, I have sat with clients as they wrote because they found it too difficult to do by themselves at first. At the other end of the spectrum, clients who are highly motivated and/or constitutionally self-disciplined may need to check in as little as once a week; you will know fairly soon whether your client is such a person. What's important is that *the client* do the work seven days a week and check in on the agreed days, at the agreed times. Naturally, you will advise the client to contact you at any time if he or she needs you. But I have found that clients rarely contact me outside of the agreed-upon days and times. As outlined in *Addiction Is the Symptom*, the Fourth Step Algorithm is clear and easy to follow, which largely precludes questions or upsets.

**Communication** Check-ins can happen via whatever medium or mix of mediums works best for you and the client. Even email or texting will do. I find the phone or Skype to be best because the sound of someone's voice, and certainly facial expression, can indicate to me what is needed.



**Length/content** These contacts are brief because they concern little more than the process itself. Is the work getting done? How much time is the client spending on it? What is being learned? Any questions? In phase one, you will most often merely offer encouragement (“Just keep moving forward”). In phase two, you may offer support if any surprises come up and remind the client to put the work aside for a bit if it incites too much anxiety. And so on. The client is doing the real work of the Fourth Step Algorithm. Your role is very easy when the client is willing to simply follow the directions—and if you have screened him or her well, that will be the case.

### Termination of therapy

When people are, for whatever reason, unwilling or unable to face their emotional history, self-protective resistance to the work—fear, control, and manipulation—kicks in. It can help to remind them that they are not doing what you tell them to do, but rather following a prescribed process that they chose to agree to. The process is the authority, not the facilitator. But if the resistance does not abate, you must end the relationship. Once a client chooses control over the healing process, whether by overt or covert resistance, it is both pointless and unethical to continue.

Two distinct signs of resistance suggest termination:

- **A lapse in the work.** If the client chooses not to do the work three days in a row or fails to check in as agreed, it is a strong indication that he or she is unwilling or unable to complete the process. Exceptions can of course be made for such things as illness. There is also a little room for ups and downs. If a client calls and says, “Hey, I just didn’t feel like working this morning,” the response should be, “That’s fine, just make sure it’s not the same tomorrow.” Whatever the reason for not doing the work or not calling, if it does not ring true, you must end the relationship.
- **Refusal or “forgetting” to pay as agreed.** Once the fee is discussed and agreed upon in the beginning, there should be no need to refer to it again. It is part of the contract.

Both of these indicate an unwillingness or inability to suspend control issues. And this therapeutic process is not about control and manipulation on either side of the desk.

*If you do terminate the therapeutic process, do not attempt to undertake it again with the same client.* Oftentimes, people play games (“she’ll take me back”), if unconsciously. You don’t want to set yourself up for that. The process mustn’t be co-opted into the complex of fear, control, and manipulation.

## Step Five

### Timing

This step typically requires 1½ to 3 consecutive days (six- to eight-hour days), depending on the length and breadth of Step Four. Many clients appreciate the all-at-once flow of full-day meetings. Also, the compressed time frame can be helpful if they are traveling from a distance. Others find shorter sessions spread over more days to be more practical, whether emotionally or logistically. And of course you may have your own personal and/or professional needs. Whatever the case, it is important that Step Five be done *as soon as possible* after the client completes Step Four. No one should have to hold on to the emotional debris stirred up by Step Four any longer than necessary.

### Preparation

My personal preparation includes praying for the guidance I may need, for the compassion to guide the client safely through, and for forgetfulness—so that I may not recall anything I heard once I have fulfilled my role as witness.

### Process

I make sure I have on hand the requisite tissues and water for the client, plus a notebook for myself. I take notes on anything that seems particularly relevant, but that is usually better discussed later in the session. If you monitor the affect of the client, you will intuitively know

when to probe and more fully bring the client's feelings to the surface. I find that when they look the calmest, it is often an indication that more focus is required. Usually the client and I break to have lunch together and then go right back to work for a few more hours.

## About You

### The work and you

**Ideally, you yourself will undertake this step process before guiding others through it: physician, heal thyself.** Given the nature of emotional dependency, nearly everyone is afflicted by it to one degree or another, and so most can benefit from the work. But I know that this is not necessarily realistic. Perhaps you have been introduced to this work by a client who wants your help and would rather not wait several months for you to do it first. At the very least, you should read and understand *Addiction Is the Symptom*. If you are not open to its psychological and spiritual premises, or not willing to precisely follow its directions, you should not undertake the work with a client.

### Fees

You will determine what works best for you. Third-party payment may of course necessitate a certain payment structure. I have always done a certain amount of this work at no charge. But when I do charge, I personally have found it best to charge weekly for the ongoing contact (I have occasionally charged a monthly fee), with separate, hourly fees for the initial interview and Step Five. A weekly fee reinforces the reality that the continuation of the process is always the choice of the client. If the client lives nearby, the ongoing fee might include one or two brief in-person sessions per week or month. Some have suggested charging a three-month fee, whether the client finishes or not.

There is also the option of not charging until the process is complete and has proved its worth, or of leaving it up to the client. After all, the value of the work cannot be understood until the results are realized.

## Healing Is a Process

As described in *Addiction Is the Symptom*, one formal construct through which to understand the Brown Method is catharsis: the elimination of a complex (here, the complex of fear, control, and manipulation) by bringing it to consciousness and giving it expression. I think of it as "psyche surgery."

The Fourth Step Algorithm roots out a lifetime of repressed feelings, memories, resentments, and unconscious beliefs. The fifth step, through sharing them with a witness, expresses and purges them. The eighth and ninth steps offer further cleansing. The leap in consciousness, the spiritual renewal, is quantum because the process is so thorough.

But after the leap comes the living of the new consciousness: the practice. I can't stress this enough, and nor can you with your clients.

The complex of fear, control, and manipulation is deeply conditioned. It is laid bare and greatly diminished by the Fourth Step Algorithm, and it is pushed further and further into the background through practice, over time. As modified in *Addiction Is the Symptom*, the Twelve Steps are the foundation of a spiritual life that will maintain and advance healing. Spiritual fitness is very much like physical fitness: you don't get fit and then stop, or you will find yourself out of shape once again.

So the Brown Method is not a magic bullet, but it is a powerful catalyst, precipitating an upward spiral of emotional *independence* that not only prevents relapse but also alters lives. I am certain that you will find, as I have, that bringing clients to the threshold of their healing journey brings you as much joy as it does them.



**Rosemary Ellsworth Brown, PhD**, attended her first AA meeting in 1968, stayed sober for a year, and then experienced a tragic two-year relapse. She returned to the program determined to understand and solve the problem of relapse and devoted the rest of her professional life, and much of her personal life, to doing so. She completed her doctorate in counseling psychology at the Union Institute in 1993. There, her academic research focused on relapse, in particular on why AA and its myriad Twelve Step offshoots too often proved ineffective for their members. Working with both sponsees and clients, Dr. Brown has been refining her cause-focused step method for upwards of 30 years.