Author’s response to reviews

Title: Analysis of the emotional experiences of Japanese Alcoholics Anonymous members striving for sobriety

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Author’s response to reviews:

Ms. Dafne Solera, Dr. Samuel Harris

BMC Psychiatry

Dear Ms. Solera and Dr. Harris:

Thank you for your reply regarding our manuscript, BPSY-D-18-00906; entitled “Analysis of the emotional experiences of Japanese Alcoholics Anonymous members striving for sobriety”.

We are grateful for the thoughtful and constructive comments we received.

We have revised and modified the text according to the referees’ critiques.

We look forward to hearing from you regarding our submission. We would be glad to respond to any further questions and comments that you may have.

Sincerely,
Miyuki Kihara
Assistant Professor
Department of Health Sciences
Dr. M Claire Greene (Reviewer 1)

Thank you for your valuable comments. We carefully examined the review you provided and have made corrections or provided explanations below.

We have addressed your editorial comments and responded to the review comments as follows.

General Comments:

* This study presents a qualitative analysis of the emotional experiences of AA members in Japan. The qualitative findings provide important insight regarding these emotional processes; however, the objectives presented in the abstract and introduction are a bit disconnected from the results. It is unclear whether this is a study of emotional processes among individuals who are seeking/in recovery from an alcohol use disorder who happen to be sampled from AA, or if the focus is on emotional processes specifically related to experiences in AA. I think the findings are valuable and advance our understanding of the emotional experiences of AA members, particularly in a novel sample of AA members in Japan, but reframing the introduction and discussion may make the article more cohesive.

Response: Thank you for your comment. Emotional processes that are specifically related to experiences in AA are also the purpose of this research and we corrected the sentence accordingly (Page 5, lines 108-109 highlighted in yellow).

Introduction:

* The majority of research on AA and mutual help organizations come from the United States. I think it would be helpful to include some background and a summary of any available literature on AA in Japan or other countries in east Asia.

Response: Thank you, we have added an explanation of the history of AA in Japan. we were only able to add a brief summary to the text because unfortunately there are only a few studies in the Japanese literature.
Some of the statements made in the background section are perhaps too strong and not consistent with prior literature. For example, the statement that alcohol is the most harmful drug is not consistent with prior studies that have found that alcohol may be most harmful to society, but not to the individual using the drug (see Nutt et al., Lancet, 2010).

Response: Thank you for pointing this out. As suggested, the relevant parts have been removed.

There have been studies on psychological mechanisms of AA and other emotional processes in the United States. It may be helpful to incorporate this literature into the introduction.

Response: As suggested, this was added to the paper.

Methods:
* Include the description of recruitment that is currently provided in the ethical considerations section in the beginning of the methods section (e.g., under the procedures and participants section)

Response: Thank you for pointing this out. We moved the sentence “Participants were recruited via written explanation of the study given to them by leaders of their AA chapters” from the “Ethical considerations” subsection into the “Study design” subsection. We then moved other items from the “Procedure and participants” subsection to the “Study design” and “Participants” subsections.

I am unsure what you mean by the interviews were "faithfully" transcribed. Please further elaborate on what you mean by "faithfully" or perhaps reconsider this word choice.

Response: Thank you, we realized it was unnecessary, so we deleted it.
Was AA and related experiences central to the interview guide? As written it seems that the themes included in the interview guide could be applied to any sample seeking recovery from an alcohol use disorder and is not specific to AA. This is confusing because the introduction focuses on AA, while the interview and results do not seem to align with this focus.

Response: We agree with the reviewer that we identified the self-help group in the interview topic as AA. Because we also asked participants how long they had been participating in AA, we made this explicit. (Page 6, lines 139 and page 7, lines 142, highlighted in yellow.)

The KJ Method seems similar to other more commonly cited qualitative analytic approaches. Please clarify how this is different from thematic analysis? Or do the differences emerge in the later parts of the analysis related to the affinity diagrams?

Response: As suggested, we have added an explanation to area ③ highlighted in yellow. (Page 8, lines 167 to 177.)

Results:

In general the quotations that are included in the results should be better integrated into the text. Instead of just presenting the themes, further analysis or description/discussion of the themes would make the results read more fluidly.

Response: As suggested, we cleaned up the Results section and rewrote parts of it. (Page 10, line 231 to page 16, line 362, highlighted in yellow.)

If the goal of this paper is to discuss AA-related experiences, I think it is important that the results are more closely tied to AA membership.

Response: As suggested, we have described the results as being more closely tied to AA membership in the Results section as a whole as well as in Fig. 1. (Page 10, line 231 to page 16, line 362 highlighted in yellow and Fig.1, Islands 6.3, 6.7, and 6.1 in red font.)

Discussion:

The discussion aims to connect the results to AA membership (see last comment above in results section); but I'm not sure whether this is an extrapolation of the data. I think it is necessary to reframe the results according to their connection to AA (informed by the data) or
instead lessen the connection to AA in the discussion. This decision should be informed by the structure of the interview guide and the data resulting from the interviews.

Response: As suggested, we have reframed the Results section and expanded and revised the Discussion. (Page 18, lines 408 to 419 and page 18, line 423, highlighted in yellow.)

* The second sentence under the "Self-help group programs that lead to long-term abstinence" attributing the abstinence of the sample to their adherence to AA is flawed. We cannot conclude that the reason the participants are reportedly abstinent is due to AA. There is a huge potential for selection bias here and I think this sentence needs to be removed as it is not supported by the data and cannot be determined based on this study design.

Response: Thank you for pointing this out. We have removed the sentence.

Reviewer 2 (Reviewer 2): To the PEER REVIEWER

We are grateful for your thoughtful and constructive comments. We have revised and modified the text according to the critiques. We have addressed editorial comments and responded to the review comments as follows.

Comment 1: The terms, "abuse" and "dependence" have generally fallen out of favor in the literature surrounding substance use and related disorders.

Response: Thank you for raising this. We have corrected the term to “alcohol use disorder.” (Page 2, line 42; page 3, lines 46, 62 to 63; page 4, lines 74 to 76 and 81 to 82 ; page 6, line 125 to 126 ; page 16, lines 371 and 374; and page 19, line 435, highlighted in yellow.)

Comment 2: The word, "media," is plural, and associated verbs should match.

Response: We have made the necessary corrections. (Page 4, lines 70 and 71, highlighted in yellow.)

Comment 3: Page 5, lines 107-110 is an incomplete sentence.

Response: Because the sentence was not necessary, we have removed it.
Comment 4: It is unclear why DSM-IV-TR would have been used, even in "a supplemental role," since DSM-5 was published in 2013.

Response: We apologize for the mistake; we have corrected this to DSM-5. (Page 6, lines 126 to 127; page 23, lines 548 to 550, highlighted in yellow.)

Comment 5: On an historical note, AA was founded in 1935, not 1934.

Response: Thank you, this has been corrected to 1935. (Page 18, line 422, highlighted in yellow.)

Comment 6: The statement, "those addicted to drugs and alcohol have low emotional intelligence and find it difficult to understand and regulate their emotions," could and should be stated more tentatively.

Response: Thank you for mentioning this. We made a error when translating the quote and it has been replaced with a more accurate translation. (Page 19, line 448 to line 451, highlighted in yellow.)

Comment 7: For some time now, AA and many other programs, particularly those centered on the 12 Steps, have been referred to as "mutual-help," rather than "self-help," groups.

Response: Thank you for your suggestion. We have substituted “mutual-help” for “self-help.” (Page 4, line 84; page 5, line 114; page 17, line 383, highlighted in yellow.)

Comment 8: The authors referred to "companions" having served important roles in support of participants. How did these individuals compare to more readily recognized, traditional roles in AA culture, such as other members of the fellowship, or "sponsors?"

Response: Thank you for this pointing out. Because “companions” was meant to refer to “sponsors” or “fellow members”, we have revised the text accordingly. (Please refer to page 17, lines 392 highlighted in yellow, and Fig. 1, Island 7.3 in red font.)
Comment 9: There were a number of elements, generally considered to be fundamental to the program of Alcoholics Anonymous, that appear to have been unknown, under-appreciated and/or unaddressed by the authors, resulting in missed opportunities at best, and misinterpretations and/or questionable conclusions at worst.

Comment A: The authors frequently made reference to issues related to "emotional regulation." Over a span of decades, many of the writings of Bill Wilson (Bill W.), one of the co-founders of AA, focused on "emotional sobriety," a concept that certainly warrants reference, inclusion, and discussion on the part of the authors.

Response: We carefully considered the concept of emotional sobriety. Emotional sobriety does seem to be an important concept and also seems to have been a focus for Bill Wilson (Bill W), as one of the co-founders of AA. Unfortunately, after contacting AA Japan’s General Service Office, it became apparent that although the meaning of the term was understood among Japan’s AA membership, the concept has not become widely adopted. To address this, we added a note to this effect in the text. (Page 18, lines 408 to 419, highlighted in yellow.)

Comment B: While the authors allude to "something beyond human wisdom," on more than one occasion, a role for "spiritual, disciplined efforts," discussion related to a "Higher Power" or "God," which are embedded in the 12 Steps, and fundamental to AA as a "spiritual program of action," designed to treat "a spiritual malady," was conspicuously absent.

Response: We hesitated to emphasize this aspect of AA because there is generally no talk of God or spiritual expression in everyday life in Japan. However, after looking at the data, we changed our minds without reservation. (Please refer to page 13, lines 287 to 299 highlighted in yellow, and Fig. 1, Island 7.2 in red font.)

Comment C: Similarly, in the context of AA, the notion that individuals in recovery reach "their goal by their own power," rather than through the support of the AA group, or reliance on a Higher Power or God, is antithetical.

Response: The participants were determined to put into practice their faith in a higher power. As such, the expression could be misleading so, to prevent any further misunderstanding, we have revised the Results section and Figure 1. (Page 13, line 305 to Page 14, line 325, highlighted in yellow, and Fig. 1, Island 7.5 in red font.)
Comment D: Based on certain of their own assertions (e.g., 9B, above), the statement by the author(s) that "the use of 'God' in the 12-step program seemed unnecessary," appears to be an unfounded conclusion.

Response: According to the data, our statement was incorrect, so we have removed those sentences.