

A. Thomas Horvath, PhD, President

Emmett Velten, PhD, Editor



President's Letter

New Organizational Developments for SMART Recovery®

SMART Recovery® is taking the simple but powerful step of establishing committees on which face-to-face (F2F) and online facilitators, volunteer advisors, and other interested individuals may serve. These committees, listed below, are an effort to retain more of the ideas generated by our volunteers, and to memorialize these ideas by generating documents that will reside on the website. As our society becomes more internet oriented, our website (www.smartrecovery.org) is the most suitable location for communicating with each other. Our website will archive the collective (and evolving) wisdom of our organization.

Each of these committees will discuss the issues it considers most important within its area of involvement, and from time to time draft one or more documents. These docu-

ments might be in the form of guidelines, reminders, action plans, wish lists, or any other form considered useful. Our Central Office and Board of Directors will review these drafts. After any needed discussion, these finalized documents will be placed on the website. In time, many of these documents will be revised by the same process, as our thinking evolves.

Our website will be divided into two main sections, one open to the public, and one open only to volunteers. The documents generated by committees might go into either section. For instance, a committee may describe a new tool for use by participants. This tool would be placed on the public section of the website. Or a committee might write a guideline about how to handle a participant who seems suicidal. This guideline would be placed on the volunteer-only section of the website.

One of the purposes of these committees is to encourage more interaction between different components of our organization. We do have the Message Board, of course, but the MB is primarily devoted to participant issues, not organizational issues. In particular, we need more connections between our F2F and online facilitators, which these committees will facilitate. These committees will also facilitate the involvement of volunteer advisors and others who wish to help grow our organization.

These committees emerged out of a day-long discussion between long-time facilitators and other volunteers, held on the Saturday of our annual Conference in Boston/Natick in early November. It was exciting to be part of the energy and creativity in the room that day, as about 20 of us attempted to address current concerns and plan for future growth.

The committees are as follows. If you wish to participate on one of the committees, contact Shari Allwood via e-mail, sallwood@smartrecovery.org.

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The SMART Recovery® 4-Point ProgramSM

The SMART Recovery® (Self-Management And Recovery Training) program helps individuals gain independence from addictive behavior.

Our efforts are based on scientific knowledge and evolve as scientific knowledge evolves.

The program offers specific tools and techniques for each of the program points:

- Point #1:** Enhancing and maintaining motivation to abstain
- Point #2:** Coping with urges
- Point #3:** Managing thoughts, feelings and behavior (problem-solving)
- Point #4:** Balancing momentary and enduring satisfactions (lifestyle balance)

Local and Regional Organization Development

Chair: Gary Bagley

Board of Directors Liaison: Tom Litwicki

Including the relationship between localities and/or regions, and other localities/regions and the Central Office, possible organizational structures for localities and regions, and growth strategies.

Facilitator Development

Chair: Ana Cooperwasser

Members: Brett Saarela, Kevin Lyons, Jason Grodsky, Jason Herman

Board of Directors Liaison: Elaine Appel
Subcommittee on inappropriate participant behavior: Carlton Bright

Including facilitator training, preventing burnout, and the development of guidelines for specific situations that occur in meetings (typically problematic participants).

Marketing

Chair: Dan Kalnes

Board of Directors Liaison: Henry Steinberger

Including how to market SMART Recovery® to the public and to professionals, and which partnerships might be beneficial for SMART Recovery®.

Long-range Planning

Chair: Carlton Bright

Board of Directors Liaison: Tom Horvath

The sky is the limit for this committee!

Program Development

Chair: Bernie Kubiak

Members: Lorie Hammerstrom;

Board of Directors Liaison: Michler Bishop

Including how to handle large meetings, branding, directions to newcomers, and self-recovery via the website.

Fundraising

Chair: Jocelyn Kimmel

Members: [membership is limited to individuals with professional fundraising experience]

Board of Directors Liaison: Tom Horvath

Including how to obtain individual private contributions, grants from private foundations, and government funding.

Correctional Issues

Chair: Tom Larkin

Board of Directors Liaisons: Joe Gerstein, Fraser Ross, Tom Litwicki, Barry Grant

Including promoting the dissemination of SMART Recovery® to correctional systems, support and training for existing programs, and research into the results of existing programs.

Potpouri

Chair: Lorie Hammerstrom

Board of Directors Liaison: To be announced

It may be that the first task of this committee is to pick another name, but that's up to them. They will address any issues that do not clearly fall under another committee.

I'm excited to see what will emerge from our collective work

Tom Howath



SMART Progress

SMART Recovery® Online (SOL) Update

Editor's note: Please read this article carefully. I found it a deeply touching reminder to us all about the importance of our perseverance in making SMART Recovery® available as a choice for people the world over.

As the director, I could try to express the value of the availability of SOL from my point of view. However, I thought it would be better to let the members speak for themselves. What follows are two posts from the Message Board that are being re-printed here with the authors' permission. These posts say far better than I can what SMART Recovery® Online means to people's recovery.

Jonathan von Breton, Director of SMART Recovery® Online

Posted on the Message Board on 11/27/06 by apmlo, a member of the online community.

Tonight I bathed my five dogs and groomed them, after a wonderful day of allowing them to run off leash at the lake. Incredible.

One year ago I would have been half crocked by now and they would have remained disgustingly muckified for the night. Or maybe they would not have had the opportunity to go for a run as I might have stayed home to nurse a hangover in the morning, and a drink by mid afternoon.

This morning I woke early and felt the muscles and bones move as they should in my body as I stretched and yawned, and I smiled at the simplicity of it all.

A year ago, I would have stumbled out of bed in a hasty rush to the bathroom, wishing I could just not wake up. I would have dreaded the next few hours of self loathing and self recriminations, and the futility of swearing that I would not drink again.

Tonight I read, for the billionth time, my journal of the last year, and I am impressed at how I have made it through this struggle, the hardest thing I have ever done. And I am astounded that I am where I am today. Fit, energetic, loving of myself, able to try new things despite my worries, knowing that I am OK. I am OK. I am OK.

Thanks to all those here at SMART Recovery® who have inspired and instructed me though posts addressed not necessarily to me but that have spoken to me because of their content and wisdom.

And I just have to post this awesome picture here - my holiday sweethearts, in their best duds.



This was posted on the Message Board in April 2006 by Elmer, Online facilitator and Message Board Liaison,

A year ago this week, a chain of events led up to my arriving at the homepage here at SMART Recovery. I was scared and shy and technically inept, lost, NEVER having been in a chat room or written on a Message Board, baffled by all the Alphabetti Spaghetti, scared some more, and most of all, terrified that by even looking at taking control of my thoughts, I was in denial, therefore as good as dead.

Underneath all of these feelings was one thing. It was one strong something that I didn't want to ignore, or brush aside, or not listen to. It was a Belief - a belief that actually - it WAS up to me. No one else was going to live my life for me. I began to actually acknowledge and explore my humanness, my choices, my feelings and thoughts, my beliefs. It really might be true that by changing my thoughts, I could change my world.

Just for me, today I wanted to make a note of those things that I remember most of all, things that I learned and ways that I was touched that have made this year the most amazing new beginning for me—even in times that have seemed so hard. These are a few of my favorite things....

☺parachat ☺my CBA. (at last)
☺Future Events Appear Real ☺feeling

USA ☺learning to understand my emotions ☺understanding what a boundary is ☺asking questions ☺and more questions ☺and more questions ☺seeing myself as responsible for both my emotions and behaviors ☺friendship and support ☺being able to explore my self harm behavior without hearing gasps of horror ☺moofing with numbers - elmer666 ☺feeling empowered to make change ☺writing and rambling ☺the toolbox ☺laughing so hard that I thought I would fall off my chair ☺feeling an urge pass - wow, it was true, they do! ☺being helped with what a ABC was for and what it was not for ☺standing at the fork in my path and choosing the road less traveled ☺being comfortable with negative emotions ☺exploring my personal values ☺thinking about my thinking ☺jumping from the music on the skysite the first time I visited ☺hugs ☺listening to my thoughts ☺my first meeting as a facilitator ☺choosing not to drink ☺the four common misconceptions ☺all the people who live in my monitor ☺meeting some of the people who live in my monitor (hello!) ☺not being scared anymore ☺choosing to be happy ☺ATW!! ATW!! ATW!! ☺seeing my thoughts as cold morning air breath ☺volunteering ☺having, recognizing and believing in my internal locus of control ☺celebrating better choices ☺feeling the difference between convincing and disputing ☺meetings ☺recognizing thoughts of using as thoughts and waving them on their way, not watering them with Elmer-miracle-grow ☺exploring on my own ☺listening to my children as they teach me about life ☺the meaning of my avatar ☺the Greeting Cafe ☺moving out from my comfy but darkest places ☺finding that I can fly ☺accepting me Is, you Is, world Is making elmerflower juice as a VACI I am not my behavior ☺homework ☺the blue

flashy New PM button ☺getting dusty in the archives ☺the courage to begin to stand up for what I believe in without insisting that others believe the same ☺reading posts ☺feeling the possibility of empowerment ☺quitting smoking with the belief that I could, just because I chose to ☺crying so hard I thought I would die but, deep down, knowing that I wouldn't and that it was ok ☺tooltalk ☺feeling free ☺jammed slop ☺Self Management ☺and about a zillion other things...

There are things that I still struggle with—because I am human and not written in stone, perfect or dead yet. I struggle with boundaries, guilt, and especially “recovery from recovery” (discovery is the goal now), and occasional urges. Yesterday I dissolved regarding some custody issues and the thoughts of drinking for some escape surfaced last night. Sometimes it's actually helpful to acknowledge these, it was something I did for a very long time for all sorts of reasons, and entirely normal that the thoughts pop up from time to time. They no longer scare me though, because it will always be my choice to follow the thought into action. Or not.

Sometimes the “not” part is the hardest thing I have ever “not” done, but I know that it's possible because I have the evidence of 17 months behind me—my personal evidence. The difference now is that I know that I can deal with things that happen in a better way than running away to get lost in a fantasy world of fear and dread and pain.

I have loved writing and exploring here—I have made so many friends, people who have touched me and reached out to me right from the start and people I have met here along the way.

Thank you all soooo soooo much for being here. This has been the most wonderful year—the year I started to learn that I was me. Just as I am.

SMART Recovery® Annual Training Program

The CRAFT Program

by Elaine Appel, Member, SMART Recovery® Board of Directors

I am very happy that I attended the SMART Recovery® Workshop on CRAFT (Community



Reinforcement and Family Training) at this year's Annual Training. Both the program methodology and success rates are amazing! Robert J. Meyers, Ph.D. Research Associate Professor in Psychology, Clinical Research Branch, Center on Alcoholism, Substance Abuse & Addictions (CASAA), University of New Mexico, made a very impressive and thorough presentation.

The statistics for getting a CSO (Concerned Significant Other – inclusion criteria of the study was first degree relative) to enter treatment from problem drinking, which were obtained from a study funded in part by a grant from the NIAAA, showed CRAFT at 64.4%, the Johnson Institute at 22.5%, and Al-Anon at 13.6%. Statistics from a NIDA study, getting problem drug users into treatment showed success rates of 59% for CRAFT alone, 77% Craft with aftercare, and 29% for 12-Step Facilitation Therapy.

The three major goals of CRAFT are to reduce the loved one's harmful drinking, to engage the loved one into treatment, and to improve the function of the CSO (emotional, physical, and relationships). Depression, Anger, and Anxiety rates of CSO's were shown to go down and continue down utilizing CRAFT.

Communication skills with the use of positive reinforcement, was discussed in depth as well as domestic violence issues. The workshop ended with how to get the substance user into treatment. The importance of having treat-

ment set up for when the substance user is ready was emphasized; as, the more waiting time the more likely the substance user is to back down.

I would encourage you to visit the Concerned Significant Others Forum on the SMART Recovery® Message Boards. A CSO ParaChat Meeting takes place on Sundays at 1:30PM Eastern Time.

I recommend two books on the subject:

- For the CSO, *Get Your Loved One Sober: Alternatives to Nagging, Pleading, and Threatening* by Robert J. Meyers, Ph.D. and Brenda L. Wolfe, Ph.D. (\$12.95 soft cover from Hazelden Press; 2004; ISBN: 1-59285-081-2. Note: this book is available via the SMART Recovery® bookstore.)
- For Mental Health Professionals, *Motivating Substance Abusers to Enter Treatment: Working with Family Members* by Robert J. Meyers, Ph.D. and Jane Ellen Smith, Ph.D. (\$35.00 hard cover from Guilford Publications, Inc.; 2004 ISBN: 1593850522)

Managing Addictions Workshop

by Jocelyn Kimmel, SMART Recovery® Online Volunteer

On November 3rd, Dr. F. Michler Bishop presented a one-day workshop on Individualized, Evidence-Based Strategies for Managing Addictions. The presentation occurred as an optional day prior to the general SMART Recovery® training held on November 4th and 5th, and was geared towards therapists, counselors, social workers, psychologists, psychiatrists, and pastoral counselors.

Approximately thirty people attended this session, and all agreed upon the quality of information presented, Dr. Bishop's engaging explanations, and the usefulness of the workshop's practical hands-on nature.



The day began with an introduction to treating clients who experience addictive behavior. Prochaska and DiClemente's Stages of Change model was presented. Potential clients were broken down into three stages or readiness for change, and potential counseling techniques were matching to each stage. Strategies for developing a relationship with a client and maintaining contact were discussed.

Additional portions of the day focused on helping clients manage their addictions, and looked at evidence-based treatment options to empower both the therapist (within the therapist-client relationship) and the client himself. A number of concepts were presented to combat the traditional problem of addictions psychotherapy, in which the client wishes to have a better, less miserable life but also to continue on with their current behavior. In particular, the techniques of Motivational Interviewing, utilization of the FRAMES acronym, and reflective listening were discussed. Helping clients to focus on planning and developing urge-coping strategies were highlighted. ACT, acceptance and commitment therapy, and shame-attacking exercises were explained. Addictions psychotherapy was linked to many other "non-addictive" behaviors, such as weight loss and procrastination, to de-stigmatize maladaptive behavior.

Finally, the session provided an introduction to REBT/SMART Recovery® tools, including the Cost-Benefit Analysis disputing irrational beliefs via the ABC and goals/values clarifications. Workshop attendees participated in demonstrations of these topics, as well as in the explanation of a "linked" ABC concept.

One very useful, simple example was demonstrated by the following. A woman in an asylum has been put into confined isolation because she has been cutting herself. Her therapist asks her what she wants, and she informs him that she wants to be out of isolation. He then asks her what has done to get into isolation. She replies that she has been cutting herself. He asks her how she likes it, and she responds that she does not like it there. The

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implicit question is the fourth one: what are you going to do about it? This series of questions: what do you want?, what are you doing?, how do you like it?, and what are you going to do about it?, have proved a very effective and simple motivational springboard. Examples such as this energized the session, motivating the participants, and leaving them feeling well-equipped to handle new challenges using newly acquired data and techniques.

General SMART Recovery® Training

On Saturday and a half day Sunday, the general training program provided an overview of the SMART Recovery® program, and provides information



regarding how to start and facilitate an effective meeting. A variety of board members presented on subjects including the SMART Recovery® 4-Point ProgramSM, the basics of Rational Emotive Behavior Therapy, how to facilitate an effective meeting, and a variety of role play that allows participants to practice leading meetings. Always a highlight of the training is the Sunday morning program, led by Jonathan von Breton, Director of SMART Recovery® Online, where the group gathers to practice and rehearse various tools, including: Stages of Change, DISARM, REBT (for urge coping), Change Plan Worksheet, REBT (for emotional upsets) Cost/Benefit Analysis, Rehearsals/Role Play, and Brainstorming. Attendee comments included: "The experience and knowledge of all the speakers both form and content were terrific." "This was my very first introduction — very informative and enlightening to SMART Recovery®. I have spent 5 years in AA and find this process a great alternative!!! Thanks!" "Role playing surprised me. I originally expected it to be a chore, but it ended up being one the most informative aspects of the presentation. And the in depth look at the tool kit was excellent."

SMART Recovery® Therapy (SRT) Program

On Saturday, Michler Bishop, Henry Steinberger and Andy Orr provided SRT training. SRT is a professional service for which a fee may be charged. SRT may employ any tool that might be used in a SMART Recovery® meeting, but may also employ other professional techniques. For instance, the psychotherapist may engage the client/patient in a cost-benefit analysis, an ABC analysis of irrational thoughts, or a review of irrational thoughts about cravings, but might also include, for instance, couples sessions or other empirically supported protocols that are consistent with SMART Recovery®. SRT is a treatment approach that, as appropriate, 1. introduces individuals in treatment to participation in SMART Recovery®, 2. supports their participation in SMART Recovery® meetings, 3. encourages their participation in meetings as a form of aftercare (which might continue even after professional aftercare has ended), 4. provides an entirely individual treatment option for those who prefer not to attend meetings or groups of any kind but want a SMART Recovery® approach, and 5. provides a more intensive and professionally guided version of the SMART Recovery® approach.

The presenters focused on the 4-Point ProgramSM, how to set up and run an SRT meeting, live demonstrations, role-plays, and taking care of yourself...ways to prevent professional burnout. Attendees were also invited to enjoy the Sunday morning program which featured practicing the various SMART Recovery® tools.

Annual Face-to-Face Board of Director's Meeting

The SMART Recovery® Board met on Saturday evening and Sunday morning.



Members featured left to right include: Fraser Ross, Michler Bishop, John Boren, Tom Horvath, Henry Steinberger, Joe Gerstein, Elaine Appel, and Andy Orr.

Thank you to our Training Sponsors!

Cephalon, Inc. and Alkermes, Inc. — Cephalon, Inc. an international biopharmaceutical company, and Alkermes, Inc., a biotechnology company, are working together to make a difference in the lives of those affected by alcohol dependence. Through various educational initiatives the companies are helping to raise awareness in the community about alcohol dependence as a serious, chronic disease, and its treatment with both medication and counseling. Together, Cephalon and Alkermes have made available VIVITROL® (naltrexone for extended-release injectable suspension), a once-monthly, injectable medication. VIVITROL is approved by the FDA for the treatment of alcohol dependence in conjunction with psychosocial support for patients who are able to abstain from drinking in an outpatient setting and are not actively drinking when initiating treatment. For full prescribing information, including boxed warning, please visit www.vivitrol.com or call 1-800-VIVITROL.

The McLean Center at Fernside — The McLean Center at Fernside is a world-class residential treatment program for adults with substance use disorders. As a satellite of McLean Hospital, this 10-bed, private-pay program, offers evaluation and individualized services for residents whose substance use disorders may be complicated by co-occurring psychiatric conditions. The program combines the use of medications, if required, and psychosocial treatment modalities with a seven-day-a-week psychoeducational

curriculum for proven positive outcomes. The Center is beautifully furnished throughout. All rooms are private and have full baths. The length of stay is 30 days. Contact: Thomas Irwin, PhD, Program Director, at 978-464-2141 or email Irwint@mcleanpo.mclean.org. To learn more visit www.mcleanfernside.org.

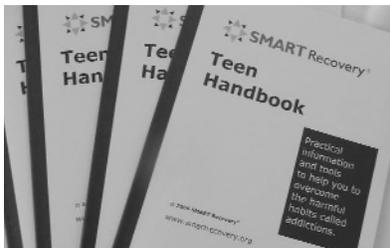
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www.practicalrecovery.com

Reckitt Benckiser – Reckitt Benckiser Pharmaceuticals, Inc. provides educational resources and treatment options to physicians/patients dealing with the chronic relapsing disease of opioid dependence. Visit their exhibit to discuss indications for Suboxone® (buprenorphine HCl naloxone HCl dihydrate).



Announcing the new SMART Recovery® Teen Handbook

The Community Coalition for Teens in Greenfield, Massachusetts, contacted SMART Recovery® seeking permission to submit a grant to produce a

new **SMART Recovery® Teen Handbook**. We were delighted when we learned the news that funding would be provided! With an immense amount of assistance from John Gramuglia, former member of the SMART Recovery® Board of Directors, the *SMART Recovery® Handbook* was adapted to be applicable for teens. SMART Recovery® also wishes to also gratefully acknowledge the Bureau of Substance Abuse Services, a department of the Department of Public Health, Massachusetts, for funding the creation of the Teen Handbook. Copies may be ordered via the SMART Recovery® website or Central Office. 43 pages, \$6.95 + shipping/handling.

Update on SMART Recovery® in Vietnam

by Bahr Weiss, Vanderbilt University, Friend of SMART Recovery®

It has been a real honor and pleasure to work with Joe Gerstein, Tom Horvath and Henry Steinberger over the past year and a half on implementing SMART Recovery® in Vietnam. The idea for modifying and implementing a variant of SMART Recovery® began for us in the early summer of 2005. Our group had been working in Vietnam on a variety of mental health-related clinical and research projects for about four years when our Vietnamese colleague, Dr. Trung, was approached by the local Danang authorities with a request to develop a treatment program for people addicted to opiates. As Tom mentioned in his last column, the current approach has been to place people in a rehabilitation camp for two years, with the expectation that a highly structured environment with manual labor in the fields will resocialize individuals into a more healthy lifestyle (i.e., one without drugs).

There have been a number of changes in how the program has developed and is implemented in Vietnam. There is no concept and no precedence for “self-help” or for “self-help groups,” and thus the program has been implemented more as a group therapy program led by professionals. In the rehabilitation center, the basic skills are taught in a structured format, with the expectation that participants will attend most or all sessions (in contrast to self-help groups). The program, for instance, starts with a focus on cost-benefit analysis for the participants, and then

SMART Recovery® Program Tools & Techniques

The SMART Recovery® 4-Point ProgramSM employs a variety of tools and techniques to help individuals gain independence from addictive behavior.

These tools include:

- Change Plan Worksheet
- Cost/Benefit Analysis
- ABCs of REBT (Rational Emotive Behavior Therapy) for Urge Coping
- ABCs of REBT for Emotional Upsets
- DISARM (Destructive Images Self-talk Awareness and Refusal Method)
- Brainstorming
- Role-playing and Rehearsing

Participants are encouraged to learn how to use each tool and to practice the tools and techniques as they progress toward Point 4 of the program—achieving lifestyle balance and leading a fulfilling and healthy life.

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moves into the other skills. As Tom mentioned in his column, the concept of “life style balance” did not translate well, and this component has developed into more of a focus on helping people develop a full life, with an emphasis on finding replacements for the satisfactions and activities associated with drug use.

Although we have not researched the effectiveness of the program yet (this is my line of work, program evaluation), there have been a number of encouraging stories. For instance, there was a young man who was being treated at Dr. Trung’s hospital (the one formal alternative to the rehabilitation camps) for opiate addiction. He was a likable young man who had been the manager of an internet café where he had unfortunately gotten involved in drugs. He was an active participant in the first set of SMART Recovery® meetings we conducted in the hospital. Because he was preparing to leave the hospital after being there for several months, Dr. Trung invited him to come back to the meetings after he returned home. He thanked Dr.

Trung politely and told him that he thought that SMART Recovery® was useful, but for other people and not for him, and that he didn’t really need the groups.

About a month after he returned home, he telephoned Dr. Trung, asking permission to attend meetings. After that, he came regularly to the meetings. I met him a year after his stay in the hospital when Henry came to consult and provide training for the program. By then, the young man had married, his wife was pregnant, and he was very happy with his life. He

still was concerned that he might use drugs again, however, so from time to time he continues to come to meetings. Testimonials are not research, but it was very touching to see someone who had turned his life around, at least in part, by using SMART Recovery.

Another encouraging story I’ll mention is this. During the major typhoon that hit Danang a couple of months ago, part of the rehabilitation camp was damaged and one of the outside walls was knocked down. About two dozen of the residents took this opportunity to go AWOL, and two drowned trying to

people in the neighborhoods are opposed to any kind of group meeting involving “a bunch of addicts” in their neighborhood. We had wanted to have the meetings in the community to help people with their sense of reintegration, but because of this have decided to hold the meetings at the hospital. We also continue to have challenges with the families, in helping them develop the most helpful relationships they can with their family member with the drug problem. Parents, even of “children” in their 30’s, want to berate and overly control the children, which ultimately ends up humiliating

them, which is counter-productive, since for a number of our participants, coping with difficult negative emotions is one of the reasons they have used drugs.

Overall, though, we are encouraged by how the program has been developing. Our next step is to submit a grant proposal to the U.S. NIDA to evaluate the program, as a model more generally for drug intervention in developing, low resource countries. Although one can never tell what the odds are of getting funded, particularly these days, we are hopeful that in a year or



Henry Steinberger (far right) enjoyed training these inspired future SMART Recovery® facilitators.

swim across the river next to the camp. But none of the SMART Recovery® participants were involved in this, which I would like to attribute to their use of a quick cost-benefit analysis on the value of eloping.

We have now been running three groups of participants for about nine months at the rehabilitation camp, and some of the participants are ready to move home and back to the community. This has presented its set of challenges. For instance, drug use is even more stigmatized in Vietnam than in the U.S., and

two we will be able to begin an evaluation at three or four sites in Vietnam. We also have been discussions with the National Office for Drug Policy about national level programs, although that is a very long and uncertain step. As someone once said, however, the journey of a thousand miles begins with the first step (as does the journey of a thousand kilometers; it is about 1,000 kilometers from Danang to the capital Hanoi). But we’re hoping that we can fly rather than walk, or at least take the train.

SMART Ideas



Being Where You Are and Doing What's Important

by Hank Robb, PhD, ABPP

I purposely did not title this column "meditation," because it seems to me the word meditation now has quite a number of different and contradictory meanings. One meaning is a practice that produces the relaxation response, the opposite of the stress response. I think relaxation is a great thing but that is not what I mean to talk about here. There are lots of good instructions to achieve a relaxation response. Simply focusing on your breathing and noticing that, while you can control your breathing, if you do nothing at all, breathing goes on all by itself. Focusing on this continual process of inhaling and exhaling, inhaling and exhaling and bringing yourself back to the process whenever your mind wanders, is one good way to achieve relaxation. I've known a number of people who use it as an aid to falling asleep. If you are tired and you relax, sleep will often follow.

The problem of the wandering mind is that you may find you simply are no longer psychologically where you are physically. That's not so bad unless your aim is to do something you consider important. Because there is no time or place when one can do anything, including important things, except right here and right now, then psychologically being some place other than the present moment is a problem.

Thus, the aim of this article is to assist in bringing ourselves into the present moment, being right here right now, or said another way, being psychologically where we are physically.

Why? So we can better do what we choose to make important with our lives. I'm going to call this, becoming mindful.

The problem isn't so much that one's mind wonders. The problem is more that we go wondering along with it. There is a certain sense in which each of us is our body. However, in another, more psychological sense, we have bodies.

From this more psychological point of view, your body is something you possess, rather than something you are. The same thing can be said of your thoughts, by which I mean those sort of radio programs inside your head; or your images, by which I mean any experience with a picture; or your bodily sensations. By sensations I mean things like your heart is beating faster or slower, your hands feeling cooler or warmer, or your stomach feeling more tense or more relaxed.

Sometimes we can control our thoughts, images and sensations. Many times we cannot. Thoughts like, "What a good time for a drink," or craving sensations for a hit of meth, or images of video poker machines that occur. We don't ask them to be there. They just arrive, whether we want them or not. If I ask you not to think of a white bear, my guess that you have already thought of one. You didn't ask it to come. It just did.

While we may not be able to stop our thoughts, images and sensations from arriving, we don't have to believe them when they do. There is a big difference between having the thought, I MUST shoot up and BELIEVING the thought, I MUST shoot up. As I wrote in the last *News & Views*, there is a big difference between surfing an urge and tumbling around in it. You don't have to avoid urges, or thoughts, or images, in order to avoid being controlled by them.

One thing that can really help in choosing weather to buy a thought or image or sensation is to first notice, Hey, that's a thought. Hey, that's an image. Hey, that's a sensation.. That psychological you that does the choosing can then better choose whether to take a thought or an image or a sensation seriously and you will make that choice much more mindfully if

you first recognize them for what they are: namely nothing more than a bunch of your thoughts, your images and your sensations. They aren't you. You are the person having them.

There are some characteristics of this psychological you that are worth noting. First, the psychological you has been around for about as long as you can remember. When you were five or eight or ten and had a completely different body, pretty much the same you that is here now was there then. Second, this psychological you is a little like the eye of a hurricane. While thoughts, images and sensations swirl around and come and go, this psychological you remains pretty much as it always has been. The experience is a little like the way a playing field remains pretty much the same even though the many games played on it may be different. Or like the way a kitchen remains pretty much the same even though the many meals prepared in it may be very different. Sometimes it is nice to experience a sense of stability in life especially if many other places are changing. This you provides that sense of stability.

A third, and perhaps most important, characteristic is that when in contact with this psychological you, it is quite clear that no matter how out of control your thoughts, images or sensations seem to be, you are very much in control of your hands, arms, feet and mouth. No matter how much you have the thought, I MUST drink, you can choose to do things with your hands, arms, feet, and mouth other than drink. No matter how strongly you have an urge to snort up, you can choose to do things with your hands, arms, feet and mouth other than snort up. No matter how vividly you have an image of video poker machines in the building you are driving by, you can keep on driving.

So, the kind of awareness I am talking about includes being present with your thoughts, images and sensations while recognizing they are a bunch of thoughts, images and sensations, and also recognizing you can exert control over your hands, arms, feet, and mouth. The mindfulness I am talking about also includes being

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mindful of what direction you are taking with your hands, arms, feet and mouth. It asks the question, Am I, right here, right now, in this present moment, moving my hands, arms, feet and mouth in a direction that is actually important to me?

“If I choose to be this best parent I can be, are these movements that I am making, right here, right now, in that direction?”

“If I choose to be the best mate I can be, are these movements that I am making, right here, right now, in that direction?”

“Whatever direction I choose, are these movements that I am making, in this present moment, taking me in that direction? If not, then with my very next movement, I will put my actions in line with the direction in my life that I choose to make important.”

How do people be where they are and do what's important to them? Like anything else, by practicing! Our thoughts and images and sensations invite us to take a ride out of the present moment and off to—well who knows where?! However, when we notice they are only thoughts, only images, and only sensations, we can let them leave the station without us. We focus on doing, in this very moment, whatever the moment requires for us to move in directions we choose to make important. Practice, practice, practice and, likely, we'll get better at: (1) being aware that our thoughts, images and sensations are only that, (2) being aware of our control over our hands, arms, feet and mouth, and (3) being mindful of choosing the direction in which we exert that control.

The Trap of Sensationalism

By Mark Genest, SMART Recovery® Facilitator, Concord, Massachusetts

Part of the process of addiction recovery is telling stories of events that occurred while a person was using drugs or alcohol. These stories are important because they are a method of investigating what addiction is and how it

works. Although this may be a valuable part of recovery, storytellers often focus on the tawdry and sensational aspects of the events they are recounting.

Publicly admitting intoxicated misbehaviors can be cathartic, as a way of being able to let go of the negative emotions associated with memories of our less than gracious pasts. If nothing else, having someone who is empathic acknowledge these can help reduce the stigma of addiction. In this way, the group becomes a crucial support system on the road to recovery.

In many recovery group situations, the telling of personal stories can become a ritualistic action that is used to identify the storyteller as a member of the group. This may affirm the kinship and identity of the recovery group by allowing the members to identify with one another. Since isolation is a common aspect of addiction, the sense of camaraderie developed can be important to recovery. For the group to function on an ongoing basis, however, the group culture may narrowly define what is expected and acceptable in storytelling. If these rituals do not encourage or support the introspection necessary to investigate the thoughts behind the behaviors, then the recovering addict may not progress, and thus be ill-served by the group.

Telling stories can become a contest, where group members compete for status in the recovery group based, ironically, upon how “bad” their addiction was, and how sensational their story is. This is a type of competition that can be counter-productive, since it glorifies self-destructive behavior, and makes it fodder for bragging rights. This seems to grow out of the conventional wisdom that the more dramatic the story, the more it deter future use. It may do this for some, but the sensationalism can also be a distraction from addressing the thoughts and beliefs that drive addiction.

Motivation means to provide with an incentive for action. Telling stories of the horrors of addiction may serve to reinforce the motivation by keeping memories fresh. We

wouldn't want to forget that there are painful and embarrassing results to substance abuse, as future decisions regarding using will be affected by this lack of information. Unfortunately for the person struggling with addiction, forgetting painful memories is something that humans do very well.

If we are prone to downplay our bad memories and romanticize the good memories, then how can we make good decisions about using or not using? Simply telling our stories without addressing the thought processes that drive these behaviors will not lead to a tacit understanding of our addiction, which may be crucial to overcoming it. It is said that “insanity is doing one thing over and over, and expecting a different result.” This is a clichéd and oversimplified way of describing addiction, and a more appropriate metaphor would consider the role ignorance has in our choices. Even in addiction, we have not lost our ability to make decisions, even with regard to drinking, drugging, gambling, and so on. However, we may have become blind to the thoughts that justify these behaviors. If a person learns how his or her beliefs affect subsequent choices, then the circumstances that surround those choices become less important.

It is important not only to *admit* that we are causing ourselves problems, but also to *learn* from these self-defeating actions. When telling a story, pause frequently and say “why?” and “what was I thinking at that time?” This should help reveal the *reason* that was used to justify, rationalize, or excuse the drinking or drugging, and those ideas are much more to recovery than how sensational the story is.

Editor's note: I read somewhere of a study in which a student attending AA meetings actually tracked the shaping over time of the stories of newcomers. The stories became more and more theoretically consistent with the AA disease theory of addiction, and the big breakthrough was the eventual report of blackouts. I don't recall the reference—maybe one of Peele's books—so can anyone help me here?

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People Power



A Warm Welcome!

SMART Recovery® is pleased to welcome two outstanding additions to the Board of Directors—Barry Grant and Tom Litwicki.

News & Views readers will be familiar with Barry's name, as Barry has, for years, provided the "Beyond the Walls" prison outreach series of articles. Long-time readers will remember when Barry wrote the "From Inside the Walls" series. His life's journey has afforded him the rare ability to draw upon, convey and apply a wide range of philosophical and practical methodologies for recovery through self-awareness and self-sufficiency. What a wonderful life transition he's experienced, and readers have and continue to enjoy his inspirational articles. Barry is currently Director of Work Release and Educational Development at the Community Education Centers in Newark, NJ. Past positions have included Senior Case Manager/Outreach Worker and Occupational Therapist. Barry's skills in grant-writing and success with foundation proposals, in combination with his personal experience and desire to help others in need, will well serve our organization.



Tom Litwicki has been involved with SMART Recovery® for many years, and Tom has twenty years of correctional experience ranging from Correctional Officer to Regional Administrator. His experience includes eight years of progressive management responsibility focused on the development and implementation of evidence based addiction treatment programs within a

correctional setting. Tom was the driving force behind the SMART Recovery® meetings presently in place throughout the Arizona Department of Corrections. Tom has extensive background as a trainer and national presenter, and like Barry, has been successful with fundraising via grants and proposals.

Please join us in welcoming Barry and Tom!

Tribute to Jean Michaud

Jean Michaud, admired Burlington, Massachusetts, SMART Recovery® Facilitator, for almost six years, passed away last Thursday. She was dedicated, caring, and a great teacher. Her wittiness and great sense of humor could liven up just about any meeting. Jean often talked about her class with Albert Ellis, PhD, as professor.

Jean's VACI (Vital Absorbing Creative Interest) was training for and participating in walkathons, especially for the breast cancer cause.

Jean will be greatly missed!!!



Congratulations to John Gallagher!

This is a photo of John Gallagher receiving his certificates at the end of successfully completing the InsideOut™ Program at Inverness Prison. John has written a book about his life and how SMART Recovery® has



been a life changing experience for him. Also featured in the photo, left to right are Adrian Clark Inclusion Coordinator, Fraser Ross, Member, SMART Recovery® Board of Directors, and Agnes Sangster, Criminal Justice Social Worker and SMART Recovery® Facilitator. Congratulations, John!

Nine Discover Freedom Within

by Joseph J. Snyder, Prestonsburg, Kentucky

Ten months ago, 15 men began a journey of discovery. They spent Friday mornings actively addressing their life histories and asking each other hard questions. They answered aloud in a group about how things got to be the way they are: "How did I get to be here, in prison? How am I helping myself to be in better control of my life?" Gradually they stripped away excuses and blame behaviors. A few were transferred, before they could get very far. Some others were not yet ready to let go of old beliefs and behaviors. Those who left the group had done so by week ten.

The nine men who remained participated in a program called, "InsideOut™." This program seeks to support individuals who have chosen to abstain, or are considering abstinence from any type of addictive behavior. They learned how to change self-defeating thinking, emotions, and actions. By doing that, they worked towards long-term satisfaction and quality of life. The program required participants to complete lengthy home-work assignments. Their struggles have led them to understand and practice a way of living that blends self-awareness with a realization that life possesses a good orderly direction of its own.

As these men complete the combination didactic and self-help program, they face the final test. They can encourage others to learn their own life-lessons. In so doing, the nine find that they are as free to live as they want to be, regardless of their circumstances. One way to continue to actualize this way of being is to pass it on.

These men will now meet weekly with the "outside sponsors" who assisted in this process, to discuss among themselves the problems they encounter in maintaining their freedom from addiction. At the same time, a new group will

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begin this arduous journey that begins “inside” but frees one to be “out”—out of self, out of violence, out of addiction.

Living beyond “Beyond The Walls”

by Barry A. Grant

Understanding that we may not be able to accomplish all we have set out to do in a given time span does not mean that we have failed at anything. I believe that it simply means that perhaps redefining what time management, prioritizing and task analysis is, in addition to what our overall goals and objectives are within that framework may be required.

Having had the experience of being and penned “Inside the Walls”, I know that time is managed by the facility. Bearing that in mind there is also ample time to develop whatever personal projects one chooses to work on in order to sustain and/or strengthen good mental health as well as cultivate plans for the future. Some of our goals will be easily attained. Others may demand stamina and resourcefulness. And still others are likely to require a commitment of which may be long standing; a willingness to postpone gratification, but most of all, an acceptance of the results that we may not necessarily prefer.

It is a good idea to prioritize our objectives wherever we are in our evolution. Having the belief that someone or something else need take precedence over what we already know has been referenced by previous occurrences is an illusion that is likely to take on the semblance of a nightmare. I would suggest that if at anytime doubt arises, perhaps the process of review, re-verse and respond should be implemented. It's not that we don't know what's best it's remembering that we do know.

It is essential that we carefully analyze the tasks that lie ahead of us. This does not mean to view them as hindrances but rather as portals to a remembrance of all that we are as stable, rational and empowered individuals. It is

not the smooth passages that reveal new understandings, but the strenuous, uphill battle that benefit us with the knowledge to grow. Moreover, looking upon our challenges as gifts whose resolution promises greater comfort makes them agreeable, perhaps even prized.

Having penned “Beyond the Walls” for a considerable time I find it appropriate to offer the perspective of how life in general tends to become extremely congested in free society. Actually, this was written minus a transitional segue on purpose.

I am now on the cusp of receiving my Masters of Human Services degree and this has occurred as a result of hard work perseverance and a dedication to what I believe about myself: through creatively implementing the concepts recommended through Self Management And Recovery Training. I am operating out of my inner essence as opposed to an outer substance or what someone says I ought to be. I am in the finals of the semester and it would not have been fair as a facilitator, a proponent of SMART Recovery®, a role model or who I am as a change agent not to render this contribution to *News & Views*.

Positively Speaking: The number one reason why people don't already have what they want is that they have learned not to let themselves want what they don't think they can have.

They're Thankful! (and SMART Recovery® is grateful to them!)

In November, SMART Recovery® sent face-to-face facilitators a letter to share with meeting participants to solicit donations and notes of “thanksgiving”. A number of inmates within the Arizona Department of Corrections not only sent lovely notes of thanks...they each sent funds! While space prohibits publishing all of their heartfelt and beautiful words, here are some excerpts:

“Your program has truly helped me with perspective I lacked for a large portion of my life. Not only has it helped me with my

thinking in the present...but it also exposed a past littered with sorrow and regret – the behavior that prompted it all. I see now I had no values beyond myself. I had no belief system, no concept of self evaluation, let alone understanding the negative impact my thinking had on my life, and those I claimed to care for. Many doors have been opened for others and myself thanks to the foundation (message) of your program. But something must also be said about the devotion here at my institution. The dedication of one individual to sharing these tools in hopes that we'll use them to succeed in life. This donation does little justice to the great inspiration exposed by your program. And those individuals with the patience and dedication to share it with others.”

“I've seen many programs in my prison stay. This is one of the few I actually feel does some good.”

“I have learned a lot in class regarding how we think and act. It has made me a better person. Thanks for giving me this chance.”

“I've gotten more useful information from my SMART Recovery® group than the other programs I've taken. Information that I believe will help me while doing my time. But more importantly when I am faced with the temptations of the street. I thank you for this program and hope it will continue to help people for many years to come.”

“Previous to SMART Recovery®, begun by me in September 2003, I had no systematic effective way of addressing the issues that led to my offense. Therefore, I am **very** thankful. Bit by bit, I see progress in my attitudes, in recognizing flawed thinking habits, and in replacing them with wholesome habits. My friends and family are as yet unaware of SMART Recovery®. They will see the difference in 15 months when I'm released. They'll believe it when they see it, which is also the way I feel. I'm cautiously optimistic. Others will be thankful to find SMART Recovery® in as much as they are willing and motivated to make changes.”

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News From the Courts

Twelve Steps Treating Sex Offenders?

by Steve McCullough, Certified Paralegal

A trend seems to be developing wherein individuals incarcerated for sex offenses are found in published court decisions to be making a complaint already familiar to us. It is that they are forced to espouse 12-Step concepts if they want to graduate from counseling programs intended to address the likelihood that they will recidivate. Is the State religion principally employed by the government in its war on drugs now being expanded to provide an answer to sex crimes?

In this column published in the summer of 2006, it was reported that the United States 8th Circuit Court of Appeals held in the case of *Munson v. Norris*, 435 F3d 877 (8th Cir. 2006), that it violated the Establishment Clause of the First Amendment to the U.S. Constitution to require an inmate, already forced to participate in a counseling program for sex offenders, to also recite AA's "Serenity Prayer". The decision was portrayed as significant, because this finding by the U.S. 8th Circuit followed decisions by the U.S. 2nd Circuit, the U.S. 3rd Circuit, and the U.S. 7th Circuit, all of which held that government coercion to attend "meetings" in which 12-Step doctrine is espoused, constitutes an impermissible requirement to participate in religious exercise unless non-religious alternatives are practically provided. See *Warner v. Orange County Dep't of Prob.*, 115 F3d 1068 (2d Cir. 1996), *Rausser v. Horn*, 241 F3d 330 (3rd Cir. 2001), and *Kerr v. Farrey*, 95 F3d 472 (7th Cir. 1996). At the time, the fact was

ignored that 12-Step concepts were being embraced within the context of counseling programs for sex offenders.

Now another case comes to our attention in which the 12 Steps are being employed as a comprehensive resolution for a societal ill that is unrelated to substance abuse.

William Edmondson is an inmate in the New Hampshire State Prison ("NHSP") system. The NHSP requires inmates convicted of sex offenses to participate in a multi-phase, multiyear Sexual Offender Program ("SOP") if they wish to be considered for parole. William Edmondson joined the SOP in December 2003. In March, 2005, Edmondson testified at a hearing that SOP materials were so permeated with religion and spirituality that they were tantamount to religious indoctrination. On April 9, 2005, Edmondson objected in writing to being forced to participate in the "faith-based" programming of the SOP.

On July 27, 2005, nine days before his scheduled graduation from the SOP, Edmondson was terminated from the program for his supposed failure to make sufficient progress. In November of 2005, Edmondson was denied parole because he had not completed the SOP. Edmondson was told by the parole board that he would have to complete the SOP in order to be considered for release on parole. Edmondson presented his grievances to Warden Cattell and Commissioner Curry, who both denied his appeals and took no action in response to them. This lawsuit, filed *pro se* by Mr. Edmondson, ensued.

In the case of *Edmondson v. Curry*, Civil No. 05-cv-445-JD, United States District Court, D. New Hampshire, April 3, 2006, the Court held that Mr. Edmondson made a *prima facie* showing that the SOP used faith-based principals in the program by incorporating references to a

"Higher Power," to spirituality and to God and, further, that Mr. Edmondson made a *prima facie* showing that the parole board's requirement that he complete the SOP before being considered for parole was coercive. Finally, the Court held that Mr. Edmondson sufficiently alleged a clearly established Establishment Clause violation in his Complaint against the SOP staff to allow his claims to proceed against those people individually.

The fact that complaints against government mandated 12-Step participation are now surfacing in cases involving counseling for sex offenses is troubling, as it appears that the Steps are being regarded as an answer to various problems of undesirable behaviors unrelated to the very special "diseases" of alcoholism and drug addiction. There is no doubt that, without the courage of plaintiffs like William Edmondson, the State's utilization of the 12-Step religion, with the attendant injuriousness of its core concept of powerlessness, would be even more pervasive than it is already.

Please note: It is extremely important for the reader to understand that this column is not intended to impart any kind of legal advice. Anyone contemplating decisions or actions based in whole or in part upon perception of his or her legal position is strongly urged to seek and follow the advice of a competent and experienced attorney.

3-Minute REBT

by Philip Tate, PhD

Author of *Alcohol: How To Give It Up and Be Glad You Did*, 1996, See Sharp Press, Tucson, AZ.

Dr. Phillip Tate will rejoin us for the Spring 2007 issue. We look forward to more of his helpful insights then!



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