SMART Recovery is the world’s largest community of mutual support meetings that use science and self-empowerment to help people overcome any addiction, including problems with drugs, alcohol, and harmful behavior such as gambling, eating disorders, and excessive shopping and internet use. In 2019, SMART is celebrating its 25th anniversary and nearing the end of our fastest decade of growth.

**Meetings Proliferate to Help Individuals and Families Recover from Addiction Epidemic**

The number of meetings has quintupled this decade as the global addiction crisis increases the need for treatment and recovery support. Each year in the U.S. alone, this crisis:

- Takes the lives of nearly 160,000 people, including more than 70,000 fatal drug overdoses in 2017 and the 88,000 annual deaths attributed to excessive alcohol use, according to the Centers for Disease Control and Prevention. The U.S. accounts for one in four drug-related deaths worldwide, most caused by opioid overdoses, according to the United Nations Office of Drugs and Crime (World Drug Report, 2017).

- Costs the economy more than $1 trillion based on estimates that account for crime (police, court and incarceration expenditures), lost work productivity and healthcare. The National Institute on Drug Abuse (NIDA) estimates addiction to tobacco products, drugs, and alcohol cost the economy more than $740 billion. The White House Council of Economic Advisors estimates the opioid crisis alone is costing more than $500 billion (The Underestimated Cost of the Opioid Crisis, 2017).

These figures cannot measure the incalculable impact on the families of loved ones suffering from addiction and the quality of life in communities, especially those hit hardest by the addiction epidemic.

SMART, which stands for Self-Management and Recovery Training, helps address all these needs. We hold free weekly support group meetings for people suffering from any harmful addiction, including those using medication, such as opioid agonists, to recover; their family members and friends; and inmates in correctional facilities through the InsideOut program (developed with $1 million in NIDA grants). SMART also has meetings for teenagers, students, military veterans, and people needing support in recovery community organizations, treatment centers, and hospitals.

**The Global Reach of SMART Recovery**

Tens of thousands of people gather weekly at 3,500 SMART meetings in 26 countries, including more than 2,200 in the U.S.1 People anywhere can attend more than 40 weekly meetings online with a compu-

![SMART Meetings Quintuple This Decade](image)

*Projected based on growth through November 2019.*

The majority of meetings are free and open to the public. SMART-oriented meetings are held in correctional and military facilities, schools, hospitals and treatment centers. These figures do not include more than 40 weekly online meetings.

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1After the U.S., the countries with the most SMART meetings include the UK (500), Australia (350), Canada (270) and Ireland (40). SMART Recovery groups also meet weekly in Brunei, China and Hong Kong, Denmark, Haiti, Iceland, India, Kenya, Malaysia, Mexico, Namibia, New Zealand, Nigeria, Panama, Romania, Russia, South Africa, Spain, Sweden, Thailand, Trinidad and Tobago, and Uzbekistan.
ter or smartphone, and receive support through 24/7 chatrooms and message boards. The *SMART Recovery Handbook* is available in 13 languages: Arabic, Danish, English, Farsi, French, German, Mandarin Chinese, Polish, Portuguese, Russian, Spanish, Swedish, and Vietnamese. There is also a culturally appropriate version for the Aboriginal and Torres Strait Islander people of Australia.

SMART uses principles, practices, and tools from disciplines with proven effectiveness in treating problematic addictive behavior, such as Cognitive-Behavioral Therapy and Motivational Interviewing.

Self-Empowered 4-Point Program®
SMART helps people find the power to change within themselves. The meeting discussion is centered around the SMART 4-Point Program:

1. Build and Maintain Motivation.
2. Cope with Urges.
3. Manage Thoughts, Feelings, and Behaviors.
4. Lead a Balanced Life.

Trained Facilitators and Hosts Lead Interactive, Forward-Looking Meetings
SMART meetings are led by facilitators who complete a rigorous 30-hour training course or by hosts who undergo less rigorous training and lead simpler meetings. Meetings are highly interactive, conversational, and educational, enabling all participants to share their successes and challenges and receive guidance from others. Meetings are action-oriented, positive, and focused on the present and future.

These self-empowering discussions include science-based tools that enable participants to become increasingly self-reliant in their efforts to change and to lead lives that are more meaningful, productive, and connected.

Participants learn from each other about specific tools and how to apply them in various situations. SMART’s tools evolve as scientific findings evolve. SMART meetings themselves are the ongoing subject of scientific inquiry. Research suggests that SMART meetings are as effective as any other mutual-help meetings for resolving problematic addictive behavior.² ³

Other research has revealed the importance of choice in the types of meetings available for individuals with different orientations, such as spiritual vs. scientific.³ This finding follows the emphasis in modern treatment on offering people multiple pathways for recovery.⁴ SMART’s effectiveness has been proven in research showing that it reduces crime among inmates released from prison.⁵

How SMART Helps Destigmatize Addiction
SMART discourages the use of labels such as “addict” and “alcoholic” because they can undermine motivation for many people. SMART views addiction as a behavioral problem that can be corrected, not a condition that defines a person’s identity.

The SMART organization is operated almost entirely by volunteers. Meeting participants are encouraged to become volunteers to enhance their own gains and experience the satisfaction of helping others. SMART is supported by ongoing relationships worldwide with mental health professionals and psychological scientists, who help SMART stay current with relevant treatment and scientific innovations. SMART’s International Advisory Council includes some of the world’s leading addictive behavior scientists. The SMART Recovery Australia Research Advisory Committee features scientists performing cutting-edge research in that country and globally.

SMART Is Recognized by Top Government and Medical Institutions Worldwide
SMART is a widely recognized pathway for recovery support and behavioral change. It is recommended by leading government and medical institutions worldwide, including:

Australia – the Government National Health and Medical Research Council and Government Department of Health and Ageing.


United States – National Institute on Drug Abuse, National Institute on Alcohol Abuse and Alcoholism, Substance Abuse and Mental Health Services Administration and Federal Bureau of Prisons.

Founded in 1994 as a 501(c)(3) nonprofit organization, SMART works as a partnership between professionals and peers (people who’ve recovered or have family members with addiction).

For more information, visit www.smartrecovery.org
References: Research on SMART’s Use and Effectiveness


A 2017 study by Zemore et al., “Comparison of 12-Step Groups to Mutual-Help Alternatives for AUD in a Large, National Study: Differences in Membership Characteristics and Group Participation, Cohesion, and Satisfaction,” Journal of Substance Abuse Treatment 73 (2017) 16-26, found that “high levels of participation, satisfaction, and cohesion among members of the mutual help alternatives suggest promise for these groups in addressing addiction problems.” 16.

3 Zemore’s studies follow research published in 2007 by Randolph G. Atkins, Ph.D., and James E. Hawdon, Ph.D., “Religiosity and Participation in Mutual-Aid Support Groups for Addiction,” Journal of Substance Abuse Treatment 33 (2007) 321-331. This research concludes: “Because religiosity influences group participation and outcomes, client ‘scientific’ worldview, it may be very difficult to fit in with spiritually based recovery programs. Individuals with this type of personal philosophy are religiosity must be considered in treatment planning…. For [individuals] with low levels of religiosity, and especially those who have a secular or more likely to feel that sense of belonging in secular support groups that do not use a spiritual approach, such as SOS or SMART, and are more likely to continue participating in these secular groups, thus improving their prognosis for long-term abstinence.

“This study provides more evidence that, in recovery, ‘one size does not fit all’ and that matching clients to appropriate support groups according to their individual beliefs can have a positive impact on their program involvement and, ultimately, on their treatment outcomes. As White and Kurtz (2005, p. 39) point out, ‘It is time that the multiple pathways and styles of recovery fully permeated the philosophies and clinical protocols of all organizations providing addiction treatment and support services.’ We could not agree more.” 329, 330.

4 U.S. Surgeon General Vivek H. Murthy, M.D., emphasized the need for multiple recovery choices in the landmark 2016 report Facing Addiction in America: “We have learned that recovery has many pathways that should be tailored to fit the unique cultural values and psychological and behavioral health needs of each individual.” v-vi.


5 The most dramatic proof of SMART’s effectiveness is an Australian study of 5,764 inmates with substance use disorders in New South Wales prisons from 2007-2011. The research compared reconviction rates for the 2,882 inmates who attended regular SMART meetings, a 12-meeting course known as “Getting SMART” or both with 2,882 who did not.

Over the two years after being released, those who attended SMART meetings had reconviction rates as much as 41 percent lower for violent crimes and 21 percent lower for all crimes. (Chris Blatch et al., “Getting SMART, SMART Recovery Programs and Reoffending,” Journal of Forensic Practice, 2016, Vol. 18, Issue 1)
Examples of SMART Tools and Strategies

**Cost-Benefit Analysis** – This exercise motivates people to stop addictive behavior by weighing the short-term benefits of, for example, abusing pain pills (feeling good, relaxed, and happy for a short time) against the long-term harmful costs (ruined relationships, lost jobs, wasted money, ill-health). The purpose is to help people decide for themselves to change, which is the most effective way for them to do so. Most people do not respond well to coercion.

**Cost-Benefit Analysis Worksheet** | **Four Questions About My Addiction: A Cost/Benefit Exercise**

**A Cost-Benefit Analysis for Alcohol Addiction**

<table>
<thead>
<tr>
<th>Advantages (benefits and rewards)</th>
<th>Addictive Drinking</th>
<th>Disadvantages (costs and risks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relieve anxiety</td>
<td>Easier to socialize</td>
<td>Lose job</td>
</tr>
<tr>
<td>Celebrate success</td>
<td>Overcome boredom</td>
<td>Costs a lot of $$$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Health problems – cirrhosis, cancer</td>
</tr>
<tr>
<td>Celebrate success</td>
<td>Fun with friends</td>
<td>Lose respect of friends, family</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DUI/Lose Driver’s License</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hangovers/ blackouts</td>
</tr>
</tbody>
</table>

**Quitting/Abstaining**

<table>
<thead>
<tr>
<th>Advantages (benefits and rewards)</th>
<th>Disadvantages (costs and risks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear thinking, good health</td>
<td>Boredom</td>
</tr>
<tr>
<td>Save a lot of $$$</td>
<td>Have to make new friends</td>
</tr>
<tr>
<td>High self-esteem</td>
<td>Trouble sleeping</td>
</tr>
<tr>
<td>Job success/ advancement</td>
<td>No hangovers, feel good in a.m.</td>
</tr>
<tr>
<td>Good marriage &amp; family life</td>
<td>Harder to socialize</td>
</tr>
<tr>
<td></td>
<td>Harder to cope</td>
</tr>
<tr>
<td></td>
<td>with stress</td>
</tr>
</tbody>
</table>

The next step is to label each item either “short-term (ST)” or “long-term (LT),” and people discover that all the advantages of drinking are short term and the disadvantages long term. Also, the benefits of not drinking are long-term, and the disadvantages can be overcome with some effort but will not last that long.

**Urge Log** – In the early stages of resolving a harmful addiction, people benefit by identifying all the events, sights, smells, and settings that trigger urges and cravings to use. Keeping a daily log of these triggers helps people avoid using and learn that urges are temporary and grow less intense the longer they abstain.

**Urge Log**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Rate 1-10</th>
<th>Length</th>
<th>What triggered my urge?</th>
<th>Where/who was I with</th>
<th>How I coped, feelings about coping</th>
<th>Alternative Activities</th>
</tr>
</thead>
</table>

**ABC** – The basis for this exercise is learning how our beliefs govern our experiences, including what we feel and how we act. We may think our actions and feelings are caused by outside forces or events we cannot control. These outside factors – call them Activating or Adverse events, the A – play a role, but it is what we Believe – the B – that decides what we experience. When our beliefs are irrational, extreme, or exaggerated, the resulting actions and feelings – the Consequences or C – can be harmful. The ABC exercise reveals rational and realistic beliefs that help us relieve anxiety and refrain from harmful and unhealthy behavior. **ABCs – A Crash Course** | **Finding the ABCs**

For more information, visit [www.smartrecovery.org](http://www.smartrecovery.org)