

H&I Basics – Treatment

Introductory Note: This is the second piece of a three-part document that will replace the current version of H&I Basics. The final revised document will consist of three sections: Committees, Corrections, and Treatment. This is the Treatment piece.

The Narcotics Anonymous World Services Membership Survey suggests that over 38% of our members found NA meetings through the encouragement of addiction-treatment providers. Creating and maintaining relationships with addiction-treatment professionals can be an important way to carry NA's message to still-suffering addicts. Much as it does in correctional settings, H&I in treatment centers gives trusted servants the opportunity to practice the Twelfth Step and Fifth Tradition and deepen their own spiritual growth. Treatment settings come with their own set of considerations, which are outlined in this resource.

The challenges for members who serve NA H&I in treatment centers include following the Sixth, Eighth and Tenth Traditions: we are not affiliated with any treatment center, we are not serving in a professional capacity, and we have no opinion on treatment methods.

SPIRITUAL PRINCIPLES

Attraction

Making NA attractive—both to addicts in treatment and to the professionals who treat them—lies at the heart of this service. Different treatment centers have different philosophies and approaches. In addition to counseling, addicts may be receiving medication to treat their disease. Some treatment centers use a twelve-step approach, but the staff and clients may be more accustomed to the literature and language of a different fellowship. In these situations, an H&I panel may be an addict's first introduction to Narcotics Anonymous.

It is the job of trusted servants to present NA as a welcoming path to long-term recovery. One way to broaden the appeal of the program is to bring in panelists with a mix of age, racial or cultural background, and clean time. This way, clients listening to the members share can see that NA has room for every manifestation of the recovering addict.

At the same time, we strive to demonstrate the reliability of NA to treatment professionals so that they refer more of their clients to our meetings. Through steady commitment, consistent communication, and behavior that reflects recovery, we can demonstrate the effectiveness of NA. If for some reason a trusted servant cannot keep their commitment, it is best practice to find a replacement panel leader with H&I experience and to notify the point of contact at the treatment center that someone new will be covering for the usual leader. Treatment centers

often have full daily schedules, and when NA panels fail to show up at their scheduled time, it diminishes our credibility.

Cooperation, Not Affiliation

As Tradition Six states, NA is not affiliated with any outside enterprises, and this includes treatment facilities. Even if the treatment center is run by or employs NA members, this distinction between cooperation and affiliation must be maintained. This is an important point for H&I committees to stress when entering a relationship with a treatment facility. It is also helpful to communicate to the addicts listening that NA is separate from the treatment center and panelists are not being paid to carry the message into their facility. As such, conversations about the treatment center's approach or policies are not appropriate. Open-mindedness can be valuable for trusted servants as we take care to respect the autonomy of the facility. Although the NA way is what has worked for us, it is not necessarily the only way that works.

Hope

Many still-suffering addicts arrive at treatment centers with no intention of lifelong recovery or even staying clean. They may have been in and out of treatment many times with little lasting success, or they may simply be looking for a place to detox so they can "get their life together" – in other words, get their using back "under control." An H&I panel could be an addict's first exposure to the hope that they can stay clean after they get out of treatment.

A panelist's humble assertion that "If I can do it, you can do it too" can plant the first seed of hope that any addict can lose the desire to use and find a new way to live. When trusted servants bring welcoming smiles, direct eye contact, and authentic delivery of how NA has changed their own lives, they create space for this hope to take root.

BUILDING & MAINTAINING RELATIONSHIPS WITH TREATMENT CENTERS

Treatment centers vary widely in their approaches to recovery and their attitudes toward NA. Some treatment centers may have unfavorable views of NA shaped by misconceptions, philosophical differences, or adverse client experiences. On the opposite end of the spectrum are facilities that are staffed or even founded by dedicated NA members. In the middle are facilities that are friendly to NA but may have more experience with other twelve-step programs. Across this whole spectrum, trusted servants should take special care as to how the NA message is being delivered.

PR committees can be valuable partners in articulating how NA differs from other programs and what we have to offer. PR and H&I committees can work together to ensure treatment professionals are clear on what NA can and cannot provide for their clients.

It is essential to respect the trained professionals who are inviting us into their workplace to carry the NA message. If we recognize certain staff members as NA members, we keep that information to ourselves to maintain clear boundaries and protect employee anonymity. Addiction professionals, even those who are in recovery, are not bound to not follow our Traditions or Steps as employees and are under no obligation to us. We are not there to discuss the treatment methods being used; we are there to offer a message of hope through the NA Steps and Traditions and to follow any rules the facility may have, regardless of our personal views. We are guests of the facility, and if their approach to treating addiction is at odds with NA's, it is helpful to present addicts with another perspective on long-term recovery.

Different treatment centers have different rules, which are always important to observe. For instance, although hugs are a popular staple of NA meetings, some treatment facilities may have a policy against touching clients. Some treatment centers may require panelists to have TB tests before entering their facilities, or they may require a sign-in with one's full legal name. In service committees' initial discussions with facilities, documenting both parties' expectations in writing can help ensure continuity when there is turnover among treatment staff or trusted servants. Through cooperation and clear communication with facilities, we establish our Fellowship's reputation as a reliable community resource.

Accountability

After establishing a relationship with a treatment facility, it is equally important to maintain it. A point of contact from the H&I service body should check in with the treatment center regularly to see what they need, ask if they have any suggestions for how we could improve, and keep all contact information up to date. Regular follow-up builds trust and demonstrates reliability. Clear, consistent communication is essential.

It is important for service committees to be realistic about the number of volunteers willing to go to the facility and able to deliver the services the facility is asking for. Failure to follow through on a commitment damages NA's reputation. It is better to start small and expand than to overpromise. For instance, if not enough trusted servants are available to provide weekly panels at a particular facility, monthly panels may be feasible instead.

Panel leaders remind their panelists to use clear NA language when they share so that NA's message is not blurred. Some treatment centers routinely use terminology from other twelve-

step programs that is inconsistent with how we speak in NA meetings. Rather than correcting a professional's or a client's choice of words, we simply model the language of our program. Trusted servants who may attend multiple fellowships need to be reminded to stick to NA terms like "addict" and "clean" when serving on behalf of an NA service body. NA's message of recovery is paramount.

VIRTUAL MEETINGS

Since the pandemic that began in 2020, delivering H&I service virtually has become more common. Because online NA panels can draw speakers from a wider geographic area, they may have the benefit of a deeper pool of volunteers. This "wide net" may be especially useful in finding panelists who will be relatable for specialized populations, such as adolescents, older adults, or addicts with co-occurring mental health diagnoses. Virtual meetings can multiply the number of people receiving NA's message, as a single online H&I panel can potentially reach multiple treatment facilities at once.

As with in-person panels, treatment centers may have preferences for how online H&I service is delivered. It is important to let the treatment center determine the rules and settings for virtual panels, such as whether clients are permitted to unmute themselves or raise their hands to ask questions or share. As always, it is an H&I committee's responsibility to adapt to the facility's needs.

It is important that trusted servants treat online H&I with the same level of diligence and effort they would in-person service. The fact that you are not physically present at the treatment center does not mean the facility's expectations have changed. For example, speaking while driving a car can distract from the message of recovery. Instead of multitasking, consider that you have a single focus and set aside time to dedicate your full attention to fulfilling our primary purpose and your commitment.

Independent of H&I service, treatment centers also have the option to log in virtually to outside NA meetings that are online or hybrid. H&I trusted servants can inform facility staff that their clients are invited to these meetings, which are listed at na.org/virtual.

RELEVANT FACTORS IN TREATMENT SETTINGS

Medication Assisted Treatment

The need to differentiate NA from the therapy provided by a treatment center may be more crucial than ever with the rise of medical approaches to addiction treatment. With the

increasing numbers of opioid use disorder patients being prescribed suboxone and other medications to assist with treatment, H&I panelists need to be trained on how to respond to questions from clients and facility staff on how NA and its members view addicts who come to meetings while taking these medications.

NA has no opinion on Medically Assisted Treatment (MAT), sometimes called Drug Replacement Therapy (DRT). At the same time, NA is a program of abstinence from all drugs. Unfortunately, some treatment facilities and medical professionals will not send their clients to NA meetings because they think they will be stigmatized and feel unwelcome. These addicts then lose out on the chance to hear our lifesaving message that any addict can stop using drugs, lose the desire to use, and find a new way to live. This message might be their first spark of hope that they can one day stop relying on medication and become drug-free. In the United States, some states will only provide grant funding to treatment centers that prescribe MAT to their clients. It is not necessarily these addicts' choice to use this medication; they are just following the protocols of their treatment program. If our Fellowship is not a welcoming place for addicts that come through these treatment centers, they may never find the freedom our program promises.

As we stated previously, NA has no opinion on the practices of any organizations or practitioners outside NA. However, within the context of NA and its meetings, we have generally accepted principles, and one is that NA is a program of complete abstinence. By definition, medically assisted therapy indicates that medication is being given to people to treat addiction. In NA, addiction is treated by abstinence and through application of the spiritual principles contained in the Twelve Steps of Narcotics Anonymous.

- *Narcotics Anonymous and Persons Receiving Medication-Assisted Treatment*

Although addicts receiving drug replacement therapy generally don't meet NA's definition of abstinence, this does not mean that they are not welcome at NA meetings. As Tradition Three states, the only requirement for membership in NA is the desire to stop using. Some members are willing to sponsor addicts currently on MAT as long as they *desire* to achieve abstinence at some point. Likewise, different groups and service committees have their own guidelines about who may participate in various service positions or share at a meeting. Some group guidelines allow members on MAT to take a service commitment like coffee, greeter, or setup, but not treasurer, secretary, or GSR. At some meetings, members on MAT are asked not to share. Other meetings may allow addicts on MAT to participate or have time set aside for burning desires.

When inviting clients to NA meetings, it may help to remind them that all our members are in various stages of recovery themselves. Consequently, some members may still be learning to give the warm welcome they were so grateful to have received. We encourage our new members coming from treatment to seek out those members who extend a hand, a hug, and an

invitation to join our lifesaving program. H&I trusted servants can help addicts and professionals alike understand that anyone with the desire to become abstinent can be an NA member. We have neither the right nor the ability to judge another addict's desire to stop using.

A member shared:

I was on MAT for 9 months while going to NA meetings. It took time to understand the meaning of abstinence, the disease of addiction, and that I was capable of being like the NA members around me. I'm not sure they knew I was on MAT. I think they noticed something was "off," but they only seemed to care about me and whether I was coming back. I always felt welcome, but I also felt a disconnect between my spirit and the program. The cognitive brain fog, the disconnection from myself and others, and the hope for something better for my life motivated me to work this program, fully abstinent. I never looked back. MAT was an essential stepping stone to stay alive and hear a message of hope. With that hope and the nonjudgmental support of others, I was able to find abstinence and experience recovery.

Use of NA's Name

In some places it is common for NA members to open treatment centers and "raise the NA flag," making direct affiliations and endorsements. This goes against our Sixth Tradition: *An NA group ought never lend the NA name to any related facility or outside enterprise, lest problems of money, property, or prestige divert us from our primary purpose.* Although businesses such as treatment centers are not obligated to follow our Traditions, we as a Fellowship still try our best to protect the NA name and other trademarks when they are coopted by outside entities. We try to educate those facilities and explain that there is no such thing as an "NA treatment center." H&I committees that run into this situation can contact NA World Services for support

"Over and over, we check ourselves not only for affiliation, but for the appearance of it." - Guiding Principles, "Tradition Six"

Even though we are not affiliated with treatment centers, we do supply them with NA literature to help familiarize clients with what NA has to offer. H&I committees should provide trusted servants with plenty of informational pamphlets and local meeting directories to bring to their panels, as well as information about how to access online meetings. Depending on your H&I subcommittee's literature budget, you may also want to bring in booklength recovery literature. However, it is important to be prudent with Fellowship funds in accordance with Concept Eleven. Part of building sustainable relationships with treatment centers involve showing those facilities how to gain greater access to NA literature. Providing a walkthrough of the literature available on na.org and bringing in order forms empowers facilities to show their clients how to

get literature for themselves. Another idea is to give the treatment center staff a library of NA books that clients can borrow, and give the clients their own copies of the *Introductory Guide to Narcotics Anonymous*.

Client turnover at some treatment centers is high, so IPs can run out quickly. It is up to the trusted servants to check the IP racks or literature tables and note which literature items need replenishing each month. It is also important to keep treatment centers stocked with the most up-to-date versions of local meeting directories. Some treatment centers do not allow literature with staples inside. Committees can specify “no staples” in their literature orders, or trusted servants can remove any staples from booklets or pamphlets before bringing them into the facility.

In order to carry a clear NA message, trusted servants do not bring any non-NA literature or non-NA speakers into treatment centers. Speakers can be reminded in advance to share a clear NA message using the language of our Fellowship during their share.

SIDEBAR: IP suggestions for treatment centers

IP # 7, Am I An Addict?

IP #8, Just For Today

IP #11, Sponsorship

*IP #13, By Young Addicts, For Young Addicts**

IP #15, For the Newcomer

IP #17, For Those in Treatment

IP #22, Welcome to NA

*IP #27, For the Parents and Guardians of Young People in Recovery**

IP #29, An Introduction to NA Meetings

*These IPs are specifically recommended for use in adolescent treatment.

Sponsorship

Some treatment centers that utilize a twelve-step approach may direct their clients to find sponsors. In some cases, having a sponsor might be a requirement for getting cleared to attend outside meetings. Consequently, it is common for addicts to come up to the speakers after an H&I panel and ask panelists to sponsor them. It is up to individual NA members whether they are open to sponsoring addicts in treatment. H&I trusted servants may decide to work with an addict in treatment as a temporary sponsor and introduce them to members at outside meetings.

Sometimes a counselor or other staff member from the treatment center may want to interview the potential sponsor about their cleantime and experience before clearing them to sponsor a client. Other facilities have a more relaxed approach.

IP 11, *Sponsorship*, can be helpful to bring in when visiting treatment centers. It is important for clients and staff to understand the role of an NA sponsor and what it does and does not entail.

Special Populations

The growth of the addiction treatment industry has allowed treatment centers to specialize in serving specific populations, such as adolescents, older adults, or addicts with co-occurring mental health conditions. Before sending trusted servants into such specialized treatment centers, H&I committees should ensure these members have been trained to meet the needs of the specific clientele those facilities serve. In these cases, committees should also have guidelines in place to make sure new trusted servants rotating into these positions are fully prepared.

Adolescents are an example of a group that comes with certain challenges. It can help to recruit panelists who got clean young, as well as those who are able to engage members when they share. Keep language simple and straightforward. It is also preferable to err on the side of too many speakers rather than too few. Three or four ten- or fifteen-minute shares will hold young people's attention more effectively than two twenty-five minute shares. Two pamphlets that are helpful to bring to adolescent treatment centers are IP #13, *By Young Addicts, For Young Addicts* and IP #27, *For the Parents or Guardians of Young People in Recovery*.

Conversely, some treatment facilities serve a client population that is older. Just like younger addicts, older addicts pose their own challenges for H&I. It is important to motivate them to find reasons to want to be drug free as they age. Speakers who got clean at an advanced age will be relatable, inspiring hope in clients who may otherwise feel it is too late for them. Younger panelists might share positive experiences with grandparents or other older people they know who also got clean in NA. Speakers can emphasize the gift of recovery that is enjoying the full spectrum of life, including quality time in their day to day living with friends, finding joy in everyday activities, or simply being able to laugh again. Many older people have chronic physical conditions which may make daily life more difficult. For these addicts, the booklet *In Times of Illness* is an invaluable resource, as is the section titled "Aging" in Chapter Four of *Living Clean: The Journey Continues*.

Some treatment centers specialize in clients with "co-occurring disorders," meaning they have both a mental health diagnosis and substance abuse. Trusted servants going into these facilities should take care to maintain a clear, simple message of recovery in NA. We are not there to

discuss mental health issues. However, if it comes up in a question or comment from a client, panelists may choose to touch on how the steps of NA helped them with other behaviors besides drugs if applicable. It is very helpful to bring copies of IP #30, *Mental Health in Recovery*, into these settings.

Many residential treatment centers are single-gender or gender segregated. Some men's facilities may ask that only male trusted servants bring H&I services into their facility for H&I, while others may be open to panelists of all genders. By contrast, women's facilities usually do not allow male visitors. As with all facility policies, it is important to clarify these expectations in advance. Addicts who do not identify as strictly male or female may still be welcome to share at a single-gender facility, depending on their gender presentation. It may be helpful to discuss these cases with staff ahead of time so that both the clients and the panelists feel safe and can focus without distraction on the NA message.

Ideas for topics/formats

A common format for an H&I meeting at a treatment center is a panel of two or three speakers sharing for 15-20 minutes each on their recovery. Having three or even four speakers allows for a more diverse panel, which increases the chance that addicts will hear something that resonates with them. Additionally, most addicts in their first days or weeks clean have yet to recover their full attention spans or clarity, and shorter shares help to retain their focus.

There are other meeting formats that may work well in treatment centers. A rotating Step 1-2-3 meeting can introduce clients to the parts of our program that apply most directly to where they are in their recovery. Alternatively, a meeting that centers on a topic such as "surrender" can be a good way to engage clients, perhaps having them draw a topic from a bag or hat. Questions and answers can also be an effective format, although trusted servants will need to be trained to anticipate and answer difficult questions clients may ask, such as opinions about treatment methods or staff. No matter the format, it is important that there be some kind of structured format to keep the discussion focused.

When we share at treatment centers, it can be tempting to try to relate to clients by telling "war stories" about what it was like when we were using. But addicts in treatment already know about active addiction—they need to learn about recovery! Similarly, it is best practice to avoid talking about specific drugs, which can be triggering or alienating to newly clean addicts. Although treatment centers often identify a client's "drug of choice" or "DOC" as part of the intake process, H&I panelists can explain that Narcotics Anonymous focuses on the disease of addiction rather than on any specific substance. Clarify that NA views drugs as a symptom of the disease of addiction, and that NA is here to help you recover from this disease regardless of what or how much you used.

Discharge

Whether someone is in treatment for a matter of days, weeks, or months, most treatment programs eventually come to an end. H&I trusted servants can help addicts in treatment centers have a plan for what to do once they are discharged. It is helpful to bring a printed stack of local meeting directories to hand out, perhaps with your home group circled or highlighted. You can invite addicts to meet you at your home group when they are discharged and point out other meetings that may be a good fit for them. Mention that some members find it effective to go to ninety meetings in ninety days, which helps them cement themselves in the Fellowship and build a support network. IP #17, *For Those in Treatment*, contains additional guidance for addicts approaching the transition out of treatment and into NA recovery.

Of course, not all treatment is residential. Clients receiving outpatient treatment have the freedom to attend outside meetings on their own after their daily programming has concluded. To encourage addicts in outpatient treatment to attend meetings, it can help to establish a regular NA meeting in a room at the treatment center that any addict is welcome to attend. The advantage of this is one of convenience and comfort for the addict in treatment. However, it is especially important in these cases to remember the Sixth Tradition and avoid the appearance of affiliation with the facility. Group trusted servants may want to include a statement about non-affiliation early in the format of an on-site meeting.

RECOMMENDATIONS

Remember to:

- Communicate NA's philosophy about addiction and recovery, such as total abstinence, the twelve-step approach, focus on the disease of addiction rather than specific drug use, etc.
- Make sure addicts in treatment have access to NA helpline numbers and online meeting schedules for both virtual and in-person meetings.
- Clarify the treatment center's rules with whomever you bring into the facility.
- Clearly state that Narcotics Anonymous is separate from the facility and from other fellowships and treatment methods.
- Respect the anonymity of treatment professionals and staff who may also be members of NA. If we recognize certain staff members as NA members, we keep that information to ourselves to maintain clear boundaries.

- Dress neatly and modestly, and avoid visible associations with outside issues or organizations through clothing, jewelry, or tattoos.
- Keep NA's purpose in mind: carrying a *clear NA message* of recovery and instilling hope.
- Thank residents for allowing NA to come in—acknowledging we're being welcomed into their current residence.

Refrain from:

- Debating any issues involving facility rules, regulations, programs, or other fellowships.
- Wearing flashy jewelry.
- Profanity, especially in youth treatment.
- Taking messages or carrying letters in or out of the facility.
- Bringing an NA member who has friends and/or family in the facility.
- Inviting significant others who are not part of the H&I panel into the treatment center.
- Discussing conditions within the facility or facility staff members with clients.

MOVING FORWARD

Addicts come to treatment centers under all kinds of circumstances, but they all can get the same message of hope and the promise of freedom when NA members bring H&I service into these facilities. Addicts can't take the resources and comfort of a treatment center with them when they leave, but they can take hope with them knowing that Narcotics Anonymous is waiting for them. However, it is not enough to have a discharge plan that lists the meetings they will go to and the contacts they will reach out to for support. To stay clean in NA, addicts must be willing to commit to do something to ensure their success. H&I trusted servants can help inspire this commitment by sharing how their own commitment to NA recovery has changed their lives.