

Quaker Action on Alcohol & Drugs



A world free from alcohol harm?

How can Quakers help? page 2

SMART about recovery? *page 4*

A view on the drugs 'war' *page 6*

QAADNET meeting *page 8*



A world free from alcohol harm?

In August QAAD and other faith group representatives met Don Shenker of Alcohol Concern to discuss common concerns and joint action. Here he shares early details of Alcohol Concern's forthcoming campaign.

Alcohol Concern wants to create a world free from alcohol harm. That means a few changes for the better in our current relationship with alcohol. We believe everyone has the right to enjoy life free from the effects of alcohol harm and everyone has a responsibility to create this.

We have created a charter based on the World Health Organisation's own charter on alcohol, and we would like everyone to join us and endorse it. The focus of this campaign will be in **Alcohol Awareness Week, which is 14th – 20th November**. We hope people will sign up to the charter and encourage their local and national politicians to do so too.

The charter has four principles:

Society. Everyone has the right to enjoy life free from the effects of alcohol harm- at home, work or in the community, and everyone has the right to be free of the pressure to drink and to be supported when they choose not to.

Information. Everyone has the right to objective and independent information and education, starting early in life, on the consequences of alcohol consumption on

health, the family and society.

Young people. All children and adolescents have the right to grow up in an environment protected from the promotion of alcohol and the negative consequences of alcohol consumption.

Drinkers. Anyone who develops a problem with alcohol - as well as members of their family - has the right to accessible advice, treatment and care.

Governments must take the lead and the drinks industry needs to play its part in reducing harm. Among other things, this means putting an end to cheap alcohol, protecting children from alcohol marketing, and issuing alcohol licences wisely in a way that fully considers public health and community safety.

Social attitudes are important too. We would like to encourage people to get involved in a national online conversation to consider, discuss and respond to two questions about our national relationship with alcohol. The questions are: **Is the social cost of alcohol too high? What is a drink problem?**

The charter will be available on the Alcohol Concern website in the autumn, along with details of our other campaigns. Signing up will give policy-makers a clear message that many people are concerned about alcohol harms, and want to work together to reduce them.

Joint work: What can Quakers do?

The faith-based groups (including QAAD) who have worked together on gambling are also coming together for joint action on alcohol. Apart from supporting Alcohol Concern's charter, we are focusing attention

on measures that will prevent the sale of cheap alcohol, particularly a minimum price per unit. QAAD's briefing is available at www.qaad.org, or by request in paper form. The Methodist Church has produced a plan for action, which is available at www.jointpublicissues.org.uk/alcohol



If Friends and Meetings would like to take action, you can:

- Sign the Alcohol Concern charter when it appears on the Alcohol Concern website www.alcoholconcern
- Invite your MP and your councillors to meet with you individually or as a Meeting during Alcohol Awareness week, and encourage them to sign the charter too
- Use the opportunity to engage with them on the subject of cheap alcohol and argue for minimum pricing per unit
- Explore options for local minimum pricing with local councillors
- Corporate bodies and charities can also sign the charter, so raise it on other agendas
- Join the on-line discussion at Alcohol Concern
- Invite young Friends to engage in the issues and add their perspectives

Progress on alcohol harm in Bristol

Jon Long of Redland Quaker Meeting explains a new - and old - development

The development of recovery communities which enable alcoholics and addicts to become abstinent and establish a stable new way of life is nothing new.

In the 1660s when Quakers first arrived in Bristol they were widely regarded as unacceptable fanatics and were driven out of the city to Frenchay, five miles away. Their disapproval of the tobacco industry and slavery, and their insistence on sobriety, were too much for the most ungovernably drunken port in England. Only after the 1690 Tolerance Act were they able to establish a permanent base, but very rapidly their reputation for mutual support and brilliant commercial networking based on honest, hardworking sobriety changed perceptions. By the mid 18th century a sixth of Bristol's citizens were sober Quakers.

In 1695 John Bellers had inspired Quakers with his vision of a Corporation for the Poor – and Bristol were quick to respond, completing by 1699 a substantial home for destitute Quaker jute weavers which

could also serve to enable their retraining, unpicking rope to make new materials. The superb building survived, unlike the similar example in Clerkenwell from 1698, and is the only remaining example – see www.youtube.com/watch?v=5drRclc7RCE

Over the years the building became a school and then council flats and eventually a semi-relic crack den earmarked for demolition by Bristol City Council.

A number of Quakers have been collaborating with The National Treatment Agency, Bristol Community Land Trust and Independent Living Services (a community of addicts and alcoholics in recovery), to buy the building from Bristol City Council and refurbish it into a community rehabilitation centre and hub for the Bristol Recovery Community, with a café, gym, Quaker Heritage Centre and central meeting point for a sober campus in the city centre – hopefully the first of 20 sober campuses across the UK. If you would like more information about the project contact Jon Long on **07532 156281**

QAAD's work with problem gambling continues very actively. A Parliamentary Committee is considering the effect of the Gambling Act 2005, and we made a strong submission. It is available on our website at www.qaad.org



‘SMART’ about Recovery?

Eva Deregowska of Aberdeen Quaker Meeting and a trustee of QAAD discusses a recent report

‘SMART Recovery is an organisation whose purpose is to help individuals seeking to change addictive behaviours to gain their independence and achieve recovery.

SMART is an acronym for ‘Self Management and Recovery Training’. It offers a recovery and relapse prevention aid, which, like Alcoholics Anonymous (AA), relies on mutual support in small groups of people recovering from drink problems. However, instead of being based on the ‘12 step’ programme of AA, it sees addiction as a learned behaviour, which it seeks to unlearn using cognitive-behavioural principles.

A SMART Recovery pilot project was funded by the Department of Health for two years from April 2008, and has now been evaluated. The Project was piloted at six sites in England, and aimed to test whether this kind of ‘mutual aid’ group could not only be started, but become self-sustaining.

Project leaders saw the groups as potentially working with treatment services, but were adamant that groups should be led by group members, who can be trained in the techniques. The code of conduct in the project’s resource manual stipulated that, “professional involvement is not an element of mutual aid and over involvement stifles group development ... A meeting run by a

worker, paid or voluntary, of a professional organisation as part of its business is not a mutual aid meeting and should not be called a SMART Recovery Group”. The evaluation found that involvement with the group was a regular part of the life of most members, and a core group of longer term attenders developed. About two thirds came to meetings weekly, and all but a few intended to continue attending. However, SMART material suggests that people may choose to stop attending in time if they feel stable in their recovery.

The evaluation found that the groups appealed to participants because of their non-hierarchical structure and because they felt understood by people with similar experiences. Other members acted as role models who had overcome their dependence and forged a ‘normal’ life.

SMART Recovery emphasises ‘moving on.’ Members liked the focus on problem solving and the practical approach to recovery. Support not to drink helped them stabilise and improve their housing, employment and social integration. However, they accepted that relapse may be part of the recovery journey and saw the availability of groups as important in helping people get back on track. They felt their self-esteem and confidence improved and enjoyed being able to think about new activities or rediscovering old ones. They were not hostile to AA, which many had attended previously, but felt that SMART Recovery worked better for them.

The advantage of adding SMART or similar groups to the mutual aid ‘menu’ is



to open the door to this type of support to people who would not be attracted to, or not do well in 12-step groups –in particular to enable a smooth transition from cognitive-behavioural type treatment to long-term support from a group with a compatible approach. It might also offer a recovery and relapse prevention option in its own right.

This pilot assessed whether it would be feasible for more groups like this to grow in the United Kingdom. The answer seems to be yes, as there are now over 80 meetings a week in different locations. Since the evaluation there has also been a growth in the number of ‘partner’ organisations based in treatment centres. SMART also offers an on-line support forum for people who can’t get to a meeting, as well as training for facilitators.

There is a body of research, mostly from America, which shows that those in formal treatment tend to do better if they also go to AA. However, there has been

very little research on other groups, though the indications are promising.

One study compared AA and SMART by alternately allocating patients suffering serious mental illness and substance use problems to each of these programmes. The results suggested that they might differ in their impacts, but not dramatically, as improvements were found in both. SMART showed better results for medical and employment benefits, including fewer psychiatric admissions, while the 12 step group was more successful at decreasing alcohol and other substance use.

In another interesting US study where spirituality was considered, about half the SMART members believed in a higher power, suggesting no incompatibility with SMART’s ethos. The AA groups attracted only a few dissenters from this view, and members were on average much more spiritual or religious in their beliefs.

The SMART recovery website is at www.smartrecovery.org.uk and includes the full evaluation report

Dear Editors,

I really appreciated the review and explanation of David Schoen’s book ‘The War of the Gods in Addiction sent in by Rupert Booth.

I worked for several years as a counsellor in a project for on-going care for people in recovery from addiction. The comparisons given in the article between the stages in development and recovery from addiction and their Jungian counterparts were so recognisable.

My counselling supervisor at the time came from a Jungian background and we had looked at various similarities but I had not thought of these in such a structured way. Now, when I look back on the people I knew and cared for, the concepts described in the article made such sense. Almost invariably our residents had struggled through life with very

little self-worth. They had each developed a persona, usually held together with the help of their drug of choice, which enabled them to survive. Eventually of course, as described in the article, the apparent ‘help’ had taken over and the Shadow ruled their lives.

The process of recovery using the 12 Step way is well described in Rupert’s article and shows Bill Wilson’s very real understanding of, and perhaps experience of, Jung’s view of the human psyche. I particularly liked the sense that individuation is something we all strive for as we move through life, whether in recovery from addiction or not. Most of us have at times relied on a ‘Persona’ to cope in social situations and the lucky among us have managed that without needing to rely on substances. Whether in silence as Quakers or in sharing life stories as AA members we can meet together as human souls striving towards the Light.

Sandra Hobbs, Bedminster Meeting



The war on drugs: Lost, failed or misconceived?

Jon Lyon, a trustee of QAAD from Somerset Area Meeting gives a personal perspective

Recent events in international and national news have eclipsed reports of what seems to be a groundswell in opinion about the co-called 'War on Drugs'. In June this year a statement was made by a group including former Presidents of Mexico, Columbia and Brazil, Kofi Annan and Richard Branson calling on other world leaders to accept that the war was unwinnable, and the approach taken so far had caused more harm than gain.

Across the world we see the unfortunate results of drugs use and dealership. The US/Mexican border has become a hotbed of gang warfare centred on supply, while a seemingly unstoppable consumption of drugs such as cocaine and opiates creates a huge illicit market.

The USA has been noticeable in its crackdown on drug use, with some states making little disparity between small amounts of drugs held for personal use, and large amounts for dealing. Hence large populations are held in prison, the early stages of drug addiction are not widely treated at street level, with the exception of small projects who may be leading the way.

The UK tends to be more liberal in attitude, and while the call for decriminalisation has not been heeded, those with the early onset of drug problems can expect a less draconian response. In the Asian countries we find responses more extreme than in the USA; in past cases the death sentence could

be a punishment for trafficking, but there is already a change here. In June 2011 a Mumbai court struck down the mandatory death sentence for a second offence of trafficking. This gives some hope for further change.

Decriminalisation is not the same as making substance use legal, and this seems to be a sticking point in more polarised communities. Decriminalisation for possession of small amounts would free people from the court system and keep their records clean, allowing a better chance of full rehabilitation into society. A relevant discussion paper has been produced by the United Nations Office on Drugs and Crime, which is called "From coercion to cohesion: treating drug dependence through health care, not punishment". Although not arguing for decriminalisation, it does encourage treating offenders with drug problems as a health, not criminal justice, issue.

Having worked in an agency where clients who were addicted to both illegal and legal drugs (such as alcohol or prescribed Valium) were treated together, I believe that decriminalisation would work to a degree. However, some drugs, and the behaviours that their use can cause, are seen as deeply antisocial, while other drugs have been normalised. For instance, nicotine is accepted; there can be a view that cigarettes are a totally different issue from other drugs, and do not inhabit the same sphere of public understanding.

My point is that apart from issues of decriminalisation we need a sea change of opinion and understanding of substance use.

Quakers, alongside some other religious groups, are well placed to argue a new approach. Some have stopped all caffeine use, as well as alcohol or nicotine, recognising the subtle effects this substance can have despite its seemingly innocuous



part in European and World society. With the knowledge that all substances affect us to some extent, and the questioning of their relevance and the need to use them, we can follow our age-old model of living testimony as a start.

But education is also the way forward. Until all substances are recognised as mood altering, and causing similar problems albeit in lesser degree, we will not be able to change views. This seems a tall order; I baulk at the idea of putting amphetamine in the same bracket as sugar as a mood-altering drug, but it can be argued that they both create a feeling of positivity in the short term.

To change the world's view that more harmful drugs should be seen the same framework as minor ones seems impossible. If we are to do this I believe it will take generations. Until then perhaps we can start to argue the case for more lenient responses to lesser transgressions.

Please note I am not arguing for the decriminalisation of large scale supplying. I would argue that this would supply those who would continue to be addicted. We do this with alcohol already, and I do not want to see problems of misuse and addiction become greater. Complete liberalisation would curb our ability to argue for a stronger hold on alcohol advertising and supply, for instance.

So surprisingly I find myself arguing against some of the more liberal proposals of those

who want to end the 'War on Drugs'. Instead, I would argue for an approach that allowed greater focus on positive decriminalised rehabilitation alongside better education. Perhaps I could be sitting on the fence, and I agree that this subject becomes more complex the more we look at it. Perhaps I am being somewhat naïve!

However, I am thankful that dialogue may now have been started. Quakers have something special to bring to the discussion.

We received this letter from a Friend

I wonder if we will ever get to a stage where drugs use will diminish and stop being such a problem.

One thing that has changed in recent years is the development of a stronger form of cannabis, which means that one cannot say it is relatively harmless. I know at least one person who has been reduced to helpless paranoia on cannabis, and we now know that its use by younger people, whose brains have not yet developed to full adult status, can affect them very badly.

I know addicts who get a methadone script which enables them to use it in the morning, which gives them time to go out and "score" later in the day. Also it is more difficult to come off methadone than heroin!

All I can say is thank God for the 12 Step Programme which got me off valium after 26 years of prescribed use.

QAAD has considered the decriminalisation of drugs at various points, but has not felt led to take a position. The issues are complex, may vary with substance, and we think we probably reflect the Religious Society of Friends as a whole in that we encompass a variety of views within our group. At present, QAAD is in the process of preparing a briefing paper on some of the issues to up-date our

reflections. It will be ready within the next few weeks, when it will appear on our website. Cornwall Area Meeting has sent a minute of concern about the decriminalisation of drugs to Meeting for Sufferings, which is being considered by the Quaker Peace & Social Witness Central Committee and the Crime, Community and Justice Group. QAAD hopes that the briefing paper will be of help to



Charity begins at...

To meet the cost of QAAD's activities we have to find around £53,000 a year. Half of this is met from donations and investment income, the rest by using up our dwindling reserves.

QAAD speaks for Friends on such important social issues as dealing with drugs misuse, gambling, and alcoholism.

Additionally, we give a lot of support to Friends working in the treatment of addiction, to individual Friends who have problems with addiction or are the victims of drug and alcohol abuse, and to local meetings which are supporting a Friend with an addiction.

So we are speaking out, and seeking to meet the needs of Friends who are not immune to the problems of addiction.

Please send your donation to: Ron Barden, Treasurer, 33 Booth Lane North, Northampton NN3 6JQ. Please make cheques and charity vouchers payable to QAAD. Individual Friends and Attenders can enhance their donation if it is by cash or cheque, by completing the Gift Aid Declaration below.

Gift Aid Declaration

Name _____

Address _____

I wish Quaker Action on Alcohol and Drugs to reclaim tax on all donations I have made since 6 April 2000 and hereafter.

I understand that I must pay an amount of income tax at least equal to the tax the charity reclaims on my donations in the relevant tax year.

Signed _____

Date _____

Have you visited the
QAAD website recently?

It's at www.qaad.org

Join QAAD

AS AN ASSOCIATE MEMBER

Send £5 or whatever you can afford (cheque/postal order payable to **QAAD**) to Helena Chambers, 21 Church Street, Tewkesbury, Gloucestershire, GL20 5PD to receive a 1 year postal subscription to **QAADRANT** and advanced notice of **QAAD** events

QAADNET Meeting

**Past, present and
future: approaches
to addiction**

Speaker: **Leigh Rusling**
of Aquarius treatment agency

Saturday 22nd October 2011
11.30am to 3.30pm

The Priory Rooms, Quaker Meeting
House, Bull Street, Birmingham B4 6AF

Dealing with an addiction involves considering past, present and future. How do we find the most useful balance between them, as individuals, close others, and workers/volunteers in the field? Leigh Rusling will reflect on his experiences of counselling and share information about Aquarius's work with problem gamblers.

All Friends are welcome, but please contact Helena Chambers to confirm attendance so that we can plan for numbers

Letters and articles for QAADRANT are very welcome, and should be sent to Helena Chambers, 21 Church Street, Tewkesbury, Gloucestershire GL20 5PD. t: 01684 299247 e: helenaqaad@hotmail.com