

COORDINATING MADE SIMPLE

A SMART[®] Coordinator is in some ways comparable to a Twelve Step sponsor, because being a Coordinator is a position of significant responsibility that requires good judgment, concern for others, and a solid knowledge of our recovery program. To reduce the possibility that the Coordinator's position might be abused, all of the Coordinator's work is done out in the open while conducting SMART[®] meetings. Unfortunately, because of the degree of responsibility, and the public nature of the work, many individuals may avoid adopting this role. Consequently, this article presents a simplified approach to Coordinating, in the hope of clarifying our basic expectations of current Coordinators, as well as persuading potential Coordinators that the job is a responsible but not impossible one.

There are four primary tasks for a Coordinator to accomplish in each SMART[®] meeting:

(1) Facilitate a flowing discussion. Although one individual may take several minutes of uninterrupted time to describe an issue to be discussed, once the issue has been described, the discussion should then involve many or most members. In particular, it is not the job of a Coordinator to conduct one-on-one 'therapy' with one participant while the remainder of the group listens. Rather, a good support group meeting gets input from all (or nearly all) who are present.

(2) Focus on addictive behavior issues. Although the conversation should flow from person to person, the issues discussed should be addictive behavior issues. Nevertheless, there will be many times when someone is discussing an issue which might also be discussed in a depression, anxiety, or couples group. In this situation, the Coordinator may simply need to ask: 'How does this relate to addictive behavior?' Typically the answer will be something like, 'If this problem gets any worse, my urges could get very strong, and I would feel at much greater risk to relapse'. For individuals early in the process of change, motivational and urge coping issues (Points 1 and 2 of the SMART[®] 4 Point Program) are of most importance. However, as success with motivation and urge coping occurs, the topics of interest to the participant will center around managing thoughts, feelings, and behaviors (Point 3), and lifestyle balance (Point 4). These are legitimate topics for a SMART[®] meeting, but a question about how to relate them to motivation and urges may be appropriate.

(3) Accept and empathize with whatever participants offer. When any one of us has a problem to discuss, we are more likely to discuss it with someone we perceive to be sympathetic and understanding, rather than someone we perceive as critical. Although we are certainly looking to help meeting participants become more rational in their problem-solving, the place to begin the transition to rational problem solving is to allow the full expression of current thoughts and feelings. The transitions that follow can take considerable time, so be patient!

The disclosure of someone's deeper thoughts is unlikely to occur in a critical atmosphere. Of the four Coordinator tasks identified in this article, this third point is actually the most important one for running a successful SMART[®] meeting. Despite SMART's[®] emphasis on rationality, the extent of self-disclosure in a meeting is a much better guide to how successful the meeting has been than the extent of rational discussion. Only after a fair degree of self-disclosure has occurred, can one begin meaningful rational problem-solving. Rational analysis of insignificant or shallow thoughts is not worth

much, and the disclosure of deeper thoughts takes trust and time. Therefore, listen closely, accept that the individual believes what is being presented (even if you think it is irrational), respond respectfully, ask relevant questions to allow the individual to elaborate, and be patient. The time for rational analysis may not yet have arrived. (The Coordinator's Manual, especially pages 1-8 to 1-11, and 4-1 to 4-2, also addresses these issues).

(4) Maintain a rational and scientific perspective. Although this fourth task is not as critical as the third one, it seems to be the one that scares Coordinators most. Supposing that good depth of self-disclosure has occurred, and the individual seems ready to proceed to the next step, what next? The first question to consider is which of the 4 Points fits best to the issue being discussed? If the individual is obviously uncertain about whether to resolve an addictive behavior, this is a motivational issue. A cost-benefit analysis, covered in the Member's Manual (MM) on pages 11-19, is relevant. If the issue is coping with urges (Point 2; MM, pages 21-36), one or more urge coping techniques may be relevant. If it is any other kind of problem or stress, including a lifestyle balance issue (Points 3 and 4, MM pages 38-55 and 57-60), consider the following actions:

First, once the issue to be discussed has been outlined by the participant, invite the group to respond. This recalls the first function of a Coordinator (to keep the discussion flowing). With luck, your SMART® group has been operating long enough that there is a substantial depth of rational perspective in the group, and several members will have useful ideas for discussion. It is also noteworthy that in professionally led therapy groups, participants report later that it is statements by other group members that are remembered most and are most meaningful, rather than statements made by the leader.

Although some Coordinators may think of their groups as a kind of stage on which they can present their increasingly refined rational thoughts, the reality of a SMART® group is that the statements of other participants will often be most meaningful to the group. (And you thought the participants of your group were hanging on your every word!)

Second, if necessary, encourage the group to identify possible irrationalities in the thoughts offered. Some basic irrationalities to consider would be:

Imperatives: Must, should, have to, can't, ought to
All-or-none thinking
Catastrophizing
Mind-reading
Global self-rating (e.g., 'I'm just no good')

The Coordinator might say, 'This sounds to me like an example of all-or-none thinking. Does anyone else understand it that way?' Having identified an irrationality, it might also be appropriate to suggest an alternative perspective: 'Have you considered understanding it in this way?'

Third, if the irrationality involved, or a rational alternative, cannot be identified, it may be appropriate to suggest that everyone think about the issue until the next meeting. This is a perfectly acceptable option. SMART® is a free support group, not professional treatment. Neither the Coordinator nor the group is expected to have an answer for everything. The Coordinator, between meetings, might well contact the Advisor. With luck, the need to have the group 'think about it' until next time will get less frequent as the Coordinator gains more experience, but there is no shame in saying something like, 'My sense about this is that what you are saying is not quite right, but I'm having a hard time putting my finger on it and explaining why, so I am going to think about it some more, contact our Advisor, and try to have something intelligent to say about it next week'.

An experienced Coordinator, of course, could facilitate a group discussion that encourages disclosure, identifies irrationalities, and identifies alternative rational perspectives. In the process of doing this, the Coordinator might also facilitate a group ABC (if you're not sure what an ABC is, see MM pages 39-45), or use some other structured problem-solving approach that the entire group actively participates in. However, a main point of this article is that even though we hope every Coordinator aspires to do this, it is not necessary to have this level of skill in order to begin coordinating a SMART® meeting.

We can also look forward to the day when scientifically supported addictive behavior treatments are widely available, and individuals attending SMART® meetings have already been well educated about rational change methods in their treatment programs. These individuals will attend SMART® meetings because they enjoy the fellowship, want an extra chance to discuss and explore various ideas, and simply want to share their new learning with like-minded individuals. Coordinating a SMART® meeting may well be less challenging then, but hopefully just as invigorating.

To summarize, basic SMART® meeting leadership involves keeping the discussion flowing from member to member, but focused on addictive behavior issues. The discussion accepts and empathizes with whatever a participant may choose to disclose (and encourages deeper, rather than shallower, self-disclosure), but also attempts to introduce a rational and scientific perspective (in a respectful and sensitive manner). Therefore, it may not take extensive preparation to lead a SMART® meeting in this manner. So, attend a few meetings (if you can), look over the Member's Manual, have a copy of the meeting outline and a watch at your side, and Coordinate! The only difficulty you may have is figuring out who is getting more from the experience: your meeting participants or yourself!

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