



Public Relations Statement

Why Public Relations Is Important to the NA Member

The Narcotics Anonymous message is “that an addict, any addict, can stop using drugs, lose the desire to use, and find a new way to live.” Our relations with the public enable us to share this message broadly so that those who might benefit from our program of recovery can find us. We perform public relations service to increase the awareness and credibility of the NA program. We share our message openly with the public at large, with prospective members, and with professionals. Maintaining an open, attractive attitude in these efforts helps us to create and improve relationships with those outside the fellowship. Establishing and maintaining a commitment to these relationships can help us to further our primary purpose.

The spiritual principles of our steps, traditions, and concepts guide us in pursuing our public relations aims and our efforts to enhance NA’s public image and reputation. These principles apply to our community and service efforts as well as to the personal behavior and attitude of individual NA members.

Informing Professionals and the Public

Narcotics Anonymous is a global, community-based organization with a multilingual and multicultural membership. NA was founded in 1953, and our membership growth was minimal during our initial 20 years as an organization. Since the publication of our Basic Text in 1983, the number of members and meetings has increased dramatically. Today*, NA members hold more than 61,800 meetings weekly in 129 countries. We offer recovery from the effects of addiction through working a twelve-step program, including regular attendance at group meetings. The group atmosphere provides help from peers and offers an ongoing support network for addicts who wish to pursue and maintain a drug-free lifestyle.

Our name, Narcotics Anonymous, is not meant to imply a focus on any particular drug; NA’s approach makes no distinction between drugs, including alcohol. Membership is free, and we have no affiliation with any organizations outside of NA including governments, religions, law enforcement groups, or medical and psychiatric associations.

Through all of our service efforts and our cooperation with others seeking to help addicts, we strive to reach a day when every addict in the world has an opportunity to experience our message of recovery in his or her own language and culture.

*As of May 2012.

Public Relations

The 2011–2012 fiscal year marked our third fiscal year of reduced PR activity due to budget constraints. However, we were able to realize participation in one additional international conference during this year. We are mindful of our slow progress toward public relations activity while drug use continues worldwide and pharmacology advances continue in the treatment of addiction. Meanwhile, the United Nations 2010 Drug Report (the most current report for FY 2011) indicated the US and Canada have seen an increase of problem drug users who abuse synthetic opioids/prescription medicine, particularly in the age group of 50 and over, while Europe continues to see heroin as the most popular drug of choice. In Southeast Asia, crystal methamphetamine is the primary drug of abuse. The need for Narcotics Anonymous to be seen as a stable, accessible, and reliable recovery option worldwide remains. At the International Society of Addiction Medicine Conference in Oslo, Norway, NA represented the only drug-free recovery approach present to provide information to physicians; medication-based addiction treatments, on the other hand, were very well represented. Our presence in Oslo helped our relations with the Norwegian government; the Director for Substance Abuse for the country requested a presentation, as did a treatment center that primarily employs drug replacement as their treatment method. That particular institution was interested in Narcotics Anonymous due to requests from patients for abstinence-based approaches to recovery.

Information from the March 2011 NAWs Environmental Scan demonstrated a relevant need for NA to remain visible and interact with treatment and healthcare professionals. Funding for treatment is often linked to drug replacement therapy, particularly in countries that have government-sponsored healthcare. We attended the American Society of Addiction Medicine (ASAM) conference, which was a mirror to ISAM yet on a larger, national scale. The ASAM conference validated our need to maintain a presence; 90% of exhibitors were pharmaceutical companies. Many physicians stopped by to tell us that they were grateful we were at the conference because abstinence-based recovery options had been lacking. At the ASAM conference we met two physicians who are recovering in NA, one of whom does administer drug replacement medication, but whose patients are drug-free by the time of discharge. The second physician brainstormed with colleagues about how to portray abstinence as a recovery model. Many addiction professionals (approximately 60% of ASAM physicians) prefer the use of drug replacement medications to an abstinence-only approach. With the continued medicalization of addiction treatment and the widely used ASAM and National Institute of Drug Abuse (NIDA) definition of addiction as a brain disease, NA needs to remain vigilant with informing medical professionals as well as government agencies that Narcotics Anonymous is a viable abstinence-based community resource for recovering addicts. The demographic profile of addicts attending their first meetings is changing over time as many more are arriving on medication given to them in

Trend

(from the NAWs Environmental Scan)

There is a growing perception that addiction is treatable through medication—and that NA is not a resource for those on medication.



treatment. Cooperation with healthcare professionals and a welcoming atmosphere from members will help NA to be that community resource for addicts. We know there are many other recovery options available, but our goal is to make it possible for addicts to find a home in NA.

Governmental relations are key in many countries. We have reported about the growth of NA in Iran through public relations efforts with the government, and this has also held true in other countries. NA Spain has continued its relationships with government officials since the PR efforts that took place in preparation for WCNA 33, and the UK has formed strong, ongoing cooperative relationships with government. Southeast Asia is one area that has continuing drug use and where many addicts have not found NA. Southeast Asia has minimal NA presence; NAWS presented at the International Federation of Non-government Organisations (IFNGO) conference, which was held in Malaysia in 2011. We had not attended this conference for over ten years, and coming back provided an opportunity to interact with many professionals in treatment and government, including police from Malaysia and treatment professionals from Thailand and the Philippines. These professionals were interested in our literature, and the president of Thailand expressed interest in NA to help his citizens.

Public relations service work is not confined solely to government, healthcare, and treatment. PR is a valuable service with drug courts because of the number of potential members they refer to meetings, and they continue to proliferate with new initiatives for veteran and reentry courts. As of 2010 (most current numbers) there are approximately 2,316 active drug courts, 31 US reentry drug courts, and 62 veteran drug courts. Additionally, the National Drug Court Institute figures indicate that 15 countries use the drug court model. Research demonstrates the efficacy of drug courts and their cost-effectiveness in lieu of incarceration. NAWS continues to attend their annual drug court conference to build cooperative relationships with these professionals and to learn of challenges they have faced in referring potential members to NA. With all the initiatives for veterans, veteran drug courts are growing, and they will be having their own annual conference. NAWS is considering a second cooperative venture with the physician researcher we partnered with for a member survey. The target group for the member survey will be recovering veterans, but all members who attend a meeting will be encouraged to participate. This second survey is in the early planning stages, and the survey itself hasn't been developed. We are providing advance notice due to the numbers of veterans who may be referred to NA from the drug courts.

The criminal justice aspect of PR, which encompasses incarcerated addicts and those on parole or probation, relies on effective cooperation with professionals in that field. As mentioned above, reentry courts may contribute to increased numbers of addicts in meetings. Building and maintaining cooperative relationships with professionals in criminal justice is one of the first steps in welcoming these potential members to NA. In an effort to support members who provide services to incarcerated addicts, we have resources such as *H&I Basics* and Chapter Six in the *Public Relations Handbook*, "Criminal Justice." We also have a publication for incarcerated addicts, *Reaching Out*, which has implemented improvements based on suggestions from a workgroup and supported by the board. Online subscriptions grew from 5,221 to 9,109, and paper copies by mail total 10,871. This periodical is a resource that can be used in public relations work, as it gives professionals a chance to read that members who heard the message of recovery "on the inside" are staying clean and becoming productive members "on the outside."



NAWS Membership Survey

At each world convention since 1996, we have distributed a membership survey, and more recently we have also offered it online for members who did not attend the convention. We distributed surveys to attendees at the Friday evening speaker meeting at WCNA 34 in San Diego, in September 2011, and made it available online through 31 January 2012. We had the largest number of respondents ever—17,492. The surveys returned certainly bury the myth that there is no recovery in NA, as the average length of cleantime among respondents was 10.87 years. No drug came out as a clear-cut main drug of use, but the top two (within a percentage point of each other) were stimulants and opiates, and this statistic actually is similar to those found in a recent UN report on drug abuse. In this survey we also asked about medication use, and 47% of those who responded to the survey stated they had taken medications for health maintenance and mental health issues. We have the 2010 *In Times of Illness* for member support and the *SP NA Groups and Medication* for group support. Even though we as a fellowship have no opinion on outside issues, the issue of medication tends to spurn members' comments. As a fellowship, we are aging, which is a factor that may contribute to an increase in health issues. NA's newest piece of recovery literature, *Living Clean: The Journey Continues*, offers life experience as we continue in our recovery.



The *Membership Survey* also illustrated that members experience marked improvement with family relationships, social connectedness, stable housing, and employment. Most professionals realize that using addicts do not function in society particularly well, yet they are more interested in how we have improved to become productive, contributing members of society. The *Membership Survey* is a resource for public relations efforts; professionals in the fields of treatment, government, healthcare, and criminal justice are keen on the facts in the survey as it provides them with information about NA in an unbiased manner.

Member Survey

The NAWS Membership Survey was validated through the member survey which was administered by NA members at the group level in the states of Pennsylvania and Florida and in Los Angeles County. This was the cooperative venture with an independent, nonaddict physician researcher. The member survey mirrored the results of the *Membership Survey*. Most professionals want to be assured of the reliability of data they are presented with, and this independent member survey, which validates our own NAWS *Membership Survey*, helps provide that assurance. Our desire to form cooperative relationships with researchers is not new, and in fact the perceived benefits of doing so were even highlighted in the *Public Relations Handbook* when it was approved at WSC 2006. This researcher's outcomes will be published in a medical journal in the near future. This cooperative effort is a first for NA—a nonaddict physician researcher reporting about the Fellowship of Narcotics Anonymous to his peers in the medical field. This action may help raise the credibility of NA in the eyes of the medical community. With the continued medicalization of addiction treatment, these types of cooperative relationships with physicians who are familiar with NA's effectiveness will be vital to the continued growth of NA worldwide.

Every NA member,
inspired by the gift of
recovery, experiences
spiritual growth and
fulfillment through service.