



**Spiritual Transformations/Epiphanies in Conjunction
with Participation in SMART Recovery,
a Secular Mutual Aid Recovery Program
Aha! Moments & Secular Conversion Experiences**

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Part 1



SMART Recovery

- Meetings are facilitated by trained personnel, almost all volunteer peers.
- The SMART Recovery 4-point Program® is based mainly on CBT/REBT, Motivational Interviewing, Motivational Enhancement Theory and uses a Stages of Change format.
- The meeting style is interactive.
- There is no animus towards use of prescribed medications to aid in recovery.
- Facilitators and participants are encouraged to avoid stigmatizing language.
- People with any sort of addiction, substance or behavioral are invited to participate in meetings.



The SMART Recovery 4-Point Program is:

Self Management Addiction Recovery Training

Evidence-
based

Self-
empowering

Abstinence-
oriented

Crux of the Program

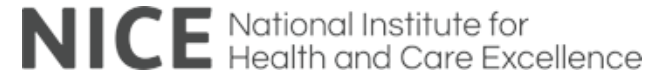
We want to help people clarify their thinking, so they can make better decisions for themselves



SMART Recovery is

A 501(c)3 organization with 2,800+ mutual-aid groups in 40 countries

Program has been endorsed by NIDA, NIAAA, ASAM, SAMHSA, NADCP, EAPA, NICE, ACHCQR, AAFP



Australian Government
National Health and Medical Research Council



**Public Health
England**



Australian Government
Department of Health and Ageing

Platonic vs. Aristotelian



Platonic

- Spiritual/Religious
- Locus of Control
-external
- Didactic
- Declaration of Independence
- Authoritative
- Powerlessness
- Traditional

Aristotelian

- Empiric
- Locus of control
-internal
- Interactive
- Constitution
- Self-empowering
- Innovative

SMART Recovery 4-Point Program[®]

1. Enhancing Motivation to Change
2. Coping with Urges
3. Managing Thoughts, Feelings and Behaviors using CBT Tools
4. Lifestyle Balance (emphasizing enduring satisfactions rather than immediate gratification)

SMART Recovery International, Inc. (501c3)

1200 Weekly SMART meetings hosted in **38** countries:

UK 500; Australia 340; Canada, 230; Ireland 40, Denmark 20

SMART Recovery Handbook, 4th Edition: Now available in English and Spanish. 3rd Edition: published in 16 languages. Latest: Haitian Creole, Russian, Japanese

Cross-cultural applicability: Meetings in Malaysia, Iran, Indonesia, India, China, Japan, Korea, Native American, First Nation, Alaskan Native, Aboriginal sites, prisons, jails, homeless shelters

Materials: 4th grade to 8th grade readability

SMART Recovery Meetings



**THINGS YOU WON'T HEAR
AT A SMART RECOVERY
MEETING**

Things You **Won't** Hear at a **SMART** Recovery Meeting



- Terms such as “alcoholic” or “addict”. Labeling is generally pejorative, stigmatizing and demeaning.
- People being told what to do. Style of meetings is consistent with Motivational Interviewing approach.

Things You **Won't** Hear at a **SMART** Recovery Meeting, Continued

- Arguments about whether addictions are diseases, disorders, behavioral maladaptations or learning disorders
- Shaming of people who report lapses and/or relapses.
- Chip delivery or removal



Things You **Won't** Hear at a **SMART** Recovery Meeting, Continued



- Dismissive, demeaning or disruptive comments about use of FDA-authorized prescribed medications, including opiate agonist medications such as methadone or buprenorphine, as aids to recovery from an addiction or co-occurring disorder.

Things You **Won't** Hear at a **SMART** Recovery Meeting, Continued



- Sponsors
- 100 people at a meeting
- Group prayers
- Permanent attendees
- Only one type of addiction represented

THINGS YOU **WILL** HEAR AT A SMART MEETING

Things You **Will** Hear at a **SMART** Meeting

A Standard Meeting Format



Things You **Will** Hear at a **SMART** Meeting, Continued

Confidentiality stressed

Supportive and empathic ethos

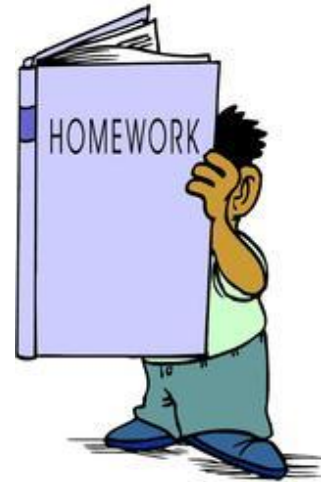


Things You **Will** Hear at a **SMART** Meeting, Continued

- Facilitator trained in SMART 4-Point Program, Motivational Interviewing, and Meeting Management
- Facilitator often graduate of the SMART Program
- Occasionally, someone without an addiction background or professional
- **70%** trainees are professionals or students training to be professionals (meetings in facilities)

Things You **Will** Hear at a **SMART** Meeting, Continued

- Tools demonstrated on whiteboard or flipchart. Some are for individuals, some for the group.
- Crosstalk
- Group size up to **15** for a **90-**minute meeting. (If larger, we try to split them.)
- Some groups occasionally end a meeting with a meditative exercise.
- Homework assignments



Online Facilitator Training Program

ONLINE
TRAINING



- Approximately **300** trainees per month.
- Most facilitators had already been in a SMART meeting for about 6 months
- Web-based facilitator training can provide **10 NAADAC CEUs**
- On-Site or Zoom 2-day professional training for groups of 10 or more provides **14 CEUs**

Family & Friends (F&F) Meetings

- Evidence-based with **CRAFT** (Community Reinforcement And Family Training)
- Support for loved ones of those with addictions
- About **60** meetings in place
- Facilitator Manual and F&F Handbook available



Correctional Program: InsideOut®

The SMART Recovery Suite of Correctional Materials is based on the InsideOut Program, which was developed with a grant from NIDA.

It now consists of materials for prisons, jails, reentry programs and courts.

In use throughout the world.

Supported by a propensity-controlled study on 6000 inmates with addictions in Australian prisons, demonstrated a 41% reduction in reconvictions for violent crimes after release.

Largest controlled study of addicted inmates.



Part 2

Aha! Moments & Secular Conversion Experiences

Bill W's Spiritual Transformation



Most people involved in the recovery treatment field or the recovery community are aware of Alcoholics Anonymous (AA) founder Bill Wilson's personal experience with a dramatic recovery from his alcoholism, his self-described "spiritual transformation."

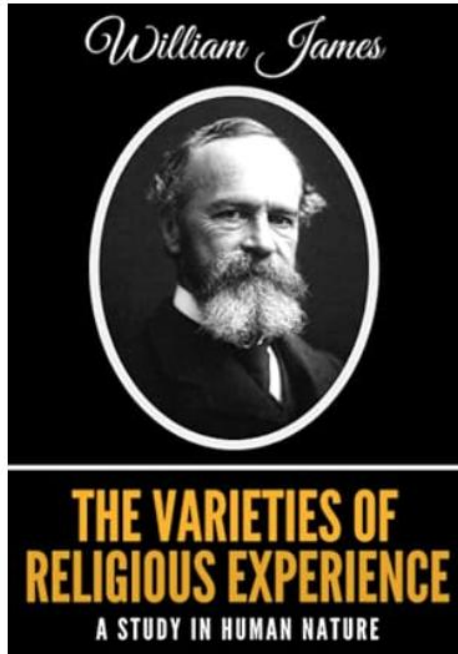


AA's Big Book contains many examples of similar experiences in recovery.



There have been numerous studies directed towards understanding the degree of importance of "spirituality" in the induction of recovery of AA members.

Varieties of Religious Experience



The book “Varieties of Religious Experience” was published by Harvard’s first Professor of Psychology, William James in 1903, and is still in print!

This anecdote within, was apparently known to Bill Wilson:

"I was effectively cured of all inclination to that sin [drunkenness] I was so strongly addicted so that I thought nothing but shooting me through the head could have cured me of it; and all desire and inclination was removed entirely...nor did the temptation return to this day."

Secular Experiences



I was surprised, in 1991, to hear a SMART Recovery participant relate a similar experience after attending his first SMART Recovery meeting, since SMART Recovery is science-based and secular.



I have since accumulated a series of **53** such episodes from SMART meeting attendees and presentations at conferences, which have a characteristic format



A sudden, dramatic, rapturous, ecstatic emotional component; a conviction that the addiction is over; total absence of urges or interest in the addictive substance after; a more tranquil and comfortable self-acceptance; a more positive worldview

SMART Recovery Studies

Studies

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graph LR; A[Studies] --- B[One demonstrated that religious participants and non-religious participants achieved about the same degree of abstinence]; A --- C[Another demonstrated that SMART participants indicated much more internal locus of control than AA participant];
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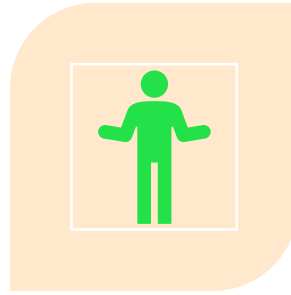
One demonstrated that religious participants and non-religious participants achieved about the same degree of abstinence

Another demonstrated that SMART participants indicated much more internal locus of control than AA participant

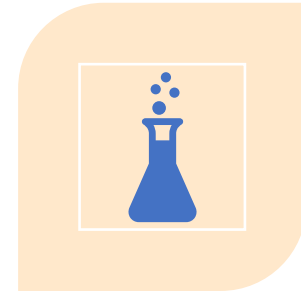
AHA! Moments



Defined as "A moment of sudden realization, inspiration, insight, recognition or comprehension." (Merriam-Webster Dictionary).



There is also a related, but less drastic and more overtly cognitive or intellectual phenomenon, best described as an "AHA! Moment":



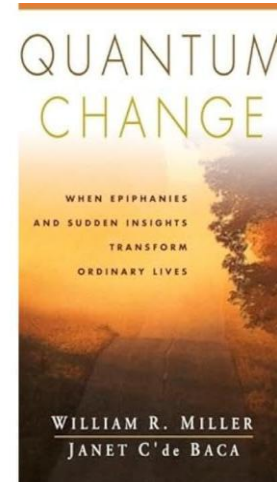
Sometimes referred to as a "Eureka! Moment."

Quantum Change

A chance encounter with Professor William Miller, an originator of Motivational Interviewing, led to a recognition of similarity with the condition he calls “Quantum Change” and defines as:

"Sudden dramatic and enduring transformations that affect a broad range of cognition, emotion and behavior.

This type of phenomenon has been described in the current vogue as a “Unitive Experience.”



Insight Types

Although notorious in a religious context, these types of experiences are not rare in the addiction arena nor in ordinary life. When William Miller and his co-author sought subjects with similar experiences via newspaper ads in Albuquerque, NM, **123** people fronted up, anxious to describe their experiences in a broad variety of contexts.



He wrote a book on this subject,: Quantum Change: When Epiphanies & Sudden Insights Transform Ordinary Lives, published in 2001 The book deals with a wide range of transformation phenomena, not just experiences related to addictions. Few of these had a religious component.



The authors described the AHA! Moment type of experiences as “Insight Type” and the conversion experience modality as “Mystical Type,” coinciding with my categorizations.

Characteristics

After this observation, I was sensitized to this type of experience and began to note such episodes when they came to my attention in meetings. I gradually became aware of some cardinal elements.



Intense sense of exhilaration or rapture, seldom reported to others, that occurred in conjunction with them.



Absence of urges subsequent to the epiphany, a distinctly unusual experience during the great majority of recoveries from addiction, especially in early phases.



New outlook on life, more positive, more tranquil, more focused.

Secular Conversion Experiences

Given the nature of the events described, I recognized the similarities with religious conversion experiences, as described by Saul/Paul on the road to Damascus, Teresa of Avila while praying, or Mother Teresa on a train to Darjeeling, as well as the experiences described by a number of authors of best-selling books. So, I named these phenomena, “secular conversion experiences.”

Only one person related his or her experience in any way to a religious event

Conversion experience with a 14-year follow-up: He perceived this not as a decision on his part but a revelation of a fact. Longest follow-up: 34 years.

I am aware of two brief lapses among the Aha! moment group and one occurrence of urges during a stressful situation, without relapse.

Secular Conversion Experiences, continued

From 1990 until 2026, I have heard **53** experiences which seem to satisfy the criteria I have enumerated for a “secular conversion experience.”

Three additional “transitional” experiences were related by people who claimed their epiphanies fell into an intermediate area between ecstasy and relief, perhaps best described as “mild elation” and would not budge towards either extreme.

Aha! Moments so far recorded number **251**

Predicates

About **85%** follow a distinct provocative event or situation, e.g., DUI or other legal encounter, waking up in an EU in 4-limb restraints, blackout, learning of abnormal liver tests, etc.

AHA! Moments

23 year-old woman with
an addiction to heroin
and the heroin lifestyle



AHA! Moments continued



A 32 year-
old repairman with AUD

AHA! Moments continued





Transitional type: 31 year-old casino hotel president with severe addiction to cocaine and cannabis.



Medical Analogues

Possible analogous clinical situations

Some brain functions change the synchronized activity of the brain suddenly without any clear provocation. In that category are falling asleep, waking up, moving from the Dream State to the Sleep State (as seen on EEG) and the reverse.

-  Meditation
-  Post-Traumatic Stress Disorder
-  Temporal Lobe Epilepsy
-  Near Death and Out of Body Experiences

Medical Analogues continued



Electroconvulsive (Shock) Therapy



Ketamine Injection (or inhalation)



Hallucinogenic Drug Exposure: Psilocybin, LSD, Ibogaine, etc.



Hypnotism



Peak Experiences: Maslow and Self-Actualization

Medical Analogues continued



Post-Traumatic Delayed Recall of Sexual Abuse



Mammalian Birth Bonding



Hypnagogic and Hypnopompic Hallucination
and/or Paralysis

Bibliography

Bill White and Rita Chaney: Over **100** articles and scientific papers

SMART Recovery Bibliography
(January 2017)

Compiled by Rita Chaney and William White
(with assistance from Dr. Joe Gerstein, Dr. F. Michler Bishop,
Dr. Tom Horvath, & Shari Allwood)

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THANK YOU!

For more information:
www.smartrecovery.org

Meeting List:
<https://meetings.smartrecovery.org/meetings/>

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