

## HEALTHCARE

**H**ealthcare may be a new term and a new service opportunity for some NA members, but many members have found Narcotics Anonymous because of a recommendation made by a professional in the healthcare field. Healthcare settings such as public health clinics and physicians' offices are opportunities for us to further educate healthcare professionals about how NA can help addicts. Our public relations efforts in these settings will benefit from clearly identified goals as well as training and preparation tailored for each project.

This chapter contains specific suggestions for building relationships in various healthcare settings. This includes ideas for training and preparing trusted servants as well as suggestions for how to interact **with healthcare professionals, hospitals, and various healthcare organizations.**

### Core public relations principles

*This section is excerpted from Chapter Two.*

#### Cooperation, not affiliation

*A big part of our credibility comes from the fact that we maintain our single focus of recovery from addiction. We can be seen as credible, and we can be present in an organization's decision making, but the only way we can be drawn into public controversy is if we offer an opinion on an issue outside the scope of our own program. If a facility wants us to endorse or lend our name to its program, or an organization requests our support on*

*a piece of legislation, we refrain. If we become involved in an outside organization's decision-making process, such as sitting on a board for a nonprofit agency as a representative of NA, we offer no opinion on the organization's business practices. We do not take sides on an outside issue, and we do not put NA at risk or compromise the clarity of our message. If we took one side or another on a legal issue or a medical practice, we would undermine our credibility and our primary purpose. We work to avoid being identified as taking any side or giving an opinion in a controversy. We stay focused only on how we can help those suffering from addiction. This focus allows us to build relationships where our role is clear and free of controversy.*

#### Key topics

**Core PR principles**

**PR & healthcare**


**Planning & preparation for areas & committees**

**Putting your plan into action**


**Discussing & addressing known challenges in healthcare settings**

**Resources**


#### Key icons


-  Practical experience

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-  Preparation and training tips

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-  PR principles for discussion

-  How can NA benefit from forming cooperative relationships with healthcare professionals?

### 📖 When does a cooperative relationship become affiliation?

*Our experience has shown that we have many nonaddict friends who can advocate for NA. If a professional wants to support NA by sharing about the effectiveness of our program, they are free to do that. What we can do is try to ensure that the nonmember's enthusiasm for our program doesn't misrepresent the addict-to-addict nature of our program. NA is not a program where professionals treat addicts, although professionals often want to advocate for NA's viability because they have seen recovery working for their clients or loved ones. The role of the local service body in a situation like this is crucial. The NA community can provide training and establish accountability with the nonmember supporter; this way the nonmember supporter can become an asset to NA in fulfilling its primary purpose.*

### 📖 How can areas avoid affiliation (or the appearance of affiliation) when working with healthcare professionals?

### 📖 What actions can an area take when working with nonaddicts friends of NA?

## **Communication**

*Communication is a two-way street. We strive to be effective, honest, open, consistent, and straightforward in our communications. We keep channels of communication open with those we are trying to reach in the public sphere. Communication is not just feedback. It is listening, accepting constructive criticism, and asking questions. Communication is verbal and non-verbal, written and oral, and it affects all of our public relationships. Good communication means listening to a member of the public after we have had an initial interaction. It is the quality of our correspondences and our awareness of various cultural environments.*

### 📖 How can we demonstrate integrity in our communications for healthcare audiences?

### 📖 What does an area need to carefully consider in order to communicate more effectively?

## **Public relations and healthcare**

Our public relations efforts in healthcare settings should strive to be focused and planned. Clearly defined goals can help to focus and clarify the actions that need to be taken to make a project successful. Healthcare professionals tend to respond to information that is easy to access and that highlights practical outcomes. Each audience may require different approaches and different types of information about NA. The following information can help area service committees create and maintain strong relationships with professionals in the healthcare field.

## **Planning and preparation for areas and committees**

### **Coordinating services**

There are a variety of ways to coordinate NA services in healthcare settings. A committee may work together on specific healthcare projects, or it may select one or more trusted servants to carry out a specific project. Trusted servants should have the skills (such as communication) and necessary training to make projects successful. These trusted servants may be responsible for regularly providing literature in a medical walk-in facility, bringing an NA meeting to an inpatient detox unit, or working on forming a more interactive relationship with healthcare professionals. The principle of accountability is important.

Trusted servants should always be accountable to a committee. If there is not an area service committee, then service efforts need to be the effort of one or more NA groups. The area is free to structure services in a way that work toward meeting the area's goals.

**F**or each responsibility assigned to the service structure, a single point of decision and accountability should be clearly defined.

*Twelve Concepts for NA Service*

## **Committee preparation**

- 📄 The committee should prioritize and plan the order in which they will interact with healthcare professionals (see Chapter Three for details about how to plan and prioritize services). Trusted servants may choose to first work on a relationship with an emergency department; this could include providing information such as meeting schedules, informational pamphlets, and posters. The committee might then decide, based on their prioritized projects, to give presentations to hospital social workers or begin providing information about NA to pharmacists in the community.
- 📄 The committee defines the goal or purpose of each project. Defining the purpose of these relationships can help trusted servants have a clearer sense about the goals of their interactions. A committee's goal might be to simply introduce NA to those professionals who discharge patients in a hospital setting; another could be to form relationships with local physicians by giving a presentation and providing a regular supply of NA literature, such as informational pamphlets and meeting directories.
- 📄 The area can research various healthcare settings to find out who seems to be the best contact person in each setting, when to contact them, and the best way to reach them. This could be through either an email, a face-to-face meeting, or a telephone call. Many NA members are also healthcare providers and can provide valuable contact information.
- 📄 Clear, relevant, and concise information is likely to be more valuable in all PR settings, especially healthcare. Committees can create handouts and displays that are tailored to the specific audience. Healthcare professionals (such as nurses and physicians) often have limited time to spare. A single page of information about NA in the community, including reliable contact numbers other than the NA phonenumber, may work best in these situations.
- 📄 Be sure that trusted servants follow up on each interaction. Sending a letter or an email or making a phone call can be the beginning of an ongoing relationship with those who work in healthcare settings.
- 📄 The committee can consider matching trusted servants with each audience. Members need to be informed and trained. Members who are unable to separate their personal opinions about issues that are likely to come up in a healthcare setting, such as medication, may not be best suited to interact with certain healthcare audiences on behalf of NA.

## Training and preparing trusted servants

- ✎ Trusted servants should have information about the healthcare settings they will be entering. Researching the profession or philosophies of an audience can help members anticipate questions and communicate more effectively. (See Chapter Four for details about research and presentations).
- ✎ Trusted servants should be trained to interact in the various healthcare settings that exist in their community. Training guidelines could include updating all healthcare audiences with current NA contact information, as well as ways to respond to a variety of requests made by healthcare professionals. Each healthcare setting is different; training can be tailored toward the specific circumstances, concerns, and needs of the various settings.
- ✎ Trusted servants should be trained to use clear and concise language. This means that presenters avoid using NA jargon or slang. A committee may invite an NA member who is also a healthcare professional or someone who understands the healthcare profession, to give a presentation. We are more likely to reach an audience when we are familiar with their practices and philosophies.
- ✎ The area may want to identify particular qualities of an ideal trusted servant for healthcare settings. The ability to communicate articulately, presentation skills, experience in NA, and the ability to demonstrate recovery are some examples of essential qualities for providing service in healthcare settings. Committees can also review the Fourth Concept when identifying the ideal qualities of a trusted servant.
- ✎ Practicing a presentation for a nonaddict audience familiar with healthcare practices can help trusted servants improve the effectiveness of the presentation.
- ✎ Many facilities require volunteers to attend an orientation session. Trusted servants should be prepared to attend one of these sessions if required by the facility. It is

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becoming more and more common for facilities to require volunteers to attend these kinds of orientations.

- ✎ Healthcare professionals understand medical models. Trusted servants need to be trained to describe NA’s approach as an abstinence-based program of recovery. Members can educate professionals about our program’s philosophy of complete abstinence using NA literature (such as the *Am I an Addict?* IP) and relevant materials created by the committee. Members can explain to physicians that NA views addiction as an illness and that we see this illness as affecting addicts physically, emotionally, and spiritually. Trusted servants can also explain that NA is a comprehensive, peer-support recovery strategy that allows many members to lead more productive lives.
- ✎ When explaining why NA is not a drug-replacement program, trusted servants can rely on NA literature. (As an additional resource, see Chapter Seven’s discussion of drug replacement.)
- ✎ *NA: A Resource in Your Community* and the *NA Membership Survey* can be useful tools in healthcare settings. Trusted servants can order these materials by contacting NA World Services.

## Putting your plan into action

### Interacting with healthcare professionals

Healthcare professionals can include **physicians, psychiatrists, psychologists, psychotherapists, pharmacists, dentists,** and **nursing** professionals.

- 📄 The area service committee may consider hosting a public relations roundtable with healthcare professionals. These roundtables can be an opportunity for local areas to exchange information with healthcare professionals and can allow professionals to identify what they need from NA. Trusted servants can also use these roundtable discussions to dispel stereotypes about the NA program.
- 📄 Trusted servants can educate healthcare professionals about NA's successes. Providing statistics on the number of members around the world, the different countries where NA meetings are held, and the diversity of NA's membership (such as the economic, racial, and professional range in members) is likely to be particularly meaningful in healthcare settings. Professionals are often interested in outcomes. NA's membership survey can be used as support material.
- 📄 Trusted servants have an opportunity to share with medical professionals that NA is a program of complete abstinence and that our members often have special concerns about physicians prescribing potentially risky medications. At the same time, trusted servants can educate NA members that it is inappropriate to interfere with medication that has been prescribed to other members by healthcare providers. We can educate our members about the dangers of substituting one drug for another and we can educate the medical community about complete abstinence, but ultimately this is an issue between doctor and patient.
- 📄 Healthcare professionals such as physicians and dentists interact with a variety of people who use drugs. Following a presentation, trusted servants could suggest that physicians provide patients who they think may have a drug problem with the pamphlet *Am I an Addict?* Trusted servants could explain that the questions contained in that pamphlet are the questions members ask themselves when first coming to NA.
- 📄 Trusted servants can be trained to dispel myths about NA's name. Survey information outlining the range of drugs used by NA members can illustrate that NA is not just for those addicted to narcotics like heroin.

### Discussing and addressing known challenges in healthcare settings

#### Harm reduction

Harm reduction is a treatment approach that may not promote abstinence yet claims to reduce harm to the individual and the community. NA is a resource that can be utilized within many treatment regimens and complements many professional treatment models. NA has no opinion on the effectiveness or validity of a specific model such as harm reduction. If requested, members can explain that NA is not in conflict or competition with approaches like harm reduction. Public health officials will often use statistical data to support various treatment models, including harm reduction. Trusted servants can explain that NA does not have statistical data that has been researched. Rather, NA uses self-reported information that is represented in the NA Membership Survey. Some areas and

regions have conducted research that shows members getting jobs, returning to school, and no longer committing crimes. This research is a valuable tool that can demonstrate the positive effect NA has in many communities.

## Interacting in hospitals

Hospitals contain a variety of healthcare audiences. Some of these audiences include **medical detox units, emergency departments, psychiatric units, walk-in medical clinics** (such as urgent care), and **behavioral health** and **social service departments**.

- 📄 Hospitals can be a good opportunity to reach members of the community, including family members and friends of addicts. One level of interaction in this setting may be forming a relationship with emergency room staff so that trusted servants can place NA posters and meeting schedules where people from the community are likely to see them in times of urgent need.
- 📄 The format of meetings held in hospitals will vary depending on the unit. Clients in a behavioral health department, where there may be inpatient drug treatment units, may benefit from getting a sense of what a typical NA meeting is like through the use of a speaker meeting or a *Just for Today* meeting format. A meeting in a psychiatric unit, where clients usually have shorter attention spans, needs to be extremely structured to limit participation.

### NA meetings in healthcare settings

In healthcare settings, there are two kinds of NA meetings: meetings that are for clients only and do not usually collect a Seventh Tradition, and meetings that are simply held at the healthcare facility and function like any other NA meeting. If a committee has decided to bring a meeting to a healthcare setting, such as an inpatient drug treatment unit, they need to

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consider the needs of the audience. The meeting format can be modified so it is appropriate for those attending, such as patients who may have a shorter attention span. Hospital detoxification units and residential hospital programs will benefit from formats structured in different ways. A detox unit may benefit from a speaker meeting or an informational meeting, whereas a residential hospital treatment program may benefit from a structured participation format. Trusted servants should also keep in mind that staff may be in attendance at meetings. Trusted servants can communicate regularly with staff to clarify the day, time, and meeting format. The committee can discuss

benefits and drawbacks of open and closed meetings with staff before deciding what would be best for the patients. Trusted servants can offer a limited supply of NA literature and inform a hospital unit that additional NA literature is available for purchase.

## Interacting with healthcare organizations

Healthcare organizations such as allied health (which includes medical assistants, nurses aides, and emergency technicians), Health Maintenance Organizations (HMOs), and professional medical associations (such as medical schools, associations for pharmacists, anesthesiologists, chemical dependency nurses, and social workers) are great opportunities for NA members to provide information about NA and build relationships.

- 📄 A committee may have prioritized an event or informational workshop for healthcare professionals. (See Chapter Four for details about giving presentations). Trusted servants should be sure to create formats and materials based on the specific audience.
- 📄 Many communities have local health fairs or healthcare provider forums. These events are excellent opportunities for area service committees to provide information to the community in a booth exhibit (see Chapter Four for details about exhibits and presentations). It also gives trusted servants a chance to network with healthcare providers who may come into regular contact with potential NA members.

Because healthcare professionals regularly interact with addicts, it is important for us to begin forming and maintaining cooperative relationships. Building relationships with healthcare professionals may be new for many of us. These relationships are another valuable way for us to carry NA's message of recovery to potential members.

## **Resources**

- List of possible healthcare projects
- Handout targeted for healthcare audiences
- FAQs for a healthcare audience