

THE SELF STORY

Right from the start SELF strove to be a learning organization. Across the years it was never content with the status quo and endeavored to keep current with developments in the field of recovery and counseling. Its watchwords were innovation and reinventing oneself or, in TC language, “Personal growth before vested status.” With these the Foundation invested in staff development, funding the attendance of key personnel in selected training seminars and workshops. It also engaged the services of helping professionals as consultants. All these had one end in mind – to develop the best possible TC program and thereby provide residents with the best possible care.

THE SELF WAY

TC By Experience

Following the spiritual awakening he experienced while undergoing detox in a hospital, Martin became passionate about his own recovery process. When he transferred to a TC he was determined to make the best of it. Not only did he eagerly participate in his recovery process, he also became concerned with helping others similarly situated. Thus, even while he was still a resident, Martin became instrumental in developing the program of the TC he was attending.

With the help of his program director who trained in DAYTOP, Martin quickly gained insights into the workings of the TC. With this understanding of the whys and hows, he began setting up disciplines and practices in the program that addressed the needs of fellow recovering addicts.

When Martin assumed the overall leadership of the Foundation in December 1992, SELF became the first TC to be fully headed and run by a recovering drug addict. By fine tuning the practices that he himself had experienced, Martin continued developing the SELF TC through its beginning years. His primary criterion? What would best



benefit residents. His paramount lesson? Sharing his life openly and honestly and encouraging residents to do the same. His best practice? Anything he would require residents to do, he did first.

Martin did not remain content with the program he learned from his own recovery process. True to SELF's founding philosophy, he took the lead in pursuing a continuing program of self development. He attended courses in counseling, coaching, and group processes and provided opportunities for staff members to do the same.



Given his background of technical skills and its associated work ethic, he saw the value of providing residents with life skills. As early as 1994 Martin introduced music and theater arts in the SELF program to instill discipline, develop confidence, and raise the self esteem of his residents. And, since Martin led by example, he was first to sing, dance, and act on stage. This proved to be such a success that it has become an important part of SELF's overall approach to treatment and rehabilitation.

Developing the TC

SELF soon grew and Martin continued to nurture the growth and development of SELF as a learning organization. From 1997 to 1999 SELF took on the services of Harald Waesch, a German national who was himself a recovering heroin addict and a trained psychologist and psychotherapist. Harald brought with him fresh insights on the TC. During his three-year stay, SELF experienced steady growth as a healing community, as program practices and processes became more settled and methodical. One major highlight of his stay was the establishment of the Aftercare program, through which graduates were given extended guidance and support that significantly supported their continuing sobriety.

SELF was also fortunate that around that time DAYTOP, a principal exponent of the TC approach, had began actively disseminating the modality to rehab operators in Asia. Martin was quick to take advantage of this and he brought senior staff members with him to numerous seminars and workshops conducted in that period. Thus SELF became more attuned to the TC principles and practices.

One of the hallmarks of the SELF TC is its insistence that a resident's family participate in the healing process. SELF formally established its Family Program in 1995. This largely involved running seminars and workshops in the monthly Family Association Meetings to help the families understand the TC better.

An important result of this was a wider understanding and acceptance of the need to address codependency together with continuing care. Families became aware of their self-defeating attitudes and the need to undergo their own process of emancipation from codependency.

SELF first shared the development of its Family Program in 1997 in both local and international forums. During that time there was much interest in **Aftercare** and SELF's advocacy of family involvement in the recovery process placed it on the map as one of the emerging TCs in Asia. SELF has continued to develop and refine its Family Program and it remains as one of the pillars of the SELF Way.



From 2000 to 2003 SELF engaged Conchita Umali PhD as a consulting psychologist. She helped provide a better understanding of the process of addiction and recovery. In addition, she was a regular contributor to The SELF Journal where her articles provided readers with cognitive handles that helped them deal with the process their loved ones or they themselves were undergoing.

Her lasting legacy, however, is the Supervised Practicum and Internship Program (SPIP) that she formulated. Piloted in 2002 the program gave graduating residents a chance to avail of a continuum of care as it engaged them in training that promoted professional growth. This reinforced SELF's Aftercare program considerably. Today one out of three candidates for graduation choose to join the SPIP as a springboard to a professional career or successfully finishing school.

The Dawn of a New Era

In December 2003, 10 years after SELF's first reorganization, another crisis struck SELF. A number of senior officers and staff failing to take control over the organization left to establish their own rehabilitation center. This untoward development caused much pain and anguish and became a defining moment in Martin's professional growth. The growth and development of the organization that he had carefully nurtured over its first decade of existence was suddenly endangered. What to do?

Martin went back to basics. He returned to SELF's roots and placed the entire organization – head office, program, maintenance and security – under a unified chain of command and as Executive Director assumed direct control of one big house. He then challenged the head of the Admissions and Training to step up and assume the post of Deputy Executive Director. In no time did she become an effective Program Director under his tutelage.



The next six months were largely spent on rectifying the resulting disarray, and the first order of the day was to conduct a through review of the TC program. Hence, any policy, rule or practice had to meet three criteria in order to be retained. They had to be **Respectful, Logical and Practical**. Decade-old customs and procedures that did not conform to the new standards were discarded. In the process SELF succeeded in developing a new culture that would be “**Strict yet Caring**” – that is, strict but not abusive and caring but not enabling.



It was also this time that the new drug law RA 9165 came into effect and to keep operating SELF had to meet the stringent requirements set by the Department of Health (DOH), which had taken over the regulatory functions of the Dangerous Drugs Board. SELF accepted the challenge and put in months of meticulous work that included the submission of a comprehensive Manual of Operations. In October 2004 it received its **1st DOH Accreditation** as a residential treatment and rehabilitation center. SELF weathered the storm and emerged a stronger organization with a renewed commitment. The year 2004 became the dawn of a new era.

Dual Approach TC Program

The new era of SELF found Martin back on the floor, regrounding the program on the TC philosophy and eagerly pursuing further developments. TCs then were strictly drug free environments. Treatment was pursued without administering psychiatric medication. Martin, however, began to realize that many prospective clients had special needs that required a different approach. Apart from substance abuse they had co-occurring disorders (COD) or mental conditions that would require a regimen of medication. In order to be true to its vision and mission, SELF could not turn away such clients.

In 2006 SELF formally launched its **Dual Approach TC Program** and began to accept clients with COD. With this SELF began to engage residents with the behavior modification methods of the TC process complemented by clinical interventions that included medication.

To support this signal change SELF instituted the Clinical Department that was tasked to

screen admissions, formulate Individualized Treatment Plans, and to set up a **Case Management System** to track the progress of each resident.

A Pre-Admission Unit (now the Evaluation and Motivation Unit) was set up under the department to handle intake protocols and prepare prospects to join the TC. Here the facility physician conducts a medical checkup to determine whether prospects are physically fit for the rigors of the program. A consulting psychiatrist also undertakes a psychiatric assessment to establish a baseline profile of each prospect and recommend a course of medication if needed.

With the Dual Approach TC Program a more professional approach to treatment and rehabilitation was achieved. SELF shifted gears and appointed seasoned professionals to head the program. Graduate staff of the program now reported to these professionals while continuing to provide peer advice to the residents. From then on only professional case load staff could conduct counseling sessions.

SELF also began documenting all its program processes. A Manual of Operations prescribed the processes a resident could undergo, and everything a resident underwent would be documented and filed. In 2007 then Clinical Head Lyn Simbulan set up the infrastructure for **Systematic Case Management** as she completed the incorporation of all the clinical files into one case file per resident. Clinical case studies subsequently became a regular feature in **The SELF Journal**.



Coming of Age

As it marks its 20th founding anniversary SELF has made yet another major change in its program structure. Proceeding from a series of progressive program changes combined with the new needs arising from the unprecedented growth of its resident population, the SELF TC program has been divided into a Lower House and an Upper House. With this SELF has effectively made a clear separation between the treatment and rehabilitation stages in the overall recovery process.

The Lower House concentrates on helping residents successfully negotiate the “chain of command” and thereby regain their self-esteem and sense of responsibility. Through group processes and counseling sessions, they are able to work out their relationship issues from which stem their dependencies and negative behaviors.

In the Upper House the emphasis is on rehabilitation. Here, Pre-reentry join Reentry residents in the common endeavor of preparing to rejoin their families and society in general. They gain the freedom of making personal choices in a less structured environment but endure

the loss of power and prestige they enjoyed in the Lower House.

Manual of Operations 2012

In January 2012 SELF held its 3rd Operations Convention, a general assembly to review current systems and procedures. This ultimately led to a thorough revamp of the organization and the formulation a new **Manual of Operations** (MOP) over a period of six months. The 300-page publication now features Core Functions and Job Descriptions for the different operating departments, together with detailed protocols on how to run them. A major part of it is devoted to the new program structure of the Upper House and Lower House. With this, SELF's aspiration of becoming the TC Training Hub of Asia in the next 10 years, could be well supported.



The Trans-Disciplinary Committee

Another significant development is the establishment of the **Trans-Disciplinary Committee** (TDCOM) – a meeting whose main purpose is to ensure that the selection of sanctions or awards for a resident is determined transparently by a body composed of staff and residents from the various service departments that make up the SELF TC. The TDCOM is held everyday or as the need arises and is presided by the Program Director. Younger members of the TC who can provide useful inputs on the cases to be discussed are encouraged to participate. With this SELF lives out the TC dictum that prescribes “Community as Method”.



Rehabilitation & Beyond

SELF evolved from being a center that merely promoted recovery, to an institution that is concerned with improving the quality of life after treatment. We have been persistent in developing a sub-program that not only helps its members secure sobriety but also offers them a chance at reinventing themselves. Through an undergraduate program called the **Supervised Practicum and Internship Program** (SPIP), residents are trained to perform with excellence and Pride in Quality in preparation for their trial-filled journey outside the facility.

Through the SPIP program, these select individuals are trained to tackle multiple activities. They are taught how to churn out reports, accomplish clinical documentation and perform duties through a systematic administrative organization. Whatever the activity, the standard bar is raised to near perfect levels (and is adjusted according to an individual's mental and physiological capacity). It was observed that most residents have expressed wanting to be pushed towards excellence. For them, it is a good preparation for handling real-life crisis situations, difficult relationship problems, school assignments, work obligations or even the corruption of the world—without being defeated.

Amazingly, after some years of implementation, we noticed remarkable results in their pursued professional attainments. In the batches of 2004 through 2014, all the graduates that went back to school after treatment were able to attain academic excellence. More than 70% of them earned themselves a spot in the Dean's List of various prestigious colleges and universities.

The New Dream

SELF has always believed in sharing its blessings by giving back to the TC to which it owes its allegiance. Secure in the belief that we have developed the SELF TC program to a point that it deserves to be shared with the world, SELF began sharing its **Best Practices** to a few international TC practitioners from Asia in 2009. In 2012, in the very year it turned 20, the Department of Health (DOH) engaged the services of SELF to provide training in TC methods and practices to selected DOH field staff running rehab centers in various provinces.



In that same year, SELF out a new 10-year mission of becoming the **TC Training Hub of Asia**. John Lennon, an early advocate of peace and solidarity in our generation once said: “A dream you dream alone is but a dream. A dream you dream with others is reality.” All the dreams our founder dreamt for SELF have become a reality because of the family, friends and supporters who shared our dream.

When Fr. Lambertus Somar, president and founder of Kasih Mulia Foundation, visited SELF with his associates, they said they shared our dream and committed to a continuing partnership. This has inspired us greatly to keep on dreaming, and we wait for you out there to also share our dream.

Meanwhile, we rest our trust in God and thank Him for giving us the grace to remain faithful to our covenant. For in the end, it is what truly matters.