# **Authentic Leadership Programme**

A promising new programme for recovery from addiction and rehabilitation of offenders

Ву

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# **SUMMARY**

Holigral proposes that the Authentic Leadership Programme (ALP) is a new way of aiding personal recovery across a variety of conditions, including dysfunctional behaviours, desires, compulsions, obsessions and addictions. In this report, the author briefly reviews the rationale behind ALP, its key processes, and illustrates the results of taking part in the programme with three case studies. Outcomes suggest that ALP could be a powerful new tool for rehabilitating addicts and offenders. However, an extensive pilot study is required to explore the validity of the work.

The author's personal experience of attending an ALP retreat is reported and the implications for healing everyday life issues in individuals and within organisations are discussed.

### INTRODUCTION

### What is ALP?

ALP is usually delivered as a seven-day retreat (sometimes longer) where clients receive intensive coaching. The environment is conducive to helping people to understand their lives, what has happened to them, and why. The work takes place in a retreat because this environment minimises external influences and maximises the probability of personal change. It allows people to focus wholly on themselves and their recovery.

# The Background – a brief overview

The main innovation behind ALP has been the development of 4<sup>th</sup> and 5<sup>th</sup> generation Neuro-Linguistic Programming (NLP). The 1<sup>st</sup> – 3<sup>rd</sup> generation NLP proposed that people structure their reality through their senses or "submodalities". Every aspect of a person's psyche is represented in this way; each word has a specific location, space and set of associations. Creating a shift in a person's submodalities brings about a change in their thoughts, feelings, beliefs or behaviour (1).

Aspects of NLP acknowledged that emotions are held in layers, and these emotions finally end in a "core" state (2). However, Holigral has found that deeper structures exist (3). While changes in the surface layers are often only temporary, ALP works with the deeper structures that hold people's thoughts, feelings and behaviours in place, maximising the probability of permanent transformation.

# **How ALP works**

The ALP model proposed by Holigral takes the view that almost all behaviour is a signal from the past that is presenting itself for healing. The facilitators work WITH the symptoms by gently asking a simple set of questions that help people to come to right understanding of their life. This also has the effect of undoing the structures that hold their behaviours and symptoms in place. In this way, a person is able to become free of the behaviour, symptoms or problems.

ALP takes place in a group setting (making it cost-effective). However, people work on an individual basis, and there is no need to speak openly about their issues in front of others. They receive a high level of 1:1 facilitation and are asked not to comment on the other people's work.

Over the last three years over a hundred people have experienced the programme, so it has been well tested in the general population. Holigral has not run niche groups - people with mental problems, depression, anti-social behaviour and addictions have been included as part of normal groups.

### **How ALP works with addictions**

Holigral suggests that ALP can enable individuals to permanently transcend an addiction to the extent that a person is can take or leave a substance. They can choose to have a few drinks and then easily stop without the need for self-control because their mind and body are free of the addiction. ALP is said to navigate and release the structures that hold addiction in place, allowing a person to connect with the different aspects of themselves and heal the cause of the addiction. Once the underlying cause of addiction has been removed, a person no longer feels compelled to abuse a substance.

### **How ALP worked with the Author**

The author was invited by Holigral to take part in a seven-day retreat with a view to reporting on her experiences from a professional point of view.

I attended a seven-day retreat set in a monastery in Barcelona. The course appeared to be very unstructured – however, I now realise that it was in fact structured – and the facilitators go with whatever is on top of the delegates' system. At the start of the programme, I was asked to represent my life on A1 paper, however it suited me (e.g. writing about it or pictures or both). The rest of the week was spent exploring the aspects of my life using sets of "clean questions" provided by the facilitators.

I am a "normal" person who has an average amount of "scarring" from life, without addiction, serious depression or alcohol issues. The one thing I really wanted to address was coming to terms with the breakdown of my marriage in

2001. Since that time, I have tried Prozac, counselling, Cognitive Behavioural Therapy, Emotional Release Therapy, and various other "alternative therapies" to try to heal my issues around my divorce. However, nothing in the past had worked in releasing the emotional pain that I still felt.

By the end of the retreat, I can say that my pain had almost magically disappeared. I was able to spend a whole day with my ex-husband whilst driving our daughter to University, without any pain. I was filled with a sense of lightness and joy. Friends and clients alike commented on how "happy" I appeared, and even asked me if I were in love! Three weeks on from completing the ALP course, I have retained a deep sense of peace with my world.

As a psychologist, I can say that nothing I have come across so far, in terms of therapy, is this fast and this effective. For me, these techniques allowed my system to heal itself, creating a permanent positive change to how I felt about my life and indeed, about myself. The ALP techniques are deceptively simple, and I would go as far as saying that, in my professional opinion, they are truly groundbreaking.

### About the facilitators

The facilitators have all been through life's mill, overcoming major problems themselves. So they have an understanding of the place where the clients are coming from, helping to put them at ease. They are now normal people who are a peace with their world and enjoying life. Because they have worked on themselves they are able to facilitate more effectively. They are clear and able to work without projecting their own thoughts and feelings onto others.

#### How ALP is different

ALP can be seen as having advantages over other commonly used therapeutic programmes because:

 The programme is run with a full cross section of society - and everyone is treated equally, as a normal human being, each with their own particular suffering. By not separating but including, the delegates can de-label themselves better than on retreats solely for a particular group of symptoms. This is part of the healing process.

- The process is much faster than many other programmes such as counselling or psychotherapy, typically taking seven days rather than weeks, months or even years. It is therefore more cost-effective.
- It does not require people to revisit and relive trauma. Instead, it works by facilitating a person to navigate the structures that hold thoughts, feelings, beliefs and behaviours in place - allowing them to gently release. So ALP creates minimal additional stress.
- ALP works at a deeper level than other interventions such as Cognitive Behavioural Therapy (CBT) and NLP, with minimum intervention to a person's system. Both CBT and NLP use re-framing. These techniques are well meaning but often only produce temporary change. They also add more layers to the person's system that later need to be navigated to obtain permanent change. ALP works in a more permanent way by deconstructing the problematic aspect of the self.
- ALP is unique in that its processes create the conditions where there is a maximum probability that a person is able to make a permanent change. It is proposed that ALP can help people permanently transcend an addiction. This can be contrasted to the AA approach – once an addict, always an addict, and one drink will put them back on the road to ruin.

# **CASE STUDIES**

Three case studies are presented to show the results of taking part in ALP. The data was gathered retrospectively with opportunity sampling, using a semi-structured interview (see appendix I). Analysis of the responses showed that every person achieved a positive gain from attending the ALP retreat. Key examples are shown in the transcripts below.

A measure of emotional well being was taken (retrospectively) using a 10-point scale. 1 = low and 10 = high. The data shows that the participants felt they had made a substantial improvement (5 points on average) between the start and the finish of the retreat (see appendix II for raw data).

Table 1

Average emotional well being scores, before and after completing ALP

Before ALP	After ALP	Improvement
4	9	5

# Case study No.1

Male

Age: 46

For the reasons of confidentiality, this person will be known as "Andy".

### **History**

Andy was brought up in a dysfunctional family where he was subjected to physical threats and emotional abuse. He has a history of depression, anger, drug use and violently assaulting others whilst under the influence of alcohol. His problems became apparent at the age of 17 when he joined the Armed Forces, and found himself away from home for long periods of time. His mental health issues have continued throughout his adult life. When Andy came to ALP, he felt he had spent his whole life trying to relieve himself of anger and depression.

Interviewer: Describe your experience of being on the programme

Andy:

"I went from incomprehension and confusion about my life, the depression,

how and why things are the way they are - to comprehension and

understanding."

"Despair turned into hope."

"I changed where I was in relation to everything else – who I am, where I am,

what I believe to be true, the whys and wherefores. It put me in a new place

where I could begin to sort my life out."

**Interviewer:** What are the three biggest differences between the person you

were before the course and the person you are now?

Andy:

"I have gained a change in my understanding

I sense a different possibility for the future - I have a different sense of self

ALP has given me the tools and techniques to deal with problems."

**Author's note** 

After a lifetime of depression, this person has reported that his depression has

lifted and that he is now free of depression for the first time in 20 years.

Case study No. 2

Female

Age: 54

For reasons of confidentiality, this person will be known as "Flo".

**History** 

Flo has a history of severe physical and mental health problems, including

rheumatoid arthritis, bi-polar personality disorder, anxiety and panic attacks

and low self-esteem. In the past, she has self-harmed and been a drug user.

She had previously been in psychotherapy and had tried many other

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programmes without success. She came to ALP looking for the tools and

techniques that would enable her to cope with her life.

**Interviewer:** What are the three biggest differences between the person you

were before the course and the person you are now?

Flo:

"The black hole inside has completely gone."

"Absolutely no fear of depression or pain happening to me again – I feel I

have the tools and resources and the ability to deal with what happens.

Before Holigral, I would have become completely helpless and all fucked up.

Now I can look at something from a place of neutrality and this makes all the

difference to me being a well-functioning person. For example, when I am

depressed I am able to ask: What is my system trying to say to me? "

"I have a huge gain in confidence. I don't care what others say or think about

me, I am proud of myself."

**Author's Note:** Flo was on a high dose of oral morphine, Fentanyl patches

(pain killers) and sleeping tables in June 2008, following an operation.

Despite Flo's past history of drug dependency, she had no inclination to want

to carry on with the morphine, and reported that she was easily able to avoid

becoming physically or psychologically addicted.

Case study No. 3

Male

Age: 37

For the purpose of this report, this person will be known as "Luke".

**History** 

Luke comes from a dysfunctional family. His parents split-up when he was

four and he was raised by his mother until she re-married when he was nine.

Luke's mother had a lot of ill feeling towards his biological father, and there

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was no communication between Luke and father. At the age of 21, Luke recognised he was repeating family patterns, was unable to sustain long-term relationships, had outbursts of uncontrollable anger and was violent to his partners under the influence of alcohol. Luke came to ALP after having tried counselling and psychotherapy, without success. He wanted to be able to come to terms with his issues and change his behaviour.

**Interviewer**: What changes have occurred in your behaviour as a result of going on the programme?

### Luke:

Its impact is on every level
I am not angry
I am happy with who I am
Don't feel guilt from my childhood
I still have issues but have the tools and techniques to deal with them
My issues no longer control my life.

### **DISCUSSION**

What these case studies show, in a clear and consistent way, is that from a starting point of pain, anger, depression and confusion, each person has:

- Come to a place of acceptance and understanding about their lives
- No longer feels controlled or overwhelmed by feelings of low selfesteem, anger or depression
- Feels more positive about themselves, others, and their future
- Feels they have the tools and the techniques to cope with future issues.

Holigral predicts that once a person is released from the underlying cause of their problems (addictions, or compulsions), these behaviours no longer serve a purpose and a person becomes free of them. A person will no longer feel the compulsion to act in a dysfunctional way. This has huge implications for working with offenders and addicts, as well as individuals in the community.

This is how Flo (case study 2) summed it up in relation to addiction: "The route of all crisis and addiction is the shattered sense of self. When that is put back together, the addiction disappears – you don't need it as it doesn't serve a purpose – you don't have to get away from your reality – you have a whole sense of self".

# Social Context in the UK and the Opportunity

Re-offending rates have remained high in England and Wales for many years and reducing these rates is one of the government's crime reduction priorities (4). The latest figures from The Ministry of Justice Statistical Bulletins show that 38.7% of juveniles re-offend within a year (5), and 41.6% of adults re-offend. A 12.5% increase in the most serious offences was also reported (6). This suggests that improvements are required in national offending management systems (NOMS).

A report by the Home Office (7) identifies the factors that are associated with offending, including alcohol misuse (33% of offenders with a custodial

sentence), drug misuse (39%), emotional well being (38%), thinking and behavioural issues (59%) and relationships issues (42%). These issues also have wider implications for offenders - for example, they may affect prospects of employment (8). Holigral suggest that because of the fast and effective way the ALP retreat is able help people with many of the problems that are related to offending, it could be a highly efficient and cost effective way of reducing re-offending rates. Implementation with a group of offenders and subsequent evaluation will be required to determine the level of success.

The author's experience ALP indicates that the programme could be useful for healing everyday life issues in ordinary individuals. The implications are that ALP could be a new way forward in personal development and psychological health that be a can be worthwhile to both individuals and organisations, that have the foresight to recognise that their people are their most valuable resource.

### Recommendations

The author recommends a prospective study, including a control group, to evaluate the effectiveness of ALP as a proposed intervention for sufferers of addiction, offending, PTSD, depression and anxiety over a 12 month period.

Such a study, in order to maintain the Holigral conditions, would mix sufferers from these demographic groups with members of the general population. This means that a study conducted over several ALP's would be required in order to generate meaningful data for statistical analysis.

# CONCLUSION

In conclusion, it is recognised that offenders frequently exhibit a range of emotional, compulsive and addictive behaviours that are associated with reoffending.

In support of Holigral's proposals, it has been shown that ALP is helpful in creating the conditions for permanent change in a small group of people with these sorts of issues.

Therefore, it is proposed that ALP could be a promising new tool for rehabilitating addicts and offenders who want to change.

The experience of the author suggests that ALP could be of benefit both to ordinary individuals and to organisations within the community.

# REFERENCES

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# **APPENDIX 1: Case Study Interview Format**

Case no	ı								
Please y	ou capita	l letters	5						
Name _									
DOB _									
Telephor	ne								
Email _									
This info	rmation i	is for re	search	purpos	es and	is strict	ly confi	dential	l <b>.</b>
You will	not be id	entified	, ехсер	t by you	ır case	number	or pse	udonyr	n.
1. What i	ssues bro	ught yo	u to the	program	nme?				
2. Descri	be your ex	xperienc	ce of be	ing on th	ie progra	amme			
3. Have a	any chang	es occu	rred in y	your beh	aviour a	as a resu	ılt of goi	ng on t	he course?
4. How w course?	ould you	rate you	r sense	of emot	ional we	ell being	prior to	going	on the
1	2	3	4	5	6	7	8	9	10
Lov	N								High
5. How w course?	ould you	rate you	r sense	of emot	ional we	ell being	on com	npletinç	g the
1	2	3	4	5	6	7	8	9	10
Lov	W								High
	are the 3 nd the per				veen the	e person	you we	re befo	re the
7 What in	nnact if a	ny has	the Al F	made o	werall o	on the co	nurse of	vour life	27

# **APPENDIX II**

# Case study No.1

Male

Age: 46

For the reasons of confidentiality, this person will be known as "Andy".

# **History**

Andy was brought up in a dysfunctional family where he was subjected to physical threats and emotional abuse. He has a history of depression, anger, drug use and violently assorting others whiles under the influence of alcohol. His problems became apparent at the age of 17 when he joined the Armed Forces, and found himself away from home for long periods of time. His mental health issues have continued throughout his adult life. When Andy came to ALP, he felt he had spent his whole life trying to relieve himself of anger and depression.

Interviewer: Describe your experience of being on the programme

# Andy:

I went from incomprehension and confusion about my life, the depression, how and why things are the way they are - to comprehension and understanding.

Despair turned into hope.

I changed where I was in relation to everything else – who I am, where I am, what I believe to be true, the whys and wherefores. It put me in a new place where I could begin to sort my life out.

**Interviewer**: What changes have occurred in your behaviour as a result of your going on the programme?

# Andy:

More accepting of other people and myself Affects the way I behave towards others I see myself on a path or a journey, as opposed to being a victim of

circumstance. So I am better able to be responsible for who I am and what I

do and say and take responsibility when I behave badly. I feel both shame

and compassion for my self – so I take responsibly, but don't condemn myself.

**Interviewer:** What are the 3 biggest differences between the person you were

before the course and the person you are now?

Andy:

I have gained a change in my understanding

I sense a different possibility for the future - I have a different sense of self.

Holigral has given me the tools and techniques to deal with problems

Emotional well being score prior to ALP = 4

Emotional well being score on completion of ALP =7

Case study No. 2

Female

Age: 54

For reasons of confidentiality, this person will be known as "Flow".

**History** 

Flow has a history of severe physical and mental health problems, including

rheumatoid arthritis, bi-polar personality disorder, anxiety and panic attacks

and low self-esteem. In the past, she has self-harmed and been a drug user.

She had previously been in psychotherapy and had tried many other

programmes without success. She came to ALP looking for the tools and

techniques that would enable her to cope with her life.

**Interviewer**: Describe your experience of being on the programme

Flow:

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The changes were massive. I can now communicate with my own system and understand what's happening with me – where it's coming from, the past or the present. I can see the big picture. I understand that what I am feeling is not always about me – I can now separate what is my issue and what is someone else's issue.

**Interviewer**: What changes have occurred in your behaviour as a result of your going on the programme?

#### Flow:

Whatever happens, I'm confident that I have the tools and resources to get through it

I have compassion and self-love

A clear sense of self, inner peace and contentment

**Interviewer:** What are the 3 biggest differences between the person you were before the course and the person you are now?

#### Flow:

The black hole inside has completely gone

Absolutely no fear of depression or pain happening to me again – I feel I have the tools and resources and the ability to deal with what happens. Before Holigral, I would have become completely helpless and all fucked up. Now I can look at something from a place of neutrality and this makes all the difference to me being a well-functioning person. For example, I am able to ask: What is my system trying to say to me when I am depressed.

I have a huge gain in confidence. I don't care what others say or think about me, I am proud of myself.

**Note:** Flow on a high does of Oral morphine, Fentanyl patches (pain killers) and sleeping tables in June 2008, following an operation. Despite Flows past history of drug dependency, she had no inclination to want to carry on with the morphine, and felt she was easily able to avoid becoming physically or psychologically addicted.

Emotional well being score prior to ALP = 4

Emotional well being score on completion of ALP = 10

Case study No. 3

Male

Age: 37

For the purpose of this report, this person will be known as "Luke".

**History** 

Luke comes from a dysfunctional family. His parents split-up when he was 4 and he was raised by his mother until his mother re-married when he was 9. Luke's mother had a lot of ill feeling towards his biological father, and there was no communication between Luke and father. At the age of 21, Luke recognised he was repeating family patterns, was unable to sustain long-term relationships, had outbursts of uncontrollable anger and was violent to his partners under the influence of alcohol. Luke came to ALP after having tried counselling and psychotherapy, without success. He wanted to be able to

**Interviewer**: What issues brought you to the programme?

come to terms with his issues and change his behaviour.

Luke:

"I had a measure of self worth that was established from my family and that's where my anger came from. Psychotherapy was too slow. I couldn't unlock the deeper issues, I didn't know how to move thorough or beyond them. ALP allowed me to understand in a fast and dynamic way, to be facilitated through my issues, heal them and put them to rest.

I had a measure of self worth that was established from my family and that's where my anger came from Interviewer: What changes have occurred in your behaviour as a result of your going on the programme?

Luke:

Its impact was on every level. I went through a major shift that completely changed me and it's still unfolding.

I am not angry

I am happy with who I am

Don't feel guilt from my childhood

I still have issues but have the tools and techniques to deal with them.

My issues no longer control my life

**Interviewer:** What are the 3 biggest differences between the person you were before the course and the person you are now?

I know myself

I don't hold any malevolent anger to society or my family or the world Allowing me to understand and accept my life

Emotional well being score prior to ALP = 4

Emotional well being score on completion of ALP = 10

### **STATISTICS**

Descriptive date for Table 1

Raw data and mean scores (Sum of X divided by N)

# Raw data

Case no.	Before ALP	After ALP	Difference
	Raw score	Raw score	Raw Score
1	4	7	3
2	4	10	6
3	4	10	6
Mean Scores	4	9	5