
**Foreword**

*We must begin to create naturally occurring, healing environments that provide some of the corrective experiences that are vital for recovery.*

-Sandra Bloom, *Creating Sanctuary*

There is a pervasive theme in the more than 280 year history of addiction treatment and recovery in America: When structures of recovery support collapse or get diverted from their recovery mission, recovering people, their family members, and a vanguard of professional allies will rise to forge new structures of recovery support. That theme is vividly illustrated in the history of The Retreat.

The founding of Alcoholics Anonymous (AA) in 1935 brought new hope for a condition that had long been plagued with pessimism. The pre-AA world was one in which alcoholics were more likely to receive contempt than care from the professional community. In the 1940s, recovering people and their allies, under the leadership of Mrs. Marty Mann, launched a movement to change the way America viewed alcoholism and the alcoholic. More than three decades of sustained advocacy led to federal legislation in 1970 that laid the foundation for modern addiction treatment. That emerging treatment system included widespread replication of the “Minnesota Model” of chemical dependency treatment—a model that drew heavily from AA’s unique program of alcoholism recovery.

The founding vision of the 1940s recovery advocacy movement was of an ever-growing recovery community. Movement leaders viewed professional treatment as an adjunctive linkage—a portal of entry for the sickest of the sick—into a community of mutual support. Hundreds of thousands of lives were subsequently touched and transformed by the emerging treatment system, but within twenty years of its rise, the advocates who were the godparents of that system were questioning what their life’s work had wrought. What they saw was a multi-billion dollar treatment industry that viewed recovery, if at all, as an afterthought and adjunct to itself. It is not possible to understand The Retreat without understanding the soil in which it grew.

Voices began to rise in the 1990s suggesting that addiction treatment had become disconnected from the larger and more enduring process of addiction recovery as well as from the grassroots communities out of which it was born. Long-tenured addiction counselors began to fear that something very important had been lost on the road to the professionalization and commercialization of addiction treatment. The signs of such loss were evident in many quarters. Recovery representation declined among addiction counselors, and the legions of recovering volunteers disappeared amidst the new wave of professionalism. Relationships eroded between addiction treatment organizations and AA and other recovery mutual aid fellowships. Addiction became viewed not as a primary disorder but a superficial manifestation of underlying psychopathology. The emphasis on spirituality and the power of a caring community declined in tandem with growing interests in “dual diagnosis,” an ever-expanding service menu, and the use of
psychotropic medications. The “language of the heart” was displaced by a new vocabulary that tenured counselors castigated as “psychobabble.”

The ultimate loyalty of many treatment organizations shifted from those being served to those regulating and paying for service. Alcoholics and addicts became a crop to be harvested for financial profit by predatory institutions. Concern for recovery rates gave way in many organizations to concerns about census rates and profit margins. In this new climate, counselors lamented spending more time on paperwork than people work. Treatment became ever-briefer, and long-term recovery became less and less of a visible focus of addiction treatment. In response to these changes in the field’s essential character, spiritual leaders within the addiction treatment field suggested it was time the treatment field conducted its own “searching and fearless moral inventory” and that perhaps the field was itself in need of a recovery process.

Such sentiments contributed to the rise of a new recovery advocacy movement in the late 1990s that, as it developed, challenged the treatment field to renew its recovery orientation. Simultaneously, experiments were initiated to recapture the best within the founding visions of addiction treatment, particularly from within the earliest era of the Minnesota Model. In that process, approaches to recovery support were created (or re-created) that defined themselves not as professionally-directed addiction treatment but as spiritually-focused communities of mutual recovery support. Among the earliest proponents of this approach were Dr. George Mann and John Curtiss, whose shared vision took life in 1998 in The Retreat. Mann and Curtiss drew on their mutual concern over the direction of addiction treatment and their long respective tenures at St. Mary’s Hospital and Hazelden to recapture the purity and simplicity of what they felt had been lost in the evolution of the Minnesota Model and the larger arena of modern addiction treatment. Their vision was of an approach focused exclusively on addiction recovery that was affordable, accessible, and effective. The boldness of what The Retreat created was not in forging a new form of treatment; it was in building a community of mutual help that no longer defined itself as treatment. It was in creating a community in which a contagious spirit of recovery rose not from the direction of a professional but from this caring community.

The subsequent success of The Retreat has prompted numerous efforts at replication and adaptation, but the story of the history and inner workings of The Retreat has, until now, not been told. Nor has there been any detailed presentation of how The Retreat was influenced by, and yet differs from, Hazelden and other exemplars of the Minnesota Model. This is a story many of us have eagerly awaited, and there is no one better suited to tell it than Damian McElrath. In the following pages, he eloquently depicts the conditions that spawned the idea of The Retreat, how that idea grew into a community, and how that community has evolved. This is a story with profound implications for the future of addiction treatment and its viability and status as a cultural institution. That alone makes this book noteworthy, but of even greater importance are the profound implications this story has on the future of addiction recovery in the United States and beyond.

The wake of this book will bring animated discussion and debate about what distinguishes a recovery community from a treatment program, mutual help from professional help, communities of recovery from health care organizations, and the
comparative merits of sophistication versus simplicity. No one should enter that conversation without first reading this book.

William L. White  
Author, *Slaying the Dragon: The History of Addiction Treatment and Recovery in America*.

References