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Therapeutic Communities and the Cultural Politics of Addiction Treatment, 1958-1974

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Abstract

Therapeutic Communities and the Cultural Politics of Addiction Treatment, 1958-1974

By Claire D. Clark

Therapeutic Communities and the Cultural Politics of Addiction Treatment describes how a California commune of ex-heroin addicts refashioned addiction treatment in the early 1960s. The Synanon commune's ex-addicts employed confrontational therapy to force each other to come to terms with their indulgence and denial. Before Synanon's therapeutic innovation, addiction treatment options were limited to federal penitentiaries and hospital detoxification units; after Synanon, government-supported programs surged. I draw on original oral histories and fresh archival sources to explain why the controversial commune's therapeutic model was both embraced by a counterculture of non-addicted spiritual seekers and scaled up under the Nixon administration's "war on drugs." In the process, I argue that charismatic ex-addict change agents significantly influenced the shifting drug policies that became a pivotal legacy of the 1960s, even as the co-optation of their methods forestalled radical challenges to punitive drug policies after the 1960s ended.

This dissertation makes several contributions to historical scholarship. First, historians have largely viewed the political conflict of the "Long 1960s" in relation to social movements or the national and global impact of the Vietnam War; far fewer scholars have explored how the seemingly apolitical arena of medicine was influenced by the demands of new interest groups from across the political spectrum. Second, scholars who have analyzed drug cultures of the Sixties have focused on drug use as a symbol of countercultural excess. Medical historians have likewise concentrated on drug use (not treatment) by describing how scientific experts helped construct the concept of addiction and why powerful politicians sought to combat it. As recovering addicts' abstinence-based treatment model ultimately proved compatible with a drug war agenda, this study is among the first to explore the role that addicts and ex-addicts themselves play in historical cycles of punitive and therapeutic addiction policies.

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In addition to oral history interviews, I draw extensively on the Synanon Collection housed in UCLA's Special Collections. My work in the collection was made possible by Emory's professional development funds and a Thayer Fellowship from UCLA. I had help from a phenomenal team of archivists there. UCLA Curator Susan Anderson is a dynamo, and deserves commendation for developing the collection and making it accessible to researchers. I quote from the collection with permission from the Synanon Foundation and UCLA Special Collections.

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Introduction

The Birth of Treatment Radicalism

“There’s nothing much to say about me,” Charlie Hamer told Hollywood screenwriter Guy Endore in 1960. “I’m just an old con. Been in and out of jail most of my life for just about every crime you can think of.” Hamer was born on a ranch in Oklahoma in 1903 and picked up an opium habit from Chinese railroad laborers who settled in the area. Decades later, he could still describe the exotic drug paraphernalia and the rose scent he associated with the smoke. “After the Harrison Act made narcotics a federal offense, opium had to go,” said Hamer. “That odor was a dead giveaway. The narcotics officers couldn’t miss it. Morphine, cocaine, and then heroin took the place of opium. Quicker and safer.”¹

For Hamer, though, the unscented substances only provided temporary relief from a life of crime. He moved from the countryside to urban centers and— as state surveillance of drug-related activity escalated— his offenses kept pace with his cravings. As other young, single men sought to avoid police detection by switching from opiates associated with ethnic minorities to those largely preferred by white, middle-class women, the laws shifted around them. When heroin became a substance of recreational abuse among working class men with a tolerance for Victorian-era vices, drug use emerged as a serious social problem.²

A series of laws passed in the first two decades of the twentieth century imposed increasing regulations on the prescription and possession of morphine and heroin. By 1920, the federal government made medical maintenance of opiate dependency under the supervision of a physician illegal; other forms of treatment for substance dependence also contracted. For more than forty years, the government adopted a simple, supply-side

addiction policy that sought to control substance use by punishing users and dealers. During this “classic era” of narcotics control, clearly defined rules governed substance use and contributed to the creation of the archetypal addict who is driven by visceral craving and associated with crime.³ Scientific discourse and popular culture reinforced this image of the heroin addict, and limited and ineffectual treatment methods further supported the notion that addiction was a fundamentally incurable condition. By the early 1960s, however, the punitive, centralized drug policy paradigm showed signs of strain. Pressure came from above: Harry J. Anslinger’s reign as Commissioner of the Federal Bureau of Narcotics came to an end, and bellwether states such as New York and California challenged the Bureau’s policies and began experimenting with new approaches to sentencing and treatment.⁴ Forces also came from below, most notably from a small community of ex-addicts who claimed they could succeed where bureaucrats failed: they had conceived a cure for the intractable problem of heroin addiction, one that had habilitated even career addicts like Charlie Hamer.⁵

The community, called Synanon, successfully sold the cure. Screenwriters like Endore, magazines like *Life*, and politicians like Connecticut Senator Thomas Dodd, Sr. were fascinated by the group’s ability to dramatically refashion the psyches of the most incorrigible addicts. The Synanon treatment not only enabled residents to abstain from heroin; it theoretically allowed them to achieve near-total character reformation. Synanon’s new peer-based treatment methods radicalized the principles of Alcoholics Anonymous and served as a protest against the medical establishment. It inspired the

rebirth of a national addiction treatment industry, which had largely disintegrated by the time Charlie Hamer discovered *chandu*.¹

In the chapters that follow, I describe how illicit drug use transformed from a fringe issue associated with incurable, hard-core, and supposedly immoral addicts like Hamer to a central concern of middle-class households. In the early 1960s, Synanon’s ex-addicts designed a radical new form of addiction treatment in response to the client profile of the iconic “junkie”; by the following decade, hundreds of new treatment centers would apply these therapeutic methods to a population of poly-drug-using youth. “Group pressure by ex-addicts forces, cajoles and motivates the addict first to act as an adult, then to think as an adult, and finally, to feel as an adult,” explained one center’s brochure. “If this process is repeated long enough, the alteration of personality becomes authentic and self-sustaining.”⁶

The End of Inebriety

Before addicts, there were *inebriates*; before addiction treatment centers, twelve-step programs, or hospital detoxification units, there were asylums. A medical explanation for the habitual and compulsive consumption of psychoactive substances gained ground in the decades following the American Civil War. The diagnosis had a name—inebriety—and in 1870, an association of professionals assembled to treat and study it.⁷ Inebriate asylums, sanitariums, lodges, and institutes flourished in the late nineteenth and early twentieth century. In addition to treating opium habitués, tobaccoists, and alcoholics, the new treatment centers also produced medical research about the singular condition that afflicted the groups. The field’s flagship journal, *The Quarterly Journal of Inebriety*, was edited by T.D. Crothers, who served as the assistant

¹ Chinese smoking opium

physician at the public New York State Inebriate Asylum (the first of its kind) and, later, as superintendent of the private Walnut Hill Asylum in Hartford, Connecticut. Like Crothers, many of the journal's scientific authors also served as managers of treatment programs; some programs placed advertisements alongside articles in the journal.⁸ Leaders of the new inebriate homes were passionate and charismatic advocates for the medical treatment of chemical dependence. They could also be self-promotional ideologues, given to squabbling about treatment philosophies and willfully ignorant of the field's ethical lapses. By 1925, the professional association had folded and the network of inebriate homes collapsed.⁹

Prohibition had something to do with it. A study conducted by the Scientific Temperance Federation in 1922 examined a sample of pre-prohibition alcoholism treatment providers; approximately 80 percent of the centers had disappeared, closed, or decided to treat other conditions. The number of inebriety treatment providers dwindled to 27.¹⁰ Although inebriety asylums differed from the mental asylums promoted by mid-nineteenth century reformers such as Dorothea Dix, they suffered the same fate.¹¹ Asylums operated under the premise that some combination of pastoral settings, spiritual cultivation, healthy recreation, and habitual labor could reform residents' troublesome temperaments. As the institutions failed to realize this utopian promise, the theory that inebriety was a treatable medical condition suffered. In the early twentieth century, Progressive reformers, seeking to purify wayward youths and control the growth of seedy communities, came to view substance use as a kind of moral contagion. When the Treasury Department surveyed local health officials about the nature of addiction in 1918, the majority believed the condition was a vice, not a disease.¹²

Reformers concluded that legal restriction, not personal reformation, was the best way to control chemical dependence. Public funding for treatment withered as local activists proposed bans on alcohol, tobacco, and nonmedical opiate and cocaine use.¹³ The Harrison Narcotics Act regulated the nonmedical use of opiates and cocaine in 1914; amendments to the Act increased drug restrictions. By 1924, the federal government forbade prescribing opiates to addicts, maintenance therapy, and heroin importation. In 1920, the Eighteenth Amendment to the constitution prohibited the production, transportation, and sale of alcohol. Offenders were sent to prisons rather than sanitariums. If inebriety could not be treated, perhaps it could be outlawed.

So went the logic of enforcers like Harry J. Anslinger, who began his career as an international anti-drug campaigner within a few months of Crothers' death in 1918.¹⁴ Anslinger would become, according to his critics, the nation's leading proponent of "dope fiend mythology."¹⁵ In 1930, he took political advantage of public controversies surrounding the Bureau of Prohibition and emerged as the first commissioner of the newly created Federal Bureau of Narcotics. As an employee of the Treasury Department, Anslinger promoted strict supply-side controls to curb substance use; he dismissed demand-side tactics such as education and treatment.¹⁶ When state conventions repealed alcohol prohibition in 1933, Anslinger retained his post as the nation's leading anti-narcotics officer. He would preside over an era of addiction hypocrisy: alcohol would be sold and celebrated. Narcotics would be vilified.

Diagnoses aligned with policy. General terms like inebriety or intemperance split into substance-specific classifications.¹⁷ Alcoholics professed a weakness for liquor,

beer, or wine. Addicts copped to heroin or morphine use. The two groups—pathetic drunkards and dangerous dope fiends— supposedly had little in common.

According to historian John Burnham, the repeal of alcohol prohibition accelerated social challenges to the dominant nineteenth century notions about character and respectability. Victorians, the ruling elites from the mid-1800s until the early twentieth century, largely believed good character could be cultivated through self-restraint and spiritual practice.¹⁸ They did not view bad habits— for example, excessive drinking, cigarette smoking, recreational drug use, gambling, or cursing—as harmless pastimes or isolated pursuits. Each bad habit weakened the will (and the nervous system), opening the door to others. Inebriety was a Victorian concept. The modern “atmosphere is full of psychological germs, calculated to inflict the nervous system and produce disease,” concluded the American Society for the Study of Inebriety in 1893.¹⁹ Treatment involved countering these toxic trends through “the best conditions of forced healthy living.”²⁰

This moral enterprise collapsed over the course of the twentieth century as business leaders unbundled the underworld vices and sold them off, one by one, to a growing mass market of compromised consumers. The “vice-industrial complex,” Burnham argues, liberated mainstream American mores long before the cultural battles of the permissive Sixties. The Sixties were no radical shift. Instead, they were the climax of a Toynbean story in which rebellious underclass practices infiltrate the ruling classes and lead to an age of excess.²¹ Some reformed addicts of the era, who knew the dangers of hipster culture too well, made a similar assessment.

The Politics of Addiction Treatment

By the 1950s, a growing subculture of illicit drug users took on new identities as fiends and junkies. New pharmacological and psychiatric research on heroin users affirmed the idea that addicts were devious, contagious, and difficult to cure.²² As social norms regarding premarital sex, alcohol use, and cigarette smoking relaxed in the mid-twentieth century, the opiate user became a lonely icon of illicit vice. Enforcers and researchers explained that addicts posed a threat to the social order. The addict characterized during the classic era of narcotics control tested many tenets of modern progress. Addiction defied individual autonomy, rational consumption, and the useful application of scientific discoveries.²³

Most importantly, addicts apparently resisted the advances of modern medicine. The treatment methods favored by inebriate homes were replaced by Freudian talk therapy, behaviorism, and hospital detoxification programs, each of which failed to emerge as a long-term cure for narcotic addiction. Inspired by science as well as politics, addiction treatments were new technologies. Whether the technologies took aim at patients' psyche, behavior, or biology depended, in part, on their historical and scientific contexts.

From the 1930s until the mid-1960s, the federal government consolidated these varieties of addiction treatment in penitentiaries located in Lexington, Kentucky and Fort Worth, Texas. The criminalization of opiate use and the decline in treatment options led to a surge of addicted inmates within the prison population in the 1920s. Wardens at federal prisons found the addicts troublesome. They supported a bill, introduced by Republican Congressman Stephen Porter in 1928, to quarantine and rehabilitate addicts in

specially designated penitentiaries.²⁴ Like many long-gone inebriate asylums, the new penitentiaries would engage addicts in a regular schedule of recreation and pastoral labor. Unlike the inebriate homes— a vulnerable village of private and locally funded enterprises— the penitentiaries were a national project. They were managed by a newly created division of the Public Health Service (PHS) and designed as a showcase for the nation’s best psychiatric research.²⁵ When Lexington’s Public Health Service Narcotic Farm finally opened in 1935, officials presented the hospital as a “New Deal for the drug addict.”²⁶

The deal provided addicts with voluntary and court-ordered treatment; the penitentiaries eventually incorporated a range of therapies, including Freudian talk therapy, twelve-step support groups, and vocational labor. In return, addicts provided researchers with data. Would sorting addicts into classes (such as iatrogenic or psychopathic addicts) help explain treatment outcomes? Could researchers separate biological and psychological drug dependence? Some patients volunteered to serve as subjects in basic biological research studies; beginning in the 1940s, a separate wing of the Lexington facility housed the Addiction Research Center (ARC), a National Institute of Mental Health (NIMH) laboratory that conducted drug experiments.²⁷ The federal narcotics hospitals were cathedrals to the era’s faith in experts. After World War II, that faith foundered as addiction rates rose and the patients’ high relapse rates gained notoriety.²⁸ Still, the hospitals’ experts continued to cultivate the belief that centralized, scientific government programs could solve social problems.²⁹

This philosophy had a name—“technocracy”— that became an epithet in the 1960s.³⁰ According to Sixties cultural critic Theodore Roszack, the US government

increasingly relied on scientific experts to justify domestic and internal policies; too often, officials chose to ignore the unintended consequences of technological advancement. As a technocratic project, the narcotics farms' failed treatment experiments reaped distressing results. Officials labeled drug users "addicts" and corralled them into two central locations; once in those locations, the addicts internalized the label. Rather than permanently breaking addicts of their drug-seeking habits, the farms functioned as a fraternal "fantastic lodge" where residents swapped instructive stories about hustling and scoring.³¹ Meanwhile, addicts' repeated stints in prisons and hospitals fostered their skepticism regarding therapeutic technocrats.

The few midcentury treatment institutions unwittingly primed addicts for an alternative cure. "What I want to point out to you," said one ex-addict advocate in the early 1960s, "is that what *happened* [to me] at Synanon did not happen at the Menninger Clinic in Topeka; the Institute of Living in Hartford; three times in Lexington, Kentucky; New York; Metropolitan Hospital; Manhattan General; the Holbrook Sanitarium; or the Westport Sanitarium."³²

The Treatment Revolution and the Long 1960s

Synanon's promoters claimed that the commune's methods marked a radical departure from the ineffective addiction cures available at other institutions. Their new treatment radicalism railed against experts' medical-criminal therapies by reviving an older concept of addiction. Scholars and former residents called Synanon's treatment philosophy positively Victorian.³³ One reporter claimed Synanon stood for "Sinners Anonymous"—an allusion to the nineteenth century notion that the opiate habit is likely linked to other moral misdemeanors.³⁴

The name also evoked Alcoholics Anonymous (AA). In 1958, a recovering alcoholic named Charles “Chuck” Dederich spun Synanon off from an AA group in the Los Angeles area. Dederich was inspired by AA’s peer-led therapy, but he claimed its non-judgmental process of “sharing” was too gentle to impact heroin addicts hardened by their criminal careers, underworld associations, and socially unacceptable substance choice.³⁵ Instead, Dederich developed a group process that used confrontation and ridicule to force participants to confront their moral defects. The confrontations took place in an intense, rule-governed familial environment that supported addicts’ efforts to replace old, maladaptive defenses with new habits and coping patterns. While AA was a non-residential mutual aid society that ran on a gift economy, Synanon’s founder was a former oil salesman who hoped his innovative treatment model would turn a profit. Dederich said he chose the name Synanon because it “looked good on the side of a truck.”³⁶

Though Synanon members protested technocratic midcentury addiction treatment, they planned to disrupt it with a market-based solution. The organization’s early members included long-time survivors like Charlie Hamer and younger urban men who encountered heroin along with jazz in the late 1940s and 1950s. The hipsters could have been members of J. Milton Yinger’s “contra culture”; in 1960, the sociologist used the term to apply to groups – such as adolescent delinquents– who live by values in direct opposition to the dominant culture.³⁷ By the end of the decade, the hipster and beatnik subcultures blossomed into “hippies.” Theodore Roszack repackaged contra culture as “counterculture,” which he described as a vital international movement poised to upend the mechanistic and supposedly dehumanizing value structure of modern society.

Believers in Synanon's treatment model argued that psychoactive chemicals had thoroughly corrupted mainstream culture; resisting, not ingesting, drugs was countercultural. By the late 1960s, alcohol and prescription drug abuse appeared problematic. Illicit drug use was on the rise.³⁸ The institutions created to deal with addicts' dire problem had seemingly worsened it. In 1969, an ex-addict advocate explained the political significance of the new Synanon-inspired treatment centers to Congress. The nation's misguided drug treatments represented "a failure of America's democracy. A failure of our wasting all this time sending people to the moon and not concentrating on things around here."³⁹

From this perspective, the establishment's ineffective drug treatments symbolized the limitations of the consensus politics that emerged from the New Deal and World War II. By the mid-1970s, many Americans had begun to recognize that the nation's dominance as a world power had serious drawbacks (like the Vietnam War). At the same time, once-hopeful campaigns for civil, student, and women's rights suffered in a climate of anger and fear. The movements' philosophical differences morphed into identity politics that placed a hiatus on leftist consensus. With its rock soundtrack and conspicuous hair, the counterculture may have been a less political response to the confines of consensus-driven liberalism. But countercultural past-times also encouraged adherents to imagine what sort of society might replace the ruling technocracy.⁴⁰

Two competing visions stood out. Libertarians sought to regain control of their choices from the supposedly coercive policies of the federal government. In contrast, communitarians imagined forging authentic relational ties without regard to societal expectations. Both impulses are reflected in unflattering historical interpretations of the

counterculture as either market-oriented or navel-gazing. They reappear in the derisive definition of Synanon: a cult with Coca-Cola ambitions.⁴¹

Synanon's ex-addict moral entrepreneurs practiced what critics call *hip capitalism*. Like advertising executives who sold Pepsi to youth, the new ex-addict treatment promoters channeled frustration about the "establishment" into a successful niche market.⁴² Unlike thousands of other communes founded and disbanded by the 1970s, Synanon-inspired therapeutic communities flourished as part of a new treatment marketplace. In 1968—ten years after Synanon was founded—a federal census of addiction treatment providers listed 373 agencies; of those, 74 employed ex-addicts as staffers.⁴³ Nearly forty years later, a random sample of the nation's treatment centers located 380 self-identified therapeutic communities—a nationwide census of therapeutic communities would presumably yield an even higher number.⁴⁴ Well before the emergence of the "consumer movement" in traditional mental health settings, Synanon's drug-free counterculture happily married patient activism to the profit motive.⁴⁵

At federal conferences and congressional hearings in the early 1960s, ex-addicts agitated experts and sensationalized the media. They voiced a strong preference for long-term residential treatments that relied on their personal expertise—a hard-knocks education that today's professionals might call "recovery." The movement toward ex-addict-led treatment models gained traction as graduates of early therapeutic communities exported the model to other states and countries.⁴⁶

The surge in youthful illicit drug use in the 1960s did not respect national borders. Still, I focus on the American "recovery revolution" that accompanied historian Arthur Marwick's international cultural one (1958-1974).⁴⁷ In an attempt to bring clarity to a

disorderly period, I use the term “Sixties” in reference to Marwick’s wide time span and its connotations. When I mention the “1960s,” I am referring to the decade—the calendar years from 1960-1969. The crisis in heroin use reached epidemic levels around 1967.⁴⁸

But the lead-up to the contemporaneous treatment revolution was long. While historians have largely viewed the “Long 1960s” in relation to social movements or the national and global impact of the Vietnam War, the era’s conflicts also rocked biomedicine. We have books filled with hippies, Weathermen, Black Panthers, feminists, Situationists, segregationists, and objectivists.⁴⁹ Despite some good work on abortion activists and anti-psychiatrists, we know much less about medical movements, and very little about treatment.⁵⁰ Scholars who analyze Sixties subcultures tend to fixate on drug use as a potent symbol of countercultural excess. Most medical historians also concentrate on drug use (not treatment) by describing how scientific experts helped construct the concept of addiction, and why powerful politicians sought to combat it.⁵¹ But, I argue, politicians and experts were influenced by treatment radicals’ drug-free subcultures. As recovering addicts’ abstinence-based treatment model ultimately proved compatible with a drug war agenda, this study is among the first to explore the role that addicts and ex-addicts play in historical cycles of punitive and therapeutic addiction policies.

Synanon, founded in 1958, capitalized on the liberal optimism and progressive mental health policies that accompanied John F. Kennedy’s presidency. In the mid-1960s, Synanon began advertising its therapeutic lifestyle to non-addicted spiritual seekers. Meanwhile, Synanon graduates and affiliates professionalized its model in new therapeutic community (TC) treatment centers. The TCs attracted national attention. They

received a sizeable federal investment when the Nixon administration expanded treatment in order to control the heroin epidemics and related crime surges of the late 1960s and early 1970s. Synanon and some other centers roiled with violent internal crises in the 1970s. Yet the revolutionary model's appeal to establishment liberals and conservatives allowed the rhetoric of treatment radicalism to outlive the upheaval of the long Sixties—and shape the drug policies of the decades to come.

Notes

¹ Quoted in Guy Endore, *Synanon* (New York: Doubleday, 1968), 20. A complete transcript of an oral history with Hamer is available from UCLA's Oral History Program, Charles E. Young Special Collections. See *Seven voices from Synanon: Oral History Transcript: Charles Dederich, Charles Hamer, Bettye Coleman, Monte Morton, James Middleton, Arlene Hefner, and Reid Kimball* (Oral History Program, University of California, Los Angeles, 1964.)

² David Courtwright, *Dark Paradise: A History of Opiate Addiction in America*, 2nd ed. (Cambridge: Harvard University Press, 2001).

³ David Courtwright, Herman Joseph, and Don DesJarlais *Addicts Who Survived: An Oral History of Narcotic Use in America* (Knoxville: University of Tennessee Press, 1989); David Musto, *The American Disease: The Origins of Narcotic Control*, Expanded Edition (Oxford: Oxford University Press, 1983); Caroline Acker, *Creating the American Junkie: Addiction Research in the Classic Era of Narcotic Control* (Baltimore: Johns Hopkins University Press, 2003).

⁴ David Musto, *The American Disease*, Chapter 10; See Box 1917-10, Narcotics Commission Records, California State Archives, Sacramento, CA for extensive documentation of the state's reassessment of drug policy beginning in the late 1950s.

⁵ For the lineage of prototypical therapeutic communities, an ex-addict-led form of drug treatment, see Frederick Glaser, "Some Historical Aspects of the Drug-Free Therapeutic Community," *American Journal of Drug and Alcohol Abuse*, 1, no. 1 (1974): 37-52. For the rise and fall of ex-addicts as drug treatment counselors/professionals see Charles Winick, "The Counselor in Drug Treatment," *The International Journal of the Addictions*, 25, no. 12A (1990-1991): 1479-1502.

⁶ *Questions and Answers on Daytop Village*. Daytop Village Folder 514, Box 29, Mayor John Lindsay Files, New York City Municipal Archives.

⁷ The American Association for the Cure of Inebriates was founded on November 29, 1870. William White, *Slaying the Dragon: The History of Addiction Treatment and Recovery in America* (Bloomington: Chestnut Health Systems, 1989), 25. (See also Chapters 4 and 5 in the same book, "The Rise and Fall of Inebriate Asylums" and "Inebriate Homes and Asylums: Treatment Philosophies, Methods, and Outcomes")

⁸ *Ibid*; Barbara Weiner and William White, "The Journal of Inebriety (1878-1914): History, topical analysis, and photographic images," *Addiction* 102 (2007): 15-23.

⁹ Ibid.

¹⁰ C. Stoddard "What of the Drink Cures?" *Scientific Temperance Journal* (1922), Quoted in William White, *Slaying the Dragon*, 27.

¹¹ Inebriety institutions concentrated on chemical dependency and generally rejected the medicinal use of alcohol or narcotics, then common in insane asylums. For more on the concept of inebriety and the fate of inebriate asylums, see Sarah Tracy, *Alcoholism in America: From Reconstruction to Prohibition* (Baltimore: Johns Hopkins University Press, 2005). Seminal histories on the history and culture of insane asylums include David J. Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic* (Boston: Little, Brown & Co, 1971); Gerald Grob, *Mental Institutions in America: Social Policy to 1875* (New York: Free Press, 1973); Gerald Grob, *Mental Illness and American Society, 1875-1940* (Princeton: Princeton University Press, 1983); Benjamin Reiss, *Theaters of Madness: Insane Asylums and Nineteenth Century American Culture* (Chicago: University of Chicago Press, 2008).

¹² Acker, *Creating the American Junkie*, 38.

¹³ White, *Slaying the Dragon*, 28.

¹⁴ John C. McWilliams, "Unsung Partner Against Crime: Harry J. Anslinger and the Federal Bureau of Narcotics, 1930-1962," *The Pennsylvania Magazine of History and Biography* 113, no. 2 (April 1989): 211-216.

¹⁵ Anslinger's most vehement critic was Indiana University's Alfred Lindesmith. Alfred R. Lindesmith, "Dope Fiend Mythology," *Journal of Criminal Law and Criminology* 31, no. 2 (1940): 199; John F. Galliher, David P. Keys and Michael Elsner, "Lindesmith v. Anslinger: An Early Government Victory in the Failed War on Drugs," *Journal of Criminal Law and Criminology* 88, no. 2 (1998): 661-682.

¹⁶ Jill Jonnes, *Hep Cats, Narcs, and Pipe Dreams: A History of America's Romance With Illegal Drugs* (Baltimore: Johns Hopkins University Press, 1999), 159-160.

¹⁷ David T. Courtwright. "Mr. ATOD's Wild Ride: What Do Alcohol, Tobacco, and Other Drugs Have in Common?" *Social History of Alcohol and Drugs* 20, no. 1 (2005): 105-40.

¹⁸ John C. Burnham, *Bad Habits: Drinking, Smoking, Taking Drugs, Gambling, Sexual Misbehavior and Swearing in American History* (New York: New York University Press, 1993). For more on the clash between Victorian and modern values in the American context, see T.J. Lears, *No Place of Grace: Antimodernism and the Transformation of American Culture* (Chicago: University of Chicago Press, 1981).

¹⁹ American Association for the Study and Cure of Inebriety, *The Disease of Inebriety from Alcohol, Opium, and Other Narcotic Drugs* (New York: E.B. Treat, 1893), 88.

²⁰ *The Disease of Inebriety*, 200.

²¹ Arthur Toynbee. *A Study of History: Abridgement of vols I-VI*. (Oxford: Oxford University Press, 1946). For the conservative contention that American society since the Sixties is in a state of Toybean decline, see Charles Murray, *Coming Apart: The State of White America, 1960-2010* (New York: Crown, 2012).

²² Caroline Acker, *Creating the American Junkie* (Baltimore: Johns Hopkins University Press, 2003).

²³ Ibid; Timothy Hickman, *The Secret Leprosy of Modern Days: Narcotic Addiction and Cultural Crisis in the United States, 1870-1920* (Amherst: University of Massachusetts

Press, 2007); Scott Vrecko, "Civilizing technologies and the role of deviance," *Biosocieties* 5, no. 1 (2010): 36-51.

²⁴ Acker, *Creating the American Junkie*, 157-158.

²⁵ Acker, *Creating the American Junkie*, 157-161.

²⁶ William F. Conhurst, "A New Deal for the Drug Addict," *Baltimore Sun*, July 14, 1935; for historical interpretation, see Nancy Campbell "A New Deal for the drug addict": The Addiction Research Center, Lexington, Kentucky," *Journal of the History of the Behavioral Sciences*, 42, no. 2 (2006): 135-157.

²⁷ See Nancy Campbell, *Discovering Addiction: The Science and Politics of Substance Abuse Research* (Ann Arbor: University of Michigan Press, 2007), Chapters 3 and 5-7; Caroline Acker, *Creating the American Junkie: Addiction Research in the Classic Era of Narcotic Control* (Baltimore: Johns Hopkins Press, 2002), Chapter 6.

²⁸ David Musto (*The American Disease*, 1983) cites these studies as among the most significant in damaging Lexington's reputation: MJ Pescor, "Prognosis in Drug Addiction," *American Journal of Psychiatry*, 97 (1941): 1419-1433; GH Hunt and ME Odoroff, "Follow-up Study of Narcotic Drug Addicts After Hospitalization," *Public Health Reports* 77 (1962): 41-52.

²⁹ Donald F. Bolles, "Doctors Battle Dope at Lexington Hospital," (AP) *The Courier Times*, January 14, 1962.

³⁰ Theodore Roszack, *The Making of a Counter-culture: Reflections on the Technocratic Society and its Youthful Opposition* (New York: Doubleday, 1969). Cf: William Akin, *Technocracy and the American Dream: The Technocrat Movement, 1900-1941* (Berkeley: University of California Press, 1977); John Jordan, *Machine-age Ideology: Social Engineering and American Liberalism, 1911-1939* (Chapel Hill: University of North Carolina Press, 2010); Frank Fischer, *Technocracy and the Politics of Expertise* (New York: Sage, 1989).

³¹ Janet Clark and Howard Becker, *The Fantastic Lodge: Autobiography of a Girl Drug Addict* (New York: Houghton Mifflin, 1961). For an interpretation of the Farm's impact on addicted identity, as recounted in Clark's memoir, see Nancy Campbell, *Discovering Addiction*, 64-69.

³² Zev Putterman quoted in Lewis Yablonsky, *Synanon: The Tunnel Back* (Baltimore: Penguin, 1967), 272.

³³ David Deitch and Joan Zweben, "Synanon: A Pioneering Response in Drug Treatment and a Signal for Caution" in *Substance Abuse: Clinical Problems and Perspectives* eds. Joyce Lowinson and Pedro Ruiz (Baltimore: Williams and Wilkins, 1981), 289-302 and Geoffrey Skoll, *Walk the Walk and Talk the Talk: An Ethnography of a Drug Treatment Facility* (Philadelphia: Temple University Press, 1992).

³⁴ R.D. Fox, "Unique Club Seeks to Whip Narcotics," *Evening Outlook*, January 23, 1959

³⁵ "The Early History of Synanon" transcript of interview with Charles E Dederich, Box 1, Synanon Collection, Charles E. Young Library University of California Los Angeles (afterwards UCLA Synanon Collection)

³⁶ Rod Janzen, *The Rise and Fall of Synanon: A California Utopia*, (Baltimore: Johns Hopkins University Press, 2001), 11.

³⁷ Yinger partially bases his theory of "contra culture" on the work of criminologist Lewis Yablonsky, who studied juvenile delinquents in New York before becoming

Synanon's most eminent researcher. J. Milton Yinger, "Contraculture and Subculture," *American Sociological Review* 25, no. 5 (October 1960): 625-635.

³⁸ Excessive alcohol consumption emerged as a public health problem in the late 1960s: Robin Room, "Alcohol Control and Public Health," *Annual Review of Public Health* 5 (May 1984): 293-317. Likewise, concerns about prescription tranquilizer abuse—which were negotiated by medical professionals in the late 1950s and early 1960s—came to the national stage in debates surrounding the 1965 Drug Abuse Control Amendments: David Herzberg, *Happy Pills in America: From Miltown to Prozac* (Baltimore: Johns Hopkins Press, 2009), Kindle e-book. Concerns about illicit drug use in the late 1960s set in motion the federally coordinated national surveys of drug use, such as the National Household Survey on Drug Use, begun in 1971.

³⁹ Testimony of William Satterfield, Special Subcommittee on Alcoholism and Narcotics of the Committee on Labor and Public Welfare. *Inquiry Into the Problem of Alcoholism and Narcotics*. 91st Congress, 1st and 2nd sessions, October 4, 1969.

⁴⁰ For more on the Sixties as the beginning of the fragmentation of the Left or an "Age of Fracture" in general, see: Daniel T. Rodgers, *The Age of Fracture* (Cambridge: Harvard University Press, 2012); William O'Neill *Coming Apart: An Informal History of America in the 1960s* (New York: Times Books, 1971); John M. Blum, *Years of Discord* (New York: WW Norton, 1991); Maurice Isserman and Michael Kazin, *America Divided: The Civil War of the 1960s* (New York: Oxford University Press, 2000). While some scholars conflate the counterculture and New Left, or argue that the counterculture took a leftist turn (see Doug Rossinow, "The New Left in the Counterculture: Hypotheses and Evidence," *Radical History Review* 67 (1997): 79-120), sociologist Rebecca Klatch's interviews with both New Left and New Right revealed that both movements were catalyzed by their members' antagonistic perceptions of the counterculture. Klatch, "The Counterculture, The New Left, and the New Right," *Qualitative Sociology* 17, no. 3 (1994): 199-214. Michael Kramer argues that countercultural leisure encouraged both libertarian and communitarian visions. Kramer, *The Republic of Rock: Music and Citizenship in the Sixties* (New York: Oxford University Press, 2013), 12.

⁴¹ Founder Charles Dederich famously said "These three syllables [syn-a-non] will someday be as well known as Coca-Cola" Endore, *Synanon*, 47.

⁴² The term "Hip capitalism" originated in the underground press but was popularized by Thomas Frank, *The Conquest of Cool: Business Culture, Counterculture, and the Rise of Hip Consumerism* (Chicago: University of Chicago Press, 1997). For another take on the business-friendly aspect of the counterculture, see Fred Turner, *From Counterculture to Cyberculture: Stewart Brand, the Whole Earth Network, and the Rise of Digital Utopianism* (Chicago: University of Chicago Press, 2006). The Pepsi example, among others, is also described in Lizabeth Cohen, *A Consumer's Republic: The Politics of Mass Consumption in Postwar America* (New York: Random House, 2003).

⁴³ 24 were self-identified therapeutic communities. Deena Watson and S.B. Sells, *Directory of Narcotic Addiction Treatment Agencies in the United States, 1968-1969* (Washington DC: US Public Health Service, 1970)

⁴⁴ Meredith Huey Dye, Lori J. Ducharme, J. Aaron Johnson, Hannah K. Knudsen, and Paul M. Roman, "Modified Therapeutic Communities and Adherence to Traditional Elements," *Journal of Psychoactive Drugs* 41, no. 3 (2009): 275-283.

⁴⁵ Synanon was technically incorporated as a non-profit; by concentrating on the development of “social enterprises,” it became a wealthy one. The organization’s profitable social enterprises (gas stations, advertising specialty business, therapy clubs) retained non-profit status by functioning as therapy and vocational training for addicts or delinquent youth. For an extensive discussion of Synanon’s financials (in 1977, it had a net worth of \$12 million and assets of \$30 million) and Dederich’s corporate approach, see Defendant’s Statement of Material Facts, *Synanon Church vs. United States of America*, No.82-2303, undated, DC District Court (especially pages 57-58) in Documents: Synanon Church vs. USA folder 4, Box 2, Mitchell Synanon Litigation Papers, University of Tennessee-Knoxville.

⁴⁶ For the transportation of the ex-addict advocate to the UK, see Alex Mold and Virginia Berridge “ ‘The Rise of the User?’ Voluntary Organizations, the State, and Illegal Drugs in England Since the 1960s,” *Drugs: Education, Prevention and Policy* 15, no. 5 (2008): 451–461; On the similarities between TCs and the Recovery Model, see William White, “David Deitch, PhD, and George De Leon, PhD, on recovery management and the future of the therapeutic community,” *Counselor* 11, no. 5 (2010): 38-49.

⁴⁷ Arthur Marwick, *The Sixties: Cultural Revolution in Britain, France, Italy, and the United States, c.1958-c.1974* (New York: Oxford, 1998).

⁴⁸ David Courtwright, *Dark Paradise: A History of Opiate Addiction in America*, 2nd ed. (Cambridge: Harvard University Press, 2001): 165-170.

⁴⁹ To name a few recent texts and reissues: Timothy Miller, *Hippies and American Values* (Knoxville: University of Tennessee Press, 2011); Dan Berger, *Outlaws of America: The Weather Underground and the Politics of Solidarity* (Oakland, CA: AK Press, 2006); Joshua Bloom and Waldo Martin, *Black Against Empire: The History and Politics of the Black Panther Party* (Berkeley: University of California Press, 2013); Stephanie Coontz, *A Strange Stirring: The Feminine Mystique and American Women at the Dawn of the 1960s* (New York: Basic Books, 2011); Richard Wolin, *The Wind from the East: French Intellectuals, the Cultural Revolution, and the Legacy of the 1960s* (Princeton: Princeton University Press, 2012); Joseph Crespino, *Strom Thurmond’s America* (New York: Hill & Wang, 2012); Jennifer Burns, *Goddess of the Market: Ayn Rand and the Making of the American Right* (Oxford: Oxford University Press, 2009).

⁵⁰ Michael Staub, *Madness is Civilization: When the Diagnosis Was Social, 1948-1980*. (Chicago: University of Chicago Press, 2011); Laura Kaplan, *The Story of Jane: The Legendary Underground Feminist Abortion Service* (Chicago: University of Chicago Press, 1995).

⁵¹ Martin Lee and Bruce Shlain, *Acid Dreams: The Complete Social History of LSD, the CIA, the Sixties, and Beyond* (New York: Grove Press, 1994); David Farber, “The Intoxicated State/Illegal Nation: Drugs in the Sixties Counterculture” in *Imagine Nation: The American Counterculture of the 1960s and 1970s*, ed. Peter Braunstein and Michael Doyle (New York: Routledge, 2002), 17-40; Musto, *The American Disease*; Acker, *Creating the American Junkie*.

Chapter One Creating the Synanon Cure

Synanon's founder Charles Dederich had grand plans for his organization. In the late 1950s, he saw a market opportunity in the treatment of narcotic addicts. He also understood that therapy was a specialized form of human relations. Later, by generalizing the therapeutic principles Synanon originally applied to addicts, Dederich could recruit non-addicted spiritual seekers or offer Synanon's services to corporations that sought to improve employee communication. While fellow ex-addicts protested ineffective establishment addiction treatments, Dederich personally viewed his new peer-led treatment model as a revolutionary improvement in social engineering. Dederich described his therapeutic experiment as "a new form of communication, a new trade, a new kind of people, a new branch of knowledge, that would possibly have as great an impact on the world as Freud's discoveries in psychoanalysis at the end of the nineteenth century."¹ In Dederich's lifetime, psychoanalytic ideas expanded in influence far beyond the realm of mental health services. Marketers appealed to *eros* in advertising campaigns; executives applied Carl Jung's Myers-Briggs Typology Index to workplace management. Although he gained notoriety as a cult leader by the end of the 1970s, Dederich's decisions were usually the result of managerial, rather than divine, inspiration.

Sociologist Richard Ofshe argued that Dederich's management choices drove the organization's development. Synanon began as an AA-influenced fellowship of recovering alcoholics and addicts (January-September 1958), established a residential therapeutic community (TC) (September 1958-1968), welcomed new non-addicted members into a social movement (1969-1975), and, finally, devolved into a controversial,

corporatist new religious movement (1976-1992). In this last phase, Synanon also came to symbolize the excesses of Sixties experiments with spiritual exploration and alternative living. “A once-respected drug program turned into a kooky cult,” reported *Time*.² Synanon leaders ordered residents to enter into open marriages, undergo vasectomies, and prepare for battle against the organization’s enemies. Professionals warned that Synanon’s fate should serve as a “signal for caution” to addiction treatment centers based on its model.³

While scholars and critics fixated on Synanon’s connection to cults or communitarian religious movements, generations of treatment centers that followed Synanon sorted out the mixed blessings of their therapeutic inheritance. Early critics argued that the hierarchical treatment model prevalent in therapeutic communities, “while freer than many custodial facilities,” still presented ample opportunity for the coercion of residents through “ridicule, abrasive encounters, social ostracism, stripping of defenses,” and so on.⁴ Yet therapeutic community proponents ultimately provided evidence that an intense social environment, if managed appropriately, improved clients’ outcomes.⁵

Synanon’s new therapeutic model directly challenged the drug treatment status quo. The few recognized drug treatment facilities— however dubious their cure rates— were authorized by a bureaucracy of medical professionals, criminal justice referrals, and government funders. In contrast, Synanon’s quest for legitimacy initially relied on charismatic leadership. The organization’s growing membership of drug-free former addicts congregated around Dederich and gave his treatment methods credibility. Had Dederich’s community been unable to later attract the interest of establishment figures such as government officials, researchers, reporters, and businessmen, Synanon’s early

members might have lost interest in the movement. Had he been quick to offer the treatment model to authorities that wished to modify it, the recovery revolution may have been moderated—or, in the words of sociologist Max Weber, “routinized.”⁶ Instead, it took more than a decade for therapeutic community treatment to become routine.

Until then, the integrity of treatment radicals correlated with their leader’s charisma. Dederich’s business plan shaped Synanon’s treatment structure. His personality inspired a provocative new way to think about addiction and its treatment.

Charles E. Dederich was born in Toledo, Ohio in 1913. Dederich’s father died before he reached the age of ten. A few years later, his mother remarried a wealthy engineer, whom Dederich respected and resented. Dederich attended private Catholic schools and, briefly, college at Notre Dame. He had difficulty adjusting to Notre Dame and his grades were poor. He returned to his hometown, where he found work at Gulf Oil’s office. He married and had a son, named Charles Dederich, Jr. During his career as a traveling salesman for Gulf, he drank heavily in social settings. In 1944, he contracted meningitis and fell into a coma that lasted two weeks. Doctors were able to save his life, but a mastiectomy and other procedures left him with facial deformities and tics. Dederich fell into a deep depression and became convinced he was dying; his habitual alcohol abuse progressed to alcoholism.⁷ He moved his wife and son to Los Angeles, California, divorced, remarried, and had a daughter, Jady, by his second wife. His increasingly problematic drinking, coupled with a Benzedrine habit, made it difficult for Dederich to maintain employment.⁸ In 1956, Dederich’s second wife left him and—taking her parting suggestion to heart—he attended his first Alcoholics Anonymous meeting. “Once she was sure that I had a fighting chance of taking care of myself, we

divided everything up,” said Dederich. “She took the inside of the house, and I took the outside.”⁹

Dederich’s wit made him a sought-after AA speaker. He maintained his abstinence from alcohol by attending an AA meeting each day. He landed an office job at an aircraft manufacturing company in Santa Barbara, but quickly grew restless. Citing divine inspiration from a tattered copy of his favorite book, Ralph Waldo Emerson’s *Self-Reliance*, Dederich quit his job, returned to Los Angeles, and dedicated himself to creating a new enterprise that would cure other alcoholics. Emerson’s essay urged readers to be skeptical about living according to traditional belief structures and societal constraints.¹⁰

Dederich offered an alternative to square, Salvation Army-style evangelism. He tried to convince a local AA clubhouse to transform the meeting space into a kind of “way-out hep jazz AA club” that would cater to a younger demographic and welcome addicts as well as alcoholics.¹¹ The AA stalwarts rejected Dederich’s proposal. By 1957, however, he had nevertheless gathered a small fellowship of recovering alcoholics and addicts in a dilapidated storefront in Venice Beach. They paid the rent with the disability pension of one of the members. Although Dederich’s group continued to attend local AA meetings, privately their rollicking, confrontational arguments evolved into a distinct form of therapy. In 1958, Dederich pushed the members of his group to formalize their association. The alcoholic members, in keeping with AA tradition, wanted to maintain an informal, non-proprietary, voluntary association and resisted Dederich’s plan to incorporate.¹² The AA traditionalists, said Dederich, were “gumming up my deal” with their emphasis on God and gift economy. “They still thought it was an AA club and they

would come in and put a dime on the counter and drink 30 cups of coffee and use our shower.”¹³ The addicts followed Dederich, and together with four other members, he drafted an organizational charter and filed the necessary paperwork. In 1958, the Venice Beach flophouse became a non-profit corporation. At first, members subsisted on donuts and stale sandwiches donated by local vendors.¹⁴ Gradually, the organization attracted new members, positive press coverage, and bigger donors. “Hustling” for funds and attention, Dederich believed, taught addicts to channel their survival skills into a responsible enterprise. By 1968, Synanon had more than 1,000 residents and locations in San Francisco, Santa Monica, New York and Detroit.¹⁵

In the mid-1960s, Dederich claimed his entrepreneurial vision was equal parts Emerson and LSD. In the 1950s, several human experiments demonstrated that *lysergic acid diethylamide* (LSD), a derivative of a grain fungus with hallucinogenic properties, was an effective treatment for alcoholics. Researchers hypothesized that the hallucinogenic experience facilitated by LSD mimicked the experience of *delirium tremens*, a condition caused by withdrawal from alcohol and often accompanied by visual hallucinations. For some alcoholics, the nightmarish delirium functioned as a shock that influenced a subsequent commitment to recovery. AA co-founder Bill Wilson endorsed and participated in LSD experiments.

One of the researchers who administered LSD to Bill Wilson was Keith Ditman of UCLA. Together with Sidney Cohen, the psychiatrist who would later become a leading official at the National Institute of Mental Health, Ditman conducted experiments to test whether LSD aids alcoholism treatment. Charles Dederich, then in early recovery from alcoholism and eager for novel therapeutic experiences, enrolled in Ditman and

Cohen's LSD study.¹⁶ In Dederich's account, a transcendent experience on LSD led to a series of "calmer breakthroughs" in the months following the experiment.¹⁷ Dederich briefly emphasized LSD's ability to help him see beyond the prescribed limits of traditional institutions.¹⁸ But in a friendly retrospective conversation with Cohen, he primarily emphasized the drug's therapeutic utility. Dederich said that the clarity he gained in Cohen's medical experiment helped him transform from an unfocused "fanatic" to a clean-shirted, "dedicated man."¹⁹

A month before his conversation with Dederich in 1966, Cohen warned a Senate subcommittee about the dangers of recreational LSD use.²⁰ By then the drug had migrated from psychiatrists' clinics to college campuses.²¹ As LSD morphed from a promising psychiatric treatment to a street substance of abuse, Synanon began to recruit polydrug-using youth who had taken multiple doses of LSD.²² For these new residents, Dederich decided, LSD could not be considered an appropriate therapeutic tool. Instead, Synanon used variations of the confrontational therapy tactics that had worked well on the original group of hardened heroin addicts in the early 1960s. Leaders expanded Synanon's confrontational therapy groups into days-long "marathons" or "dissipation" sessions that broke down the ego without the aid of drugs. The humanistic psychologist Abraham Maslow agreed that potent group therapy was a good alternative to LSD.²³ The short-term dissipation of the self helped individuals gain new perspectives on their problems and stifling preconceptions. Participants supposedly emerged more self-reliant or—to use Maslow's term—"self actualized."²⁴

“Synanon pioneered the hippie business,” said Dederich. Synanon members modeled communal living before it became fashionable. Yet Dederich viewed hippies as hypocrites who “took what they liked from the established world and then tuned in, turned on and dropped out.” Their communes were not self-sufficient; their righteous spirituality disguised immaturity. “What’s holy about getting loaded to your eyelashes and leaving your garbage to pile up and breed flies while your plumbing goes out of whack and your girls get babies and clap at the same time?”²⁵

That was the sort of no-nonsense language that residents could expect from Synanon. Like a stern father, Dederich promised to create an orderly residential environment that would teach drug users to behave responsibly. Synanon Houses operated according to a hierarchical system. After detoxifying, new residents were schooled in household rules and given simple job assignments such as mopping or dishwashing. Experienced peers demonstrated right behavior. If new residents maintained decorum and did their jobs well, they could also eventually earn promotions and privileges. “I’m hooked into the organization and want to move up,” said one former actor. “The side effect may be getting well and growing up from being a baby to my thirty-four chronological years of age.”²⁶

Synanon’s group therapy sessions also helped residents “grow up.” Several times a week, residents gathered for confrontational therapy sessions. The group originally called the sessions “synanons”—supposedly inspired by a tongue-tied resident’s riff on “seminar” or “symposium”—but later decided to call them “games.”²⁷ The hard-fought confrontations provided an outlet for residents to express their daily frustrations. The sessions also used humor, ridicule, and rage to force participants to confront their

personal failings. In one of the first sessions, several founding Synanon members admitted they were using drugs on the sly. In an environment like the Lexington Narcotic Hospital, they might have hidden their habits from the therapist. But the encounter's ego-crushing peer pressure made it difficult to evade detection. In a Synanon session, Dederich explained, "there is no escape through chemicals, techniques of avoidance come to nothing, the con-wise criminal finds himself thwarted at every turn, and the high verbal professional can't find enough words to talk his way around things."²⁸ Synanon's founders confessed, and committed themselves to clean living.

Most of these members kept their promise.²⁹ Their ability to do so bolstered Dederich's claim that compulsive drug-seeking was a maladaptive response to social pressures. The treatment was simple: Synanon "points out [addicts'] stupidity in the hope that they will learn how to grow up and function like adults," said Dederich.³⁰ The technique worked for other symptoms of immaturity, avoidance, or indulgence. One Synanon member had been arrested seven times for protesting; she said she was "addicted to peace demonstrating and marches." She was immersed in hippie culture and "did everything they did but grow a beard" until Synanon helped change her self-presentation, worldview, and behavior.³¹ It did so without any drugs, within a surrogate family setting, and with considerable style and drama. In the 1960s, these strategies became excellent selling points.

Notes

¹ "Changing the World: the New Profession" audio tape of lecture by Charles E. Dederich, February 3, 1973. Box 70, UCLA Synanon Collection.

² "Life at Synanon is Swinging," *Time*, December 26, 1977, www.time.com, accessed January 21, 2013.

³ David Deitch and Joan Zweben, "Synanon: A Pioneering Response in Drug Treatment and a Signal for Caution" in *Substance Abuse: Clinical Problems and Perspectives* eds. Joyce Lowinson and Pedro Ruiz (Baltimore: Williams and Wilkins, 1981), 289-302.

⁴ Leon Brill, "Some Comments on the Paper 'Social Control in Therapeutic Communities' by Dan Waldorf," *International Journal of the Addictions* 6 (March 1971), 46.

⁵ For a summary of TC research, see George DeLeon, *The Therapeutic Community: Theory, Model, Method* (New York: Springer, 2000)

⁶ Max Weber and Stuart Eisenstadt, ed., *On Charisma and Institution Building: Selected Papers* (Chicago: University of Chicago Press, 1968).

⁷ Rod Janzen, *The Rise and Fall of Synanon: A California Utopia*. (Baltimore: Johns Hopkins University Press, 2001), 10.

⁸ *Seven Voices from Synanon: Oral History Transcript : Charles Dederich, Charles Hamer, Bettye Coleman, Monte Morton, James Middleton, Arlene Hefner, and Reid Kimball* (Oral History Program, University of California, Los Angeles, 1964).

⁹ David Gerstel, *Paradise Incorporated: Synanon* (Novato: Presido Press, 1982), 35.

¹⁰ Ralph Waldo Emerson's "Self-reliance" was published in a collection of essays in 1841 and is available here: <http://www.emersoncentral.com/selfreliance.htm>

¹¹ "The Early History of Synanon" transcript of interview with Charles E Dederich, Box 1, UCLA Synanon Collection

¹² Guy Endore, *Synanon* (New York: Doubleday, 1968), 40-47; Lewis Yablonsky, *Synanon: The Tunnel Back* (Baltimore: Penguin, 1967), 54.

¹³ "The Early History of Synanon" transcript of interview with Charles E Dederich, Box 1, UCLA Synanon Collection.

¹⁴ Lewis Yablonsky, *Synanon*, 61.

¹⁵ Richard Ofshe, "The Social Development of the Synanon Cult: The Managerial Strategy of Organizational Transformation" *Sociological Analysis* 41, no. 2 (1980): 109-127; Endore, *Synanon*, 352.

¹⁶ Timothy Novak, "LSD Before Leary: Sidney Cohen's critique of 1950s psychedelic research," *Isis* 88, no. 1 (1997): 97.

¹⁷ Sidney Cohen Interviews Charles Dederich about his LSD experience, June 4, 1966, audio recording, Box 614, UCLA Synanon Collection.

¹⁸ Timothy Leary endorsed Synanon as the "foremost university of behavioral change in the world" This quote was repeated in Synanon lectures and promotional material (see Synanon member Bill Crawford lecture at the University of Nevada, 1963. Transcript Box 1, UCLA Synanon Collection). Leary wrote positively of Synanon's therapeutic methods and implemented them in experiments with prisoners. See Timothy Leary, Ralph Metzner, Madison Presnell, Gunther Weil, Ralph Schwitzgebel, and Sarah Kinne, "A New Behavior Change Program Using Psilocybin," *Psychotherapy* 2, no. 2 (1965): 61-72 and Timothy Leary "The Effects of Consciousness-Expanding Drugs on Prisoner Rehabilitation" *Psychedelic Review* 10 (1969): 29-44.

¹⁹ Sidney Cohen Interviews Charles Dederich about LSD experience, June 4, 1966, audio recording, Box 614, UCLA Synanon Collection.

²⁰ US Senate Subcommittee on Executive Reorganization, *Organization and Coordination of Federal Drug Research and Regulatory Programs: LSD*, 89th US Congress May 24 and 25, 1966.

²¹ Ericka Dyck, *Psychedelic Psychiatry: LSD From Clinic to Campus* (Baltimore: Johns Hopkins Press, 2008).

²² Sidney Cohen Interviews Charles Dederich about his LSD experience, June 4, 1966, audio recording, Box 614, UCLA Synanon Collection; Sidney Finkelstein interview with author, July 23, 2011.

²³ Abraham Maslow “Comments on ‘Religions, Values and Peak Experiences’” in *The Farther Reaches of Human Nature* (New York: Penguin, 1971), 331-337.

²⁴ Ralph Waldo Emerson, “Self-reliance,”

<http://www.emersoncentral.com/selfreliance.htm>; For a description of Maslow’s definition of “self-actualization,” see Abraham Maslow, *Toward a Psychology of Being* (New York: D. Van Nostrand, 1962).

²⁵ Quoted in Guy Endore, *Synanon*, 358-360.

²⁶ Synanon resident Zev Putterman, quoted in Lewis Yablonsky *Synanon*, 282.

²⁷ Rod Janzen, *The Rise and Fall of Synanon*, 11.

²⁸ Scrapbook of Charles E Dederich’s responses to news articles, Box 83, UCLA Synanon Collection.

²⁹ Guy Endore, *Synanon*, 150.

³⁰ Lewis Yablonsky *Synanon*, 254.

³¹ *Or Die*, short film, Box 572, UCLA Synanon Collection.

Chapter Two Selling Synanon

In 1963, officials in the New York City Department of Corrections were considering an investment in the Synanon model. Richard McGee, a leader in midcentury prison reform and an administrator in California's Youth and Adolescent Corrections Agency, wrote a confidential letter to New York corrections commissioner, Anna Kross. McGee warned Kross to be suspicious of Synanon's positive press. "When Senator Dodd of Connecticut was in California holding hearings on this matter a year ago, he was completely taken in by the press-agentry of Mr. Dederich and wrote a laudatory speech into the *Congressional Record*," wrote McGee. "Unofficial information is that he is now very embarrassed by having gone out on a limb without careful investigation."¹

Critic Daniel Boorstin, author of *The Image: A Guide to Pseudo-Events in America*, could have predicted Dodd's orchestrated tour of Synanon and subsequent grandstanding on the senate floor. Boorstin's 1961 book argued that the rise of public relations (or "press- agentry"), advertising, and visual mass media warped the American public's understanding of historical and current events. New media professionals staged "pseudo-events"—marketing or entertainment gambits that audiences perceived as authentic and significant.² Boorstin described the process of producing pseudo-events in detail, and Synanon's strategies seemingly followed the tactics designed by early- and mid-twentieth century marketing men. After all, Charles Dederich—an accomplished salesman before the onset of his alcoholism— had been one of them.

To explain how a pseudo-event is constructed, Boorstin provided an example from public relations pioneer Edward Bernays's book, *Crystallizing Public Opinion*.

When a hotel wanted to increase its prestige, its leadership consulted Bernays. He told the hotel to persuade a committee of high-profile community members to host a thirtieth anniversary celebration big enough to attract media attention. “The occasion,” wrote Boorstin, “gave the hotel the prestige to which it was pretending.”³

The best pseudo-events, like the hotel celebration, are carefully staged and widely reported. Successful pseudo-events are self-fulfilling prophecies.⁴ For example, Synanon House’s staged tours implied that the organization was a significant new form of drug treatment; news coverage of the tours reinforced that idea. Yet, Boorstin notes, the media impact of pseudo-events depends on audience curiosity rather than gullibility. Is the news story real or fake? Ambiguity generates ongoing public interest. From the moment Synanon appeared in the press in the late 1950s, readers puzzled about whether or not to believe media accounts of its cure.⁵

In the late 1950s, the recovered heroin addict was a curiosity. Early Synanon members played into the sensationalism that often accompanied depictions of the social problem of addiction; one reporter described Dederich as a “cross between P.T. Barnum and Florence Nightengale,” a hybrid of grand self-presentation and altruistic intention.⁶ Without the aid of public relations professionals, Synanon members instigated local news coverage of a Santa Monica zoning controversy. They rallied celebrities, politicians, and academics to help Synanon resist wealthy opponents’ attempts to prevent the organization from occupying a new property on Santa Monica Beach. The conflict was initially a local issue that mainly interested beachfront homeowners, but Synanon used it as a platform for promoting the promise of its therapeutic method. Symbols, taglines, and scenes that were first described by the *Santa Monica Evening Outlook* were later repeated

in articles, photo essays, and films by national media outlets such as *Time*, *The Nation*, and *Life*.⁷ Following the paper trail, academics arrived to investigate the organization's novel treatment strategy. As scholars continued to study Synanon, their findings also circled through a series of popular media outlets. The tension between Synanon as verifiable, therapeutic breakthrough and stagey revival of a nineteenth century confessional lengthened the "pseudo-event" into an era. From 1958-1968, Synanon members sold the organization's addiction cure as the preeminent solution to the nation's drug abuse problem.

Synanon's Icons

"Unique Club Seeks to Whip Narcotics," declared one of the first articles published about Synanon, which appeared in the *Evening Outlook* just months after the organization was founded. Reporter R.D. Fox described the Venice Beach club's unconventional atmosphere, followed with a twist: the club's residents "are not 'beatniks.' They are not 'Bohemians.' They are narcotics addicts trying to cure themselves."⁸ The only requirement for membership, noted Fox, is the experience of "hitting bottom" and the desire to "start climbing the ladder back to normal society—back to the world of the 'squares.'" While members of Alcoholics Anonymous began their "steps" to sobriety from a similarly low point, Fox reported that Synanon stood for "Sin, Anonymous."⁹ In contrast to AA, Synanon claimed to offer a more comprehensive characterological make-over, one that combined confrontational therapy and public humiliation for wrongdoing with growth-motivated educational sessions that drew lessons from Bible passages, psychology and sociology texts, Ralph Waldo Emerson, and poetry.¹⁰ These sessions took place in intimate living quarters, which Fox described as an

efficient “ship-board type” atmosphere. Fox observed that a life preserver hanging on the clubhouse had the words “S.S. Hang Tough” painted in neat letters in place of a ship’s name. It means keep trying, don’t give up.”¹¹ “Hang Tough” also became an effective icon of Synanon’s novel therapeutic philosophy; two years later, *Time*’s photographer captured a casual portrait of Dederich in front of the life preserver.¹²

The “Hang Tough” directive worked for scholars as well as hardened addicts. Shortly after the first *Evening Outlook* articles appeared, a graduate student in sociology at UCLA joined Synanon. Rita “Ricky” Volkman was the first non-addict to participate in Synanon games and the first scholar to study the organization in depth.¹³ Initially, Volkman found the games “tremendously exciting,” but resisted the idea that they were relevant to her life as an accomplished, middle-class young woman. Gradually, participation in the games began to break down her self-image of a “lovely and highly educated young girl, just stuffed with sweetness and light.” Volkman’s confrontations with the ex-addicts caused an identity crisis as she came to view her polished self-image as an illusion, “another kind of dope I had been taking all my life.”¹⁴ Stripped of her previous source of self-confidence, Volkman immediately considered abandoning her research project. Volkman sat in her car and prepared to drive away when she “remembered that ‘Hang Tough’ motto that one of the addicts has painted on a ship’s life preserver. I would swing the wheel of my car hard and drive right back, determined to see it through.”¹⁵

Synanon permitted other writers to take part in early encounter groups. Less than two years after the first *Outlook* article appeared, Walker Winslow, a prominent journalist who had chronicled the Menninger family and their influence on psychotherapy, moved

into Synanon with plans to complete a book on the organization's therapeutic method.¹⁶ While Winslow anticipated that outsiders might consider living with ex-addicts "an adventure" or a "novel way of gathering morbid material," he experienced Synanon as a "a new dynamic of family life that each day brings some fresh reward."¹⁷ The uncompromising honesty evident in Synanon's therapy sessions could also be found on its house tours. Synanon guides, wrote Winslow, "followed the injunction 'display before you are investigated,' and let officials and professional people stroll where they will and talk to whomever they wish."¹⁸ Synanon leaders incorporated positive press coverage into their tours for journalists and officials. The media attention attracted newsmakers along with new residents.

Winslow covered the *Outlook* reports. The paper reversed its positive assessment of Synanon when the ex-addicts relocated from a seedy Venice storefront to an Armory building on Santa Monica Beach. Winslow posited that the paper's editors catered to wealthy Santa Monica residents that made up the paper's primary readership.¹⁹ The city condemned the Venice beach facility in 1959—Dederich later conceded that the small storefront wasn't designed to house twenty five people—and members of a local theatrical club volunteered to fund Synanon's rent if they found a suitable new building. The planned move to beachfront property met with fierce opposition from Synanon's new neighbors, who called City Council meetings and urged the city attorney to file investigations for health and zoning violations. In August 1959, Synanon was charged with a misdemeanor zoning violation for operating a hospital without a license, and the theatrical club withdrew their support. Synanon continued with a national public relations campaign.

Synanon residents drafted letters to California Governor Edmund Brown and to President John F. Kennedy. The Synanon file maintained by the National Institute for Mental Health (NIMH) included 54 letters from Synanon residents and supporters, and Synanon's own offprints of positive news coverage from *The Nation*, *Manas*, *Sepia*, *Downbeat*, and *Time*.²⁰ Synanon members perfected testimonials that emphasized the longevity of their abstinence from drugs. In a letter to President Kennedy, Charlie Hamer offered his two drug-free years in Synanon as evidence that the organization was "the first workable approach to this terrible problem that has yet been discovered." Rather than asking for federal funds, Hamer and others urged Kennedy to "help us preserve the right to help ourselves."²¹ At a Santa Monica City Council meeting, reported Winslow, "member after member of Synanon got up, after the manner of Salvation Army 'testifiers,' and told his or her story. Tears began to flow on both sides. Even the *Outlook* editorial writer was softened."²²

While Salvation Army testimonials were aimed at pious observers, Synanon members sought to convince the editors. As Synanon expanded, the extensive media coverage of its therapeutic lifestyle became difficult to distinguish from the actual inner workings of its media-rich environment. In 1964, the tour offered to a *San Francisco Chronicle* reporter followed an established script. By then, Synanon's display of positive news clippings blanketed a large corkboard near Synanon's office, where an ex-addict guide greeted the reporter with a firm handshake. Before offering his own recovery testimonial, the guide screened a short Steve Allen television clip about Synanon, which described members' domestic duties, intense group interactions, artistic pursuits, and therapeutic philosophy ("An addict is a child that has a need for a firm loving hand," said

Dederich's screen image).²³ When the guide finally offered his own testimonial, he punctuated his recovery story with a few rough statistics about Synanon's cure rate, pausing occasionally to point at the first academic book about Synanon to reprint Dederich's exaggerated figures.²⁴ The *Chronicle* article did not dwell on the data. Instead, it included a familiar observation—the S.S. 'Hang Tough' hanging over Synanon's mantle—and a title pasted from the pages of a *Life* magazine photo essay.²⁵

The 1962 *Life* article brought Synanon's addiction treatment to a national audience. The weekly picture magazine ushered in the age of the image; it debuted to a wide readership in 1936 and doubled its circulation to two million by the following year.²⁶ The *Santa Monica Independent* reported that the Synanon essay was the "largest black and white documentary that *Life* has ever done"; the photographer took more than 7,000 photos.²⁷ Critics anticipated that the story would have considerable reach. One Santa Monica doctor wrote to the Bureau of Narcotics Commissioner, Harry J. Anslinger, complaining that the *Life* article would bring the organization's problematic pitch to a national audience. Synanon "conducts a constant appeal to the youth community," he wrote, through its "beatnik atmosphere" and constant invitations to "fraternize with the addicts and thereby show what wonderful people they were."²⁸ The criticism had some merit; after seeing the *Life* essay, one young woman fantasized about using an eyebrow pencil to imitate track marks so she could gain admission to Synanon.²⁹ Even residents in the federal government's rehabilitation facility at Lexington, Kentucky received *Life*. The unforgettable Synanon issue circulated in group therapy sessions. After a post-Lexington relapse, one addict asked his brother to help him get to Synanon: "in the back of my mind I remembered the article from Lexington," he said.³⁰

The attention generated by the article began to alter Synanon's management structure. In the early 1960s, Synanon had three stages; residents moved up to greater degrees of responsibility and independence, concluding with a graduation. By 1965, Synanon phased out the final graduation stage. Synanon promoter Zev Putterman argued that the *Life* article forced Synanon to innovate. Synanon had to launch new industries to support an influx of residents attracted by the photo essay.³¹ Synanon developed new business projects—which included revenue-producing business ventures like gas stations as well as new treatment facilities in San Francisco and Connecticut — that required leadership and staff. Synanon had an incentive to retain its most experienced ex-addicts as leaders.

“*Peyton Place* for dope fiends”

The earliest ex-addicts from Synanon achieved celebrity. Other media outlets repeated the themes and images presented in *Life*. *Life*'s photos were recycled as décor in Synanon House's foyer; they appeared as part of the set when the Synanon band played on the television show *Jazz Scene USA*; and they hovered in the background of director Richard Quine's motion picture. The movie *Synanon*, produced by Columbia Pictures, dramatized *Life*'s journalistic photo essay and illustrated the therapeutic rationale that Synanon members promoted. *The Saturday Review*'s Hollis Alpert echoed local Santa Monica critics when he argued that the movie's attempt to make addicts sympathetic glamorized them. “Be *proud* to be an addict,” he wrote sarcastically. “Hollywood is on your side. Why, that whole fan magazine crowd is doing it, and if your own family can't or won't help you, if society at large turns its collective head, don't worry man. There's always Synanon.”³²

Columbia's publicity campaign further muddled the studio's artistic intention. At times, the movie was promoted as a serious film about rehabilitation; at others, an exploitation of teen fascination with hard drug use.³³ The advertisements catered to audiences' desire to see "real" stories of suffering and redemption. The program for the film featured two pages of biographies. The first page, titled "Cast Histories," featured headshots and resumes of the actors featured in the film; the second, "Case Histories," displayed headshots and rap sheets of the recovering addicts from Synanon who were awarded supporting roles.³⁴ As a promotional tie-in, the press book urged theater owners to ask former addicts to tell their stories on local radio or television spots.³⁵

One aspect of the film struck *Life* author Richard Stolley as "unsettling": watching "actors play real people."³⁶ Director Richard Quine enlisted Synanon residents as extras and supporting actors, and he styled the lead actors after real Synanon residents featured in the article. Still, Stolley gave the film an enthusiastic endorsement, asserting that its faithful adaptation of his text grounded it in truth. "Too melodramatic? Not in my experience," wrote Stolley. "Although there is ample drama, it is not the showbiz kind; it is the drama of a superb documentary, which it essentially is."³⁷ While the actors' performances might verge on the extreme, Stolley defended the film's authenticity on the basis of the plotlines, which were based on true events.

Actually, *Synanon* is a docudrama. *Life* magazine (and, later, famed *Time-Life* film producer DA Pennebaker) depicted the real-life dramas of Synanon's residents. The Columbia film fictionalized them.³⁸ According to film scholar Steven Lipkin, docudramas deploy melodrama—a narrative form that relies on stock characters and tightly written, pathos-filled plots—to deliver social critique. Docudramas place an

intimate, familiar domestic setting within the context of corrupt and powerful social systems. Lipkin argues that the docudrama's ability to resolve its fictionalized, domestic plotline suggests that the "lost moral structure" that characterizes the film's social setting "can be recovered and restored."³⁹

Synanon's plotlines were driven by the residents' real stories of redemption, which took place within a ship-shape domestic setting. As ex-addicts described *Synanon* as an exit from lives of prostitution, theft, drug dealing and alienation, their stories helped Dederich to sell the organization as a "tunnel back to the human race." The line became the title for the *Life* feature, the subtitle of an academic monograph on *Synanon*, and the tagline for the Columbia film.⁴⁰

The metaphorical tunnel went through *Synanon's* living room. *Life's* photoessay, like earlier journalistic tours of *Synanon*, took the viewer through the domestic spaces of

Synanon House. Photographer Grey Villet captured meals, chores, and conversations. These images established the normalcy of the ex-addicts' communal life. The mundane aspects of Synanon's private life made the contrasting images of sensational "game" therapy sessions more credible. Addicts were a curiosity. A radical new therapy with the potential to reform them? That was newsworthy. "We snatch all the covers off our dirty little secrets," said one *Life* headline in an ex-addict's voice. The article explained how the seemingly over-the-top, tough-love interactions created an environment that fostered domestic tranquility.⁴¹

Author Richard Stolley viewed *Life*'s close-ups of ex-addicts' confrontations through a therapeutic lens: "Out of his own agonizing honesty, the addict reaches a more realistic and, surprisingly, a more comfortable feeling about himself and his shortcomings."⁴² As a studio film, *Synanon* dramatized the residents' confrontations for entertainment purposes. Synanon's own public relations campaign nevertheless benefited from the docudrama approach. By redeeming a small cohort of addicted residents in a private therapeutic setting, *Synanon* suggested that effective treatment could counteract the prevailing drug culture. The repetition of Synanon's theories also helped sustain public interest about the veracity of its cure.

Some aspects of the film were strategic distortions, designed to bring Synanon's therapy to a wider audience. Dederich and his supporters sought movie deals from Synanon's start; at one point, they pitched a script about the zoning dispute. When Columbia finally acquired the rights to the Synanon story, the production company promoted the adaptation as a bold move. "Synanon sold the motion picture rights to three different companies," the film's press book explained. "In each case, options were dropped when controversy raged around the brave efforts of this institution." Instead of running from controversy, Columbia planned to capitalize on it.⁴³ Edmund O'Brien lobbied for the role of Chuck Dederich, who he described as "the most total personality I've ever met." But the Dederich character did not make an ideal leading man. "Columbia was interested in making money," said O'Brien. Producers inserted a doomed love story into the Synanon narrative in order to make the picture commercially viable. "Chuck wanted the [therapeutic] methodology truly represented. Then if a boy-girl story was necessary for the box office, he agreed to that," said O'Brien.⁴⁴

Although the film was a commercial failure for the studio, it was a successful public relations campaign for Synanon.⁴⁵ Dederich negotiated compensation for Synanon's role in the film's production. "I have no way of putting a price on the peculiar 'gut level' technical advice that is available here," wrote Dederich to Richard Quine, the film's director. "So what do I do? What is the matter with a lump sum in the neighborhood of \$100,000 or \$125,000 to cover all these things, help in rewriting, working with actors, etc."⁴⁶ Columbia also hosted a benefit premiere at Santa Monica's Aero Theatre and donated the proceeds to Synanon.⁴⁷ Synanon's own San Francisco premiere featured Synanon members, Chuck Connors, the Synanon band, and a display featuring *The Tunnel Back*, a scholarly book about Synanon.⁴⁸ Synanon members took advantage of the Hollywood publicity machine. They blamed the cinematic excesses on the entertainment industry. "We know more about living than Hollywood does," said one ex-addict who participated in a panel discussion following a San Francisco screening. "All they know is how to make one kind of movie, *Peyton Place* for dope fiends."⁴⁹

A junket with the National Institute of Mental Health

Incredible depictions of Synanon's therapeutic method also attracted scholars. Ricky Volkman's advisor, Donald Cressey, described her work on the group to criminologist Lewis Yablonsky. Cressey convinced Yablonsky that a "radical set of circumstances" might be required to solve an intractable problem like drug addiction.⁵⁰ Yablonsky observed Synanon in 1961. In 1962, Yablonsky and psychiatrist Daniel Casriel joined Dederich at Senate subcommittee meeting on juvenile delinquency. Casriel had visited Synanon while undertaking a nationwide survey of innovative addiction treatment methods. Dederich described Casriel's tour in salesman's terms. According to

Dederich, Casriel discovered Synanon as part of his “junket with the National Institute of Mental Health (NIMH).” “This ‘junket,’ agreed Casriel, “has been one of the most worthwhile and rewarding experiences of my life. I think [Synanon] is the greatest breakthrough psychiatry has seen since Freud.”⁵¹

Seven Synanon members submitted their case histories to Congress, summarizing the years of drug use, criminal history, and therapeutic failures they accrued before achieving months or years “clean” in Synanon. Like former addicts who emphasized the failures of previous treatments, Yablonsky and Casriel described their disappointing experiences researching and treating addicts in institutions such as Riverside and Metropolitan Hospitals. Thomas Dodd, Sr., the chair of the subcommittee, had invited the men to testify before the subcommittee. Dodd was a conservative Democratic Senator from Connecticut who, along with Estes Kefauver (D-TN), convened a series of hearings about the influence of media on adolescent violence. His subcommittee on juvenile delinquency would go on to explore the effects of drugs on youth. In 1962, he concluded the subcommittee’s examination of Synanon with a rousing endorsement that was later reprinted in the *Congressional Record*.

“The central ingredient of Synanon,” is not present “in any treatment methods attempted in correctional institutions, psychiatric clinics or even the two Federal hospitals for drug addicts,” declared Dodd. That ingredient, he concluded, is the “family type social climate where hardened drug addicts help each other get a grip on life.” Synanon’s ability to function as a “substitute for the right kind of family most addicts never had” served as a Dodd’s central selling point to his fellow politicians.⁵²

Congress listened to the Synanon sales pitch. Daniel Boorstin, quoting a disenchanted public servant, argued that the establishment of the *Congressional Record* in 1873 helped turn the proceedings of Congress into “a sort of variety performance, where nothing is supposed to be real except the pay.”⁵³ For his part, Dodd claimed he was not highlighting the seven Synanon members as “horrible examples, or to exploit their difficulties”; his stated goal was to “draw inspiration” from the ex-addicts’ experiences and urge federal agencies such as the NIMH to “experiment with the Synanon idea.”⁵⁴

Controlled experiments proved difficult. Synanon members resisted efforts to quantify or replicate the organization’s processes. Dederich said he “didn’t believe in statistics”; he favored participant-observation instead.⁵⁵ In 1961, Synanon leaders refused to furnish California’s narcotics commission with client records.⁵⁶ Still, Synanon’s opposition to statistical analysis did not prevent the organization from developing what Boorstin called a “corporate image,” a brand identity built on “over-simplified, sociological concepts such as ‘status,’ ‘other –direction,’ etc.”⁵⁷

Yablonsky’s research argued that “status,” not pseudo-familial relations, was at the center of the Synanon model. Former addicts could earn recognition for achievements that ran contrary to the reinforcement they previously received for abiding by the code of the “street.” Ex-addicts served as achievable role models for new Synanon recruits, who could move up to positions of leadership and authority in the organization as they matured. In Synanon, developing a new, drug-free identity became a way to gain status. Although early critics of the organization observed that residents’ adoption of a strict behavioral code resembled the brainwashing tactics of an Army boot camp, Zen monastery, or Maoist re-education camp, Synanon members argued that their growth in

the program was not simply a response to external stimuli.⁵⁸ “Outer-directed” individuals, explained sociologist David Riesman in his popular 1950 book, *The Lonely Crowd*, reacted to their circumstances, allowing the social expectations placed on them to shape their desires and identity. Riesman argued that the technocracy of the 1950s tended to favor the outer-directed personality type, as these individuals could be easily convinced to adopt the goals and values of large organizations. In contrast, “inner directed” individuals had a strong, autonomous sense of their own identity, values, and unique human potential. After Synanon residents rejected their former identities as addicts, they theoretically went through a process of discovery and emerged with a more authentic sense of self. “In the space of just a few short months,” wrote one reporter, “former addicts have passed through two stages of transformation corresponding approximately to Riesman’s change from ‘outer-direction’ to ‘inner direction.’”⁵⁹

Synanon embraced social science terms while largely rejecting the scientific method. This tactic was in keeping with the marketing trends of the time, as dry, data-driven advertisements gave way to a style of self-expression and nonconformity.⁶⁰ Yablonsky, who later became Synanon’s Director of Research, intuited the trend when he argued that there was a “possible danger in using standard methods of research on Synanon.” The danger was part placebo effect, part public relations problem. Systematic attempts to study the residents could conceivably impair the aura of positive expectation and success that surrounds Synanon,” wrote Yablonsky.⁶¹ Part of the reason Synanon was able to attract and reform new residents, Yablonsky argued, was that addicts believed the cure would work. “Attitudes are more important than facts,” declared one prominent sign in Synanon House.⁶²

Addicts who did not believe Synanon's method would work quickly departed, and the organization did not follow up with residents who gave up on the therapy after a few short days or weeks. The records that the organization provided to the New Jersey Study Commission in 1964 indicated that around 50 percent of Synanon residents left within the first six months—not enough time to reform an addictive personality by Synanon's standards.⁶³ Although Synanon guarded its rosters, an internal population history conducted in November of that year anticipated later studies of therapeutic community efficacy. The longer residents stayed in Synanon, the less likely they were to drop out: the split rate fell to 40 percent for those who stayed three months, 32 percent for those who stayed six months, and less than 25 percent for those who stayed a year or longer. Of the 1180 members who had joined Synanon since 1958, 463 (39.3 percent) were in residence or had graduated in good standing.⁶⁴ By the standards of Synanon's contemporaries, that cure rate was more than respectable.⁶⁵

But good data paled in comparison to compelling visual evidence— like a beachside class picture of Synanon's reformed addicts, the opening shot in a Time-Life documentary film. The photo reinforced Synanon's preferred numerical argument: that the organization had “the largest number of clean addicts in one place as anyplace else in the world.”⁶⁶ The talking point came with an important caveat: “outside an institution.” Because Synanon residency was purely voluntary, the members argued that it differed from coercive total institutions like prisons or hospitals. Synanon's promoters claimed that its successful but unconventional therapeutic methods made it difficult for the organization to obtain federal government support.

Synanon followed Dodd's suggestion to his fellow senators and, with Yablonsky's help, applied for NIMH funding. The reviewers rejected Synanon's application and funded other therapeutic communities, based on the Synanon model, instead. Synanon turned to industry. After Synanon failed to generate the expected grant funds, supporter Guy Endore explained, the organization "was forced to depend on the charity of thousand of modest donors, plus some few—some very few—larger donors such as the Mellon Family."⁶⁷

Sponsors of Synanon

A 1964 list of Sponsors of Synanon (known by the acronym SOS) included entertainers such as Steve Allen, Ruth and Milton Berle, and Jack Lemmon; media professionals such as *Life's* Richard Stolley and Henry Geiger, the publisher of the counterculture magazine *Manas*; and mental health researchers such as Karl Menninger, Donald Cressey, and Lewis Yablonsky.⁶⁸ By the mid-1960s, Synanon cited several large companies as major investors, including Burlington Industries, Singer, Haggard, and Maidenform.⁶⁹ Synanon's so-called "hustling" program began when the first residents begged for modest donations of food and clothing. Within a few years, hustling had grown into an efficient operation. Synanon members told companies that they could dispose of unsold food and merchandise by donating their goods to Synanon. Salespeople emphasized that because Synanon was charitable enterprise, donations were eligible for tax write-offs.

Synanon supporters often made the economic argument for their treatment method. A pamphlet soliciting monetary donations described the "billions of dollars wasted" on ineffective educational programs that fail to prevent or cure drug addiction.

“This is because of our neglect in teaching adulthood and fundamental morality, Synanon’s basic curriculum,” wrote fundraisers. A detachable return card provided blank spaces where potential donors could contribute to Synanon by indicating how long they would “like to keep one drug addict off the streets.” According to the card, Synanon rehabilitated a single addict for the cost of approximately \$3 a day, \$20 a week, \$80 a month, and \$1000 a year.⁷⁰

By 1963, Synanon had an impressive fundraising record. That year the organization received approximately \$800,000 in donations of goods and services and \$200,000 in cash.⁷¹ In Synanon, fundraising was part of the treatment. Synanon’s ex-addicts gained the confidence to seek out powerful, moneyed individuals. “I could go to the president of most banks and get an appointment, or crash a senator’s office because he’s never sure how many votes I represent,” remembered John Maher, a former Synanon member who later founded his own therapeutic community. At Synanon, Maher learned to transition smoothly from corporate meetings to countercultural gatherings, “addressing huge college rallies while the mob cheers, ‘Right on!’”⁷²

In addition to soliciting donations and drumming up popular support, in the early 1960s Synanon started its own industries, beginning with a series of gas stations in the Los Angeles area. In 1964, Synanon leaders asked Walker Winslow to compose several advertisements for trade journals.⁷³ Even the organization’s gas station ads relied on Synanon’s characteristic tension between reality and self-promotion. With cheeky self-referentiality, the ad for Synanon’s Texaco station declared, “Synanon service doesn’t come naturally! Obviously this photograph didn’t just happen. We planned it, posed it, pressed the uniforms, even brought along a birdie for our guys to look at.”⁷⁴ The ad

concluded that Synanon members were equally conscientious about achieving good results with the cars they serviced, citing the stations' sales records and customer satisfaction as evidence.

Synanon was led, managed, and supported by the work of its ex-addict residents, whose earnings pored back into the non-profit endeavor. Labor was central to Synanon's mode of rehabilitation, and its rehabilitative mission justified Synanon's non-profit status. Ideally, working at gas stations or soliciting donations helped train residents for the adult responsibilities that they had evaded while in the grip of addiction. Other plans for Synanon's expansion were more overtly therapeutic enterprises. In 1961, Synanon piloted the Terminal Island Project off the coast of Los Angeles. At the island's penitentiary, Synanon members led confrontational game sessions for prisoners and established a small, Synanon-type community inside the prison.⁷⁵ Inmates were initially doubtful about the program until "some of the Synanons began to kick off and do something with the guys who got with it," said Candy Latson, a Synanon member who led the effort.⁷⁶ A few Synanon members had once been Terminal Island inmates; they returned to the prison to make the case for the Synanon program as a viable prison reform. James Middleton— an ex-addict who allowed his rap sheet to be reprinted by *Life*, Columbia Pictures, and the *Congressional Record*— argued that former inmates were uniquely qualified to bridge the communication gap that invariably separated prisoners from the correctional employees who attempted to coercively reform them. "It is conceivable to me that someday Synanon could become an established part of the prison system throughout the United States," predicted Middleton.⁷⁷

The program ran for two years before encountering resistance from administrators who did not want Synanon inmates living together on a single cellblock.⁷⁸ Although prison leadership removed Synanon from the program, the model Synanon initiated continued when Terminal Island became a federal drug treatment site under the Narcotic Addict Rehabilitation Act (NARA) of 1966. According to a report published by the National Institute on Drug Abuse (NIDA), the Terminal Island program was the earliest precursor to the implementation of therapeutic communities in prisons.⁷⁹ Meanwhile, Synanon members moved on to Nevada. After seeing Yablonsky give a presentation on Synanon's program at a regional psychology conference, a Nevada State Prison psychologist, visited Synanon in California. He reported back to his superiors, who were sold on the program. Within weeks, Synanon members opened a house in Reno, and introduced Synanon sessions into the state prison setting.⁸⁰

The program generated more positive publicity. In Reno, Synanon's "tunnel to the human race" was no longer metaphorical; the confrontational therapy sessions were held in caves beneath the earth. Walter Cronkite's documentary series *Twentieth Century* followed Latson into the prison's cellar. On March 13, 1966, the show broadcast the remarkable transformation that occurred upstairs on the Synanon prison halls. On Synanon's row, inmates played chess, hung art on their walls, and listened to classical music. They lived without bars on their cells. The confrontational sessions, shown in detail, civilized the Synanon cellblock. Latson, a seasoned Synanon leader, argued that the therapy sessions he led could address sins other than addiction. The program's narrator asserted that Latson brought a revolutionary idea into the prison: "the idea that crime, like dope, is an addiction to stupidity."⁸¹ By using the game sessions to break

down the defenses of prisoners—the same defenses he had unlearned in Synanon—Latson reportedly helped the inmates evolve beyond the impulsive and immature behavior that characterized their pasts.

At the same time, Synanon established new locations for its voluntary therapeutic program. Several Synanon members moved north to San Francisco, where they recruited addicts into the program, forged bonds with sympathetic audiences, and solicited donors. In 1964, the San Francisco chapter of SOS invited Dederich to establish a Synanon residence in the area. With help from sponsors, Synanon acquired an old warehouse near the water and Synanon's ex-addicts carried out a full-scale renovation. Soon after, Synanon expanded its Bay Area operation by purchasing an estate in Marin County. Predictably, the organization faced opposition from local residents; but this time, Synanon had experience making its case. Synanon affiliate and attorney Dan Garrett argued that Synanon's rapid expansion from "a raggedy bunch of Beatniks occupying a storefront to a multimillion dollar enterprise spanning the entire United States" was possible "precisely because it has never permitted the slightest compromise with morality."⁸² Garrett successfully argued that the familial qualities of Synanon's rehabilitative enterprise justified the use of properties zoned as residential, like the estate in Marin.

By the mid-1960s, the Synanon family was bi-coastal. Synanon's public relations campaigns contrasted the healing environs of the California beachfront with the hardscrabble streets of New York City. In a press release announcing the new San Francisco location, Dederich claimed that he could "have 3,000 addicts off the New York streets in 18 months."⁸³ Synanon also established a small residence in Westport,

Connecticut as an intake center for the California locations. In 1964, Dederich estimated that about half of Synanon's population came from New York, "the junk capital of the world." Dederich said that more than 50 percent of the East Coast addicts who arrived at Synanon since 1959 were "living drug-free lives."⁸⁴

Synanon's public relations agents shaped the organization's pitch for niche media outlets in New York City. The vice president of San Francisco's SOS sent "exclusive" press releases about Synanon's planned 1964 expansion to editors at the *New York Post*, the Spanish publication *La Prensa*, *Business Week*, and *Jet*. For *La Prensa* and *Jet*, Synanon emphasized the inspiring recovery stories of Puerto Rican and African American residents; for *Business Week*, the organization noted that Synanon began with "the total capital of \$32 and a dozen addicts" and "doubled its size each year." The letter to the *New York Post* highlighted Dederich's "colorful, positive, and important personality" and promoted his planned confrontations with city officials as the "New York invasion."⁸⁵

According to the letter to the *Post*, Dederich traveled to New York at the invitation of a New York Supreme Court judge; he brought along "several ex-addicts taken off the streets of New York" to "act as an indication of the effective work of Synanon."⁸⁶ Within a year, local officials would support several new drug treatment centers based on the Synanon model. Dederich's "invasion," however, did not result in direct support for a large Synanon center on the East Coast.

A Rehabilitation Destination

Synanon's intake centers relied on persuading individual addicts rather than invading institutions. The treatment failures that colored many Synanon members'

biographies were based in real social circumstances: in the early 1960s, effective addiction treatment was practically non-existent. By 1965, 34 states still had *no* special facilities for addicts.⁸⁷ While Synanon was hardly luxurious—residents were expected to work, bunked together, and subsisted on donated food and clothing—the beachfront locations were a draw for addicts accustomed to the hustle of the city or the boredom of pastoral cures in Lexington and Fort Worth. Local Santa Monica papers reported that Synanon quickly established a reputation through underground networks of drug users.⁸⁸ After being discharged from Lexington, one addict learned about the Synanon cure from a drug-using friend who “made their set-up sound like Utopia.”⁸⁹

By the mid-1960s, Synanon had gained enough acclaim to begin charging some addicts for admission. Rates varied, but were rumored to run between \$500 or \$1,000 (equivalent to about \$3500 and \$7000 in today’s dollars).⁹⁰ One addict who was unable to raise the funds to enter Synanon griped, “I don’t give a damn whether it calls itself a social movement or the French Revolution. It’s just the country club of junkie places.”⁹¹

In the years before Synanon became a social movement, its leaders marketed the country club lifestyle to non-addicts. Synanon ran confrontational therapy groups for non-addicts as early as 1961, when members helped a Santa Monica minister use Synanon’s confrontational techniques as a form of couples’ therapy.⁹² In 1966, Synanon opened its first “game club”; for the price of a monetary donation to Synanon, non-addicts could gain admission to Synanon’s confrontational therapy groups—and enjoy Synanon’s facilities near the beach.⁹³

“You may be able to buy a private beach club membership, or a sauna, or entertainment, or whatever, elsewhere,” read a letter to new Santa Monica Synanon club

members. “You cannot, however, buy the Synanon game elsewhere at any price!”⁹⁴ An ex-addict who managed the Santa Monica game club sold the confrontational groups as a form of recreation: “a social function, a setting for relaxation” and a “way of managing apathy.”⁹⁵ Synanon expanded its message to focus on re-education for the disenfranchised masses, rather than drug rehabilitation for an underworld minority. One Synanon public service announcement proposal directed members to “play down drugs, etc. Emphasize group interaction.” Synanon would be sold to non-addicted members as a new form of education: the “communiversity.” “The Synanon Foundation has developed a re-education process which supplies the individual with moral and intellectual tools, enabling him to cope with a changing world,” stated the radio spot.⁹⁶

The sales approach worked. In 1967, approximately 1,000 non-addicts engaged in confrontational therapy groups at clubs in Santa Monica, San Diego, San Francisco, Reno, Detroit, and New York; 700 people were on waiting lists to join.⁹⁷ A San Francisco news station produced a two-part documentary on the clubs, advertising the utility of confrontational group sessions for managing interpersonal relationships in schools, businesses, and marriages.⁹⁸ After the documentary aired, the San Francisco club received 85 new applications.⁹⁹ One San Francisco area director promoted the Synanon game as a promising method for “unearthing possible approaches to such gigantic social questions as racial conflict and the generation gap.” Synanon “still counters addiction as a side effect of its full time educational process,” said the director. But in the late 1960s, its “scope expanded considerably.”¹⁰⁰ Synanon became part of what one critic called “America’s one growth industry”: the human potential movement. Synanon game sessions, like “T-groups, encounters, marathons, and sensitivity training workshops,

spread across the landscape like real estate developments in Southern California.”¹⁰¹ By 1968, the year Synanon became a “social movement,” the organization had 3,400 non-resident members.¹⁰²

Synanon and Cultural Transformation

That year, Synanon celebrated its ten-year anniversary as a rehabilitation mecca. At the party, Synanon’s leaders announced its ambitious new mission. Hundreds of Synanon members met near Synanon’s former location at the rear of the Pacific Coast Highway and formed a human chain for the walk back to the palatial residence on Santa Monica beach. While Synanon’s brand had once relied on its association with supposedly irredeemable addicts like Charlie Hamer, Synanon newsletters presented the beachfront formation as the new “Synanon personified: old and young, black and white, ex-dope fiend and businessman.” The media event, like previous ones, also highlighted positive news and documentary footage of Synanon—a decade’s worth. Later that evening, celebrants were “treated to a display of old Synanon films, newsreel clippings, and some film strips which would not have been seen since Synanon’s early days.”¹⁰³

The screenings played on the prestige of past media attention. Synanon’s big reveal to contemporary media outlets, however, was the debut of the organization’s new statistical tool. In a press release for the 1968 event, Synanon announced its own metric for the success of its rehabilitative enterprise. Rather than concentrating on the number of cured addicts, Synanon introduced the “clean man day,” which members defined as the cumulative number of days that Synanon’s ex-addicts remained drug-free, crime-free, and outside of hospitals and jails.¹⁰⁴ Later critics noted that Synanon’s “clean man day” calculation depended on ex-addicts’ continued residence inside Synanon; after all, hadn’t

many addicts accumulated a number of crime and drug-free days in jails or hospitals, only to relapse following their release?¹⁰⁵ Synanon contended that its program's central virtue, in comparison to established institutions, was its cost. Synanon rehabilitated addicts at no expense to taxpayers, and at a much lower daily rate than other institutions.¹⁰⁶ Synanon's earlier resistance to data might have created dramatic anticipation for its quantitative debut, but the press release quickly changed the topic. Although Synanon's directors now had the numbers to defend their claims of efficacy, they also "had the unpleasant and unproductive experience of being treated as statistics in the various arms of the bureaucracy." As a result, they "felt that Synanon's growth in human terms over the past ten years was of greater consequence."¹⁰⁷

The declaration was no contradiction; by tying economic arguments to personal growth, Synanon's press release was in keeping with new management trends. The technocratic, bureaucratic management style that had dominated corporate culture at mid-century was shifting in favor of new approaches that valued creativity, individual expression, and work fulfillment. Dederich and other Synanon members embraced the work of psychologist Abraham Maslow in the early and mid-1960s. According to historian Jessica Grogan, Maslow, the founder of humanistic psychology, was inspired by the New Left movements of the 1960s, particularly the civil rights and anti-war movements. The individuals who participated in these movements challenged and surpassed the limitations that society placed on them. Grogan argued that Maslow's optimistic theory about the universal human capacity for spiritual connection, fulfillment and joy was "reinforced almost daily by the parade of individuals who pronounced, in what sounded to Maslow like a distinctly Maslowian style, a new era of the self."¹⁰⁸

Maslow undoubtedly heard several of these inspiring accounts when he visited and lectured at Synanon in 1966; later, he classified Synanon and one of its spin-offs as examples of *Eupsychia*—utopian societies that fostered, rather than stifled, spiritual and psychological growth.¹⁰⁹ Although his humanistic theory had roots in the New Left, Maslow quickly shifted his attention from utopian societies to the corporate world, publishing *Eupsychian Management* in 1965. In the early 1960s, Maslow’s warmest reception came from executives who believed humanistic psychology could improve employee productivity¹¹⁰

Maslow was also welcome at Synanon. Synanon members discussed his work on self-actualization in meetings in the early 1960s. According to Dederich, “Maslow” became a household name among the ex-addicts—on par with “Sinatra.”¹¹¹ Maslow agreed with Synanon’s method of stripping away the particular social and cultural influences that impeded addicts’ self-realization. Self-actualizing people in every culture, Maslow told his Synanon audience, have discovered that the “ultimate verities are in our guts.”¹¹² The confrontational therapy practiced by Synanon and similar groups “ripped aside the veil of the half-blind world” by “cleaning out the defenses, the rationalizations, the evasions and politenesses of the world.”¹¹³ Significantly, rather than concentrate on Synanon as an idyllic, separatist society that cultivated the discovery of universal truth, Maslow focused on the organization’s potential to transform the business of mental health care. In an uncharacteristically positive war metaphor, Maslow declared that Synanon was “in the process of torpedoing the entire world of psychiatry, and within ten years will completely replace psychiatry.”¹¹⁴

Synanon and its successors picked up on the idea that confrontational therapy games could be a boon to human relations; according to Synanon's promoters, they offered a way to increase personal satisfaction and organizational productivity. The documentary produced for a San Francisco television station pitched Synanon's game as a great "tool for business managers," and explained that the tool had already been effectively demonstrated in Synanon's many enterprises. Historian Natasha Zaretsky argued that Maslow's well-received Quality of Work Life (QWL) programs saw the factory as the site of "self-fulfillment," not labor alienation.¹¹⁵ One Synanon representative echoed this insight. Workplace game sessions allowed business leaders to learn the details about floor-level plant operations while providing workers with an opportunity to blow off steam. As a result, he concluded, the encounters might help corporations realize their "human potential *as organizations*."¹¹⁶

Synanon members also promoted Maslow's suggestion that the ex-addicts' influence on the psychiatric establishment might have larger social and political implications. At a lecture for a Synanon-inspired therapeutic community in New York, Maslow argued that the organization's graduates were uniquely qualified for a "new kind of job opening up," "an activists' job that demands experience rather than book training." The lay professionals who excelled in this new profession were not "the people with PhDs"; they were "the people who have been on the streets and know what it is all about themselves."¹¹⁷ The prediction reflected Synanon's critique of technocratic responses to social problems such as addiction. Maslow championed the ex-addicts' ability to see beyond the establishment's limited vision for drug treatment, and urged Dederich to "groom some young people for politics."¹¹⁸

Synanon members later framed their group confrontations as a way to overcome the divisive cultural conflicts of the late 1960s. One poem, printed over an image of empty directors' chairs arranged in a circle, mused that Synanon's encounters offered a potential solution for rebellious youthful drug use, prison riots, college protests, and inner city racial confrontations. Synanon could fill the chairs with the warring parties, and get "all the people talking to each other."¹¹⁹

Synanon's new identity as a social movement was fraught with tension between the stated desire to transform society and the motivation to recruit residents. Even as Synanon used its purported success with heroin addicts to sell its therapeutic model to new audiences, Dederich ousted old-timer addicts. He claimed they interfered with the organization's productivity and undermined its updated image.¹²⁰ Synanon leaders believed that their therapeutic model had the potential to revolutionize sectors of society such as business and education, but they fiercely resented the emergence of subsequent addiction treatment centers based on Synanon's philosophy. Because Synanon maintained the mystery about the details of its operating procedures, Dederich argued that his model was impossible to replicate. "How do you imitate something that you don't fully understand?" he asked rhetorically.¹²¹

Later therapeutic communities inspired by the Synanon model would use many of the same promotional strategies pioneered by the commune: practiced tours of idyllic domestic settings, personal stories of redemption, and imagery depicting addiction treatment as a process of rebirth and maturation. They would also face challenges from proponents of other treatment models such as methadone, who argued that the labor- and time-intensive residential therapeutic community (TC) cure did not place enough

emphasis on integrating addicts into society. While later TCs aimed to return addicts to society after they had been sufficiently re-educated, Synanon members increasingly argued that society itself was sick. In so doing, Synanon tapped into the seemingly conflicting desire of non-addicted spiritual seekers: to transform society by dropping out of it. The press release announcing Synanon's new incarnation as a social movement declared that the organization was "absorbing people into the *responsible community*" (emphasis added).¹²² Synanon's restyled Victorian philosophy—with its focus on self-reliance, rules, rigorous self-examination, and family values—had a novelty quality that nevertheless appealed to influential supporters in politics, academia, corrections, and media. In 1962, *Manas* disseminated Synanon's self-fulfilling prophecy: "the Synanon method seems destined for large-scale application—in prisons, in public hospitals, and independently, in a growing number of communities."¹²³ As Dederich also predicted, each of these stakeholders would have different interpretations of his controversial cure for drug addiction.

Notes

¹ Richard A. McGee to Anna Kross, May 13, 1963, Folder F3717:195; Box F317:192-219; California State Archives, Sacramento, CA.

² Daniel J. Boorstin, *The Image: A Guide to Pseudo Events in America* (New York: Vintage Books, 1992).

³ Boorstin, 10.

⁴ Boorstin, 12.

⁵ Ibid.

⁶ "Synanon: On the Side of Life," *Manas*, December 25, 1963.

http://www.manasjournal.org/pdf_library/VolumeXVI_1963/XVI-52.pdf

⁷ David Gerstel, *Paradise Incorporated: Synanon* (Novato: Presido Press, 1982), 40.

⁸ R.D. Fox, "Unique Club Seeks to Whip Narcotics," *Evening Outlook*, January 23, 1959.

⁹ Ibid.

¹⁰ R.D. Fox, "Drug Addicts Get a Lift," *Evening Outlook*, January 24, 1959.

¹¹ Ibid.

¹² "S.S. Hang Tough," *Time*, April 7, 1961. Synanon offprint, personal collection of author.

¹³ Guy Endore, *Synanon* (New York: Doubleday, 1968), 192.

¹⁴ *Ibid.*

¹⁵ *Ibid.*

¹⁶ Walker Winslow, "Synanon Revisited," *Manas*, February 8, 1961. Synanon reprint, personal collection of author.

¹⁷ *Ibid.*

¹⁸ *Ibid.*

¹⁹ Walker Winslow, "Experiment for Addicts," *The Nation*, April 29, 1961. Synanon reprint, personal collection of author.

²⁰ For letters to Brown, see Folder F3717:195; Box F317:192-219, California State Archives, Sacramento, CA. For letters to the Kennedy administration, see Folder 1 of 2, Synanon Foundation Correspondence; Box 3 Public Relations Correspondence 1939-1973 Clinical Research Center (CRC), Lexington, Kentucky; Records of the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA), Record Group 511; National Archives and Records Administration (NARA)- Southeast, Morrow, GA.

²¹ Charles Hamer to President Kennedy, February 25, 1961; Folder 1 of 2, Synanon Foundation Correspondence; Box 3 Public Relations Correspondence 1939-1973 CRC, Lexington, Kentucky; Records of the ADAMHA, Record Group 511; NARA- Southeast, Morrow, GA.

²² Winslow, "Experiment for Addicts," *The Nation*.

²³ Steve Allen Show film clip, undated, Box 571, UCLA Synanon Collection. The *Steve Allen* variety show was produced by NBC and ran from 1956-1960.

²⁴ The reported success rate was 90 percent for those who stayed at least three months: Daniel Casriel, *So Fair a House: The Story of Synanon* (Englewood Cliffs: Prentice-Hall, 1963), 177.

²⁵ Harold Gilman, "Tunnel to the Human Race," *San Francisco Sunday Chronicle*, January 26, 1964; Grey Villet and Richard Stolley, "A Tunnel Back to the Human Race" *Life*, March 9, 1962, 52-67.

²⁶ Boorstin, *The Image*, 38.

²⁷ "Synanon Story in *Life*," *Santa Monica Independent*, March 1, 1962.

²⁸ Eugene Ireland to Harry Anslinger, March 6, 1962; Folder 1 of 2, Synanon Foundation Correspondence; Box Public Relations Clippings 1939-1973; Records of the Alcohol, Drug Abuse and Mental Health Administration, Record Group 511; National Archives and Records Administration- Southeast, Morrow, Georgia.

²⁹ Rod Janzen, *The Rise and Fall of Synanon*, 30.

³⁰ Ted Dibble, interview with author, August 26, 2012.

³¹ Zev Putterman, June 21, 1965, Recording, Box 605, UCLA Synanon Collection.

³² Hollis Alpert, review of *Synanon*, Columbia Pictures, *The Saturday Review*, May 1, 1965, 4.

³³ A *Variety Weekly* article, "Film Plugs & Pluggers: Needle Sharp Excitement of the Sell," April 28, 1965, referred to the campaign as "schizoid," contrasting lines that read "decorously" ("Dope addiction, the topic making headlines across the country...") with more thrilling prose ("cash in on needle sharp excitement...!"). The article cheekily suggested alternative slogans for the "basically honest project": "Synanon'—your mainline to profit!" "Hypo your boxoffice!" "Watch the kids kick the TV habit!" This

marketing approach was characteristic of low-budget “social problem” films; see Eric Schafer, *Bold! Shocking! Daring! True! A History of Exploitation Films, 1919-1959*. (Durham: Duke University Press, 1999).

³⁴ *Synanon* Program (Los Angeles: Columbia Pictures, 1965), Folder Synanon Movie: Quine PR, Box 100, UCLA Synanon Collection.

³⁵ “Do you have a former addict in your community? One that would be willing to stand up and say ‘Yes, I was...’ on radio and television and to the press? Such an individual could be the greatest box office booster that ever came into your showmanship history! To find him (or, preferably, her!) ask the Police Department or welfare agency for assistance...” *Synanon* Pressbook (Los Angeles: Columbia Pictures, 1965), 9. Author’s personal collection.

³⁶ Richard Stolley “An Honest Look at the Tunnel Back,” *Life*, May 14, 1965, 19.

³⁷ *Ibid.*

³⁸ For Time-Life’s direct cinema depiction of Synanon, see Bill Ray, *David* (New York: Time-Life Broadcast and Drew Associates, 1961), 16mm.

³⁹ Steven Lipkin, *Real Emotional Logic: Film and Television Docudrama as Persuasive Practice*. (Carbondale, IL: Southern Illinois University Press, 2002), 5.

⁴⁰ Grey Villet and Richard Stolley, “A Tunnel Back to the Human Race” *Life*, March 8, 1962; Lewis Yablonsky, *Synanon: The Tunnel Back*. (New York: Penguin, 1967); *Synanon* Pressbook (Los Angeles: Columbia Pictures, 1965),

⁴¹ Grey Villet and Richard Stolley, “A Tunnel Back to the Human Race,” 56-57.

⁴² Stolley “An Honest Look at the Tunnel Back,” 19.

⁴³ *Synanon* Program (Los Angeles: Columbia Pictures, 1965), Box 100, UCLA Synanon Collection.

⁴⁴ Paine Knickerbocker, “Edmund O’Brien’s Approach to Synanon,” *San Francisco Chronicle*, May 5, 1965.

⁴⁵ Folder Stockholder’s Report 1968, Box 100, UCLA Synanon Collection

⁴⁶ Charles Dederich to Richard Quine, October 5, 1964. Folder Columbia Pictures, Box 102, UCLA Synanon Collection.

⁴⁷ “A benefit preem for ‘Synanon’” *Hollywood Reporter*, May 11, 1965.

⁴⁸ Folder Synanon Movie: Quine PR, Box 100, UCLA Synanon Collection.

⁴⁹ Grover Sales, Jr, “Critics Choice” column clipping, Folder Synanon Movie: Quine PR, Box 100, UCLA Synanon Collection.

⁵⁰ Yablonsky, *Synanon: The Tunnel Back*, 2-3

⁵¹ *Hearings Before the Subcommittee to Investigate Juvenile Delinquency of the Committee of the Judiciary, US Senate, 87th Cong, 2nd session, (August 6 & 7, 1962), 2785.*

⁵² “A Study in Heroism: Statement of Thomas Dodd to the US Senate Subcommittee to Investigate Juvenile Delinquency” *Congressional Record*, September 6, 1962. Synanon offprint, personal collection of author.

⁵³ Boorstin, *The Image*, 18.

⁵⁴ “A Study in Heroism,” *Congressional Record*, September 6, 1962.

⁵⁵ Casriel, *So Fair a House*, 176.

⁵⁶ Letter from Arthur Alarcon to John O’Connell, December 15, 1961 with appended report, Folder 3717:196, Box 1917-10, California State Archives.

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- ⁵⁷ Boorstin, *The Image*, 202.
- ⁵⁸ Edgar Friedenberg, "The Synanon Solution," *The Nation*, March 8, 1965, 257.
- ⁵⁹ "Synanon: Its Best May Come Last," *Manas*, November 14, 1962, 2.
http://www.manasjournal.org/pdf_library/VolumeXV_1962/XV-46.pdf.
- ⁶⁰ Thomas Frank, *The Conquest of Cool: Business Culture, Counterculture, and the Rise of Hip Consumerism*. (Chicago: University of Chicago Press, 1997), 93.
- ⁶¹ Yablonsky, *Synanon*, 397.
- ⁶² Jim Hoffman, "New Hope for the Addict: Synanon" *Pageant*, January 1964, 123-129; Gilman, "Tunnel to the Human Race," *San Francisco Chronicle*, January 26, 1964.
- ⁶³ Peter Collier, "The House of Synanon," *Ramparts*, October 1967, 50. The client retention problem carried over to the therapeutic communities inspired by Synanon.
- ⁶⁴ Synanon Members as of 11/1/1964, Folder Population history, Box 81, UCLA Synanon Collection. Several demographic characteristics might help account for Synanon's success. For example, the average resident's age was 29 years and 9 months old; most heroin addicts in this era seriously sought treatment or began the process of "aging out" of use by their thirties: Charles Winick, "Maturing Out of Narcotic Addiction," *Bulletin on Narcotics* 14, no. 1 (1962): 1-7. Additionally, although the Synanon community was integrated, and quite ethnically diverse for its day, the majority of residents (76.77 percent) were white. White, middle-class patients typically had better treatment outcomes than ethnic minorities. For example, an analysis of men committed to California's Civil Addict Program in 1964-1966 found that success in the program was related to ethnic background, with whites highest (21.9 percent), blacks lowest (11.7 percent), and Mexicans intermediate (17.2 percent). W.H McGlothlin, M.D. Anglin, and B.D. Wilson, "Outcome of the California Civil Addict Commitments: 1961-1972," *Drug and Alcohol Dependence* 1 (1975/76): 165-181.
- ⁶⁵ Ibid. For example, the "success rate" for men in California's Civil Addict Program, hovered between 15 and 20 percent from 1961- 1964.
- ⁶⁶ Bill Ray, *David* (New York: Time-Life Broadcast and Drew Associates, 1961), 16mm; Dederich quoted in Endore, *Synanon*, 246-247.
- ⁶⁷ According to Collier, Synanon accepted \$100,000 combined state and federal funds for rehabilitation. Collier, "The House of Synanon," 54; Guy Endore, "Synanon is the People Business," pamphlet, Box 84, Guy Endore Papers, University of California Los Angeles
- ⁶⁸ Folder Sponsors of Synanon 1964, Box 95, UCLA Synanon Collection.
- ⁶⁹ Folder Industries-Investors, Box 73, UCLA Synanon Collection.
- ⁷⁰ Folder Sponsors of Synanon 1964, Box 95, UCLA Synanon Collection
- ⁷¹ Yablonsky, *Synanon*, 399.
- ⁷² Grover Sales, *John Maher of Delancey Street: A Guide to Peaceful Revolution in America* (New York: WW Norton, 1976), 53.
- ⁷³ William Crawford to Lee Work, December 5, 1964, Folder Press Releases, Box 83, UCLA Synanon Collection.
- ⁷⁴ Advertisement for Synanon Texaco station, Folder Synanon Industries, Box 489, UCLA Synanon Collection.
- ⁷⁵ Kerwin Kaye Brook, "Drug Courts and the Treatment of Addiction: Therapeutic Jurisprudence and Neoliberal Governance," (PhD dissertation, New York University, 2010), 195.

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- ⁷⁶ Yablonsky, *Synanon*, 338.
- ⁷⁷ Lewis Yablonsky, "The Anti-criminal Society: Synanon" *Federal Probation* 26 (1962), 57.
- ⁷⁸ Yablonsky, *Synanon*, 336.
- ⁷⁹ Harry Wexler and Craig T. Lowe, "Therapeutic Communities in Prison," in *Therapeutic Community: Advances in Research and Application*, ed. Frank Tims, George Deleon, and Nancy Jainchill, eds. (Rockville, MD: National Institute on Drug Abuse, 1994), 188.
- ⁸⁰ Yablonsky, *Synanon*, 337.
- ⁸¹ "Synanon in Prison," *Twentieth Century*, season 9, episode 13, aired March 13, 1966 (New York: CBS). 16mm film print, Box 580, UCLA Synanon Collection.
- ⁸² Dan Garrett to Marin County Board of Supervisors, November 16, 1964, personal collection of author.
- ⁸³ Synanon Press Release, November 9, 1964, personal collection of author.
- ⁸⁴ Ibid.
- ⁸⁵ Folder Press Releases: 1960-1969, Box 82, UCLA Synanon Collection.
- ⁸⁶ Ibid.
- ⁸⁷ "Hospital and Community Services for Addicts: a list Compiled by the National Institute of Mental Health," Folder 3 of 4 Civil Commitment 1966; Box 7 Administrative Files CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511; NARA-Southeast, Morrow, Georgia.
- ⁸⁸ RD Fox, "Unique Club Seeks to Whip Narcotics," *Evening Outlook*, January 23, 1959.
- ⁸⁹ Paul Lofty, "A Former Addict Reveals What Goes on Inside Synanon," *True*, May 1967, 55.
- ⁹⁰ Lofty, "Former Addict Reveals," 55; Collier, "House of Synanon," 52.
- ⁹¹ Collier, "House of Synanon," 52.
- ⁹² Winslow, "Synanon Revisited," 5.
- ⁹³ Janzen, *The Rise and Fall of Synanon*, 41.
- ⁹⁴ "Welcome to Synanon," letter to new game club members, Folder Game Club Articles, Box 70, UCLA Synanon Collection.
- ⁹⁵ Sylvia Glick, "Synanon Game is Verbal Mayhem," *LA Free Press*, April 21-27, 1967, 3.
- ⁹⁶ "Proposal: Public Service Announcements," Folder PR Information 1965-71, Box 83, UCLA Synanon Collection.
- ⁹⁷ Glick, "Synanon Game is Verbal Mayhem," 3.
- ⁹⁸ *The Most Adult Game* (San Francisco: KRON-TV, 1967), 16mm.
- ⁹⁹ Glick, "Synanon Game is Verbal Mayhem," 3.
- ¹⁰⁰ Bill Crawford Addresses San Francisco Synanon, Synanon Foundation News Release, April 4, 1968, San Francisco, personal collection of author
- ¹⁰¹ Robert Claiborne, "The Potential of Human Potential," *The Nation*, October 19, 1970, 373.
- ¹⁰² Synanon Foundation News Release, April 4, 1968.
- ¹⁰³ "Tenth Anniversary-What a Party!" Synanon News for the week ending November 9, 1968; Folder Newsletters, Box 83, UCLA Synanon Collection.
- ¹⁰⁴ Folder Synanon 10 and 15 year Anniversaries, Box 100, UCLA Synanon Archive.

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- ¹⁰⁵ Paul Lofty, "A Former Addict Reveals What Goes on Inside Synanon," *True*, May 1967, 114.
- ¹⁰⁶ Synanon's anniversary press release projected that the organization would save society 30 million dollars in 1969. Mike Kaiser to All Media, "Synanon's Ten Year Anniversary," Folder Synanon 10 and 15 year Anniversaries, Box 100, UCLA Synanon Collection.
- ¹⁰⁷ *Ibid.*
- ¹⁰⁸ Jessica Grogan, *Encountering America: Humanistic Psychology, Sixties Culture, and the Shaping of the Modern Self* (New York: Harper, 2013), Kindle e-book.
- ¹⁰⁹ Abraham Maslow, "Synanon and Eupsychia," *Journal of Humanistic Psychology*, 7 (1967), 28- 35.
- ¹¹⁰ Jessica Grogan, *Encountering America*, Kindle e-book.
- ¹¹¹ Abraham Maslow Speaks at General Meeting in Santa Monica, January 1, 1966, Recording, Box 611, UCLA Synanon Archive
- ¹¹² *Ibid.*
- ¹¹³ Maslow, "Synanon and Eupsychia," 28.
- ¹¹⁴ Quoted in Leon Brill, review of Guy Endore, *Synanon* (New York: Doubleday, 1968), *Social Work*, July 1969, 119-121.
- ¹¹⁵ Natasha Zaretsky. *No Direction Home: The American Family and the Fear of National Decline, 1968-1980*. (Chapel Hill: University of North Carolina Press, 2007), 140.
- ¹¹⁶ *The Most Adult Game* (San Francisco: KRON-TV, 1967), 16mm.
- ¹¹⁷ Maslow, "Synanon and Eupsychia," 32.
- ¹¹⁸ Abraham Maslow Speaks at General Meeting in Santa Monica, January 1, 1966, Recording, Box 611, UCLA Synanon Archive.
- ¹¹⁹ Synanon Game Poster with poem by Steve Handler, 1972. www.synanon.org, last accessed July 9, 2013.
- ¹²⁰ Janzen, *The Rise and Fall of Synanon*, 31-57.
- ¹²¹ Endore, *Synanon*, 241.
- ¹²² Mike Kaiser to All Media, "Synanon's Ten Year Anniversary," Folder Synanon 10 and 15 year Anniversaries, Box 100, UCLA Synanon Collection.
- ¹²³ "Synanon: Its Best May Come Last," 1.

Chapter Three Synanon Rashomon

Throughout the 1960s and early 1970s, Dederich and his fellow Synanon members capably sold the organization's neo-Victorian lifestyle as the remedy for a variety of social ills. Although Synanon's promoters emphasized different aspects of their therapeutic lifestyle to suit multiple audiences, they could not entirely control what critics saw in the waterfront residences, uninhibited group therapy sessions, regimented daily routines, and testimonials of character reformation. Like the characters in *Rashomon*, the 1950 film by Japanese director Akira Kurosawa, many of the key actors in Synanon's drama gave contradictory accounts about what happened there.¹ In Synanon's *Rashomon*, criminal justice workers, scholars, radical youth, and government authorities approached the therapeutic events with their own preconceptions. Their personal agendas influenced their stories, and those stories made statements about postwar society. "Possibly, a part of our society is so sick that it can't stand seeing people organize to *get well*," wrote Synanon booster Walker Winslow in 1961. "Especially when they do it their own way."²

The Criminal Justice Establishment

By luck or design, Synanon's prison programs matured at a turning point in penology's cyclical reorientation from rehabilitation to punishment. The professional penologist grew out of postbellum prison reforms. Following the Civil War, reformers argued that US prisons had been transformed from spaces of spiritual reformation into brutish sites for slave labor. These reformers promoted the philosophy that warehousing socially disenfranchised members of society fostered criminality. By the early twentieth century, progressive prison reformers had introduced value-laden classification systems for prisoners based on their social risks of recidivism. They also launched the reformatory

initiatives that later functioned as models for post-World War II prisoner education programs.³ Many Synanon members participated in these educational and therapeutic experiments during their previous periods of incarceration. When they returned to lead prison-based Synanon groups in the early 1960s, they capitalized on the growing perception that existing prison-based social programs were permissive and ineffectual. Criminologists like Synanon supporter Lewis Yablonsky confirmed Synanon members' claims that most prison-based group therapy programs unintentionally indoctrinated inmates into a deviant subculture.

Prisons in California—where Synanon began its programming efforts—embodied the “rehabilitative ideal” of midcentury US corrections.⁴ That ideal began to crumble with Ronald Reagan’s landslide gubernatorial election in 1966. Reagan’s media-savvy campaign packaged a punitive turn as a common-sense response to student and racial protests. Almost a decade later, California’s Department of Corrections (CDC) adopted mandatory sentencing and officially abandoned the rehabilitative mission.⁵ Sociologist Kerwin Kaye argued that the correctional establishment’s receptivity to Synanon’s hierarchical structure and tougher therapeutic encounters anticipated the backlash against supposedly permissive correctional environments. Kaye noted that the first therapeutic communities in US prisons were not modeled on Synanon; they resembled the “democratic” therapeutic community model (TC) pioneered by psychiatrist Maxwell Jones in the United Kingdom.⁶ Richard McGee, the director of the CDC and champion of the “rehabilitative ideal,” hired Jones as a consultant and California initially implemented democratic TC prison programs based on Jones’s approach.⁷ These programs supposedly improved upon intermittent group therapy sessions by transforming the entire prison

environment into a “therapeutic milieu.” In this rehabilitative setting, prison workers and prisoners shared equal responsibility for creating a total environment that encouraged personal growth. In contrast to later Synanon-style TCs, democratic TCs’ professionals tactfully moderated the confrontational therapy sessions and played supportive roles in both individual and group therapies. Synanon’s hierarchical “level system,” in which prisoners gained liberties and luxuries through good behavior, was also noticeably absent in democratic TCs. Kaye argued that the comparatively liberated environment of democratic TCs ultimately “fostered Black radicalism” and “created ‘problems’ for McGee and other prison officials.”⁸ The few vocal officials who embraced Synanon’s hierarchical, authoritarian spin on the TC concept viewed Synanon’s adjustments as a possible solution to the political problems arising from the more democratic model of prison reform.

“People ask why I don’t go to Birmingham and help the sit-iners,” said Candy Latson, an African American leader of Synanon prison programs in California and Nevada. “I’m doing my job here.”⁹ The Birmingham civil rights campaign, led by Martin Luther King, Jr. and the Southern Christian Leadership Conference (SCLC), brought national attention to the ways in which business and criminal justice authorities used intimidation and violence to protect racial segregation. Latson’s suggestion that he was “doing his job” had a double meaning: it implied that Synanon’s prison reform program was a form of social justice work while distancing Latson from the iconic civil rights conflicts of the day. Prisoners’ access to radical texts and like-minded inmates transformed cellblocks into incubators of revolutionary leftist dissent. Yet none of the authorities who supported Synanon’s program viewed Latson’s job as a political or

institutional threat.¹⁰ As *Time* reported, Synanon's open cells were decorated with "reproductions of Van Gough and work done by inmates instead of calendar nudes."¹¹ Progressive wardens, noted historian Lee Bernstein, still tended to view prison cultural programs as a way to distract inmates, prevent protest, and "quell dissent"—in other words, as a disciplinary tool. The Synanon inmates' supposed preference for high art suggested that the program had a civilizing influence. Jack Fogliani, the warden who brought Synanon to Nevada's state prison in Carson City, frequently attributed the reduction in inmate "fights, disturbances, and complaints" to Synanon's prison program, which he believed helped inmates develop the maturity to work through their conflicts independently and without resorting to violence.¹² "[Synanon] makes meaningful changes for us" that "effect the whole prison," said one inmate.¹³ "We're 100 percent behind this program," said Nevada Governor Grant Sawyer, "and want to do everything we can to help it along."¹⁴

But the hierarchical system employed by Synanon and similar programs developed inmates' "maturity" by reserving the right to grant or revoke privileges—such as open cells and recreational activities—based on program participation and behavior. While these incentives for joining Synanon remained in place in the Nevada prison, program participation was high. But when the correctional paradigm shifted from rehabilitation to custody in the mid-1960s, the state prison outlawed programs that conferred "special treatment" on any group of prisoners. Prison officials hypothesized that the discontinuation of "earned privileges" caused Synanon membership to "dwindle to the point that the program was discontinued."¹⁵

Synanon's relationship with the criminal justice system carried on. Although Synanon's ex-addicts frequently emphasized how other treatment programs had failed them, addicts were far more likely to be sent to standard prisons than they were to receive specialized addiction rehabilitation in detoxification units, psychiatric hospitals, or federal centers like those in Lexington and Fort Worth.¹⁶ For that reason, members of Synanon's initial target population—"hard core" addicts or "dope fiends"—invariably had histories with law enforcement. Synanon sought the support of parole officers who had the power to supply Synanon with a steady client base of released addicts who remained under state supervision.

The Southern California Parole Officers Association was among Dederich's first audiences, and the paper he read to them in October 1958 later became Synanon gospel. In his speech, Dederich described Synanon's "autocratic structure," designed with the "19th century family setup" in mind. He argued that the verbally "brutal" therapeutic encounters effectively reformed addicts' behavior and helped them "realize that a loving father must be a firm father." Four years later, Dederich noted that his paper was no manifesto—it was simply a "framework for discussion" with the officers in attendance. Nevertheless, scholars and critics continued to cite the document as the primary source of Synanon's therapeutic philosophy.¹⁷

While the paper presents an early version of Synanon's concept of addiction and recovery, it was probably intended to convince corrections officers that Synanon was a suitable placement site for new parolees. Early press coverage of Synanon implicates corrections officers in the organization's controversies. While the Santa Monica police chief seriously worried that the organization was "attracting felons and narcos,"¹⁸ one

probation officer expressed ambivalence about Synanon's place as a treatment alternative. "About all I'd say is that it's highly unorthodox," he said. "But you can't quarrel that these addicts are off the stuff and seem to be staying off."¹⁹ Less than a year after Dederich delivered his paper, he received an endorsement from a state parole officer, who praised Synanon's work with three parolees from state prisons and favorably compared its rehabilitative program to the available treatments in the California State prisons and the federal program in Lexington and Forth Worth.²⁰

Motivated by pragmatism—when their cases stayed under Synanon's fatherly supervision, they tended to keep out of trouble— individual probation and parole officers in New York and California began to refer clients with drug problems to Synanon for treatment.²¹ Synanon had more trouble garnering bureaucratic support. CDC officials viewed Synanon's anti-professional stance as a threat. When California Assemblyman John O'Connell steered a favorable subcommittee investigation of Synanon, a medical official from the CDC fiercely criticized the notion that the government might support a therapeutic enterprise managed by non-professionals.²² Ultimately, the CDC removed seven parolees from residence in Synanon. Synanon leaders used the removal to rally supporters to their cause.²³ A group of Berkeley students disrupted a CDC presentation by passing out Synanon's informational flyers. While CDC officials described plans to launch their own "Synanon-type program," the protesters effectively championed Synanon's peer-led privatization of addiction treatment. "Any individual, even a public ward, should be able to seek rehabilitation by any legitimate means. That private organization may assume the responsibility of any person who chooses to seek its assistance," declared the protesters' handout.²⁴

Legitimacy was precisely what Synanon lacked. California required probationers in its treatment programs to undergo random drug tests (first with a drug called Naline; later, programs adopted urine chromatography). Synanon vehemently resisted any form of drug testing and argued that its total institutional environment, which was predicated on a drug-free philosophy, guaranteed that no members were using psychoactive substances. Dederich and his fellow Synanon members argued that their therapeutic lifestyle required members to commit themselves to the practice of searching, brutal honesty and conformity to the community's fixed moral norms. In this setting, the rationale went, any lapse in sobriety could not be disguised for long. For Dederich, the condition of random drug screening probably also represented a loss of control. Drug-testing programs would grant external authorities the right to determine the status and progress of Synanon members on the basis of their tests.

CDC officials believed Synanon's unscientific approach to probationer rehabilitation engendered "morbid dependency" rather than a gradual transition to independent living.²⁵ In order to circumvent CDC bias, Dederich knew he would need to appeal to other authorities. Synanon directors selected a parolee, Gil Faucette, as a legal challenge to the CDC's policy. In 1966, county probation officials waived Naline tests for Synanon parolees, but Faucette knew that staying in Synanon was still a violation of the requirements for his state parole. If the judge looked unfavorably on Synanon's anti-testing argument, Faucette faced a return to prison.²⁶ Luckily for Faucette and Synanon, the judge upheld the organization's claim that irregular drug tests destroyed the "sense of trust" that Synanon's model of rehabilitation required.²⁷ Although the case further

alienated Synanon from CDC officials, the American Civil Liberties Union defended Synanon's claim that its rigorous treatment required little government oversight.²⁸

The parole debate highlighted a central Synanon paradox. The organization's rhetoric led supporters to believe that Synanon was a reaction against the failed carceral solutions to drug addiction, especially supposedly enlightened rehabilitation programs like those attempted in Lexington and the CDC's new center in Corona, founded in 1961. But supporters in corrections recognized that Synanon never questioned the value of the larger social project of reforming hardened addicts; what Synanon offered was a different way to discipline them. In contrast to programs that exemplified a "rehabilitative ideal," Synanon and similar programs aimed for *habilitation*.²⁹ The structured environment and cathartic attack therapy sessions did not simply correct a few minor neuroses; they broke down the addict's personality and remade it, this time in the context of a neo-Victorian moral habitus. The technique fascinated midcentury social scientists because it implied what they already suspected: the cure for addiction would be entirely social and cultural.

The Scholars

The notion that psychiatric diagnoses may be social constructions was not a product of "the counterculture's loopy excesses," wrote historian Michael Staub. "Antipsychiatrists" of the Sixties—writers like RD Laing, Erving Goffman, Thomas Szasz and Michel Foucault—posited new theories about the societal roots of mental disorders.³⁰ But mainstream psychiatry embraced "social diagnoses" even earlier: after World War II, the rise of Nazism and Communism motivated government-funded research on the interplay between social and psychological disorders.³¹ The premise that civic problems like drug use or crime had social causes underwrote entire disciplines,

such as sociology, criminology, or the fashionable new postwar field of “social psychology.” Synanon’s contention that the right combination of social forces could reshape behavior and personality would have come as no surprise to prominent social psychologists like Stanley Milgram or Philip Zimbardo, whose infamous experiments were based on the same assumption.³²

Nor did Synanon’s social cure come as a shock to criminologist Donald Cressey, who viewed the organization’s early success with a small group of heroin addicts as validation for his own theories. Cressey was a renowned criminologist who earned his doctorate under the supervision of Indiana University criminologist Edwin Sutherland in the 1940s. Sutherland developed an influential theory that criminal behavior is learned, not innate. In Sutherland’s paradigm, a criminal education is achieved through a process called “differential association,” in which law-breaking techniques, motivations, and justifications are reinforced by close-knit social groups. Cressey employed Sutherland’s principle of “differential association” in an influential 1955 essay. Cressey critiqued correctional programs that focused on altering the “sick” psychology of individual criminals. Instead, Cressey argued, correctional treatment programs should target the social codes of groups.³³ Cressey hypothesized that “the most effective mechanism for exerting group pressure on members will be found in groups so organized that criminals are induced to join with non-criminals for the purposes of changing other criminals.”³⁴ Put simply, and often cited in Synanon press, Cressey argued that “the way to change Criminal A is to get him to change Criminal B.”³⁵

When Rita Volkman introduced Cressey to the Synanon commune, he saw his theory at work in Synanon’s confrontational “games.” Volkman and Cressey combined

the data for her master's thesis (collected in 1959-1960) with Cressey's observations from his own weekly visits, which began in July 1960 and lasted for a year. Their article, published in the influential *American Journal of Sociology* in 1963, presented the Synanon case study as evidence that supported each of Cressey's earlier guidelines for group corrections. Synanon's reform processes "unwittingly attempted" to implement the features mentioned in the ideal correctional program described by Cressey in 1955. Synanon alienated members from deviant group norms, indoctrinated them into a new anticrime subculture, fostered group cohesion around the new subculture, socially rewarded obedience to antiriminal norms, and even used ex-criminals as change agents in group therapy sessions. Rather than depicting Synanon as the most promising cure for drug addiction—which was how Synanon members interpreted Volkman and Cressey's results—the article presented the problem of drug addiction itself as a "severe test of Sutherland's theory of differential association and Cressey's sociological principles."³⁶ Synanon's subcultural cure for drug addicts with criminal pasts suggested that the scholars' abstract social theories of deviance had a practical application.

For Lewis Yablonsky, criminology research was personal. Like many of the ex-addict Synanon members recruited from the East Coast, Yablonsky grew up in a rough neighborhood in the New York City area. He started thinking critically about social deviance during a brief stint as a hobbyist gambler.³⁷ After studying business and engineering in college, he discovered a sociology textbook at the public library and promptly changed professions. He made a cold call to a New York University professor and matriculated in a doctoral program in sociology. He studied youth gangs while working in a juvenile jail and managing a city-wide violence prevention program.

Yablonsky was working as an assistant professor at the University of Massachusetts in Amherst when he met Cressey at a conference in the summer of 1960. Over drinks at a local bar, Cressey “sketched vivid picture of the [Synanon] group, loudly arguing philosophical concepts and amateur psychology into all hours of the night,” Yablonsky wrote.³⁸ A few months after their conversation, the phone rang with what Yablonsky described as a “Hollywood phone call.”³⁹ Cressey was going on leave. Cressey invited Yablonsky to take his place at UCLA and pick up the Synanon research project.

On Yablonsky’s first visit to Synanon, Charlie Hamer’s gripping story and Synanon House’s orderly atmosphere convinced him the group was worth studying. Unlike Rita Volkman, Yablonsky relished Synanon’s confrontational therapy sessions. “I related easily to other Synanon residents because of my early socialization with my Newark buddies,” Yablonsky wrote. He viewed deviance as largely situational. One man—who Yablonsky first met in his studies of New York gangs—had been utterly transformed by Synanon. “My friends in Synanon were not my criminal cohorts. They were individuals attempting to quit their past lives as junkies and criminals,” he wrote.⁴⁰

In 1961, he fell in love with a Synanon resident named Donna. Yablonsky’s personal and professional lives became part of Synanon’s story. “If Synanon worked—we worked,” he reflected. “If it was like all the other failed [drug treatment] methodologies I knew—marrying Donna was a major mistake in my life.”⁴¹ Yablonsky became an enthusiastic expert on Synanon’s methods.

At one lecture, Yablonsky joked that conventional social scientists perceived his 1965 book on Synanon as “deviant research” rather than “research on deviance.” But Yablonsky defended his personal investment in his research subject, claiming that his

scholarship was enriched by his decision to relate to Synanon, “first as a human being, not in the phony way in which anthropologists do field studies.”⁴² In fact, Synanon did not welcome detached academic observers; beginning with Volkman’s original study, Synanon expected scholars to actively participate in therapeutic confrontations. Although Synanon was not fond of quantitative data, the organization’s policies were not hostile to research; in fact, Synanon’s guidelines suited subsets of 1960s research trends—such as anthropological “participant observation” and humanistic psychology—that challenged the conventional divisions between researcher and subject.⁴³ While traditional psychiatry taught practitioners to guard against counter-transference, the social scientists who studied group interactions in Synanon would have to embrace the premise of the new humanistic psychology: that they, too, should be changed by their participation in therapeutic encounters.

Synanon members complained that psychiatrist Daniel Casriel did not change enough. “You can’t come here for a few weeks like Dr. Casriel, dash off a little book, and then establish a Synanon,” complained Dederich. In 1962, Casriel was surveying the available addiction treatment models for a planned halfway house in New York, and arrived at Synanon along with an illustrious research team.⁴⁴ By then, Yablonsky was well entrenched as Synanon’s Director of Research. After hearing a short presentation from Yablonsky, Casriel believed Synanon had achieved a “major breakthrough in the treatment of addiction.” Casriel moved in to Synanon and became, he boasted, “the first psychiatrist to live at Synanon and study the movement in detail and depth as a participant-observer.”⁴⁵ Casriel’s account, *So Fair a House: The Story of Synanon*, was

published barely a year later, when his plans to open a Synanon-style center in New York were well underway.

So Fair a House is Casriel's conversion story. After more than a decade working as a community psychiatrist with drug addicts and drug-dependent juvenile delinquents in the best facilities in New York, Casriel had concluded that addicts were incurable.⁴⁶ He saw two possible solutions to the problem of addiction: "Put [the addict] away either in hospitals or jails for the rest of his life, or give him all the heroin he wants."⁴⁷ The Synanon model convinced Casriel that there was a way out of that vicious circle: the "radical difference" he saw in Synanon members persuaded Casriel that "Synanon holds the solution to the enigma of drug addiction."⁴⁸ But while Cressey had seen social theory at work in Synanon, the psychoanalytically trained Casriel found Freud.

Casriel believed that the Synanon "movement," "unknowingly using the psychodynamics and basic teachings of Sigmund Freud, has developed a system of therapy that may revolutionize our present method of treatment of certain types of personality disorders."⁴⁹ For Casriel, Synanon's success was derived from the "paternalistic family structure," led by Dederich. This organizational model enabled addicts to experience a "rebirth" and then guided them through the Freudian stages of development (oral, anal, phallic, and latency periods).⁵⁰ In this way, Casriel's conversion story remained faithful to the common psychiatric view that addiction is the expression of an underlying, individual psychological disturbance caused by insufficient psychosexual development.

If faulty personality development could be traced back to childhood and the family, then Dederich's claim that Synanon's subculture treated addicts as children who

need firm, loving guidance followed a Freudian logic. While Casriel admired the ex-addicts' ability to create a familial milieu, he also thought the Synanon model ought to be integrated with traditional psychiatry. "The psychiatrist's aid to Synanon should start at the top," wrote Casriel, who believed psychiatric professionals should be responsible for assessing and supervising treatment centers' peer leaders.⁵¹ In New York, Casriel co-founded a Synanon-style therapeutic community where he was able to advance his own psychodynamic theory of addiction.⁵²

At another Synanon location in northern California, Mitchell "Mitch" Rosenthal became the second psychiatrist to adopt Synanon's structure following an intense period of observation. Rosenthal was managing a British-style psychiatric TC in a Naval Hospital when two Synanon members visited the unit to make the pitch for their treatment model.⁵³ Rosenthal was receptive. In addition to joining Synanon's groups as a participant, Rosenthal counseled individual Synanon members alongside Dederich.⁵⁴ Rosenthal tried and failed to restructure the naval TC in the Synanon style before moving to New York, where, like Casriel, he helped establish a Synanon-modeled treatment center. "I had become impressed, as a psychoanalytically oriented psychiatrist, with the tremendous power of this new form of social psychiatry," recalled Rosenthal, who focused more on the "power" of the "group encounter" than the influence of the authoritarian father figure. "I thought that kind of approach could be [useful] to many different populations that we might describe in general as being socially disordered."⁵⁵

Rosenthal's receptivity to group therapies befitted his military background; in the United States, group therapy pioneers like Karl Menninger and Carl Rogers developed their techniques in military settings.⁵⁶ Unlike Synanon's communal confrontations, these

previous professional approaches to group therapy were technocratic; they were designed to address the trauma of servicemen and implemented in a bureaucratic context that favored rationalization, planning, and large-scale social engineering. In contrast, Synanon's groups seemed to scholars like a spontaneous, revolutionary method for addressing loftier social problems.

For psychologist Abraham Maslow, mental health meant more than taming neuroses and restoring an individual's ability to function socially. Psychological well-being was entwined with feelings of spiritual fulfillment, social belonging, and acceptance; these states could only be achieved once an individual's basic physical and psychological needs had been fulfilled. From Maslow's point of view, Synanon's residential environment met residents' fundamental requirements. The organization's encounter groups then provided a venue in which residents could experience a radical shift in perspective—a sense of harmony, one-ness, and understanding that Maslow called a “peak experience.” The Synanon encounter was a transformative spiritual event that enabled participants to transcend the societal expectations that impeded personal growth.

Although Maslow died in 1970, the humanistic social scientists he inspired continued to promote Synanon's methods. Steven Simon, a doctoral student in Harvard's Department of Social Relations, followed Maslow's advice to a group of undergraduates: “Go West to Synanon!”⁵⁷ In a 1978 article in *The Journal of Humanistic Psychology*, Simon argued that the Synanon lifestyle, as adapted to include non-addict residents, had “implications for building humanistic organizations.”⁵⁸ For Simon, the dichotomy of the social rules that applied inside and outside of the confrontational therapy sessions helped

foster holistic psychological growth by forcing residents to “integrate new personality and behavioral elements.” In short, “for dope fiends, a Synanon gaming organization offers obedience training and for squares it offers assertion training.”⁵⁹ A social work student at UCLA who studied Synanon’s appeal to non-addicts similarly viewed the lifestyle as a corrective to the technocratic excesses of postwar culture—such as materialism and conformity—that Yablonsky called “robo-pathology.”⁶⁰ For middle-class youth who were attuned to the racism and sexism that characterized their ordinary upbringing, Synanon offered an attractive form of deprogramming.

The Counterculture

In the late 1960s, therapeutic encounter groups spread far beyond Synanon. Journalist Tom Wolfe observed that group confrontations had become a daily habit at psychedelic, countercultural communes and the politicized, New Left variety. Like later historians who questioned the distinction between politically engaged New Left radicals and the hedonistic idealists of the counterculture, Wolfe viewed the two groups as part of the same religious movement—a “holy roll” driven by the unprecedented expansion of the middle class following World War II.⁶¹

College students also fueled the youth revolutions. The “attack therapy” that communes practiced, Wolfe noticed, resembled the traditional highbrow hazing in the Ivy League’s secret societies. During the 1960s, federal investment in public universities and the expansion of college to women and minority groups meant that the college experience was no longer limited to elites. By the end of the decade, college enrollment increased 120 percent.⁶² In one New Left origin story, newly empowered college students at the University of California-Berkeley and the University of Michigan linked calls for

university reforms—such as free speech and campus governance—to broader issues such as civil rights and peace activism.⁶³ Even Timothy Leary’s countercultural directive to “drop out” implied access to the institutions of higher learning that he urged his acolytes to reject.⁶⁴ But for Synanon in the early 1960s, any association with institutions of higher learning helped confer respectability.

The most influential Synanon observers favorably likened Synanon to college. “It looked like a campus co-ed situation,” thought Lewis Yablonsky during his first trip to Synanon, “except it was integrated.”⁶⁵ At Synanon, Daniel Casriel similarly recalled, house members “acted as if they were preparing for an open-house party on an average college campus.” They looked nothing like the “guarded, sullen, lost souls” confined in other psychiatric or criminal treatment facilities. For addicts whose opportunities for higher education had been limited by their drug habits, Synanon’s seminars and encounters offered an avenue for growth. “I call them my college days,” remembered one ex-addict who arrived at Synanon for drug treatment around his eighteenth birthday. He described twenty-four hour “marathon” sessions followed by philosophical discussions called “reaches.”⁶⁶ Dederich similarly described the secret of his therapeutic breakthrough: “we’re nothing but a college bull session blown up into an institution.”⁶⁷

For students mildly disillusioned with traditional education, Synanon offered a way to explore a new lifestyle—to “drop out”— while maintaining enrollment. For some middle-class students accustomed to summer camps or dormitories, the communal living arrangement came naturally. One undergraduate who studied for a semester at Synanon remembered adjusting quickly to the mess hall meals and dorm-like sleeping quarters.

She returned to Synanon the following year, after considering her postgraduate options: “Europe, grad school, or Synanon.”⁶⁸

According to Wolfe, the economic security of the postwar years made communes and graduate school equivalent choices for an expanding class of college graduates. In contrast, Wolfe reported that Europeans—even educated, revolutionary ones—were “astounded” that “people so young could go off on their own, without taking jobs, and live a life completely of their own design.”⁶⁹ Historian Timothy Miller roughly estimated that Sixties communes numbered in the “tens of thousands”; still, most had disbanded by 1975.⁷⁰ Although most communes did not evolve into institutions, the brief trend in experimental living had lasting cultural influence. Communal life piled up stereotypes: in addition to the encounter sessions Synanon helped popularize, the lifestyle supposedly supported a freewheeling attitude toward sex, drugs, and rock and roll. Public expressions of these countercultural values played out in media depictions of hippie gatherings like the music festivals at Woodstock and Altamont.⁷¹

Synanon predated the countercultural communes, and the organization’s anti-drug stance, structured lifestyle, and comfortable relationship with capitalism challenged popular preconceptions about what communal life looked like. As the “dysfunctional” behaviors that previously defined the drug-using underworld seeped into mainstream society in the 1960s, Dederich’s claim that Synanon’s values-driven lifestyle was the true counterculture gained credence. Just as the hip posturing of heroin-using subcultures supposedly impeded the psychological growth of some original Synanon residents, hippie performativity stood in the way of the authenticity and connection that youthful seekers chased. “[I] came straight from Greenwich Village and my hair was down to here,” said

one Synanon member. “They cut my hair and took away my sunglasses and told me to talk to people. Well, I couldn’t do it.”⁷² The testimonial implied that some social revolutionaries were also conformists; the counterculture was equally capable, in its own way, of stifling genuine self-expression.

With that argument, Synanon conjured up the *zeitgeist* of the Sixties: the “romance of the outsider.” According to historian Grace Elizabeth Hale, this new romanticism was “politically promiscuous”—equally attractive to right- and left-wing activists who positioned themselves in opposition to conventional society.⁷³ During the long 1960s, Hale argued, Elvis, William F. Buckley, Tom Hayden, Bob Dylan, Stokely Carmichael, Lonnie Frisbee, and Jerry Falwell all claimed rebel status. We could add Charles Dederich and his followers to the list. Who could be more excluded from mainstream society than drug addicts—the *archetypal* outsider group?⁷⁴

The only group more deviant than heroin users was black heroin users. Long before Tom Wolfe lampooned the “radical chic” of black militancy in 1970, Synanon emphasized the racially integrated environment it provided for recovering drug addicts.⁷⁵ In 1962, Dederich, proclaimed Synanon “the most successful experiment in integrated living in a segregated area in the world.”⁷⁶ The claim had credence. By 1964, more than 10 percent of Synanon’s residents were black. Dederich’s loving, interracial marriage with Betty Coleman (formalized in 1963) served as a powerful symbol of the community’s commitment to racial equality.⁷⁷

Integration also served as a selling point. In addition to fascinating the Hollywood elite, Synanon received favorable attention from the black press. By all reports, Synanon “games” not only cured drug addicts of their character deficiencies; they also helped

members get over the racial hang-ups that stifled their psychological growth. “A young Negro girl with an inferiority complex” was “lashed” by fellow game-players, reported *Ebony* magazine in 1963: “ ‘You just can’t admit to yourself that you might have been chosen to do the job because you were qualified!’ A southern white man received similar treatment: ‘How can you be from Texas and not be prejudiced?’”⁷⁸

Although Synanon generally viewed racial issues as secondary to psychological ones, when civil rights trends changed, Synanon changed with them. In the early 1960s, journalists depicted Synanon as a model of integrated living and an ideal setting for Sidney Poitier’s next film project.⁷⁹ By the late 1960s, Synanon opened an Oakland branch and forged relationships with Black Panthers by moderating their confrontational therapy sessions, supplying donated food for breakfast programs, and hosting afterschool activities for neighborhood youth.⁸⁰

By the late 1960s, California was a hotbed of community activism. In 1965, the newly inaugurated Office of Economic Opportunity (OEO) established a jobs training program largely geared toward inner city youth. Rather than impose programming on disadvantaged communities, the Kennedy-Johnson administration sought to involve indigenous inner city leaders as community organizers. In 1967, there were 44 Community Action Agencies in California, including ten in the Bay Area that were primarily staffed by members from underrepresented minority groups.⁸¹

Lewis Yablonsky helped shape the OEO’s logic of community-based leadership. He served as a consultant for Sargent Shriver’s Job Corps program and, in 1965, recommended that the program adopt Synanon’s tactics for anti-delinquency jobs training and education programs. Yablonsky rejected the program’s initial plan to locate the

training programs in rural locations and employ government officials to conduct them; instead, he argued, leaders from urban communities should manage training and discipline.⁸² Synanon's ex-addict leaders, who had little luck with applications for direct government grants, secured local funding for youth programs from the OEO Jobs Training program. In 1967, Synanon members were enlisted to provide drug education for two schools in East Los Angeles. In Las Vegas, officials hired Synanon members to moderate racial confrontations amongst high school students.⁸³ Still, some Synanon members who left to found their own therapeutic communities thought Synanon was not sufficiently attuned to the needs of ethnic communities beset by drug addiction.⁸⁴ John Maher, the founder of a therapeutic community in San Francisco, believed that Synanon members capitalized on confrontation but lacked genuine community engagement. "The three organizations that have cured more drug addicts are, in order, Red China, the Black Muslims, and Synanon," said Maher. "But they have done so only at the tremendous cost imposing of total conformity" and embracing separatism.⁸⁵

Some female Synanon members interpreted Synanon's separatism, new boot camp training regimen, and heady therapy confrontations as a form of feminist consciousness-raising. "Think Synanon: we are the true revolution!" the women chanted as they marched in step. "This is the first time I've had to confront the Feminine Mystique and knock it off," declared one participant.⁸⁶ Other aspects of the Synanon's social movement lifestyle also promoted women's liberation from traditional gender roles. Betty Dederich invented the "hatchery," a communal form of child-rearing that supposedly freed women from the responsibilities associated with being an infant's sole caretaker. Women's-only "games" featured frank discussions about bodies and sex. In

her tour of Synanon, EST, Esalen and other encounter groups, journalist Jane Howard noted that the consciousness-raising sessions held by women's liberation groups—with their stated intention to “speak bitterness” about their suffering and circumstances, just as social outcasts were taught to do in Maoist reeducation centers—were the most politically radical faction of the human potential movement.⁸⁷ But as early as 1970, critics questioned the paranoid conservative notion that the human potential movement was a dangerous “blend of brainwash and sex orgy.” “Here as elsewhere,” concluded critic Robert Claiborne in *The Nation*, “the Right credits the Left with far more enterprise than it actually possesses.”⁸⁸

Later critics largely concurred. Wolfe hypothesized that “in the long run, historians will regard the entire New Left experience as not so much a political as a religious episode wrapped in semi military gear and guerrilla talk.”⁸⁹ In the short run, scholars such as Christopher Lasch argued that America's cultural revolution ushered in an era of narcissism: consciousness-raising groups and encounters were ultimately about personal improvement, not social change.⁹⁰ While Synanon's outsider status may have been attractive to putative misfits, some members simply saw the organization's activities as a self-help tool. “To be married and be able to communicate with each other is definitely a peak experience,” reflected one woman in a written assignment following a Synanon workshop in 1974.⁹¹ To others, Synanon offered a completely transformative therapy, a subculture so radical that it could refashion personalities and negate prejudicial social conditioning. While Synanon's counterculture romanced self-helpers and outsiders, the organization's oppositional style half-convinced the political establishment that Dederich had discovered the solution to drug addiction.

Government Authorities

Dederich's providential political timing overwhelmed officials' doubts about his treatment methods. The optimism of the Kennedy era even extended to drug addicts. The president fulfilled his campaign promise to convene a White House Conference on Drug Abuse in September of 1962.⁹² The gathering brought together elected officials, public health experts, and criminal justice leaders in the hopes of reforming the nation's punitive approach to drug use. Rising rates of heroin use in the 1950s had inspired a federal crackdown on drug users and dealers (the Boggs Act of 1951 and the Narcotic Control Act of 1956 imposed mandatory minimum prison sentences for some drug offenses). Enlightened postwar rehabilitative programs in New York and California also offered alternative methods for addressing the addiction problem. New York City opened Riverside Hospital, a 141-bed facility for juvenile narcotic addicts, in 1952. Smaller units for adult addicts were also designated at Metropolitan Hospital and Manhattan State Hospital. The 1961 California Civil Commitment program provided funding for the massive California Rehabilitation Center (or CRC) in Corona. Civil commitment, a legal proceeding in which addicts can be diverted out of the criminal justice system and into state psychiatric facilities, emerged in the early twentieth century but had practically disappeared until California officials revived the practice. Following California's lead, New York enacted the Metcalf-Volker Narcotic Commitment Act in 1962.

These institutional experiments, like the Lexington and Fort Worth Narcotics farms before them, had high relapse rates and were widely publicized as failures.⁹³ Synanon officials contrasted their innovative program with other institutions' bad press. Buoyed by advocacy from the New York and California leaders who argued that their

states suffered from heavy drug traffic and concentrated areas of narcotics addicts, the conference floated the message that federal officials were ready to reexamine the criminal justice approach to addiction.⁹⁴ Yet the first steps toward reform—like the national Civil Commitment legislation that US Senator Kenneth Keating (R- NY) introduced in 1961—still favored designated public facilities for addicts that repeatedly reported poor outcomes. Synanon’s vocal presence at the moment of initial reform meant that the organization was later able to present a lively, viable rehabilitative alternative for politicians and professionals who were prepared to reject the Anslinger’s supply-side approach to narcotics control and embarrassed by the failures of the limited liberal institutional experiments. “There is no divergence of opinion on the need for vastly improved techniques and programs aimed at rehabilitating addicts,” pronounced John F. Kennedy in his opening remarks at the White House Conference. “The discouragingly high rate of relapse among addicts who leave our medical institutions free of physical dependence is clear evidence that more must be done.”⁹⁵ The professionals’ panel discussion on innovative approaches to rehabilitation featured leaders from Lexington, the CRC, and major New York hospitals. Meanwhile, Synanon members screened promotional films in a nearby room. Synanon members, not the experts, earned a full-page feature in the *Washington Post*. “Why has Synanon been able to succeed in some cases where hospitals, prisons, and jails have failed?” asked the reporter. “An addict never believes he can get well,” said Dederich, reinforcing the dominant political message of hope. “I tell him he can get well.”⁹⁶

The press scarcely acknowledged that even “failed” treatment programs were few in number. In 1965, the National Institute of Mental Health (NIMH) compiled a list of

community services and facilities for addiction treatment. Addiction treatment outside state psychiatric facilities and prisons consisted of Synanon, the CRC, and a small group of hospital programs in New York. Beginning in the early 1960s, officials in the US Public Health Service and the NIMH began to consider restructuring the Lexington Narcotics Farm.⁹⁷ In 1966, the Narcotic Addict Rehabilitation Act (NARA) guaranteed that the facility would have to change; Lexington transitioned from its role as the nation's centralized addiction treatment facility to a supportive entry point that would connect convicted addicts with appropriate "aftercare" in their communities. To accomplish this transition, the NIMH established state-matched grants to fund local aftercare and treatment centers necessitated by the new law.

The NIMH consulted Synanon leaders during the planning stages. In a report prepared to inform the enactment of NARA, researchers interviewed Dederich alongside research and treatment luminaries such as Lexington's research director Harris Isbell, and Ray Trussel, the Commissioner of Hospitals for New York City; Synanon members were the only addicts that researchers consulted.⁹⁸ But officials remained standoffish when Synanon asked for direct support. Dederich, aware that the NIMH was dispensing grant funds to other treatment centers, wrote directly to his friend Sidney Cohen after his appointment as director of the NIMH's Division of Narcotic Addiction and Drug Abuse (DNADA) in 1968. "It would certainly seem that sometime during the next decade NIMH would decide to give Synanon a hand and maybe you are the guy who could get something started in that direction," wrote Dederich. "I need one helluva lot of money. Do you have any? Keep in touch whether you have or not—perhaps in your new position a real good site visit to our Santa Monica and Oakland places winding up here at Tomales

Bay to boil up a shirt is indicated. Best of everything for the New Year and in your new job. Betty still speaks of you as one of the kindest men around.”

Cohen responded that Synanon could get money, “by becoming an aftercare agency for NARA” but “we ask for record-keeping and I suppose you don’t like reports.” Cohen was willing to work with Dederich if he agreed to the government’s terms: “You won’t get a ‘helluva lot of money,’ but maybe we could make a start.” He concluded: “Tell Betty I’m no longer kind. This job has turned me into a guy like you.”⁹⁹

Cohen was more like Dederich than he knew. As a central administrator of NARA programs, Cohen effectively oversaw the funding for Synanon-inspired therapeutic communities (TCs) across the United States. He supported Lexington’s transformation into a large-scale therapeutic community in the early 1970s.¹⁰⁰ But Cohen, like earlier NIMH grant reviewers, was not willing to write Synanon a blank check. Synanon’s ex-addicts sold the concept of effective rehabilitation and described a drug-free treatment model that resonated with timely social science research. NARA realigned the federal approach to addiction treatment and supported Synanon-style treatment centers on a national scale. Once the “therapeutic community” was cut from its communal roots, officials could comfortably support the model by emphasizing the aspects that suited their political agendas. And they wouldn’t have to deal with Dederich, who had a habit of using polite praise from high-profile figures— like Connecticut Senator Thomas Dodd, Nevada Governor Grant Sawyer, and even 1962 California gubernatorial hopeful Richard Nixon— for his own promotional purposes. (Synanon’s public relations team argued that a letter from Nixon praising Synanon for "evident effectiveness in a very worthwhile cause" counted as an endorsement, despite the candidate’s protestations).¹⁰¹

Synanon's ex-addicts made the reverse complaint: their revolutionary approach to addiction treatment had been co-opted by the establishment. Dederich, Yablonsky, and Synanon members repeated a historical analogy that Walker Winslow penned in the early 1960s: Dederich was Dorothea Dix.¹⁰² Dix was an antebellum crusader who advocated for the rights of individuals with mental illnesses and helped establish a system of state mental hospitals. Prior to Dix's reform effort, mentally ill individuals were often placed in private homes or prisons where they were starved, stripped, chained, and beaten. Just as Dix's efforts were later co-opted by her supposed allies, Synanon supporters argued that the "administrators, doctors, and politicians that climbed on [Dederich's] bandwagon" would warp his good intentions. After Dix's reforms, Winslow argued, wardens continued their abusive practices, this time under the pretext of curative "hospital" treatment that "gave the tormenters a protection they had never had before."¹⁰³ While Dederich said he "feared" that Synanon's spin-offs would "hide behind the magic aura" of the organization's "good name," they scrapped the name and replicated the radical therapeutic practices.¹⁰⁴

Notes

¹ In *Rashomon*, a fable-like film set in the bleak countryside of pre-industrial Japan, four characters involved in a rape and murder provide conflicting accounts of the crime to a judge. Following the film's release, the word "Rashomon" became shorthand for philosophical questions about subjectivity when US audiences and critics interpreted the movie's novel narrative form and ambiguous ending as a meditation on the relative nature of truth. Bosley Crowther, "Rashomon," *New York Times*, December 27, 1951; Stephen Prince, "The Rashomon Effect," *The Criterion Collection*, <http://www.criterion.com/current/posts/195-the-rashomon-effect>, accessed August 3, 2013.

² Walker Winslow, "Synanon Revisited" *Manas*, February 8, 1961.

³ Lee Bernstein, *America is the Prison: Arts and Politics in Prison in the 1970s* (Chapel Hill: University of North Carolina Press, 2010), Kindle e-book.

⁴ John C. Burnham and Joseph F. Spillane, "Editor's Introduction," in William Wilkinson, *Prison Work: A Tale of Thirty Years in the California Department of*

Corrections (Columbus: Ohio State University, 2005), x-xi; See Francis A. Allen, *The Decline of the Rehabilitative Ideal* (New Haven, CT: Yale University Press, 1981) and Eric Cummins, *The Rise and Fall of California's Radical Prison Movement* (Stanford: Stanford University Press, 1994).

⁵ Gerard DeGroot, "'A Goddamned Electable Person': The 1966 California Gubernatorial Campaign of Ronald Reagan," *History* 82, no. 267 (1997): 429-448; Burnham and Spillane, "Editors' Introduction," xv-xvi.

⁶ Kerwin Kaye, "Drug Courts and the Treatment of Addiction: Therapeutic Jurisprudence and Neoliberal Governance," (PhD dissertation, New York University, 2010), 177.

⁷ Kaye, "Drug Courts," 181-82.

⁸ Kaye, "Drug Courts," 193.

⁹ Walter Cronkite, "Synanon in Prison," *Twentieth Century*, season 9, episode 13, aired March 13, 1966 (New York: CBS). 16mm film print, Box 580, UCLA Synanon Collection.

¹⁰ Bernstein, *America is the Prison*, Kindle e-book.

¹¹ "Mutual Aid in Prison," *Time*, March 1, 1963, 67.

¹² "Synanon in Prison," Box 580, UCLA Synanon Collection.

¹³ *To Slay a White Horse*. 16mm film print. Box 572, UCLA Synanon Collection.

¹⁴ *Nevada State Prison*. 16mm film print. Box 572, UCLA Synanon Collection.

¹⁵ Legislative Commission of the Legislative Counsel Bureau of Nevada, *Illegal Narcotic and Drug Use in Nevada* Bulletin 80 (January 1969), 12; For an overview of the transition away from behavior modification programs that use a "level" system of rewards, see Alexandra Rutherford, "The Social Control of Behavior Control: Behavior Modification, Individual Rights, and Research Ethics in America, 1971-1979," *Journal of the History of the Behavioral Sciences* 42, no. 3 (2006): 203-220.

¹⁶ Joseph Spillane, *Liberalism Behind Bars [tentative title]* (Baltimore: Johns Hopkins University Press, forthcoming).

¹⁷ Charles Dederich, "Synanon Foundation," 1962 Synanon reprint of paper read before the Southern California Parole Officers in October 1958, personal collection of author. Cited in David Deitch and Joan Zweben, "Synanon: A Pioneering Response in Drug Treatment and a Signal for Caution" in *Substance Abuse: Clinical Problems and Perspectives* eds. Joyce Lowinson and Pedro Ruiz (Baltimore: Williams and Wilkins, 1981), 289-302 and Geoffrey Skoll, *Walk the Walk and Talk the Talk: An Ethnography of a Drug Treatment Facility*. (Philadelphia: Temple University Press, 1992).

¹⁸ "Synanon Ordered to Move," *Santa Monica Evening Outlook*, August 13, 1959.

¹⁹ R.D. Fox, "Unique Club Seeks to Whip Narcotics," *Santa Monica Evening Outlook*, January 23, 1959. See also Harry Nelson, "Synanon Drug Center Condemned, Praised," *Los Angeles Times*, October 8, 1961.

²⁰ "State Parole Officer Praises Synanon," *Santa Monica Evening Outlook*, September 2, 1959.

²¹ "Dope Addict Flood Into State Feared: Synanon Plan Would Bring in Users from NY," *Los Angeles Times*, November 12, 1964; Sidney Finkelstein interview with author, July 23, 2011.

²² Guy Endore, *Synanon* (New York: Doubleday, 1968), 297-300.

²³ *Ibid.*

²⁴ Folder Games: Seawall Berkeley, Box 70, UCLA Synanon Collection.

²⁵ Ibid.

²⁶ Endore, *Synanon*, 297-306; Kenneth Hansen, "State Appeals Ruling: Hearing on Synanon Slated Today," *Los Angeles Times*, June 12, 1967.

²⁷ "Synanon Hails Ruling on Tests for Ex-Addicts," *Los Angeles Times*, October 13, 1966.

²⁸ Ibid.

²⁹ Discussed by former Synanon members Rod Mullen and Naya Arbiter "Against The Odds: Therapeutic Community Approaches to Underclass Drug Abuse," in *Drug Policy in the Americas*, ed. Peter Smith (Boulder: Westview Press, 1992), 179-201.

³⁰ Michael Staub, *Madness is Civilization: When the Diagnosis Was Social, 1948-1980*. (Chicago: University of Chicago Press, 2011), 3.

³¹ Staub, *Madness is Civilization*, 4. Staub notes that the Cold War gave rise to the National Mental Health Act of 1946, the National Institute of Mental Health established in 1949, and the first edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-I) in 1952.

³² Milgram's experiments on obedience to authority, conducted in the early 1960s, cast subjects in the role of "teachers" who were ordered by the experimenter to administer electric shocks to a "learner" (played by an actor) when the learner failed to answer an academic question correctly. In actuality, no shocks were administered; however, Milgram's experiment apparently showed that more than 50percent of subjects were willing to administer dangerous doses of voltage when given repeated directions by the authority figure—the experimenter—to do so. Similarly, Philip Zimbardo's 1971 Stanford Prison Experiment, initially designed to reveal the dehumanizing conditions of prison, ended after only six days when the psychologically healthy young adult subjects thoroughly adopted their randomly assigned hierarchical roles of prisoners and guards. As punishment for minor infractions, the guards stripped the prisoners, placed them in solitary confinement, and deprived them of food, leading to several nervous breakdowns. The researchers describe the experiments in Stanley Milgram, *Obedience to Authority: An Experimental View* (New York: Harper, 2009); Philip Zimbardo, *The Lucifer Effect: Understanding How Good People Turn Evil* (New York: Random House, 2008).

³³ Donald R. Cressey, "Changing Criminals: The Application of the Theory of Differential Association," *American Journal of Sociology* 61, no. 2 (1955): 116-120.

³⁴ Donald R. Cressey, "Contradictory Theories in Correctional Group Therapy Programs," *Federal Probation*, 18 (1954): 20-26; Also quoted in Rita Volkman, "Differential Association and the Rehabilitation of Drug Addicts," *British Journal of Addiction*, 61 (1965): 98.

³⁵ Ibid; "S.S. Hang Tough," *Time*, April 7, 1961. Synanon offprint, personal collection of author.

³⁶ Rita Volkman and Donald Cressey, "Differential Association and the Rehabilitation of Drug Addicts," *The American Journal of Sociology*, 69 (1963): 129-142. Reprinted in *The Dynamics of Modern Society*, William J. Goode, ed. (New Brunswick: Transaction Publishers, 2011), 253.

³⁷ Lewis Yablonsky, *Confessions of a Criminologist: Some of my best friends were sociopaths* (New York: iUniverse, 2010), Kindle e-book.

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- ³⁸ Yablonsky, *Synanon*, 2-3
- ³⁹ Ibid.
- ⁴⁰ Yablonsky, *Confessions of a Criminologist*, Kindle e-book.
- ⁴¹ Ibid.
- ⁴² Charles Dederich, Father William Dubay, and Lewis Yablonsky lecture, San Francisco Valley State College, April 19, 1966. Audio Recording. Box 611, UCLA Synanon Collection.
- ⁴³ According to Jennifer Platt, “participant observation” as we understand it today emerged following the Second World War. Jennifer Platt, “The Development of the ‘Participant Observation’ Method in Sociology: Origin Myth and History,” *Journal of the History of the Behavioral Sciences*, 19 (1983), 379-393.
- ⁴⁴ Daniel Casriel, *So Fair a House: The Story of Synanon* (Englewood Cliffs: Prentice-Hall, 1963), 4-5.
- ⁴⁵ Casriel, *So Fair a House*, 6.
- ⁴⁶ Casriel worked in Metropolitan and Riverside Hospitals.
- ⁴⁷ Casriel, *So Fair a House*, 3.
- ⁴⁸ Casriel, *So Fair a House*, 6.
- ⁴⁹ Casriel, *So Fair a House*, 11.
- ⁵⁰ Casriel, *So Fair a House*, 42-43.
- ⁵¹ Casriel, *So Fair a House*, 208.
- ⁵² Daniel Casriel and David Deitch *New Success in the Cure of Addicts* (Staten Island, NY: Daytop Village, Inc, 1967), 3.
- ⁵³ David Courtwright interview with Mitchell Rosenthal, July 23, 1981, Addicts Who Survived Collection, Columbia University Center for Oral History (hereafter Addicts Who Survived Collection).
- ⁵⁴ Nolan Diller Psychoanalysis, Audio Recording. Box 614, UCLA Synanon Collection.
- ⁵⁵ David Courtwright interview with Mitchell Rosenthal, July 23, 1981, Addicts Who Survived Collection.
- ⁵⁶ Peter Sheehy, “The Triumph of Group Therapeutics: Therapy, the Social Self, and Liberalism in America, 1910-1960,” PhD Dissertation, University of Virginia, 2002.
- ⁵⁷ Steven Simon, “Synanon: Toward Building a Humanistic Organization,” *Journal of Humanistic Psychology* 8, no. 3 (1978), 4.
- ⁵⁸ Simon, “Synanon,” 15.
- ⁵⁹ Simon, “Synanon,” 16.
- ⁶⁰ Sidney Jo Becker, “Synanon: an alternate lifestyle for the non-addict” PhD dissertation, UCLA, 1973; Lewis Yablonsky, *Robo-paths: People as Machines* (New York: Penguin, 1972).
- ⁶¹ Tom Wolfe, “The ‘Me’ Decade and the Third Great Awakening” *New York*, August 23, 1976, 26-40. Retrieved from <http://nymag.com/news/features/45938/>
- ⁶² National Center for Education Statistics, *120 Years of American Education: A Statistical Portrait, Volume 1*, ed. Tom Snyder (Alexandria VA: National Center for Education Statistics, 1993), 66.
- ⁶³ William J. Rorabaugh, *Berkeley at War: The 1960s* (Oxford: Oxford University Press, 1989); Seth Rosenfeld, *Subversives: The FBI’s War on Student Radicals and Reagan’s Rise to Power* (New York: Farrar, Strauss & Giroux, 2012); James Miller, *Democracy is*

in the Streets: From Port Huron to the Siege of Chicago (Cambridge: Harvard University Press, 1987); Kirkpatrick Sale, *SDS: The Rise and Development of the Students for a Democratic Society* (New York: Random House, 1973).

⁶⁴ Don Lattin, *The Harvard Psychedelic Club: How Timothy Leary, Ram Dass, Huston Smith, and Andrew Weil Killed the Fifties and Ushered in a New Age for America* (New York: Harper Collins, 2010).

⁶⁵ Denis Mitchell, *The House on the Beach*. (Canadian Broadcasting Corporation/Westinghouse Broadcasting Corporation, 1965). 16mm film print. Box 593, UCLA Synanon Collection.

⁶⁶ Interview with Warren Katz, March 9, 2013.

⁶⁷ Endore, *Synanon*, 167.

⁶⁸ Interview with Wendy Williams, March 6, 2013.

⁶⁹ Tom Wolfe, "The 'Me' Decade," Retrieved from <http://nymag.com/news/features/45938/>

⁷⁰ Timothy Miller, *The 60s Communes: Hippies and Beyond* (Syracuse: Syracuse University Press, 1999), xvii-xx.

⁷¹ For an overview of how historians and writers have viewed counterculture history through the lens of Woodstock and Altamont, see the introduction in John McMillian, *Smoking Typewriters: The Sixties Underground Press and the Rise of Alternative Media in America* (Oxford: Oxford University Press, 2011).

⁷² Denis Mitchell, *The House on the Beach*. (Canadian Broadcasting Corporation/Westinghouse Broadcasting Corporation, 1965). 16mm. Box 593, UCLA Synanon Collection.

⁷³ Grace Elizabeth Hale, *The Romance of the Outsider: How the White Middle Class Fell in Love With Rebellion in Postwar America* (Oxford: Oxford University Press, 2011), 7.

⁷⁴ Howard Becker, *Outsiders: Studies in the Sociology of Deviance* (New York: Free Press, 1963).

⁷⁵ Tom Wolfe, "Radical Chic: That Party at Lenny's" *New York*, June 8, 1970, accessed at <http://nymag.com/news/features/46170/>. Wolfe described a fundraiser held for the Black Panthers by famous composer Leonard Bernstein. In 1967, a list of 27 Hollywood luminaries supported Synanon's contention that police opponents were "racial bigots." The list included Francis Ford Coppola, Leonard Nimoy, and Synanon supporters who participated in the 1965 film such as actress Eartha Kitt- see "Synanon is in Danger," Motion Picture and Television Committee for Synanon, advertisement printed in *The Hollywood Reporter*, September 22, 1967, Synanon Folder, Social Movements Collection, Microfilm, University of California at Berkeley.

⁷⁶ Lynn Grossberg, "Dope Addicts Discover a Cure for Themselves," *Sepia*, August 1961, 3. Synanon offprint, personal collection of author.

⁷⁷ Synanon Members as of 11/1/64, Folder Population History, UCLA Synanon Collection; Rod Janzen, *The Rise and Fall of Synanon: A California Utopia* (Johns Hopkins Press, 2001), 26.

⁷⁸ Louis Robinson, "Drug Addicts Who Cure Each Other," *Ebony*, February 1963, 120. See also Susan Glass, "Synanon: The Integrated Community," *The Crisis*, June-July 1965, 54-55.

⁷⁹ Hedda Hopper, “Honors, Film Bids Heaped on Poitier,” *Los Angeles Times*, May 2, 1964; Hedda Hopper, “Poitier Quits ‘Synanon House,’” *Los Angeles Times*, August 21, 1964.

⁸⁰ For descriptions of Synanon-Oakland’s youth and breakfast programs, see Samuel and Edith Grafton *Youth Report Newsletter* (undated); *Hello! This is Synanon Oakland* brochure; “Synanon: One Year in Oakland in Synanon Folder, Social Movements Collection, Microfilm, University of California at Berkeley. For Synanon “games” and Bay Area Black Panthers, see Janzen, *The Rise and Fall of Synanon*, 25, 29, 47, 133. Eldridge Cleaver, the Minister of Information for the Oakland-based Black Panther Party and an advocate of guerilla revolutionary tactics—until he converted to Christianity and Republicanism in the late 1970s—corresponded with Synanon members over the course of his long career, and took note when the San Francisco-area Synanon branch took up arms in 1973

For Cleaver correspondence and personal collection of Synanon news clippings, see Synanon Folder, Box 13, Eldridge Cleaver Papers, 1963-1988, University of California at Berkeley; On Synanon’s decision to take up arms, see Rod Janzen, *The Rise and Fall of Synanon: A California Utopia*, 114.

⁸¹ “A California Summary,” Folder State Summaries 1967-1968 Microfilm Roll 36, Office of Economic Opportunity Collection, Lyndon Baines Johnson Presidential Library; For a parody of the movement, see Tom Wolfe, *Radical Chic and Mau-Mauing and the Flak Catchers* (New York: Farrar, Strauss & Giroux, 1970).

⁸² “Job Corps Adviser: Synanon Plan Praised,” *Los Angeles Times*, March 4, 1965; “Synanon Slated to Get US Research Windfall,” *Santa Monica Evening Outlook*, May 26, 1967; Folder OEO: Job Corps, Box 489, UCLA Synanon Collection.

⁸³ Folder OEO: Job Corps, Box 489, UCLA Synanon Collection.

⁸⁴ Interview with Ron Clark, April 23, 2013; Interview with David Deitch, May 25, 2011; John Maher quoted in Grover Sales, *John Maher of Delancey Street: A Guide to Peaceful Revolution in America* (New York: WW Norton, 1976), 54. Clark, Deitch, and Maher each went on to lead their own socially active therapeutic communities.

⁸⁵ Grover Sales, *John Maher of Delancey Street*, 54.

⁸⁶ *Synanon on Film Newsreel: Female Boot Camp*. 16mm. Box 572, UCLA Synanon Collection.

⁸⁷ Jane Howard, *Please Touch: A Guided Tour of the Human Potential Movement* (New York: Dell, 1970).

⁸⁸ Robert Claiborne, “The Potential of Human Potential,” *The Nation*, October 19, 1970.

⁸⁹ Wolfe, “The ‘Me’ Decade,” <http://nymag.com/news/features/45938/>

⁹⁰ Christopher Lasch, *The Culture of Narcissism: American Life in and Age of Diminishing Expectations* (New York: WW Norton, 1991).

⁹¹ “The American Dream-A Lie” in Folder Bypass 1974, Box 81, UCLA Synanon Collection. See also, “Synanon Methods Being Used to Aid Collegians With Lost Feeling,” *Los Angeles Times*, April 3, 1966.

⁹² Charles Dederich, “Kennedy Talk,” December 1963, audio tape, Box 605, UCLA Synanon Collection; William J. Rorabuagh, *Kennedy and the Promise of the Sixties* (Cambridge: Cambridge University Press, 2004); David Musto and Pamela Korsmeyer,

The Quest for Drug Control: Politics and Federal Policy in a Period of Increasing Substance Abuse (1963-1981) (New Haven: Yale University Press, 2002), 7.

⁹³ For an overview of studies highlighting the CRC's poor results, see John Kramer and Richard Bass, "Institutionalization Patterns Among Civilly Committed Addicts," *Journal of the American Medical Association* 208, no. 12 (June 23, 1969): 2287-2301. For the story of Riverside Hospital, see William White, "Riverside Hospital: The Birth of Adolescent Treatment," *Counselor* 5, no. 2 (2004): 18-20. An overview of criticisms of New York and California Civil Commitment programs can be found in William White, *Slaying the Dragon: The History of Addiction Treatment and Recovery in America* (Bloomington: Chestnut Health Systems, 1998), 250-251.

⁹⁴ Department of Health, Education and Welfare: Public Health Service News Summary Bulletin, September 22, 1962, Folder Narcotic Addiction White House Conference, Box 3 CRC Public Relations Correspondence, 1939-1973, Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia.

⁹⁵ "Remarks of the President to White House Conference on Narcotics (As actually delivered)," Press Release, September 27, 1962, Folder F3717:198, Box F317:192-219; California State Archives, Sacramento, CA.

⁹⁶ "Ex-Drug Addicts Convene Here," *The Washington Post*, September 27, 1962

⁹⁷ "Hospital and Community Service Facilities for Addicts by State," Folder 3 of 4 Civil Commitment 1966, Box 7 Administrative Files CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511; NARA- Southeast, Morrow, Georgia.

⁹⁸ Folder, Study of the Future of the CRC, 1963-1965, Box 11 Administrative Files CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511; NARA- Southeast, Morrow, Georgia.

⁹⁹ Charles Dederich to Sidney Cohen, December 29, 1968, Folder NIMH-NARA, Box 489, UCLA Synanon Collection.

¹⁰⁰ Nancy Campbell, "The History of a Public Science: How the Addiction Research Center became the NIDA intramural program," *Drug and Alcohol Dependence* 107, no. 1 (2007): 108-112.

¹⁰¹ "Nixon, Synanon in Disagreement," *Santa Monica Evening Outlook*, July 11, 1961.

¹⁰² Walker Winslow, "Frontiers: A Lesson from Current History," *Manas*, June 17, 1964, 11-13; Yablonsky, *Synanon*, 392; Endore, *Synanon*, 357; John Maher quoted in Sales, *John Maher*, 169.

¹⁰³ Walker Winslow, "Frontiers: A Lesson from Current History," *Manas*, June 17, 1964, 13.

¹⁰⁴ Endore, *Synanon*, 357.

Chapter Four Co-optation

The initial distinction between Synanon and its therapeutic community competitors was largely a matter of branding. Dederich set out to make Synanon “as well-known as Coca-Cola” and, by the mid-1960s, he succeeded. Synanon was listed in Random House’s dictionary.¹ The organization’s tag lines reached ordinary households via magazines and television. Conservative critic William Safire’s political dictionary, first published in 1968, credited Synanon with popularizing the phrase “hang tough”—by the early 1970s, the term had crossed over from rehabilitation subcultures to the political lexicon. President Richard Nixon told his wife Pat to hang tough during the Watergate crisis.²

From another point of view, however, the 1960s were not the best time to seek Coca-Cola status; the soft drink company faced increased competition from Pepsi’s new advertising campaign. Coke and Pepsi had similar origins, and they basically peddled the same product. Coke dominated the marketplace until Pepsi’s advertising firm came up with a youthful new promotional strategy in 1961. The campaign framed Coke as old, conformist, and establishment. Pepsi was the opposite: hip, rebellious, and forward-looking.³ Synanon’s leadership, like Coca-Cola’s, viewed the new therapeutic communities that emerged in the mid-1960s as inauthentic, Pepsi-like imitations. New therapeutic communities (TCs) differentiated their treatment products from Synanon while co-opting many of Synanon’s early sales techniques. (“Hang tough,” read the sign above the door to a TC started by New York City’s Addiction Services Agency in 1968).⁴

The new centers inspired by Synanon dulled the organization’s influence on the addiction treatment field. By 1970, Synanon promoters could no longer claim that their

branches housed the largest number of cured addicts anywhere in the world. The city of New York claimed thousands of recovery success stories—and credited many of those successes to methadone maintenance, a biomedical addiction treatment model. In the mid-1960s, Synanon had been a must-see stop for addiction researchers and treatment professionals.⁵ But when President Richard Nixon’s advisers made their rounds, they bypassed Synanon for methadone clinics and spin-off TCs that former members helped establish in New York and Chicago.⁶ Nixon’s presidential election in 1968 cemented the death of the so-called “good Sixties”—the end of the liberal optimism that had sparked curiosity in the Synanon cure and inspired ambitious, experimental drug treatment reforms. Historians and observers characterized the late Sixties as a crescendo of violent leftist extremism and reactionary right-wing politics.⁷

In this cultural climate, TCs became self-conscious about being perceived as cultish, leftist, or overtly like Synanon, which had revised its rehabilitative mission in 1968. Once researchers articulated the defining characteristics of the TC treatment model, they decided that Synanon had been the starting point for a new line of organizational development.⁸ The New York TCs that followed called themselves the “second generation”—the first was conceived at Synanon during Daniel Casriel’s visit in 1962. Despite Casriel’s laudatory congressional testimonial about Synanon’s treatment model, the psychiatrist and his fellow researchers did not deviate from their original plan: to apply their findings to a new experimental residential program for men with felony drug offenses. The program was managed by the Probation Department of the New York Supreme Court for the Second Judicial District; Chief Probation Officer Joseph Shelly

lobbied for the lodge. These founders named the center with an uncomplicated (and un-hip) acronym: Drug Addicts Treated on Probation (DATOP).⁹

Daytop Village

Replicating Synanon's treatment proved more difficult than the professionals anticipated. Originally, DATOP's administrators attempted to hire a Synanon graduate to manage the residence, but he grew frustrated with the slow hiring process and accepted another job.¹⁰ When that hire failed, they employed a recovering alcoholic and AA member that Synanon's allies called an "Ersatz- Dederich."¹¹ Despite his charismatic pretensions, the AA manager did not have Dederich's gift for discipline. Residents regularly left for work and brought drugs back to the lodge, where they lounged, glazed-eyed, in full view of the management.¹² At least four different directors tried to bring order to DATOP during its first year, without much success.¹³

Fortunately for DATOP's leaders, David Deitch—an intense, cerebral, and romantic ex-addict—left Synanon's new San Francisco location with a woman who was living in the Santa Monica house. They married, and planned a move to Synanon's intake center in Westport, Connecticut, where Deitch would continue to run group sessions and promote Synanon's cure. Dederich disapproved; Deitch left the Westport house. His departure marked the beginning of a reformation for DATOP.¹⁴ Casriel hired Deitch, first to run groups for his private practice, and then as director of the reconstructed center.

Although DATOP floundered in its first year, Casriel remained convinced that the Synanon model could be duplicated under the right conditions. Synanon's members had accomplished the feat with new branches in San Francisco and Connecticut. After returning to the East Coast, Casriel continued to visit the Synanon house in Westport

where Deitch led groups. Casriel also met William O'Brien, a Catholic priest, on the steps of the Westport Synanon. O'Brien, like Lewis Yablonsky, became interested in the problem of drug addiction after working with youthful gang members in the 1950s. He stumbled on Synanon's Connecticut location soon after it was established; he planned for a half-hour visit and ended up staying all night.¹⁵

Leaders were less convivial when O'Brien and Casriel attempted to broker a partnership between Synanon and the struggling DATOP. O'Brien and Casriel made a modest proposal. Synanon could assume management of the center if its leadership agreed to a few bureaucratic conditions: permit systematic research, accept collaborative relationships with credentialed health service professionals, and temper harsh disciplinary practices. "We felt Synanon had found the formula for the recovery of life," said O'Brien, who nevertheless wanted to standardize the formula's production.¹⁶ Dederich was unwilling to reveal Synanon's recipe for success. "There is ample room for any number of imitation Synanons," explained supporter Guy Endore. But in order to be effective, the imitators would need "the key. The savvy. The precious something."¹⁷ Dederich's representatives rejected Casriel's requests.

Casriel and O'Brien reformulated their treatment program without the Synanon brand. The two men met with New York City Mayor Robert F. Wagner, a Catholic Democrat who quickly approved their new plan for the halfway house.¹⁸ They incorporated "DATOP Lodge" as "Daytop Village," an independent not-for-profit overseen by a board of directors—which O'Brien would later lead—not the Probation Department. The residence would no longer serve as a "lodge" for passerby on probation; instead, the expanded "Village" would welcome female clients and voluntary patients

without criminal records. With an autonomous new organizational structure and Synanon-trained Deitch as director, the “Daytop” acronym took on a new meaning: “*Drug Addicts Yield to Persuasion.*” At that moment, O’Brien argued, Daytop was christened the “first of a second generation of therapeutic communities.”¹⁹

Initially, Deitch used Synanon-style persuasion to transform Daytop into a therapeutic community based on principles of total honesty and chemical abstinence. He swept the house, rooted out contraband drugs and alcohol, and engaged the residents in a mass confession. That “cop-out” technique, as Deitch remembered it, carried powerful “symbolic meaning,” though it was not therapeutically “artful.” Deitch explained his logic at the time: “Everyone’s gonna get your head shaved. Whether you like it or not, you’re a part of this corrupt community, look at what we discovered, drug paraphernalia, lots of booze, and all over the facility.”²⁰ The discovery also carried repercussions: some men still faced prison terms if they left. After the ritual, Daytop and its members “started anew” under Deitch’s leadership.²¹

While Daytop’s inhabitants awoke to a fresh start, the organization’s early years repeated Synanon’s history. With Deitch as the director, Daytop expanded rapidly. According to Casriel, Daytop was greeted with “the same welcome that Synanon [received] in its first days out in Santa Monica”: picketers and protest signs reading “Junkies Go Home.”²² Undeterred, the organization moved from its original building to a spacious property overlooking Prince’s Bay in Staten Island in 1965. The Swan Lake house in upstate New York opened in 1966, followed by a larger facility on 14th street in New York City in 1968. Daytop’s incorporation allowed the organization to receive local and state grant funds while freeing leaders from direct control by the Probation

Department.²³ The not-for-profit status also allowed Daytop to raise funds from other sources, such as private donors and concerned parents.²⁴ The organization quickly rose to prominence, thanks in part to Synanon-style promotions; Daytop members allowed documentarians to record their therapy sessions and dramatized their avant-garde confrontations on the off-Broadway stage.

There was one crucial difference between Daytop and Synanon: Synanon was an original, self-proclaimed revolution in addiction treatment, while Daytop had to contend with the precedent Synanon set. Daytop residents agreed to submit to drug tests and file grant reports; its leadership took a less hostile stance toward psychiatric theories about the nature of drug abuse. Righteous Synanon members considered such concessions an affront to a therapeutic endeavor based on rigorous honesty. Daytop members thought differently: “What’s humiliating about a urinalysis? I myself would find peddling pencils humiliating. It’s all in the way you see things.”²⁵

Whether Daytop members “peddled pencils” or—as Synanon members charged—“piss,” their method of promoting the new therapy relied on proven strategies of ex-addict testimonials and therapeutic dramatization. A one-hour documentary depicting a “marathon” encounter session led by Deitch aired on ABC in 1967. “Only the possibility that insight would lead to freedom from addiction—and that other addicts might be stimulated to seek help—justifies such an invasion of privacy,” wrote one complimentary television critic.²⁶

The documentary condensed more than thirty hours of footage into a prime-time feature that highlighted dramatic and deeply repressed psychological revelations. “I don’t like the person inside me, whoever that is, that needs my father’s love,” admitted Julie, a

pretty young woman who survived an intentional drug overdose, to the group. “You don’t like the person inside you that needs *anybody’s* love,” responded Deitch. In the last therapy scene, the group offered Julie the opportunity to “grow up” by reckoning with her need to be loved and risking the rejection she long feared. Deitch directed Julie to ask the presiding psychiatrist to love her: “Will you love me, doctor?” They hugged.²⁷

Julie’s embrace came, not from her father, but from Efred Ramirez, a psychiatrist from Puerto Rico who became New York City’s first director of the new Addiction Services Administration (ASA). Historian Samuel Roberts has argued that John Lindsay, the Republican Mayor who instituted the ASA, won the 1965 campaign by challenging the treatment policies established by his predecessor, the Democrat Robert F. Wagner. Wagner turned too late from criminal to medical addiction policies. Wagner moved toward medicalization in order to weaken critiques regarding his administration’s treatment of imperiled ethnic communities. In contrast, Lindsay’s mayoral campaign championed pluralism and neighborhood treatment efforts. While Wagner’s Health Research Council excluded Puerto Rican representatives, Lindsay appointed Ramirez to a top administrative post.²⁸

Daytop bridged the two administrations: the probationary half-way house established during Wagner’s term quickly evolved into one of Lindsay’s leading community-based treatment providers. Lindsay appointed Ramirez and an ex-addict special assistant to lead a \$5.5 million-dollar treatment program in mid-1966.²⁹ Before joining the Lindsay administration, Ramirez pioneered a Synanon-inspired therapeutic community program in Puerto Rico.³⁰ When Ramirez later appeared in New York, he seemed sold on Casriel’s theory about the nature of addiction. “Drugs to the addict serve

as a cushion, a protective layer,” he explained in Daytop’s marathon documentary. Lengthy confrontational sessions begin to heal participants by altering addicts’ tendency to retreat from intimacy: “No day, no night, no sleep. Fatigue will have won over many defensive barriers.”³¹

Casriel posited a theory that addicts do not react to stress according to commonly understood response mechanisms like “fight” or “flight” and “fear or anger.” Instead, they adopt a coping strategy that Casriel called “withdrawal” or “encapsulation.”³² Effective addiction treatment begins with shedding the “encapsulating shell.” Ex-addicts got behind the theory. “Be aware,” Daytop residents reminded each other. “Don’t be encapsulated.”³³ Deitch and Casriel co-authored promotional pamphlets that described the strategy. Daytop sent pamphlets to Lindsay. Casriel submitted promotional material with another round of congressional testimony in 1969.³⁴

According to a prime spot in a National Institute of Health drug abuse campaign film, Daytop also “took the message right to the center of the action: the ghettos, where drug use is rampant.”³⁵ Daytop’s Special Action Project Against Narcotics (SPAN) led outreach efforts in urban neighborhoods. The SPAN office in the Lower East Side of Manhattan conducted intake interviews for potential clients, confronted active drug users, and held group sessions for members who did not require residential treatment.³⁶ SPAN services reached ethnic enclaves and drug-culture youth. By the middle of 1968, Daytop’s outreach bordered on New Left activism. “Our real job ain’t got nothing to do with overcoming drugs,” Deitch told a Daytop audience. “Our real job is confronting a racist community and challenging them to live the life we show by example. Daytop works because it is *not* concerned with ‘overcoming drug addiction.’ It’s concerned with

social change.”³⁷ As Deitch made his declaration, Daytop’s members had already altered the establishment’s approach to addiction; its graduates were entrenched in a new, city-run system of treatment providers that would only grow larger.

Phoenix House

In 1967, Lindsay moved Efren Ramirez’s multi-million dollar treatment effort out of the Health Services Administration. He named the psychiatrist the first commissioner of the Addiction Services Agency (ASA) in the city’s Human Resources Administration. Lindsay’s move aligned addiction treatment with other social problems, such as poverty, rather than the medical establishment. Lindsay announced that the newly created agency would better support Ramirez’s treatment philosophy, which emphasized “the close relationship of narcotics to other social problems in neighborhoods.” Ramirez explained that he intended to increase the budget for the city’s programs by more than \$90 million to meet his treatment goals.³⁸ Ramirez might have been content to continue investing in existing, independent treatment providers like Daytop; instead, he used his mandate to found and expand a massive, city-run TC project. Phoenix House became one of the largest residential treatment programs in the country between 1967 and 1970. With 918 residents in 15 locations, Phoenix soon rivaled Synanon and the narcotics farms.³⁹ (In 1970, Synanon had 1365 residents, though not all of these were addicts; Lexington and Fort Worth had a combined patient load of 618).⁴⁰ “Phoenix House is the largest project of its kind in the world,” touted its brochure.⁴¹

TCs relied on the uncommon expertise of ex-addicts who understood the essential components of the therapeutic philosophy. Synanon was still the best place to find employees that met this qualification. Ramirez asked Mitchell Rosenthal to serve as his

deputy and, in the spring of 1967, Rosenthal moved from California to New York. Once the framework for a new program had been established, the ASA extended generous offers of employment to Synanon graduates (one couple was reportedly offered an annual salary of \$19,000 a year—over \$130,000 in today’s dollars).⁴² Daytop graduates also found work at Phoenix House and similar treatment programs; an evaluation study conducted in mid-1969 found that 75 percent of graduates were employed in the addiction treatment field.⁴³ Daytop helped establish this pattern of TC employment. Daytop held its first official graduation ceremony in 1967, yet many graduates chose to remain employed at the organization.⁴⁴ Only three graduates listed on a 1968 roster of Daytop graduates found work outside the growing treatment industry. The others employed outside Daytop worked with new city-run treatment programs or Marathon House, a TC Daytop graduates founded in Rhode Island.⁴⁵

Another way to acquire ex-addict talent was to develop it. Ramirez started a pilot program at the Morris Bernstein Institute. The Institute was housed in a wing of the well-respected Beth Israel Medical Center, which had acquired Manhattan General Hospital in 1964. The venerable center housed addicts who displayed an underwhelming faith in addiction treatment’s curative powers. When ex-addict Ron Williams checked in for a month-long detoxification stint, he had no plans to break his a long-term heroin habit. Then Ramirez launched his new program. “I’m going to come back tomorrow,” Ramirez promised the skeptical patients. “I have a surprise for you.”⁴⁶

The surprise was a cured addict. Williams and his fellow patients had never heard of Synanon. They knew about Lexington— and, Williams remembered, thought its treatment would not work. Ramirez’s clean-cut colleague testified about his drug use,

prison stints, and the difficulty he had re-entering society afterward. The patients were hopeful; if Ramirez's friend was not entirely cured, they thought skeptically, he was clearly a functional addict. He returned on several occasions and brought along other ex-addicts. They made staying clean seem possible.⁴⁷

Williams had twenty days left in his twenty-eight day stay when the hospital announced it was starting a therapeutic community. He joined the ex-addicts on a designated floor. The leaders "were gifted. You wanted them to like you. And you would do things in order to be liked," said Williams. Gradually, "your standards changed a little."⁴⁸ Williams' twenty days became forty. Forty became sixty. Williams bonded with the other Bernstein TC residents. When the program directors announced their plan—they wanted to renovate a prison on nearby Hart Island and transform it into a large-scale TC with the help of the Bernstein residents—a few ex-addicts, including Williams, refused to work in a prison. One member of the group, Julio Martinez, convinced a developer to rent them a floor of his building on 85th street. If they pooled their welfare money together, they could just afford the rent. Rather than following Ramirez's men to Hart Island, the Bernstein TC graduates moved into the apartment building with plans to establish their own halfway house.

It was a wreck. The building was inhabited by "winos and addicts—and they had drugs," said Williams.⁴⁹ The floor was crawling with roaches and rats. One of the six residents was a former Synanon member who had relapsed after leaving the organization. He intuited how to repeat the organization's early success in Venice Beach. The roommates scrubbed the floor clean, combined their resources, and started hustling. Soon they had furniture and regular food donors; they began attracting new residents. They

named the house after the patient newspaper they started together at the Bernstein Institute: Phoenix House.

When Mitchell Rosenthal visited the house, the recovering residents had expanded their venture to other floors of the building, but their ambitions were still small in scope. “If you could have one thing,” Rosenthal asked the Phoenix leaders “what would it be?” Williams asked for a telephone; at the time, twenty men shared a single line. “Phones. Two or three phones,” Rosenthal repeated, incredulous. “One of these days you're going to have so many phones, you won't know what to do with them.”⁵⁰

Rosenthal brought phones, funding, powerful connections, and professional experience. As he promised, Phoenix grew rapidly; it quickly “took on qualities of industry,” said Williams.⁵¹ Phoenix leaders became “professional dope fiends,” complained one former Phoenix resident who later joined Synanon. “They would guru for eight hours a day, they would tell all the dope fiends how to be responsible, how to develop some kind of character and then they would leave and do whatever they did.”⁵² A few Synanon members criticized Phoenix House as a “watered down” version of the early 1960s Synanon cure. They argued that the Phoenix version had been hopelessly corrupted by its total dependence on establishment support.⁵³

Rosenthal hired several of Synanon’s ex-addict luminaries to establish the facility on Hart Island’s prison site. Former Synanon members like Candy Latson brought extensive Synanon prison experience to the Hart Island project, and within seven months the program had grown from 50 people to more than 200. The intake department was processing 40-50 new arrivals each week. At that point, Rosenthal asked the Hart residents to train non-addicted ASA officers in TC methods.⁵⁴ Vinny Marino lived in

Synanon and Daytop; he entered Phoenix House after another relapse. Marino worked as an unpaid senior coordinator for the island. He led groups and renovated the facilities as part of his treatment; with the increasing patient population, he expected an eventual promotion to a paying position. Instead, Marino complained, he was “asked to show these squares from ASA how everything worked so they could go out and get fatter salaries from the city.”⁵⁵

The ASA’s hefty operating budget also drew scrutiny from outside the prison; in addition to employing a handful of influential ex-addict leaders, the ASA created an entirely new bureaucracy. A large portion of the ASA’s investment in treatment went into Phoenix House. When city leaders decided to turn Phoenix’s management over to the Foundation Board in 1970, Phoenix’s combined city and state funds (\$4.3 million) rivaled the entire ASA’s first-year operating budget (\$5.5 million).⁵⁶ But taxpayers would have to wait to see their return on investment in Phoenix and similar programs; cure in TCs was a lengthy and labor-intensive process that was often expected to take years.⁵⁷ Rosenthal knew that Phoenix would need data from rigorous evaluation studies in order to retain its legitimacy. He hired George Deleon, a recent PhD in psychology from Columbia, as Phoenix’s in-house researcher.⁵⁸

Like the Synanon scholars before him, Deleon was familiar with drug-using subcultures; he was a jazz musician and had seen several friends develop heroin habits. Later, he observed the results of his friends’ encounters with Synanon and Daytop: they seemed completely reformed. As a psychologist, Deleon was keenly interested in the curative mechanisms of the TC model. His patients with everyday neuroses made modest, incremental changes in private psychotherapy; in contrast, the TC method apparently

resulted in dramatic character transformation. The TC practice seemed like a much more rewarding pursuit.⁵⁹

Deleon also noticed that TC proponents had made little effort to quantify their success. Using Phoenix House as his laboratory, Deleon carried out extensive studies on the impact that the organization had on long-term emotional changes, criminal activity, and psychopathology. He later showed a relationship between the length of time that clients stayed in the TC and the degree to which they achieved a variety of therapeutic goals.⁶⁰ For example, staying in the TC for one year or more reduced residents' anticipated postprogram arrests by 70 percent. Slightly shorter stays of between three and eleven months still reduced arrests by more than 40 percent. Leaving the TC within the first three months, however, reduced arrests to merely 6.7 percent of the preprogram level.⁶¹

TCs needed the data. They soon faced opposition from a rigorous, biomedical, and monied new treatment method called methadone maintenance. The early New York TCs initially competed for talent, clients, and official support. By the late 1960s, however, a growing recognition that the drug methadone might solve the heroin epidemic inspired TC providers to present a unified message: "Methadone is a lie," said Judianne Densen-Gerber, the conservative director of Odyssey House.⁶²

Odyssey House

On the surface, Judianne Densen-Gerber had little in common with the addicts she would eventually treat. In 1965, Densen-Gerber described herself as the perfectionistic daughter of intellectual professionals, the wife of the director of New York's hospital system, a pregnant mother of two, and a graduate in law and medicine.⁶³ Her vita lacked

the experiential learning that ex-addicts substituted for doctoral training. But when Densen-Gerber began treating an addict in the first year of her psychiatry residency at Metropolitan Hospital, she related to the feelings of alienation and distress described by her client, Tony Enriquez. Densen-Gerber did not use drugs. But she secretly agonized over whether she would be capable of sustaining the competing demands of motherhood and medicine.⁶⁴

Since everyone knew addicts couldn't be cured, leaders at Metropolitan didn't consider caring for them to be particularly demanding. The chairman of the Psychiatry department assigned Densen-Gerber to the drug addict ward in lieu of maternity leave.⁶⁵ Inspired by her work with Enriquez, she decided to take a more active role. She tried all the standard psychiatric practices—token economies, aversion and shock therapies, and drug maintenance—but met with “failure after failure.”⁶⁶

She persisted. Efren Ramirez, whom Densen-Gerber remembered meeting on a “post-partum rest visit” to Puerto Rico, assured her that it was possible to “redirect” addicts' manipulative skills to therapeutic ends. Densen-Gerber had not found the right method of redirection (the addicts found ways to use drugs on her ward), but she did become convinced that the hospital's standard experimental methods were unethical. Authorities asked Densen-Gerber to persuade her patients to consent to liver biopsies for an unrelated research study. Researchers also supposedly enrolled patients, against their will, in another study that tested their neurological response following heroin administration. A few became re-addicted. Densen-Gerber grew increasingly disenchanted with the establishment response to addiction treatment.⁶⁷

But her solitary efforts to inspire change still proved insufficient. She discovered that Enriquez had relapsed. In 1966, she brought him on to the ward at Metropolitan. She devised a new treatment plan. Enriquez would first receive care as an individual patient. Once he was stabilized, she wrote, she would count on him to “police the ward from within.”⁶⁸ Several weeks of turmoil eventually led to a cop-out session; fourteen residents re-committed to therapy and elected Enriquez as their president.⁶⁹ The residents decided to discontinue use of the maintenance drug cyclazocine and—contrary to the hospital’s wishes and funding mandate—begin a drug-free treatment program. This, Densen-Gerber remembered, was the beginning of Odyssey House.

“We used group-therapy techniques borrowed from everywhere, from Synanon, from Daytop, from Maxwell Jones, from whatever we could find on the subject,” wrote Densen-Gerber.⁷⁰ The patients’ decision to terminate maintenance therapy caused controversy, and Metropolitan discharged them. Daytop housed the ex-addicts while Ramirez searched for a more permanent location. When he gave up—citing bureaucratic opposition to the plan—Densen-Gerber allowed several patients to camp in her upper East Side penthouse while they searched for an affordable group home. Over lunch, a wealthy friend of Densen-Gerber’s reflected that the group “appeared to be on an odyssey.” Before the TC found a building, it had its brand.⁷¹

The ex-addicts located a dilapidated building in east Harlem. It rented for seventeen dollars a month. Odyssey House’s residents fixed the broken windows, cleaned the rooms, and hustled donations of food and funds. They visited the nearby police precinct and befriended the officers. The sergeant told the *Today* show that the order Odyssey established was “an oasis in the desert.”⁷²

Reporters were intrigued by Odyssey House. The *Village Voice* justified the cramped, makeshift quarters: the lack of privacy is “intentional. No secrets are tolerated. Nothing is too personal to be discussed.”⁷³ Authorities were less ready to recognize regimented communal living as a form medical treatment; Densen-Gerber, like Dederich before her, challenged building code regulations as ill-suited for classifying such unconventional therapeutic operations.⁷⁴

Odyssey billed itself as a “therapeutic community,” but it deviated in several ways from the Synanon model. Densen-Gerber actively participated in the confrontational group sessions, but she did not—to use Casriel’s terms—shed her psychiatrist “shell.” Ex-addicts could advance to roles of authority in Odyssey, but Densen-Gerber carefully policed the paraprofessional divide. In 1967, under Enriquez’s leadership, Odyssey residents revolted. Enriquez graduated, received a promotion to Executive Director, and shortly afterward demanded that Densen-Gerber grant him total control over clinical care. As an ex-addict, he argued, he had insight that Densen-Gerber lacked. Mitchell Rosenthal, recently arrived from California, agreed. Rosenthal joined a local group of addiction treatment providers; once there, he reportedly urged the other members to turn their agencies over to ex-addict leaders.⁷⁵ Densen-Gerber believed Rosenthal intended to use Odyssey’s split as an opportunity to take control of the organization. Although the Board of Directors ultimately supported Densen-Gerber over Enriquez, Enriquez’s walk-out called Densen-Gerber’s leadership into question. Ramirez threatened to cut off Odyssey’s local funds and place the organization under new leadership: Rosenthal and his group of ex-addict advisors. “Efren, she’s full of this

psychiatric shit,” Rosenthal reportedly argued. “She’s not capable of running an agency. She doesn’t understand what it’s all about.”⁷⁶

Densen-Gerber and Odyssey’s Board successfully resisted the city’s attempt to restructure the program. Densen-Gerber later argued that Ramirez’s Phoenix House program was an “encapsulated addict world” that was out of touch with reality. “Our residents go out into the communities, talk to drug addicts, purchase supplies, go to the movies,” countered Rosenthal. “How can you call them isolated?”⁷⁷ The shape of outreach and activism reflected the leadership of different TCs. Despite Odyssey’s intention to “treat the streets,”⁷⁸ unlike Synanon or Daytop, the organization never catered to the counter-culture. Densen-Gerber was unabashedly conservative—more conservative than most others in the field, she said—and she charmed powerful Republican supporters like Governor Nelson Rockefeller.⁷⁹ When funds were not forthcoming, she also shamed politicians with public relations campaigns. In 1968, Odyssey parents paraded a coffin in front of Mayor Lindsay’s Gracie Mansion, symbolizing the imminent death of Odyssey House, which was awaiting the ASA’s overdue response to a budget request.⁸⁰

Synanon and Daytop supporters had argued that their treatment organizations served as effective substitutes for dysfunctional families. Densen-Gerber carved out a market niche by promoting TC treatment designed for women and children. Densen-Gerber’s arguments drew on her personal experiences as a woman, a mother, and a trained mental health professional. In her campaigns for treatment funding, she emphasized the innocence and immaturity of the addicts under her care. “I have no problem as a mother looking at these children [who use drugs] and considering that if these were my children,

I would consider [addiction] an illness, not a crime,” said Densen-Gerber, who went on to argue that successful parenting was the disease’s cure. Densen-Gerber believed that poor adult models and insufficient moral supervision lead children to abuse drugs.⁸¹ Odyssey’s emphasis on instilling traditional values in parents and children could complement conservative political platforms, and Densen-Gerber challenged politicians to invest in the addiction treatment models that best reflected their values.

In 1969, Densen-Gerber claimed that Odyssey’s Bronx building was overcrowded with teenage addicts seeking treatment. Because government officials refused to allocate additional funds for youth-specific treatment, Densen-Gerber opened a private adolescent unit. “This was technically illegal,” conceded Densen-Gerber—but justified by the immoral reluctance of government officials to address the problem of youthful drug abuse.⁸² Mayor Lindsay’s administration took Densen-Gerber to court but reversed its opposition almost immediately. The city and state each allocated funds for Odyssey’s adolescent program, which maintained its growth through a combination of private and government funds.⁸³

Densen-Gerber “led the crusade” for youthful addicts, reported the *New York Times*. Scarcely a year after Odyssey established its adolescent unit in New York, the organization fielded requests to establish Odyssey Houses in New Hampshire, Massachusetts, Arizona, Utah, Virginia, and Michigan.⁸⁴ In New York City, Densen-Gerber brought “Ralphie” deJesus, a frail twelve-year boy, to testify about the reality of his drug addiction. Sitting on Densen-Gerber’s lap, deJesus told the city’s Joint Legislative Committee on the Protection of Children and Youth Drug Abuse that he began mainlining heroin after “learning how to do it in the street.”⁸⁵ The committee was

skeptical about the likely efficacy of Governor Nelson Rockefeller's new campaign to address youthful drug abuse, which did not appear to come with increased funding or new proposals for treatment. Densen-Gerber similarly criticized the decision to allocate state funds to new buildings rather than to treatment services. She made a motherly declaration: "We don't need buildings, we need bedtime stories."⁸⁶

"Officials ought to stop sniping at the voluntary, private agencies [like Odyssey] trying to meet a need that the city, the state, and the federal government are clearly not beginning to meet," concurred the *New York Times* editorial board.⁸⁷ Densen-Gerber argued that federal revisions to the Narcotic Addict Rehabilitation Act should "more fully utilize" private sector innovations such as Odyssey's adolescent program.⁸⁸

Odyssey's promotions turned Daytop and Synanon-style docudrama into soap opera material. In 1970, the daytime drama *One Life to Live* filmed a summer series of sixteen episodes at Odyssey House, where *One Life*'s fictional character, Cathy Craig, took part in confrontational therapy sessions with real teen drug users. The series followed the "troubled teenager's" arc through her journey of drug experimentation and dramatic recovery.⁸⁹ Unlike preachy documentaries or somber news stories, *One Life*'s summer storyline had the potential to reach bored, at-risk teenagers—or their mothers.⁹⁰

In 1971, Odyssey added a new facility with treatment programs tailored to young girls and pregnant women.⁹¹ Densen-Gerber was first convinced that maintenance medication was the enemy of authentic addiction recovery in Metropolitan Hospital. Youth and pregnant women were even clearer illustrations of the dangers of drug-based addiction treatment: giving a heroin substitute to innocents amounted to government-sanctioned "genocide," Densen-Gerber later argued. In 1971, she warned a tour of federal

officials that the substitute drug methadone was being diverted for illicit use and methadone-related deaths were increasing.⁹² Densen-Gerber believed the Nixon administration supported prescribing narcotic agonists like methadone to child addicts. She offered an alternative: “children should be inoculated with values.”⁹³

Methadone’s Treatment Market Takeover

In 1965, as the newly incorporated Daytop faced the objections of Princess Bay protesters and Densen-Gerber began her psychiatric residency at Metropolitan Hospital, two researchers published a groundbreaking study on a promising new treatment for narcotic addiction. The technical title of the article published in the *Journal of the American Medical Association*—“A Medical Treatment for Diacetylmorphine (heroin) Addiction” — belies the extraordinary impact it had on addiction medicine and politics.⁹⁴ The study’s authors, Vincent Dole and Marie Nyswander, began their work when Dole was asked to lead the New York City Research Council’s Committee on Narcotics during the chair’s sabbatical in 1962. At the time, Dole researched obesity and metabolism; he knew little about the field of addiction. He contacted Marie Nyswander, a psychiatrist who had worked at Lexington and authored a sympathetic book about clinical work with addicts, *The Drug Addict as Patient*. Dole secured a staff position for Nyswander at his home institution, the Rockefeller Institute. They developed an unorthodox hypothesis: narcotic addiction was not caused by a sociopathic “personality” that led addicts to chase craving without regard for consequences. Instead, they viewed craving as a fundamentally biological condition that could be treated with pharmaceuticals. Their research led to a reversal of the nation’s ban on maintenance treatment for opiate addiction.⁹⁵

Dole and Nyswander began with an observational study. The team used an approach that incensed Densen-Gerber during her residency at Metropolitan: they maintained addicts on different narcotic drugs. Dole and Nyswander soon saw that short-acting narcotics like heroin and morphine made maintenance arduous for patients. Patients' growing dependence on the drug varied wildly and Nyswander found it difficult to standardize the dosage. As a result, patients often suffered through daily withdrawal as they waited to receive their next dose. The craving overwhelmed patients' plans to complete any other daily task—even dressing seemed like an insurmountable goal, remembered Nyswander.⁹⁶ But when Dole and Nyswander switched the patients to a longer-acting, synthetic opiate called methadone, their cravings subsided. They enrolled in school and looked for work. And their criminal behavior—the most politically significant sign of sociopathy—ceased.

Based on the results from the first 22 methadone patients, Dole and Nyswander argued that addicts stabilized on 80-120 mg of methadone could be “blockaded” from the euphoric experience associated with heroin injection. Once exposed to narcotics, addicts underwent a permanent metabolic change. After that change, they needed the drugs in a visceral way, just as “a diabetic needs insulin.”⁹⁷

They needed methadone like a bourbon-drinking alcoholic needs scotch, argued drug-free TC advocates, who saw methadone treatment as substituting one drug for another.⁹⁸ TC leaders believed it took time, effort, and even some degree of discomfort to achieve maturity—yet Dole and Nyswander's patients were functioning in jobs and school in a few short months. The methadone cure ran contrary to the early TCs' philosophy.

While TC leaders were just beginning their work with small groups of initiates, the preliminary methadone study quickly generated political and scholarly attention. New York City Hospital Commissioner Ray Trussel gave Dole and Nyswander an entire floor at the Bernstein Institute that also piloted Phoenix House.⁹⁹ Dole and Nyswander's participant pool grew into the hundreds, and the positive results scaled up to higher sample sizes. The expanded studies tracked arrest records of heroin users maintained on methadone. In 1968, after measuring the employment and crime status of 750 methadone patients over a four-year period, Dole reported "unequivocally" positive results: "criminal addicts can be rehabilitated by a well-supervised maintenance program." 88 percent of the patients were "socially acceptable, maintaining arrest-free records since admission," while a subset of 59 percent had become "productive members of society" by gaining and maintaining employment.¹⁰⁰ This evidence suggested that methadone was a solution for crime and a workable treatment for a chronic disease. Journalists and politicians picked up the message.

Some members of the medical establishment, like Trussel, viewed Efen Ramirez's ASA as a challenge to the biomedical status quo. Ramirez endorsed ex-addict professionals and his agency siphoned public funds away from hospital providers. Even worse, it seemingly operated with enviable autonomy.¹⁰¹ TCs' comparatively small number of reformed addicts countered the drug culture, one user at a time; meanwhile, Dole and Nyswander's methadone program produced relatively rapid, widespread results. In 1968, Julius Moskowitz, a Democratic city councilman from Brooklyn, denounced Ramirez as a "fraud." Moskowitz claimed Phoenix House had "not cured a single addict in the city."¹⁰² According to likeminded critics, Ramirez's TCs were an obstacle to

methadone, the only proven treatment method. The Lindsay administration tried to balance support for both treatment modalities, but they proved incompatible.¹⁰³ Ramirez resigned in 1968 and was succeeded by his protégé Larry Allen Baer, who left the following year. In 1970, Lindsay, once among TCs' most powerful proponents, tipped the scales toward methadone. *The New York Times* reported that Phoenix House had reached its peak enrollment—but because Phoenix had supposedly produced only 140 successful graduates since its inauguration in 1966,¹⁰⁴ Lindsay refused to invest in increasing the TC's capacity. In contrast, methadone programs could serve far more patients. They could be administered for a fraction of the cost of residential treatment. Lindsay planned to expand the number of addicts in methadone programs from around 2,500 to at least 7,500 in less than a year.¹⁰⁵

Methadone's expansion outlasted Lindsay's mayoralty.¹⁰⁶ Under the direction of Dr. Robert Newman, New York City's methadone program grew from several thousand patients to approximately 18,000 by 1973.¹⁰⁷ In the late 1960s and early 1970s, other cities and states attempted to replicate New York's success; large-scale methadone programs in Illinois, Washington DC, and Georgia became the training ground for the nation's first three "drug czars" (Jerome Jaffe, Robert Dupont, and Peter Bourne).¹⁰⁸ While TC leaders bickered, the managers of large-scale methadone programs formed an intimate club and met regularly to share struggles and strategies.

Methadone appealed to politicians and health professionals. Dole and Nyswandars' studies made the controversial notion of outpatient opiate maintenance medically (and thus, politically) respectable. Methadone programs used the existing medical infrastructure to deliver treatment, which meant that they could be scaled up

relatively rapidly. Many of the methadone pioneers understood the programs as a public health response: methadone was a population-based intervention that could be swiftly implemented in areas that experienced surging rates of heroin use. It even tested well in double-blind studies.¹⁰⁹

Therapeutic communities, in contrast, were a labor- and time-intensive form of treatment primarily oriented toward individual and familial transformation. They were expensive, and their reliance on residential treatment and a trained workforce of peer counselors limited their ability to expand quickly enough to meet rising demand. While TCs promoted gripping stories of personal transformation, methadone programs gathered crime data. Dole and Nyswander showed that methadone treatment reduced recidivism in their patient population. Psychiatrist Robert Dupont's new methadone program in Washington, DC brought down crime rates throughout the district.¹¹⁰

What good were TCs' "anti-criminal" subcultures if they did not reliably reduce neighborhood crime rates? In addition to opposing methadone on moral grounds, TC leaders adopted three central counterarguments in response to methadone's philosophical challenge. First, they contended that the TC model's emphasis on maturation and psychological development made it a more appropriate treatment option for youth and families. Second, they noted that methadone was a limited treatment model; the drug only worked on opiate addicts and could not be used to reduce the habitual cravings associated with other illicit substances. Finally, they argued that TCs could meaningfully treat the symptoms of social dysfunction (like drug use and crime) by countering the decadent culture that produced them. This last point caused conflict among second-generation TCs

like Daytop; in the late Sixties, treatment promoters became increasingly concerned with the era's cultural politics.

Daytop Divided

Daytop came perilously close to becoming a Synanon-like cult in 1968—or so Monsignor William O'Brien argued. As Synanon leaders made the self-conscious decision to recruit countercultural seekers, O'Brien believed Deitch was confusing Daytop's rehabilitative mission with dramatic social activism.¹¹¹ Deitch began to preach that curing the individual addict was secondary to a larger mission: transforming the inequitable and dysfunctional conditions that produced addiction. The dramatic transformation of individuals within therapeutic communities— from apathetic, deluded drug users to aware, engaged adults— served as a metaphor for the sort of radical transformation needed to create a more just world. Deitch had working relationships with the Black Panthers, and like some Panthers, began to frame addiction as a tool of oppression.¹¹² O'Brien learned about Deitch's philosophy from an NBC documentary producer, who called with concern after several disappointing days of filming at Daytop. "We've burned the flag, we've heard all about the life Che Guevara," he reportedly told O'Brien. "We haven't seen a thing about Daytop."¹¹³

O'Brien felt he had made a critical mistake. Years earlier, he had refused to partner with Synanon when its directors refused to submit to oversight. But Deitch had been such a competent leader that board members had felt confident in giving him free reign over the organization's operations. Daytop's grantors would not be pleased if they discovered that funds meant to address the drug problem were going to treatment radicals.¹¹⁴

They found out soon enough. On November 17, 1968, *The New York Times* published an article with the headline “Narcotics Complex Split With Charges of Cultist Activity.”¹¹⁵ The next issue of the *Village Voice* also called Daytop a cult: “Drug treatment in the Vietnam era gets politicized, cultish.”¹¹⁶ O’Brien denounced Deitch’s therapeutic program as a “new left commune” and urged government agencies to withhold funding until Deitch had been removed and order restored.¹¹⁷ O’Brien, Casriel, and some Daytop staff protested Deitch’s increasingly politicized therapeutic philosophy—especially the artistic decision to make costumes out of the American flag for Daytop’s anniversary celebration in late October. Casriel threatened to resign unless the board took action against Deitch. In response, Deitch fired seven staff members who opposed his leadership. The board refused Casriel’s resignation and prepared to fire Deitch and his political followers. Before he could be fired, Deitch resigned along with 61 staff members. They staged a “live-in” at Daytop’s property on West 14th street.¹¹⁸ Signs reading “we’re a family, not a factory” and “integrity, not compromise” decorated the windows of the former convent building.¹¹⁹ While O’Brien took legal action to have the occupants removed, Deitch met with his own supporters, including the deputy commissioner of the ASA and a defeated Democratic candidate for the US Senate.¹²⁰ “We are operating the same way we have for years,” argued Deitch. “Now, suddenly, they call this a commune.”¹²¹ The communal kitchen and dormitory rooms that the *Times* called cultish were architectural remnants from the buildings’ previous use as a nunnery. The Catholic O’Brien and activist Deitch clashed over the community’s purpose, but not its therapeutic process. “They disagree only on the crucial question of which side is

obsessed with manipulation, in contrast to the side of the selfless therapeutic angels,” noted the *Village Voice* reporter.¹²²

Were Daytop’s therapeutic confrontations in service of middle class (and technocratic?) maturation, or liberatory (and dangerous?) consciousness-raising? O’Brien’s recollection of the Daytop revolt echoes later historical interpretations of 1968: the year when the “good sixties” turned bad, and enlightened liberal reforms gave way to camp-outs and cults. Daytop, perhaps more any other therapeutic community at the time, was engaged with the cultural and political events of the day. More than a year before Woodstock, Daytop hosted a music festival featuring the Grateful Dead, Pete Seeger, and Janis Ian, among others; 1300 people attended.¹²³ When protesters rocked the August 1968 Democratic convention, Daytop members were there.¹²⁴ Six months after antiwar student protesters occupied Columbia University’s campus administration buildings, Daytop members occupied the convent property and made statements in favor of peaceable resistance. While *Hair*’s cast bestowed posies on a Broadway audience, real Daytop members walked through the aisles of their own play’s off-Broadway venue and asked each audience member directly: “Will *you* love me?”¹²⁵

Daytop’s play, *The Concept*, opened off-Broadway on May 6, 1968 after being piloted in Atlantic City, Philadelphia, Providence, Trenton, Stanford, and Los Angeles.¹²⁶ Director Lawrence Sacharow worked with Daytop members to organize their life stories and therapeutic experiences into a full-length play. The play follows a young addict from jail to Daytop, where he undergoes the challenging process of rehabilitation. The cast members played themselves onstage, and critics argued that their tight bond, wry humor, and rhythmic profanity kept *The Concept* from veering into soap-opera sentimentality.¹²⁷

In addition to staging the TC's dramatic group encounters, the play adopted the expressionist tactics of the avant-garde stage. While many critics were moved by the audacious intimacy created between *Concept* actors and their audiences, one skeptic argued that the togetherness fostered by the interactive off-Broadway theater too closely resembled "T-groups, communes, and encounter sessions. In this type of atmosphere, the opportunities for charlatanism are simply enormous."¹²⁸ (When a *Village Voice* critic saw the Daytop members moving into the aisles at the play's climax, their arms extended for hugs and affirmation, she was thankful to have a balcony ticket).¹²⁹ But most audiences were less skeptical about edgy theater's capitalist impulses. "*The Concept* is a wonderful commercial for Daytop," concluded one opening night review, "and"—echoing *Life*'s Synanon coverage—"an even better one for the human race."¹³⁰

When Deitch left Daytop, director Lawrence Sacharow argued, *The Concept* died. The play ceased production in December 1968 after Deitch's ouster, but was revived the following fall. Sacharow called the new *Concept* a "fading carbon copy"; it could never recapture the "honesty and love" that animated Deitch's Daytop, and the nightly dramatic portrayal of it.¹³¹ The authentic Daytop spirit was as lifeless as the Hippie, the countercultural icon that the Diggers, a radical San Francisco community group, declared dead in October 1967. Just as the Diggers proclaimed the Hippie a media invention, Sacharow argued that audiences could still see the co-opted performance of Daytop's therapy sessions—but it would be a fraud.¹³² Predictably, the tension between therapeutic realism and fiction only continued to drive sales. Daytop's new leadership wrote that the play remained a faithful depiction of the Daytop philosophy; *The Concept*, they argued, was still "playing to standing room only" and inspiring standing ovations.¹³³

The treatment facilities took longer to fill. On December 3, 1968, Daytop's board regained control of the facilities using a court order and the former staff left, bringing approximately fifty residents with them.¹³⁴ Charles Devlin, Daytop's first patient, and Samuel Anglin, another ex-addict employee, had opposed Deitch's increasingly politicized leadership agenda. They returned to Daytop in leadership roles and worked to rebuild the organizations' legitimacy; the buildings were not operating at capacity, and important records mysteriously disappeared during the shake-up. (A team of evaluators, surveying the available drug treatment programs between October 1970 and February 1971, issued a scathing review of Daytop's spotty data).¹³⁵ Yet by 1970, the organization had reassembled a handsome portfolio of grants; the State Narcotics Commission presented Daytop with a \$1.5 million dollar award, bringing Daytop's total state funds since the 1968 fallout to almost \$4 million—a generous sum touted by Governor Nelson Rockefeller at a press conference.¹³⁶ Despite TC leaders' worries about methadone, as it turned out, treatment funding in the early 1970s was not a zero-sum game. After Daytop's reorganization, Casriel opened a private center where he treated wealthy, troubled, polydrug-using youths with encounter groups and primal scream therapy.¹³⁷ In the late 1960s, other former Daytop employees also founded new treatment centers such as Marathon House, Gaudenzia House, Walden House, and Gateway.¹³⁸

Gateway to the White House: the Illinois Drug Abuse Program

In 1966, Illinois still lacked adequate treatment facilities for addicts. New York, in contrast, had adopted California-style statewide program for civil commitment several years earlier. And newer therapies were also well underway: the methadone experiment was expanding, and Daytop's roster of residents continued to grow.¹³⁹ When the Narcotic

Addict Rehabilitation Act became law in November 1966, Illinois, like many other states, needed to put alternatives to incarceration in place. When addiction researcher Jerome Jaffe moved from New York to the University of Chicago a few months later, the only place an addict could detoxify was the infirmary of the county jail.¹⁴⁰

Jaffe, who trained as a psychiatrist and pharmacologist, arrived at Chicago following appointments at Lexington and Vincent Dole's laboratory at Rockefeller University. As Jaffe began to establish his Chicago research lab in early 1967, he also served as a consultant to the Illinois Narcotics Advisory Council.¹⁴¹ Jaffe was a dynamic, inventive young researcher (then only in his thirties) who had already observed Lexington, Synanon, Daytop, and methadone treatments firsthand.¹⁴² The Council heeded his advice.

Jaffe proposed a research program that would have been unthinkable in New York. (Although the state and city adopted comparatively progressive drug treatment policies, New York's treatment landscape was littered context with conflicting philosophies, large personalities, and well-entrenched medical and criminal justice interest groups). Jaffe asked: Why not pilot the treatment programs that had demonstrated promising preliminary results—methadone, therapeutic communities, detoxification and aftercare programs—and then expand the ones that hold up to rigorous evaluation? The Council agreed with one condition: Jaffe had to head the program. Instead of devoting the next phase of his career to the basic and clinical studies of alpha-acetyl methadol (a methadone-like drug known as LAAM), Jaffe's lab became the testing ground for multi-modal addiction treatment.¹⁴³

Jaffe's idea for the Illinois Drug Abuse Program (IDAP) earned Governor Richard Ogilvie's approval and the full support of Harold Vigotsky, who directed the State Department of Mental Health. With the political and financial backing of local authorities and the research resources of the University of Chicago, Jaffe recruited talented researchers such as Bob Schuster and Patrick Hughes.¹⁴⁴ In just a year and a half, IDAP established a detoxification ward with associated residential and day treatment facilities, more than one methadone program, and a new therapeutic community called Gateway House.¹⁴⁵

Initially, Jaffe planned to test the modalities' efficacy by randomly assigning patients to one of the three treatment options: maintenance, detoxification, or therapeutic community care. But clients had strong opinions about which treatment model suited them, and little interest in Jaffe's clinical trial. The attrition for clients assigned to undesirable treatments was "horrendous," remembered Jaffe. The plan to randomize addiction treatment was "naïve."¹⁴⁶ Clients were more likely to be successful if they were initially motivated to comply with their treatment program.

Casriel disagreed. "We assume when [clients] come in they truly have no real motivation. One of the things we do very early is to motivate them so that they stay over several weeks," he said in a filmed debate with Jaffe, citing Daytop's impressive 90 percent retention rate. "This is of course the great paradox," replied Jaffe, "that although you have to push them into treatment that we designate as being curative, we have a waiting list of several hundred people who want to participate in a methadone treatment program." While Jaffe made therapeutic community programs available for those who demanded them, he argued that methadone was a more viable public health solution.

Methadone programs served more people, and the clients they treated returned more quickly to their communities, where they could serve as worthy examples for active addicts. Daytop's ex-addicts also addressed urban issues, argued Casriel: they "vacuumed the streets of addicts through confrontation." Daytop's SPAN workers returned to their old friends to say, "Look Johnny you don't have to do it anymore. You know, you don't have to be a dope fiend. You're not some peculiar enzymatic defunct human being. You just had a problem that you've never been able to face." According to Casriel, that problem was "emotional, cultural, social, and vocational."¹⁴⁷ It was not metabolic.

Jaffe was not opposed to assertive approaches to community outreach, or to social and vocational enrichment programs; he hired David Deitch to help manage education and outreach for IDAP in 1969. But he demanded that staff in the TCs and methadone programs collaborate; they attended meetings together, and shared discussions about clinical care. If the staff brought any philosophical hang-ups to the IDAP, Jaffe later said, "they were smart enough to hide it from me."¹⁴⁸ IDAP became famous for reconciling the two opposing treatment strategies. The program allowed clients to transition from one modality to another, and used some TC techniques in groups designed for methadone patients. Clients who wanted to stop taking methadone could have their dose gradually reduced in supervised TC settings.¹⁴⁹

Gateway was the first TC associated with IDAP. Jaffe drew from his knowledge of the drug treatment field and earlier observations of TCs like Synanon and Daytop. He revisited Synanon, and asked if the organization would be interested in establishing a new TC in Chicago. Dederich was not interested—not if Jaffe planned to manage the external evaluation of the center. Synanon's stance had not budged since the conversation with

Casriel and O'Brien almost five years earlier. "Basically Chuck Dederich just said, 'Give us money and don't bother us,'" remembered Jaffe.¹⁵⁰ Instead, Jaffe located several ex-addicts in another treatment program and sent them east to be trained at Daytop. He hired a former Synanon member to run the new organization.

Jaffe organized Gateway as a non-profit governed by a Board of Directors rather than a state-run facility. He believed that an organization with the freedom to pursue private and public funds would ultimately be more sustainable. He also thought that the ex-addict leadership needed to feel a sense of ownership in order for the organization to work.¹⁵¹ But ownership had hazards that were not immediately obvious. Although Jaffe took a rigorous approach to treatment evaluation, IDAP also established a friendly therapeutic environment; staff, management, and patients from the programs mingled at picnics.¹⁵² Jaffe even referred his own relative to Gateway for treatment. All was well—until several residents, including his relative, told him that Gateway's director had moved his brother into the community as an "enforcer." Gateway, like other traditional TCs, was certainly "authoritarian," said Jaffe. "That didn't bother me."¹⁵³ Then Jaffe discovered that the director attempted to use intimidation and threats to coerce women in the community to perform sex acts.

Jaffe called several meetings with Gateway's Board of Directors. "They were completely taken in by their so-called director of the house," said Jaffe.¹⁵⁴ Jaffe explained that he would withdraw the public support of IDAP funds unless the Board looked for new leadership; since Gateway was an independent entity, the Board could continue to raise revenue from other sources.¹⁵⁵ Initially, the Board voted to retain the director and forgo state funds, a decision that left Jaffe without a traditional TC for his multimodal

program. He had barely established a new TC structure—and hired Daytop defectors Carl Charnett and Michael Darcy to run it—when Gateway’s Board reversed course and fired the errant director. Jaffe permitted a “quiet merger” of the two organizations.¹⁵⁶ Charnett and Darcy brought a refreshing leadership style and reversed Gateway’s course.¹⁵⁷

In addition to Gateway, IDAP pioneered other treatment centers with TC elements. Tinley Park accommodated about 100 people in a former mental health center. Tinley offered an array of services, including detoxification, therapeutic community treatment, methadone, and transitional supportive housing for patients who needed further counseling and job training before returning to independent living.¹⁵⁸ Safari House also provided both outpatient methadone and residential treatment, and was managed by TC graduates and ex-addicts who were not initially trained in the TC model.¹⁵⁹ The IDAP approach proved to be a highly creative endeavor that encouraged the combination of different treatment approaches and a wide variety of options for addicts who sought treatment. But it was also bureaucratic, and designed with the goal of collecting evidence in mind.

Jaffe later argued that the bureaucracy, and not the intimacy between patients and staff, kept the abuses inherent in the hierarchical treatment structures from escalating in IDAP TCs.¹⁶⁰ IDAP’s close association with the University of Chicago and with the state funders meant that evaluators and medical residents regularly visited Gateway and other program sites. The multimodal approach also meant that the professionals involved with particular communities often had professional allegiances outside the TC orders.

Bureaucracy appealed to politicians who had a stake in effective solutions to the addiction problem. By the early 1970s, hard drug use and addiction had expanded beyond

the trafficking centers in New York and California and become an issue of national concern. The heroin epidemic of the late 1960s was inspired by demography as much as geography; it was, concluded historian David Courtwright, a “baby-boom phenomenon.”¹⁶¹ The first wave of heroin users in the late 1960s mostly consisted of black and Hispanic young men. Substance use began to spread among other groups—soldiers, women, middle-class youth— as Jaffe rapidly expanded IDAP and presidential candidate Richard Nixon pledged to restore law and order.¹⁶²

Nixon’s New Crisis

Nixon won the 1968 election. In early June of 1970, Nixon’s advisor Jeffrey Donfeld took a tour of the nation’s most prominent drug treatment programs: Daytop Village, Phoenix House, a New York City methadone clinic, and IDAP in Chicago.¹⁶³ Donfeld had weathered the 1960s as a California conservative; he opposed the Free Speech movement as a law student at Berkeley and interned for Nixon’s law firm throughout the “Summer of Love.”¹⁶⁴ Although Nixon had largely avoided discussing drug policy specifics during the 1968 campaign, Donfeld made the drug issue his cause as a member of Nixon’s domestic policy staff. Donfeld read studies—like Dole and Nyswandars’ pioneering methadone results— that suggested that new treatment innovations could bring down crime rates. When Nixon’s trusted advisor Egil “Bud” Krogh, Jr. wanted to address crime in the District of Columbia, he turned to Donfeld for advice.¹⁶⁵ Either Donfeld, Dole’s research, or both sold Krogh on methadone’s ability to function as a crime intervention. Krogh gave Robert Dupont, then head of a small city pilot methadone program, the authority to replicate New York’s large-scale success rate with methadone. The Narcotics Treatment Administration (NTA), a multi-modal program

with a heavy emphasis on methadone, opened in February 1970.¹⁶⁶ Krogh viewed DC as “laboratory,” a natural experiment to test whether funding community-based treatment would have a positive effect on social disorder.¹⁶⁷ Donfeld and Krogh both had the inkling that methadone, not therapeutic communities, would best serve Nixon’s crime-fighting agenda. Still, Krogh asked Donfeld to survey several of the nation’s prominent programs.

Donfeld reported that the New York program personnel were universally disparaging about competing treatment programs and approaches: “each is a very parochial zealot believing that his program is the true panacea,” he wrote.¹⁶⁸ IDAP’s TCs were different. Tinley Park exhibited none of the “intense, moralistic, rigid approach of Daytop,” observed Donfeld, who attributed the change in tone to Jaffe’s cerebral management style.¹⁶⁹ He asked Jaffe to head a new study commission that would investigate the feasibility of establishing a national treatment program. Jaffe accepted. His commission’s advice convinced Nixon advisor John Erlichman to take a proposal for national methadone expansion to the President.¹⁷⁰

Nixon created a new office to tackle the drug problem—the Special Action Office for Drug Abuse Prevention (SAODAP)—and appointed Jaffe to lead it. A variety of factors in the months of 1971 paved the way for this bold new bureaucratic solution: stonewalling from the Bertram Brown’s psychoanalytically-inclined NIMH, which still viewed pharmaceutical methadone treatment as a fringe threat to the profession; a moral panic about drug use in Vietnam and among veterans, who obviously deserved compassion rather than criminalization; and the astonishing success of Dupont’s DC

methadone program, which began to bring crime down in 1970 after a frightening three-year increase that tracked a heroin epidemic from 1966-1969.¹⁷¹

In June, Nixon's advisors called Jaffe to the White House for a second meeting, ostensibly to further discuss his proposed plan for detoxifying troops before their return from Vietnam. Instead, Krogh and Donfeld brought Jaffe to a meeting with President Nixon and John Erlichman, who asked him to explain the details of the IDAP approach and questioned the relative merits of methadone and therapeutic community treatment. When Jaffe mentioned that his program included therapeutic communities "like Synanon and Daytop," Nixon vaguely remembered Synanon. Jaffe dismissed the group's relevance to drug treatment: "It's a very controversial group that's effective for a very select group. But they have most of their time available to go around writing speeches about how they've been converted. They're a certain evangelical quality to it—which is not bad, but the difficulty is that they are not very critical about themselves and they are all too willing to denigrate other approaches."¹⁷²

Still, Jaffe conceded that therapeutic communities had a place in a national treatment plan. He repeated two arguments in TCs' favor: Methadone programs could serve heroin addicts, yet many youthful drug abusers used a variety of substances. Most who used heroin had only recently developed the habit. Giving methadone to young heroin users was politically unpalatable, and Jaffe had psychiatric misgivings about it as well. Jaffe described the ideal federal plan put forth in his commission's report: scale up methadone treatment into a nationwide program, and fund multi-modal, IDAP-style systems in cities with documented drug abuse problems and few treatment programs.¹⁷³ On June 17, 1971 Nixon announced the creation of the new office, Jaffe's appointment,

and a new budget of \$105 million federal dollars designated for addiction treatment. Nixon's cabinet may have underwritten this budget with methadone in mind, but TC advocates would also be eligible for the unprecedented influx of funding.

Treatment advocates predicted the further federalization of community treatment, a process that arguably began with the matching grants associated with the Johnson administration's Narcotic Addict Rehabilitation Act. Congressional subcommittee hearings in 1969 and 1971 debated the merits of each treatment model.¹⁷⁴ TC and methadone advocates presented results from their local programs, argued for funding each model on a national scale, and positioned themselves for new funding opportunities. New Yorkers repeated their arguments for a national audience.

Daniel Casriel told Congress, "methadone will prevent stealing, but it doesn't cure [the addict's] personality. No chemical does. The thing that drove them to search out heroin is still driving them. Long before they took heroin they were not functioning effectively, either vocationally or socially."¹⁷⁵ Therapeutic community advocates called methadone a crutch, a band-aid, a handkerchief, and an alcohol rub.¹⁷⁶ It looked like medicine, but failed to address the underlying causes of addiction, which TC advocates believed were spiritual and characterological. Critics told horror stories about children getting into methadone-laced orange juice¹⁷⁷ and expressed concern for the well-being of fetuses exposed to the drug in utero long before fetal alcohol syndrome was a widely recognized condition.¹⁷⁸ Born into a chemically saturated culture, innocents with the propensity for chemical addiction would need a therapeutic retreat to get out of it.

Vincent Dole challenged this theory at a congressional subcommittee hearing in 1971. His pilot study data failed to convince his conservative audience, so Dole used an

anecdote to argue that addicts could be referred to methadone maintenance as a form of civil commitment. Dole told the story of a “tough Irish kid,” a high-school dropout and heroin addict who had been jailed twice for stealing and who had failed at previous attempts at detoxification. Seven years into methadone treatment, the “kid” had a wife, a family, and a college degree in aeronautical engineering. “Now,” Dole asked Republican Representative Robert McClory, “is he rehabilitated?”¹⁷⁹

“My answer to that,” replied McClory, “would be that from the standpoint of rehabilitation from narcotics, no, he isn’t.” The boy’s continued reliance on the drug—perceived as an “easy way out” of addiction—undermined Dole’s uplifting story. McClory continued, “Sure, we can rehabilitate persons by putting them on another form of drugs or, I suppose, through the British system of letting heroin be received free of charge and thereby rehabilitate a criminal. He won’t be out stealing in order to support his addiction. But that isn’t the kind of rehabilitation we had in mind: no.”¹⁸⁰

Some conservatives had in mind McClory’s preferred “slow gradual [program] which required a lot of spiritual and mental rehabilitation, a change in attitude and thinking, an aftercare program.”¹⁸¹ Dole’s data failed to move McClory, who admitted that he would sooner send his son to a TC-style NARA-designated research center than to Dole’s methadone program.¹⁸²

Ex-addicts (some of them former Synanon members) employed by therapeutic communities in the late 1960s critiqued the depravity of a drug-saturated mainstream culture. They crafted these critiques of mainstream culture even as they promoted the TC model’s efficacy in helping them conform to it. In 1969, ex-addict and former Daytop

resident Samuel Anglin minimized the importance of chemical effects and emphasized the influence of a dysfunctional culture:

We have to find out what it is in our culture and the attitudes of our culture that encourages drug abuse. And you see it on television and everything else: you take the little blue pill if you get up tight. You see it about Compoz: it doesn't bother him, the war and everything, because he takes Compoz. If we keep dealing with this problem chemically, we will in 20 years have a bunch of people sitting around tranquilized not caring about anything.¹⁸³

Conservative and liberal drug-free ideologues disagreed on which issues were worth examining, but both sets of arguments considered the physical properties of the chemicals less important than their symbolic function, as a form of false consciousness. Monsignor William O'Brien, like Anglin, viewed the therapeutic community as a response to the "loneliness and alienation" of modern life. "The elimination of the symptom," he proclaimed, "be it substance abuse or other disorders, is only part of the treatment."¹⁸⁴ TC advocates framed the "truth" at the center of addiction recovery as the total alignment of personal behavior with the community's particular moral philosophy. Therapeutic communities could be perceived as a promising treatment model as long as their philosophies were uncontroversial and the methods used to achieve behavior change seemed reasonable.

"Uncontroversial" suddenly meant "conservative"— institutionally and politically. Therapeutic communities, which Synanon graduates envisioned as a reaction against the traditional psychiatric treatments embodied by Lexington and hospital wards, briefly allied with the establishment in the fight against methadone. Psychiatrists like Casriel, Ramirez, Densen-Gerber, and even Sidney Cohen—who would attempt to revitalize Lexington using the TC model— helped legitimate many of the therapeutic

methods that Synanon developed. To politicians, the TC approach for treating addiction proved most acceptable when residents were socialized into appropriate religious and gender roles along with their new abstemious behaviors. For better or worse, the most radical aspects of Synanon's model of social experimentation—which involved alternative family, labor, and educational structures—were not replicated using federal funds. Additionally, the “community” itself became a bounded entity, delineated by funding structures as well as walls. Deitch's model of the TC resident as “change agent” who challenged mainstream culture and impacted local neighborhoods was short-lived; as TCs became established as legitimate agencies, “community” was largely reduced to an efficacious method of delivering addiction treatment for the individuals that entered it.¹⁸⁵

This efficacy was defined in terms of individual recidivism, not social or cultural changes. Though TC advocates raised awareness about a drug-saturated society, for the most part politicians turned their attention back to incorrigible individuals. In a 1971 discussion of the expansion of civil commitment for addiction treatment, one Republican congressman concluded that addiction is an epidemic. Forced treatment was a justifiable “quarantine of people who are sick and infect others with this sickness wherever they go.”¹⁸⁶ Addiction was framed as a problem of contagious agents rather than social environments. Rhetorically, transformative countercultures became quarantine wards.

With addiction rates still rising, especially among youth, more wards were needed. The differences between the patient populations of methadone and therapeutic community programs became evident: methadone providers tended to treat older, nonwhite patients with lengthier drug use histories. Synanon's therapeutic model was designed to remake the ‘hard core’ career opiate addict, but second-generation TCs began

shifting their focus to young poly-drug users by the late 1960s. The first nationwide efficacy studies confirmed Jaffe's discovery in Chicago: it was difficult to compare outcomes in TCs and methadone programs because clients selected treatments based on their personal taste and motivation—two factors which were shaped by the treatment providers' increasingly savvy public relations.¹⁸⁷

Providers' treatment philosophies would continue drive policy even after rigorous evaluation data became widely available. This was true despite favorable outcomes worthy of front-page news: in the Drug Abuse Reporting Program (DARP)'s multifaceted analysis of the positive effects of drug treatment, the “standard,” Synanon-style TC treatment outranked eleven other treatment models.¹⁸⁸ The treatment model was more than a symbolic improvement on past attempts: it held up scientifically in comparison with its contemporaries. At the same time, methadone treatments achieved impressive during-treatment results with special populations, particularly older heroin addicts.¹⁸⁹ Narcotic addiction treatments were evaluated on a holistic range of variables, such as their ability to influence alcohol and non-opiate drug use, lead to employment, or reduce arrests.

The early DARP studies suggested that drug treatment, in the aggregate, had negligible effects on arrests and jail time.¹⁹⁰ Although they measured criminal outcomes, medical authorities like Dole and Nyswander hoped that methadone could be used to attract and maintain street addicts in rehabilitation programs. Methadone might link street addicts to other social services; metabolic stability could become the basis for social uplift. Unfortunately, the Nixon administration hoped to emphasize lower crime rates, not the moral or even socioeconomic progress of drug users. Methadone advocates

accordingly pitched the clinics as part of an “anti-crime” initiative rather than as a “rehabilitation” program. Critic Edward Jay Epstein wrote, “The net result was that those with the technical competence to see the limits of methadone treatment chose not to deflate the unrealistic claim that methadone would substantially reduce crime.”¹⁹¹

Ex-addict TC advocates who lacked “technical competence” had nevertheless pointed out that methadone, as a single-drug solution to heroin dependence, was useless in treating the supposed personality defects that might also lead to psychedelic or stimulant addiction. But by the early 1970s, the public—even the liberal community that initially promoted methadone treatment—was becoming less worried about alleviating the condition of addiction than in addressing its consequences. Popular media coverage of addiction treatment was no longer so hopeful.¹⁹² The *New York Times* featured a Lower East Side resident with little interest in the basic causes of addiction or in the humane treatment of addicts. “I wouldn’t care if someone came along with a machine gun and killed all of them,” he said in 1971. “I’ve been robbed, my wife has been robbed—I’m sorry, I just don’t care any more.”¹⁹³ Unfortunately—as methadone maintenance advocates well knew—a simple chemical solution was an inadequate response to the era’s trends in drug use and crime. Some historians argue that when New York’s Rockefeller Drugs Laws ushered in mandatory prison sentences for minor drug offenses in 1973, the treatment revolution was over before it started.¹⁹⁴ Conservatives such as California Governor Ronald Reagan attempted to de-fund local methadone clinics and favored other measures for controlling drug-related crime.¹⁹⁵

As Nixon and other political leaders in the 1970s soon learned, no medicine could arrest the bedlam of the “bad Sixties.”

Notes

- ¹ Guy Endore, "1,000 Words on Synanon," Guy Endore Collection, UCLA; Guy Endore, *Synanon* (New York: Doubleday, 1968), 61.
- ² William Safire, "Hang Tough," *Safire's Political Dictionary* (New York: Oxford University Press, 2008), 304.
- ³ Thomas Frank, *The Conquest of Cool: Business Culture, Counterculture, and the Rise of Hip Consumerism* (Chicago: University of Chicago, 1997), 168-172.
- ⁴ Martin Tolchin, "600 Addicts Aided by Ex-Users in City Program," *New York Times*, February 4, 1968.
- ⁵ In addition to the tours for US professionals described in previous chapters, in 1967 Synanon was also featured on a drug-focused study tour for professionals housed in Great Britain's newly funded Addiction Research Unit. The researchers visited many of the representatives from treatment centers that are discussed in this chapter and elsewhere: Lexington penitentiary officials; Vincent Dole and Marie Nyswander; Mitchell Rosenthal and Efren Ramirez; and Jerome Jaffe. Griffith Edwards, "Seeing America- diary of a drug-focused study tour made in 1967," *Addiction* 105 (2010): 984-990.
- ⁶ Michael Massing, *The Fix* (Berkeley: University of California Press, 2000), 102-104
- ⁷ Todd Gitlin, *The Sixties: Years of Hope, Days of Rage* (New York: Bantam, 1993); Jeremy Varon "Between Revolution 9 and Thesis 11: Or, Will We Learn (Again) to Start Worrying and Change the World?" in *The New Left Revisited*, ed. John McMillian and Paul Buhle (Philadelphia: Temple University Press, 2003), 214-240; Dan T. Carter, *The Politics of Rage: George Wallace, The Origins of the New Conservatism, and the Transformation of American Politics* (New York: Simon & Schuster, 1995); Rick Perlstein, *Nixonland: The Rise of a President and the Fracturing of America* (New York: Scribner, 2009); Mary C. Brennan, *Turning Right in the Sixties: The Conservative Capture of the GOP* (Chapel Hill: University of North Carolina Press, 1995).
- ⁸ George DeLeon, *The Therapeutic Community: Theory, Model, Method* (New York: Springer, 2000), 24-25.
- ⁹ Barry Sugarman, *Daytop Village: A Therapeutic Community* (New York: Holt, Rinehart, and Winston, 1975), 8-9.
- ¹⁰ Sugarman, *Daytop Village*, 9.
- ¹¹ Guy Endore, *Synanon*, 308.
- ¹² Interview With Charles Devlin, October 6, 2011; Sugarman, *Daytop Village*, 9.
- ¹³ David Courtwright interview with Monsignor William O'Brien Oral History, July 31, 1981, Addicts Who Survived Collection; Interview With Charles Devlin, October 6, 2011; Sugarman, *Daytop Village*, 9.
- ¹⁴ Interview With David Deitch, May 25, 2011.
- ¹⁵ David Courtwright interview with Monsignor William O'Brien Oral History, July 31, 1981, Addicts Who Survived Collection.
- ¹⁶ *Ibid.*
- ¹⁷ Endore, *Synanon*, 297.
- ¹⁸ David Courtwright interview with Monsignor William O'Brien Oral History, July 31, 1981, Addicts Who Survived Collection.
- ¹⁹ *Ibid.*
- ²⁰ Interview With David Deitch, May 25, 2011.

²¹ Ibid.

²² Daniel Casriel and Grover Amen, *Daytop: Three Addicts and Their Cure* (New York: Hill and Wang, 1971), xv.

²³ Sugarman, *Daytop Village*, 9.

²⁴ The intention to pursue a variety of funds is described in this news article: “Daytop Village Plans 7 Branches,” *New York Times*, June 26, 1966. For example, parents donated approximately \$100,000 toward the purchase of a new building for Daytop: C. Gerald Fraser, “Ex-addicts Parents Clean New Daytop Center,” *New York Times*, January 7, 1973;

²⁵ Peter Collier, “The House of Synanon,” *Ramparts*, October 1967, 54.

²⁶ George Gent, “TV: New Hope for Young Addicts,” *New York Times*, July 21, 1967

²⁷ Ernest Pendrell, *Marathon: The Story of Young Drug Users* (American Broadcasting Company, 1967), 16 mm.

²⁸ Methadone pioneer Vincent Dole later hypothesized that Lindsay selected the Puerto Rican-born Ramirez to lead his treatment efforts for political reasons. Vincent Dole Oral History, Addicts Collection; Samuel Roberts, “‘Rehabilitation’ as a Boundary Object: Medicalization, Local Activism, and Narcotics Addiction Policy in New York City, 1951-62,” *Social History of Alcohol and Drugs* 26, no. 2 (2012): 163.

²⁹ Thomas Buckley, “City Starts Narcotics Plan to Turn Tide of Addiction,” *New York Times*, July 27, 1966.

³⁰ David Courtwright interview with Mitchell Rosenthal, July 23, 1981, Addicts Who Survived Collection.

³¹ Pendrell, *Marathon: The Story of Young Drug Users*, 1967.

³² *Current Trends in the Therapy for Narcotic Addiction* (U.S. Dept. of Health, Education, and Welfare, Public Health Service, 1969), VHS.

³³ Sugarman, *Daytop Village*, 93.

³⁴ Daniel Casriel and David Deitch *New Success in the Cure of Addicts* (Staten Island: Daytop Village, Inc, 1967); Daytop Village 1966, Folder 514, Box 29, John Lindsay Papers, Municipal Archive of the City of New York; Testimony of Daniel Casriel, *Inquiry Into the Problem of Alcoholism and Narcotics: Hearing Before the Special Subcommittee on Alcoholism and Narcotics of the Committee on Labor and Public Welfare of the United States Senate*, 91st Congress, 1st and 2nd sessions (1969), 787.

³⁵ Murdock Head, *The Distant Drummer: Flowers of Darkness* (George Washington University, the National Institute of Mental Health and the District of Columbia Medical Society and the American Academy of General Practice, 1972), VHS.

³⁶ Casriel and Amen, *Daytop*, 77.

³⁷ Sugarman, *Daytop Village*, 123.

³⁸ David Bird, “Ramirez to Head Addiction Agency,” *New York Times*, November 27, 1967.

³⁹ David Courtwright interview with Mitchell Rosenthal, July 23, 1981, Addicts Who Survived Collection; for Phoenix House numbers, see Barbara Campbell, “Cost and Space Plague Addicts’ Centers,” *New York Times*, March 4, 1970.

⁴⁰ For Synanon residency numbers: Richard Ofshe, “The Social Development of the Synanon Cult: The Managerial Strategy of Organizational Transformation” *Sociological Analysis* 41, no. 2 (1980): 109-127; Lexington and Fort Worth numbers are calculated for

the residents at the end of fiscal year 1970, in February 1971: Folder Statistical Data, Box 1 Clinical Research Center Administrative Files; Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia).

⁴¹ Phoenix House brochure, Drug Addiction 1969-1972 Folder 560, Box 31, John Lindsay Papers, New York City Municipal Archives.

⁴² Dan Garrett to Ted Dibble, November 1967, Graduates Folder, Box 70, UCLA Synanon Collection

⁴³ Walter V. Collier, Edward Hammock, Charles Devlin, *An Evaluation Report on the Therapeutic Program of Daytop Village* (Daytop Village, February 1970), 63.

⁴⁴ Charles Devlin, Daytop History Timeline, September 2011; Charles Devlin's personal papers, copy in possession of author.

⁴⁵ "Confirmed Individuals of Daytop Village," June 11, 1968; Charles Devlin's personal papers, copy in possession of author.

⁴⁶ Interview with Ron Williams, March 6, 2013.

⁴⁷ Ibid.

⁴⁸ Ibid.

⁴⁹ Ibid.

⁵⁰ Ibid.

⁵¹ Ibid.

⁵² "Kenny Talks About the Time He Was in Phoenix House," May 14, 1971, Box 640, UCLA Synanon Collection.

⁵³ Ibid.

⁵⁴ Vinny Marino, *Journey From Hell* (Kaneohe, Hawaii: Habilitat, 1966), 143.

⁵⁵ Ibid.

⁵⁶ Martin Gansberg, "City Acts to Let Foundation Run Addict Program," *New York Times*, October 12, 1970; Thomas Buckley, "City Starts Narcotics Plan to Turn Tide of Addiction," *New York Times*, July 27, 1966.

⁵⁷ Francis Smith, the Democratic City Council President complained in 1969 that "none" of Phoenix House's residents had completed the program in three years. Maurice Carroll, "Smith Terms Mayor's Program on Drugs 'Highly Unsuccessful'" *New York Times*, October 19, 1969.

⁵⁸ When an independent evaluator raised questions about Phoenix House's retention rate and cost efficacy, Rosenthal supplied the Lindsay administration with Deleon's internal evaluation studies and publications. See Mitchell Rosenthal to John Lindsay, April 5, 1973 and appended material in Phoenix House 1973 Folder 1592, Box 85, John Lindsay Papers, New York City Municipal Archives.

⁵⁹ William White, "David Deitch and George De Leon on recovery management and the future of the therapeutic community," *Counselor* 11, NO. 5 (2010): 38-49.

⁶⁰ Therapeutic goals included, for example, "long term drug freedom, elimination of antisocial behavior and attitudes, emotional change, psychological insight, job stability." Key studies are collected in *Phoenix House: Studies in a Therapeutic Community, 1968-1973*, ed. George Deleon (New York: MSS Information Corporation, 1974).

⁶¹ George Deleon, "Phoenix House Therapeutic Community: The Influence of Time in Program on Change in Resident Drug Addicts," *Phoenix House: Studies in a Therapeutic*

Community, 1968-1973, ed. George Deleon (New York: MSS Information Corporation, 1974), 194-198.

⁶² James Markham, “Methadone Therapy Programs: Issue and Debate,” *New York Times*, April 17, 1973.

⁶³ Judianne Densen-Gerber, *We Mainline Dreams: The Odyssey House Story* (New York: Doubleday, 1973), 33.

⁶⁴ Densen-Gerber, *We Mainline Dreams*, 34

⁶⁵ *Ibid.*

⁶⁶ Densen-Gerber, *We Mainline Dreams*, 35.

⁶⁷ Densen-Gerber, *We Mainline Dreams*, 36.

⁶⁸ *Ibid.*

⁶⁹ Densen-Gerber, *We Mainline Dreams*, 37.

⁷⁰ *Ibid.*

⁷¹ Densen-Gerber, *We Mainline Dreams*, 41.

⁷² *Ibid.*

⁷³ Quoted in Densen-Gerber, *We Mainline Dreams*, 44.

⁷⁴ Densen-Gerber, *We Mainline Dreams*, 45.

⁷⁵ Densen-Gerber, *We Mainline Dreams*, 69.

⁷⁶ Densen-Gerber, *We Mainline Dreams*, 73.

⁷⁷ Tolchin, “600 Addicts Aided by Ex-Users,” *New York Times*, February 4, 1968.

⁷⁸ Densen-Gerber, *We Mainline Dreams*, 282.

⁷⁹ Judianne Densen-Gerber Oral History, Addicts Collection

⁸⁰ “‘Funeral’ Held for Narcotics Center,” *New York Times*, July 22, 1968

⁸¹ Quoted in Israel Shenker, “A Crusader Aiding Addicts: Doctor Leads Crusade for Teen-aged Addicts,” *New York Times*, March 6, 1970.

⁸² Densen-Gerber, *We Mainline Dreams*, 406.

⁸³ Densen-Gerber, *We Mainline Dreams*, 408.

⁸⁴ Shenker, “A Crusader Aiding Addicts,” *New York Times*, March 6, 1970.

⁸⁵ Alfonso Narvaez, “Addict, 12, Tells Enquiry of Mainlining,” *New York Times*, February 27, 1970.

⁸⁶ *Ibid.* Later, Ralphie was dismissed from the program a few weeks later; Densen-Gerber explained that the adolescent unit could not accommodate the needs of such a young patient—including bedtime stories: Martin Arnold, “Boy Who Told of Addiction at 12 is Back Home,” *New York Times*, March 11, 1970.

⁸⁷ “The Odyssey Move,” *New York Times*, February 14, 1970.

⁸⁸ Densen-Gerber wrote: “NARA revisions should “make clear...that the private sector, including non-profit agencies, should take an active role in commitment and rehabilitation programs.” *Treatment and Rehabilitation of Narcotic Addicts*, 694.

⁸⁹ Beatrice Berg, “Television: Real Life Comes to ‘One Life to Live,’” *New York Times*, August 2, 1970.

⁹⁰ *Ibid.*

⁹¹ Densen-Gerber, *We Mainline Dreams*, 408.

⁹² Densen-Gerber, *We Mainline Dreams*, 186.

⁹³ Densen-Gerber, *We Mainline Dreams*, 392.

⁹⁴ Vincent Dole and Marie Nyswander, "A Medical Treatment for Diacetylmorphine (heroin) Addiction," *Journal of the American Medical Association* 193 (August 23, 1965): 646-650.

⁹⁵ This history is discussed in more detail in David Courtwright, "The Prepared Mind: Marie Nyswander," *Addiction* 92 (1997): 257-265.

⁹⁶ *Ibid.*

⁹⁷ Courtwright, "The Prepared Mind," 259; Vincent Dole and Marie Nyswander, "Heroin Addiction: A Metabolic Disease," *Archives of Internal Medicine* 120, no. 1 (1967): 19-24.

⁹⁸ Testimony of Daniel Casriel, *Inquiry Into the Problem of Alcoholism and Narcotics*, 813; Another variations on this metaphor is "shifting an alcoholic from scotch to cheap wine": David Courtwright interview with Judianne Densen-Gerber, August 5, 1981, Addicts Who Survived Collection; William L. Claiborne, "A Daily Dose of Methadone Could Be Answer to Crime." *The Washington Post*, December 6, 1970.

⁹⁹ Courtwright, "The Prepared Mind," 260.

¹⁰⁰ Vincent Dole, Marie Nyswander and Alan Warner, "Successful Treatment of 750 Criminal Addicts," *Journal of the American Medical Association* 206 (December 16, 1968), 2708.

¹⁰¹ Dole explained that Trussel was a strong supporter of his methadone program, in stark contrast to Ramirez: Vincent Dole Oral History, Addicts Collection; When Lindsay decided to invest in methadone, he placed the treatment under the purview of the Health Services Agency rather than the Addiction Services Agency, which operated (controversially) with little oversight until a Controller and future Mayor Abraham Beame released a damning report in 1970: Tom Buckley, "Medicine: Lindsay Steps Up Methadone Program," *New York Times*, October 4, 1970.

¹⁰² Charles G. Bennett, "Addiction Agency Called a 'Fraud': Councilman Moskowitz Says Dr. Ramirez Has Failed," *New York Times*, December 11, 1968.

¹⁰³ *Ibid.*

¹⁰⁴ *Ibid.*

¹⁰⁵ Tom Buckley, "Medicine: Lindsay Steps Up Methadone Program," *New York Times*, October 4, 1970.

¹⁰⁶ Lindsay left office in 1973, after a party switch and a failed bid for the Democratic presidential nomination in 1972; Abraham Beame, a Democrat and vocal critic of Phoenix House, succeeded him from 1973-1977.

¹⁰⁷ Courtwright, "The Prepared Mind," 260; Robert Newman, "Methadone Maintenance: It ain't what it used to be," *British Journal of Addiction* 71, no. 2 (1976): 183-187.

¹⁰⁸ Interview with Peter Bourne, April 24, 2013; Peter Bourne, "Alcoholism and Drug Abuse," <http://petergbourne.co.uk/articles10.html> accessed October 21, 2013

¹⁰⁹ Herman Joseph, Sharon Stancliff, and John Langrod, "Methadone Maintenance Treatment: A Review of Historical and Clinical Issues," *Mount Sinai Journal of Medicine* 67, nos 5 and 6 (October/November 2000): 347-364.

¹¹⁰ Robert DuPont and Richard Katon, "Development of a Heroin-Addiction Treatment Program: Effect on Urban Crime," *Journal of the American Medical Association* 216 (May 24, 1971): 1320-24.

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- ¹¹¹ David Courtwright interview with William O'Brien, July 31, 1981, Addicts Who Survived Collection.
- ¹¹² Interview With David Deitch, May 25, 2011; Sugarman, *Daytop Village*, 124; Joshua Bloom and Waldo Martin, *Black Against Empire: The History and Politics of the Black Panther Party* (Berkeley: University of California Press, 2013).
- ¹¹³ David Courtwright interview with William O'Brien, July 31, 1981, Addicts Who Survived Collection.
- ¹¹⁴ Ibid.
- ¹¹⁵ Will Lissner, "Narcotics Complex Split by Charges of Cultist Activity," *New York Times*, November 17, 1968.
- ¹¹⁶ Joe Pilati, "Schism on 14th Street: The Daytop Explosion," *Village Voice*, November 21, 1968.
- ¹¹⁷ Lissner, "Narcotics Complex Split," *New York Times*, November 17, 1968..
- ¹¹⁸ Ibid.
- ¹¹⁹ Will Lissner, "Legal Action Planned in Daytop Dispute," *New York Times*, November 18, 1968.
- ¹²⁰ Ibid.
- ¹²¹ Pilati, "Schism on 14th Street," *Village Voice*, November 21, 1968.
- ¹²² Ibid.
- ¹²³ "4-day Music Fete Aids Ex-Addicts," *New York Times*, June 16, 1968.
- ¹²⁴ Interview With David Deitch, May 25, 2011.
- ¹²⁵ This observation was made by a theater critic: Eleanor Lester, "...Or the wave of the future?" *New York Times*, June 30, 1968.
- ¹²⁶ Casriel and Amen, *Daytop*, 82-83.
- ¹²⁷ Dan Sullivan, "The Theater: 'The Concept' Pictures Narcotics Victims Ordeal: Rescued Addicts Recall Their Cure in Play," *New York Times*, May 7, 1968.
- ¹²⁸ Robert Brustein, "New Fads, Ancient Truths," *New York Times*, August 17, 1969.
- ¹²⁹ Casriel and Amen, *Daytop*, xxv.
- ¹³⁰ Sullivan, "The Theater: The Concept," *New York Times*, May 7, 1968
- ¹³¹ Lawrence Sacharow, "A Carbon Copy 'Concept'?" *New York Times*, September 7, 1969.
- ¹³² Ibid.
- ¹³³ Mortimer Levitt, "A Community 'Concept'?" *New York Times*, September 21, 1969
- ¹³⁴ "Daytop Board Gains Control of Center," *New York Times*, December 3, 1968.
- ¹³⁵ Raymond Glasscote, James N. Sussex, Jerome H. Jaffe, John Ball & Leon Brill, *The Treatment of Drug Abuse: Programs, Problems, Prospects* (Washington DC: American Psychiatric Association, 1972), 83-103; 242-244.
- ¹³⁶ "Daytop Village Gets Grant," *New York Times*, July 30, 1970.
- ¹³⁷ Daniel Casriel, *A Scream Away from Happiness* (New York: Grosset & Dunlap, 1972)
- ¹³⁸ "Conversation with David Deitch," *Addiction* 94 (1999): 795.
- ¹³⁹ Jerome H. Jaffe, "The Nathan B. Eddy Lecture: Science, Policy, Happenstance," in *Problems of Drug Dependence, 1994: Proceedings of the 56th Annual Scientific Meeting, The College on Problems of Drug Dependence, Vol. 1* (Rockville, MD: National Institute on Drug Abuse, 1994), 21.
- ¹⁴⁰ Ibid.

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- ¹⁴¹ Jaffe, “The Nathan B. Eddy Lecture,” 21-25.
- ¹⁴² Interview with Jerome Jaffe, April 23, 2013.
- ¹⁴³ Jaffe, “The Nathan B. Eddy Lecture,” 21-25.
- ¹⁴⁴ Schuster and Hughes later emerged as international leaders in addiction research.
- ¹⁴⁵ Ibid.
- ¹⁴⁶ Interview with Jerome Jaffe, April 23, 2013.
- ¹⁴⁷ This debate is recorded in *Current Trends in the Therapy for Narcotic Addiction* (U.S. Dept. of Health, Education, and Welfare, Public Health Service, 1969), VHS.
- ¹⁴⁸ Jerome Jaffe Oral History transcript, Oral History of Substance Abuse Research, Bentley Historical Library, University of Michigan, Ann Arbor.
- ¹⁴⁹ Jerome Jaffe, Misha S. Zaks, and Edward N. Washington, “Experience with the Use of Methadone in a Multi-modality Program for the Treatment of Narcotics Users,” *International Journal of the Addictions* 4 (September 1969): 481-490.
- ¹⁵⁰ Interview with Jerome Jaffe, April 23, 2013.
- ¹⁵¹ Ibid.
- ¹⁵² Jerome Jaffe Oral History, Oral History of Substance Abuse Research, University of Michigan; Jaffe, “The Nathan B. Eddy Lecture,” 24.
- ¹⁵³ Interview with Jerome Jaffe, April 23, 2013.
- ¹⁵⁴ Ibid.
- ¹⁵⁵ Ibid.
- ¹⁵⁶ Jerome Jaffe Oral History transcript, Oral History of Substance Abuse Research, University of Michigan. (The new TC, called BRASS, became a corporate shell which was later adopted by another Chicago TC).
- ¹⁵⁷ Darcy, scarcely out of his teens, grew into a leader in the field.
- ¹⁵⁸ Jaffe, “The Nathan B. Eddy Lecture,” 23.
- ¹⁵⁹ Raymond Glasscote, James N. Sussex, Jerome H. Jaffe, John Ball & Leon Brill, *The Treatment of Drug Abuse*, 148; Interview with Jerome Jaffe, April 23, 2013.
- ¹⁶⁰ Ibid.
- ¹⁶¹ David Courtwright, *Dark Paradise: A History of Opiate Addiction in America*, 2nd ed. (Cambridge: Harvard University Press, 2001), 165-174.
- ¹⁶² Ibid. Edward Jay Epstein argues that Nixon, unlike campaign opponent and New York Governor Nelson Rockefeller, did not link crime and drug use in the 1968 campaign. According to Epstein, only later in Nixon’s first term—when he realized that new drug policies could produce data-driven results and powerful, “tough” rhetoric—did Nixon make drug control a central part of his political agenda. Epstein, *Agency of Fear: Opiate and Political Power in America* (New York: Verso, 1990), Chapter 4 and 5, available at edwardjepstein.com, accessed October 22, 2013
- ¹⁶³ Massing, *The Fix*, 102.
- ¹⁶⁴ Massing, *The Fix*, 97.
- ¹⁶⁵ Massing, *The Fix*, 100-01.
- ¹⁶⁶ Massing, *The Fix*, 102.
- ¹⁶⁷ Ibid.
- ¹⁶⁸ Massing, *The Fix*, 103.
- ¹⁶⁹ Ibid.

¹⁷⁰ Massing, *The Fix*, 104-105.

¹⁷¹ Massing, *The Fix*, 103-112; Robert DuPont and Richard Katon, "Development of a Heroin-Addiction Treatment Program: Effect on Urban Crime," *Journal of the American Medical Association* 216 (May 24, 1971): 1320-24.

¹⁷² OVAL 516-10; June 10, 1971, 3:08-4:24pm; White House Tapes; Richard Nixon Presidential Library, Yorba Linda, California

¹⁷³ Ibid; Massing, *The Fix*, 105.

¹⁷⁴ *Inquiry Into the Problem of Alcoholism and Narcotics: Hearing Before the Special Subcommittee on Alcoholism and Narcotics of the Committee on Labor and Public Welfare of the United States Senate*, 91st Congress, 1st and 2nd sessions (1969); *Treatment and Rehabilitation of Narcotics Addicts: Hearing Before the Subcommittee to Amend the Narcotic Rehabilitation Act of 1966 of the Committee on the Judiciary of the United States House of Representatives*, 92nd Congress, 1st session (1971).

¹⁷⁵ Daniel Casriel, *Inquiry Into the Problem of Alcoholism and Narcotics*, 787.

¹⁷⁶ For an example of each of these analogies in context, see the congressional testimony of recovered addicts on pages 698 and 704 of *Inquiry Into the Problem of Alcoholism and Narcotics*.

¹⁷⁷ Testimony of Samuel Anglin, *Inquiry Into the Problem of Alcoholism and Narcotics*, 698.

¹⁷⁸ For the history fetal alcohol syndrome, see Janet Golden, *Message in a Bottle: The Making of Fetal Alcohol Syndrome* (Cambridge: Harvard University Press, 2005); for one example of an article on methadone's effect on infants, see Stuart Auerbach "Babies born addicted to methadone," *Washington Post*, February 26, 1972.

¹⁷⁹ Dole, *Treatment and Rehabilitation of Narcotic Addicts*, 399.

¹⁸⁰ McClory, *Treatment and Rehabilitation of Narcotic Addicts*, 399..

¹⁸¹ Ibid.

¹⁸² Ibid.

¹⁸³ Testimony of Samuel Anglin, *Inquiry Into the Problem of Alcoholism and Narcotics*, 700.

¹⁸⁴ Address to the Ninth World Conference of Therapeutic Communities (San Francisco, 1985) reprinted in Lewis Yablonsky, *Therapeutic Community: A Successful Approach for Treating Substance Abuse* (Lake Worth, FL: Gardner Press, 1994): 38.

¹⁸⁵ For a discussion of "community as method" and an overview of changes in TC structure, see George Deleon, *The Therapeutic Community: Theory, Model, Method*. (New York: Springer, 2007).

¹⁸⁶ Maryland representative Lawrence Hogan, *Treatment and Rehabilitation of Narcotic Addicts*, 695.

¹⁸⁷ A pioneering and influential nationwide study of treatment efficacy began in 1969 when the National Institute of Mental Health (NIMH) contracted with Texas Christian University to produce a large-scale evaluation study of the drug treatment models employed by 52 agencies taking part in the Drug Abuse Reporting Program (DARP). See: Saul B. Sells, ed. *Studies of the Effectiveness of Treatments for Drug Abuse, Vol. I* (Cambridge: Ballinger, 1974). It is important to note that other modalities of treatment existed in the late 1960s and early 1970s—such as hospital detoxification programs and religious treatments like Teen Challenge, to name a few. However, most comparative

academic studies like Sells's focused on variations of methadone and TC treatments, either independently or in their "multi-modal" forms.

¹⁸⁸ Saul B. Sells, ed. *Studies of the Effectiveness of Treatments for Drug Abuse, Vol. I* (Cambridge: Ballinger, 1974), 170-171.

¹⁸⁹ Saul B. Sells, ed. *Studies of the Effectiveness of Treatments for Drug Abuse, Vol. I* (Cambridge: Ballinger, 1974), 191-192.

¹⁹⁰ Saul B. Sells, ed. *Studies of the Effectiveness of Treatments for Drug Abuse, Vol. I* (Cambridge: Ballinger, 1974), 170.

¹⁹¹ Edward Jay Epstein, "Methadone: The Forlorn Hope" *Public Interest* 36 (Summer 1974): 14.

¹⁹² For an overview of the shifting media coverage, see Ronald Bayer, "Liberal Opinion and the Problem of Heroin Addiction: 1960-1973" *Contemporary Drug Problems* 93 (Summer 1975): 93-112.

¹⁹³ Severo, "Chemistry is the New Hope," 23.

¹⁹⁴ For an overview of the historical significance of rise of mass incarceration in the US, see Heather Ann Thompson, "Why Mass Incarceration Matters: Rethinking Crisis, Decline, and Transformation in Postwar America" *The Journal of American History* 97, no. 3 (2010): 703-733. For an overview of mass incarceration in relation to punitive drug laws, see Michelle Alexander, *The New Jim Crow: Mass Incarceration in an Age of Colorblindness* (New York: The New Press), 2009.

¹⁹⁵ Reagan reduced the funding for California's proposed methadone program from \$5,020,000 to \$20,000. Associated Press, "Reagan Methadone Veto Draws Sharp Criticism," *Modesto Bee* August 21, 1972. Although the state reversed course, the history of methadone had a historical trajectories in California and New York. See "Differences Between New York and California," in Richard Retting and Adam Yarmolinsky, eds. *Federal Regulation of Methadone Treatment* (Washington DC: National Academies Press, 1995), 85-89.

Chapter Five Violence and Legitimation

For Robert Dupont, Nixon's election in 1968 coincided with the beginning of the "Drug Abuse Decade." In Dupont's internal history of the drug abuse field, addiction research and treatment progressed over the next ten years. During the "Incubation Period" (from 1968 until 1971) drug use emerged as a social problem, largely due to concerns about addicted servicemen, rising rates of youthful drug abuse, and an association with rising crime rates. Local experiments with methadone and therapeutic communities attracted federal attention. The Controlled Substances Act, a "big tent" drug policy reform with increased funding for treatment and policing, sailed through Congress in 1970. In 1971, the creation of Jerome Jaffe's Special Action Office for Drug Abuse Prevention (SAODAP), and its rapid expansion of drug treatment, ushered in a period of "Chaotic Growth." According to Dupont, the chaos lasted until 1974, when the new National Institute on Drug Abuse (NIDA) affirmed the authority of federal experts and consolidated addiction treatment efforts. The end of the long Sixties inaugurated a period of "Progressive Maturity" (1973-1978) for drug abuse professionals. Federal funding stabilized; "public concern remained high but was much less hysterical," wrote Dupont at the end of the decade.¹

Hysterical, paranoid, estranged: the public mood had a profound impact on the development of addiction research and treatment during Nixon's presidency. Nixon was an effective— if reluctant— chaperone of progressive drug policies.² But his surveillance tactics inspired liberals' suspicions. Controversial therapies tainted drug treatment efforts. Revelations and hypotheses about government projects involving behavior modification and brainwashing coincided with Nixon's downfall.

The image of Nixon as a dark conspirator circulated in the radical left's underground press long before *Washington Post* reporters linked the White House to the June 17, 1974 break-in of the Democratic Campaign Headquarters in the Watergate Hotel.³ The ex-addict employees in a government-run treatment center were not permitted to read the papers' depictions of government conspiracy. But secretly, they subscribed to the theories.

Revolution in Lexington

The Lexington Narcotic Farm had just undertaken a massive reorganization project when a small group of addicts claimed an unused room in the hospital and began to run their own confrontational therapy sessions. The passage of the Narcotic Addict Rehabilitation Act (NARA) in 1966, and the expansion of community-based treatment that followed, rendered the Farm's treatment model obsolete. Charles Dederich's old friend Sidney Cohen, then the acting director of the nation's Division of Narcotic Abuse and Drug Addiction (DNADA), assembled a committee to investigate whether Lexington could be transformed into an institution-wide therapeutic community. Cohen named his colleague Harold T. Conrad to the committee. In 1968, Lexington's treatment wings became the "Clinical Research Center" (CRC); Conrad became the hospital chief and associate director of the NIMH's Division of Narcotic Addiction (NDA).⁴ In 1969, the prison bars came down and each hospital wing prepared to operate according to the open TC concept. "We've gone from maximum security to maximum freedom," proclaimed Conrad to the press.⁵ When Lexington's leadership discovered a faction of ex-addicts from the Numen House holding confrontational therapy groups in November 1969, they encouraged the residents and made space for their group. The group members decorated

their designated room by painting the walls with graphic psychedelic images of drug use depravity. Five months later, they moved into a 100-bed building on the Lexington grounds. They called it Matrix House.⁶

The leaders found the name Matrix in the dictionary: “something within which something else originates or develops.”⁷ Matrix grew out of the group sessions led by Numen House members under the informal name The Lighthouse. The liberated new therapeutic environment made it easier than ever to smuggle in contraband substances, and some participants in the Lighthouse group continued to use them. A few residents decided to replace heroin or meth habits with marijuana or acid, swapping their “dirty dope fiend” identities for “groovy dope fiend” postures, said Terry, a Lighthouse founder and former Synanon member.⁸ “We just decided we don’t use dope, period. Not smack, not speed, not acid, not pot.”⁹ Along with John Wildes, another ex-addict leader who had been in Synanon, Terry pressured the other members to “cop out” and take a drug-free pledge.¹⁰ They formed a new group, Lighthouse II, from the pledging members. Lexington administrators formally recognized the new group, which grew from a small band of four to almost twenty members.¹¹

The Matrix founders “were rock stars,” remembered former resident Dick Shea. Jon Wildes had been an original member of Iron Butterfly.¹² Matrix’s style evolved accordingly. Members replaced the feces, dirty straight jackets, and filth of a former asylum building with tie-dyed bedspreads, bell-bottoms, and patchouli. They buffed the floors to a shine until they looked like glass reflecting the walls’ bright paint colors.¹³ “Matrix House was like walking into somebody’s rather large San Francisco apartment,” remembered one medical officer.¹⁴

Or a college dormitory. Residents decorated individual rooms with colorful curtains, bedspreads, and music posters. Officials praised the campus atmosphere, tie-dye and all, in internal quarterly reports.¹⁵ Images of Matrix members lounging on the grass in discussion circles appeared in government publications and news articles. Matrix, read one newspaper caption, is “just like a college campus except that the curriculum is an 18 month course in survival.”¹⁶ Matrix’s demographics in 1970 were more collegiate, too—compared to residents in the professionally-run communities in the CRC, Matrix residents were younger, had more education, fewer arrests, and shorter drug histories.¹⁷

Matrix’s mode of re-education differed from “Kentucky College,” the nickname former Lexington residents had long ago assigned to the institution’s apparently ineffectual treatment; “K-Y” inadvertently schooled naïve addicts in street skills such as hustling, smuggling, and stealing.¹⁸ Rather than reinforcing addicts’ old skills, Matrix House members prohibited “street talk” and promised to follow the Synanon pattern to reconstruct residents’ psyches in a more wholesome fashion.¹⁹ Matrix promoters emphasized the new community’s similarity to Synanon. “At Lexington, we’ve adopted many of the Synanon methods,” Conrad told the press.²⁰ He used the same pitch for a Congressional appropriations committee: the “emergence of the addict as an active participant in his treatment is one of the most encouraging developments on the treatment scene in the last 10 years.”²¹ Matrix House’s informal first director Terry departed and Conrad hired four ex-addicts—Jon Wildes, Jay Therrien, Vernon Farrington, and Carl Salley—as federal employees to manage the house.²² “We are becoming valuable, and probably within the next year Matrix will have as big a national reputation as Synanon if

things keep going the way they have gone,” co-founder Wildes told anthropologist Robert S. Weppner.²³

Weppner served as Matrix’s in-house anthropologist. He closely observed the community’s development from July through October 1970; at the end of October, he moved into the house for a week and experienced the initiation process firsthand. As part of Lexington’s restructuring, the CRC had revived its mission to engage in innovative treatment research. From 1969 until the hospital closed in 1974, three staff anthropologists studied Lexington’s organizational culture. Conrad touted the planned Matrix House research as a unique opportunity to study the ex-addict-led therapeutic community in a controlled institutional setting.²⁴ Although Synanon had abandoned its strictly therapeutic enterprise for a more sweeping social movement—and second-generation communities had begun downplaying Synanon similarities—the Matrix ex-addicts’ plan to re-create Synanon suited the CRC’s search for a new research agenda.

Initially, the Matrix founders’ enthusiasm won over Weppner. He published a flattering report of the organization’s first year of development, concluding that it had “grown beyond the experimental stage” and served as a model for “other treatment units at Lexington” and beyond.²⁵ But if Matrix served as a model, it was not always an attractive one. While Matrix generated curiosity following its move to a freestanding building in April 1970, the organization had a more difficult time attracting residents; it was never able to fill more than half the slots in its 100-resident building. The rate at which residents “split” from Matrix climbed from around 40 percent at the end of the organization’s first year to more than 50 percent by March of 1971; at that point, two co-directors Therrien and Salley attempted to oust Jon Wildes from the house leadership.

When Conrad backed Wildes in the dispute, Therrien and Salley left with several other residents (driving the “split rate” further) and Wildes assumed total authority over the dwindling community. Weppner grew critical of Wildes’ increasingly dictatorial rule and in May, Wildes terminated the researcher’s association with Matrix.²⁶

While Wildes recruited a few non-addict residents from visits to community sites and local colleges, most “squares,” including Weppner and his wife, were not interested in living the Matrix lifestyle full-time. With Weppner’s departure, Matrix residents became insulated from external scrutiny. Wildes’ philosophy became politicized and the dramatic therapeutic tactics he used to remake the psyches of Matrix residents escalated. Most of the developments exaggerated Matrix’s initial concepts. In an early publicity packet for Matrix House, Wildes confessed that his drug use resulted from a displaced revolutionary fervor; this impulse, now channeled into realizing the Matrix philosophy, would remake society.²⁷ As Wildes developed political causes, he monitored residents’ reading material—the preferred Synanon library of “Emerson, Thoreau, and Yablonsky” expanded to include work by Abbie Hoffman and Chairman Mao.²⁸ Matrix House began making small contributions—possibly from the leaders’ government paychecks or small donations from public speaking engagements—to organizations like the Black Panthers and the American Indian Movement.²⁹ Margie Smith, a resident who moved into Matrix shortly after Wildes assumed the role of sole director, watched the community radicalize. Matrix developed a new “esprit de corps” and an “almost militaristic faction within Matrix” donned berets, said Smith.³⁰ Wildes took up arms.

Wildes did not have permission to possess a gun, but he told Matrix members that the house was under threat.³¹ In December 1971, a Lexington staff physician reported

that Wildes had threatened him with a gun. A second report followed a few days later. Conrad gave Wildes and the rest of the Matrix House residents six months to close their operation at Lexington.³² “We are encouraging [Matrix House] to seek independence and eventually to plan on separation from the federal government with the development of self-sustaining Matrix programs in communities where interest and support are available,” wrote Conrad in his 1971 annual report. “Until this is accomplished, we shall continue to do in-house research and study the entire self-help movement and lifestyle.”³³

According to former Matrix residents, Conrad was aware that Wildes had added compulsory nudity to the therapeutic community’s typical structure of confrontational therapy, intentional humiliation, and hierarchical system of household duties.³⁴ Wildes ostensibly forbade sexual relations among the residents; the nudity that Conrad observed supposedly symbolized the residents’ psychological liberation, not their sexual freedom. In March 1972, he ordered residents to cross-dress, then remove their clothes. Resident Dick Shea remembered the ritual as an “innocent” event; the “‘Anti-American’ spirit” of the role-playing had a “therapeutic value,” he later argued.³⁵ Other observers saw something more sinister. One evening, Wildes decided to punish resident Marshall Green—observers differ regarding his justification—and ordered the naked man to hold up a large wooden cross.³⁶ Green was admitted to Lexington’s health clinic, his flesh singed with burns from Wildes’ cigarette.³⁷

A few days later, an officer from the Federal Bureau of Investigation (FBI) told the hospital director that Matrix House members were secretly supporting other revolutionary groups. On March 16, 1972, Lexington’s guards raided Matrix House and discovered the community had a collection of radical literature and material for

incendiary bombs. Marty Panone, a non-addicted resident who escaped before the raid, remembered the rationale for making the bombs: “the society is gonna come at us and we had to learn to protect ourselves.”³⁸ It was a self-fulfilling prophecy.

Wildes’ paranoia was reciprocal. Matrix revelations emerged just in time for locals to reimagine Wildes as Kentucky’s Charles Manson.³⁹ Weppner later hypothesized that FBI surveillance of black radical groups led agents to their supporters in Matrix.⁴⁰ Some Matrix House members, like other radical factions, suspected the government was spying on them. Leftist groups like SDS, once cast as “paranoid,” later came to find out “that they indeed were bugged, not only were they bugged but they were set up,” remembered vindicated Matrix resident Margie Smith. “Keep in mind this is the same administration that had [muckracking reporter] Jack Anderson on a hit list and [carried out] Watergate.”⁴¹

Since several Matrix leaders were federal employees, they might have anticipated some government oversight. Four months after the raid, a federal grand jury finally began an investigation of Matrix. It culminated in a trial the following April: “former drug patients relate sex, violence” read the headline of an Associated Press (AP) story in local Kentucky paper (the small column AP story on its right was headlined: “Watergate Unsettled”).⁴² US District Court Judge H. David Hermansdorfer settled the case in less than two weeks. Wildes was convicted of violating the Federal Firearms Act, assaulting a patient, and lewdness on government reservation. He was initially sentenced to thirty-six and a half years in prison.⁴³ Hermansdorfer ordered a more extensive investigation into the inner workings of the CRC. In 1975, that jury concluded that Conrad had been “derelict in his duties” by failing to provide adequate supervision of Matrix House’s

operations—“notwithstanding what may have been the accepted practice in similar institutions throughout the United States.”⁴⁴

Internal Politics

The practices at other TCs motivated Conrad to hire Wildes and his colleagues. In a labor management committee meeting in 1970, Conrad outlined the proposal to employ ex-addicts. No ex-addict residents would agree to manage a therapeutic community with only room and board as compensation, he explained—not as long as ex-addict leadership remained a “hot commodity” among state and municipal government and private treatment providers. TCs outside Lexington were prepared to pay handsome salaries to luminary ex-addict leaders, explained Conrad.⁴⁵ Hiring a few experienced ex-addicts in permanent staff positions would also provide the organizational consistency necessary for establishing a new TC. If the community proved successful, Conrad hoped the entrepreneurial ex-addicts would expand their ranks and establish new TCs.⁴⁶ After the passage of NARA, Lexington operated at half capacity.⁴⁷

Federal government officials promoted the decision to hire ex-addicts as progress. A press release from the Department of Health, Education, and Welfare (HEW) championed the new hires: HEW secretary Elliot Richardson reportedly argued, “it would be folly to ignore the valuable resources many ex-addicts bring to rehabilitation programs.” The NIMH had urged the Civil Service Commission to revise the regulations prohibiting the employment of ex-addicts; the CRC became the first agency to act on the new regulations by hiring Wildes, Therrien, Farrington, and Salley to manage a “Synanon program.” NIMH director Bertram Brown framed the move as an improvement in the areas of “equal employment and consumer participation.”⁴⁸

Matrix employees set up a public relations office that ran on the Synanon model.⁴⁹ They recorded confrontational therapy sessions and supplied communities across the country with tapes. They ran training programs at other ex-addict-led centers and made appearances on local television stations. They hosted reporters and representatives from other government branches.⁵⁰ One reporter wrote to Conrad with fond reflections of her “absorbing experience” at Matrix; Conrad forwarded clippings from her series to the director of the NIMH. “Although the stories were generated by a ‘failure’ who ran away from Matrix House, on the whole I think the Matrix people ‘turned on’ the reporter sufficiently to get good press even out of that,” he wrote.⁵¹ Matrix members joined Synanon representatives for an educational event hosted by the Mayo Clinic in Rochester, Minnesota. Conrad could “personally testify” to NIMH leadership: the residents “are doing a tremendous job.”⁵²

Other Lexington workers had their doubts. Sidney Louis, an Air Force veteran and nurse with a graduate degree in psychiatric hospital supervision, led the CRC’s education department. He critiqued the hospital for enlisting un-vetted ex-addict speakers as participants in community and school-based educational events. Attractive and charismatic ex-addicts could undermine professionals’ efforts to convey the harms of drug use. Louis began compiling criteria for speakers after “having been burned a number of times by having a patient I didn’t know accompany me to a program.”⁵³ Conrad, in contrast, happily invited Matrix members to join him on public speaking events that garnered press attention. Along with Matrix House’s public relations team, Conrad worked to channel the energy associated with a growing movement of community-based, ex-addict-led treatment centers; Matrix’s brochures emphasized the new organization’s

adoption of the Synanon and Daytop model of drug treatment.⁵⁴ But in 1970, Matrix's campaign lagged behind other second-generation TCs. Weppner later viewed Matrix as an unoriginal "vintage model of Synanon, perhaps a 1965 version."⁵⁵ Conrad "urged" resistant Lexington employees to attend Matrix's Synanon-style open houses;⁵⁶ meanwhile, Synanon, now a social movement, discontinued facilities tours. "Guided tours during the work day create an 'institutional' situation for both residents and visitors," concluded the Synanon speakers' bureau.⁵⁷

A few long-time Lexington workers resented any attempts to remake the institutional environment. Even before the establishment of Synanon-style, ex-addict-led Matrix House, employees reportedly resented the planned transformation of NARA wings into Maxwell Jones-inspired therapeutic communities. The workers had been trained as jailers and supervisors, not as co-participants in a total therapeutic environment. "The staff has not jelled to the program and many of them are looking forward to their termination date in June," wrote the chief of one NARA wing in 1970.⁵⁸

Lexington's reorganization brought an influx of new young physicians. Veteran nurse Sidney Louis believed many of the young doctors volunteered to serve as commissioned officers in the Public Health Service at Lexington in order to avoid deployment to Vietnam. Lexington's therapeutic programs, therefore, were idealistic and "poorly conceived by young doctors with no background in administration," wrote Louis.⁵⁹ Lexington's guards—who were mostly conservative and Southern—disapproved of Matrix members' long hair and psychedelic style. Older guards reportedly considered Matrix House "communistic."⁶⁰

According to Louis, Conrad paid little attention to internal politics. He preferred to work from his office and rarely conversed with the staff. He restructured the organizational chart and placed the new ex-addict hires on the second tier; they ran an autonomous unit and reported only to Conrad's office.⁶¹ "There was no illusion of supervision," said Matrix House physician Jack Croughan. "They were given the mission to establish a truly self-help unit and I think the project was designed to see if it could be done in a very good fashion without a lot of administrative intrusion."⁶² For Louis, this managerial approach created "a near perfect culture medium for the disaster which was growing at Matrix House"—an assessment shared by Weppner and the 1975 grand jury.⁶³

In a letter to the grand jury investigators, NIMH chief Bertram Brown defended Conrad's leadership, but revised his earlier opinion regarding the value of ex-addict employees: "it should be pointed out that the indictments involve only addict patients or former ex-addict patients rather than regular staff members."⁶⁴ Brown noted that Robert Dupont's new agency had since conducted overview of the CRC's treatment programs and made recommendations. "It was learned from the Matrix House experience that when patients are allowed to conduct their own affairs, special difficulties arise because of Federal responsibilities for close monitoring and supervision of its treatment and research programs," wrote Brown.⁶⁵ Brown's statement suggested that decentralized or privatized ex-addict-led programs might involve fewer "difficulties." The government closed the federally managed CRC treatment center in 1974.

Lexington's other research arm, the Addiction Research Center (ARC), continued to operate following the CRC's closure. According to historian Nancy Campbell, the biomedical researchers who staffed the ARC resented Lexington's transition into a

therapeutic community. Lexington's guards did not want to be therapists; basic scientists like Peter Mansky became equally perturbed about the prospect of becoming jailers. Before NARA, ARC researchers conducted medical experiments on addicted prisoners recruited from Lexington's general population. But under NARA's new civil commitment program, Lexington patients' sentences were too short to permit experimentation (Lexington scientists would not treat patients with experimental drugs within six months of their release date). The scientists had to recruit research subjects serving longer sentences from other federal prisons.⁶⁶ By 1970, the ARC's human subjects were the only federal prisoners remaining at Lexington. The scientists placed research subjects under lockdown behind heavy bars and gates while TC residents freely roamed the grounds. The ARC's pioneering research had produced discoveries regarding the abuse potential of various pharmaceuticals and the mechanisms involved in relapse,⁶⁷ yet the government had inexplicably chosen to reinvest in clinical research. ARC researchers, along with other basic scientists in the early 1970s, perceived treatment evaluation as scientifically weak. The decision to reorient Lexington around treatment research led to conflict between the ARC and the larger institution.⁶⁸ The ARC experiments, like Matrix House, also generated ethical controversy. But experts respected the ARC's scientific reputation, and ultimately they decided to rehabilitate it; in 1979, the ARC moved from Lexington to Baltimore and restructured as the intramural research enterprise at the National Institute on Drug Abuse (NIDA).⁶⁹

In 1973, Robert Dupont supervised NIDA's formation. NIDA merged SAODAP, the ARC, and the Division of Narcotic Abuse and Drug Addiction (DNADA) of the NIMH. Along with ARC's basic science researchers, Dupont wrote that the new

organization brought together two disparate new traditions of treatment research: SAODAP's "young anti-bureaucrat devotees to quick decisive action" and the NIMH's "professional who had mastered the arcane intricacies of the bureaucracy of HEW."⁷⁰ The arranged marriage made both groups beholden to the same political pressures. NIDA largely maintained the SAODAP tradition of funding extramural treatment research—a rational enterprise that nevertheless developed its own ethical challenges when critics questioned the Institute's political motivation for privileging particular grant applications.⁷¹

Lexington's own therapeutic and scientific experiments coincided with a crisis of legitimacy in the US prison system.⁷² The conflict between old guards and young doctors reflected the renewed debate between proponents of retributive and rehabilitative corrections. Lexington's TC proponents did not predict the resurgence of mandatory minimum drug sentences or the widespread appeal of a carceral model of social control. "We stress the mature use of increased freedom, and conversely, to imply the need for a return a prison system is pandering to impulsive kids, a 'cop-out' on manhood," wrote the chief overseeing a new Lexington TC in 1970.⁷³ The Lexington chief, like proponents of Synanon's early prison TCs, emphasized the shortcomings of simplistic criminal justice approaches that unintentionally bred further criminality. But by 1974, the verdict was in: the government transferred Lexington to the Bureau of Prisons (BOP). BOP officials reinstalled the prison bars stashed away on Lexington's grounds.

External Politics

The raid at Matrix House took place six months after New York Governor Nelson Rockefeller quashed an uprising in the Attica state prison. The televised brutality of

Attica brought long-standing academic debates about the fairness and efficacy of the correctional system into public view. For a polarized viewership, the event proved the prison was either a retrograde, racist relic that should be abolished or a necessary warehouse for irredeemable criminals that clearly posed a serious threat to civilized society.⁷⁴

Liberal academics and activists who belonged to the first group hoped a de-institutionalization movement for prisons would follow the transition to community-based care in the mental health system. To their later regret, liberal and radical activists levied a fierce critique against the indeterminate sentence, which granted parole boards the ability to end a prison term based upon their assessment about whether a prisoner had been adequately “rehabilitated.” The subjective nature of this form of sentencing was vulnerable to conscious and unconscious biases and abuse.⁷⁵ As early Synanon members and supporters once charged, much prison rehabilitation was play-acting; those who pretended to go along with the system earned release, while those who chafed against it were held in prison indefinitely. If individuals only committed non-violent crimes to feed their addictions, the TC and methadone treatment pioneers argued, it made more sense to address criminality by diverting addicts to community-based therapy. Lexington’s TC proponents argued that ex-addict peers trained in the Synanon model had special insight into the veracity of addicts’ character transformation. If the prison could be made to look like a therapeutic community, the distinction between the two would eventually evaporate. The addict-prison, like the mental asylum, would be rendered obsolete.⁷⁶

At the same time, other critics of rehabilitative corrections took aim at indeterminate sentencing for entirely different reasons. “Hard line” proponents of

retributive justice emphasized punishment for its own sake.”⁷⁷ Like the liberals and radicals, hard line critics rejected the notion that the correctional justice system should be used for rehabilitation; they also rejected a more moderate and utilitarian view that prison sentences should help deter future crime. Instead, hard liners advocated for fixed sentences that communicated the non-negotiable consequences of individual moral violations. In 1973, Governor Nelson Rockefeller championed mandatory minimum sentences for drug charges; possessing four ounces of heroin, morphine, cocaine or cannabis earned offenders at least 15 years in prison. The former champion of rehabilitation became responsible for the resurrection of the carceral solution for drug abuse. Other conservative governors followed Rockefeller’s example. By the end of decade, straightforward punishment and incapacitation—not rehabilitation—had become the primary purpose of prison work.⁷⁸

Other uses for prisons came under scrutiny in the early 1970s when left-wing journalist Jessica Mitford exposed the horrific biomedical experiments conducted on prisoners. Mitford’s *Kind and Usual Punishment*, published in 1973, also delivered a trenchant critique of coercive psychotherapies.⁷⁹ As home to both Matrix House—a re-education effort run amok—and the ARC, which administered drugs to confirmed addicts for decades, Lexington exemplified the ethical violations that beset the nation’s prisons. Matrix House caught the attention of the Associated Press. The ARC’s experiments entered public consciousness following controversial revelations about government-funded experiments on African-American men afflicted with syphilis in Tuskegee, Alabama.

Senate subcommittee hearings on human experimentation called these decades-old research studies into question. The Civil Rights Movement and anti-war Left had raised public awareness about racial disparities and the moral shortcomings of Cold War military logic.⁸⁰ The Senate investigation of government research efforts also coincided with the Watergate crisis. FBI associate director Mark Felt (“Deep Throat”) broke the story. Felt was no friend to left-wing groups; he unapologetically led illegal surveillance of left-wing groups such as the Weather Underground and Black Panthers. Nixon passed Felt over for an expected promotion—twice—and Felt, in turn, passed the along the details of the FBI’s Watergate investigation to Bob Woodward and Carl Bernstein at the *Washington Post*.⁸¹ The revelations that followed tapped into a bipartisan backlash against the unchecked power of the federal government.

Nixon’s critics questioned his misuse of federal power well before Watergate. His drug control strategies, for example, verged on militancy; Nixon expanded enforcement along with treatment. The number of federal agents in the Bureau of Narcotics and Dangerous Drugs (BNDD) grew from four hundred to two thousand between 1969 and 1971.⁸² When BNDD director John Ingersoll resisted the pressure to devote these new resources to low-level drug arrests rather than international traffickers, Nixon created a new cabinet-level office, just as he had done with SAODAP. The Office of Drug Abuse Law Enforcement (ODALE) was inaugurated in 1971 with just four hundred officers and an eighteen-month sunset provision. ODALE was a showpiece, not a permanent drug control solution. It capably displayed the administration’s aggressive new crime-fighting weapons: no-knock raids, preventive detention, the power to jail witnesses who refused to testify in grand jury drug cases, and wiretaps.⁸³

Historians such as Kathleen Frydl argue that many of Nixon's dramatic drug-related encroachments on civil liberties entered a stage set by President Lyndon Johnson and his predecessors. In 1968, the regulation of narcotics moved from the Department of Treasury—which treated drug distribution as a trade problem—to the new BNDD, housed in Department of Justice.⁸⁴ Johnson also expanded the Office of Law Enforcement Assistance. The expanded Law Enforcement Assistance Administration (LEAA) supported liberal social efforts such as community policing, educational programs, and even a few therapeutic communities; it also helped outfit state and local law enforcement agencies with the tools for quasi-military policing.

Under Nixon, the LEAA's federal funding mechanism provided incentives for tougher street policing. The brand of aggressive street-level enforcement later promoted by ODALE became the province of local police departments, now emboldened with new weaponry and federal support. The Los Angeles police department requested a submarine; Birmingham wanted an armored personnel carrier.⁸⁵ Massachusetts drug treatment commissioner Matthew Dumont ominously argued that Nixon's extraordinary policing and surveillance efforts quickly subsumed treatment: "all of the equipment, technology, and bureaucracy designed to predict, identify, isolate, monitor, and control the drug addict will be found to have other utility."⁸⁶

The most searching critique of federal drug control efforts, behavioral research and treatment, and Watergate came from Sam Ervin, a Democratic Senator from North Carolina. Ervin, a watchdog for civil liberties violations with a blind spot regarding desegregation, was a vociferous opponent of the "no knock" raids pioneered by Rockefeller in the mid-1960s. Ervin chaired the Senate Watergate Committee and played

a pivotal role in gathering evidence that led to Nixon's resignation. In 1973, he also released the results of government investigation into coercive behavioral research.

Treatment Ethics at the End of the Sixties

The Senate Subcommittee on Constitutional Rights, chaired by Sam Ervin, held a series of hearings on the constitutional rights of the mentally ill in the early 1960s. By the 1970s, the committee had also begun questioning whether current carceral conditions violated prisoners' constitutional rights. Beginning in 1971, Ervin and other committee members grew concerned about the use of new behavioral technologies on "captive" populations of mental patients and prisoners. They launched an investigation into the wide variety of government-funded approaches to behavior modification. Ervin discovered that the Department of Health, Education, and Welfare (DHEW), Federal Bureau of Prisons (FBP), Law Enforcement Assistance Administration (LEAA), the Veteran's Administration (VA), Defense Department, Labor Department, and the National Science Foundation (NSF) supported a wide range of behavior modification programs—such as psychosurgery, Skinnerian token economies, chemical castration, and attack therapy. Ervin asked leaders in each agency to describe how the funded programs were ethically evaluated and monitored. HEW was the only agency with an ethical review process in place.⁸⁷

Three months after Nixon's resignation, the subcommittee published the results. *Individual Rights and the Federal Role in Behavior Modification* collected the letters and articles from the critics of federal behavior modification programs alongside agency officials' overwhelmingly ineffectual replies to Ervin's inquiries regarding ethical oversight.⁸⁸ The report described several frightening programs: a behaviorist prison

project in which misbehaving inmates were stripped naked and shackled to their beds; planned LEAA research into radio receivers that could “determine the location, activities, and even the thoughts” of possible offenders;⁸⁹ and the VA’s ongoing practice of performing “therapeutic” lobotomy operations. Ervin framed the report’s results as a reproach to reactionary politics: “The widespread civil disobedience of the nineteen sixties caused many to despair of more indirect methods of ‘behavior modification’ such as rehabilitation and understanding.” A new emphasis on violence prevention spawned new agencies, such as LEAA, which privileged “immediate and efficient means” to correct antisocial behavior above “more time-consuming attempts to understand its sources.”⁹⁰ The boom in federal funds for methadone and TC programs in the early Nixon years was due in large part to their explicit links to criminological results: methadone served as a crime-fighting tool, while TCs seemed to inspire permanent personality change.

In a 1975 article in the *Hastings Center Report*, the ethicist Gerald Kleiman affirmed the TC’s function as a tough but progressive form of behavior modification. The re-education TCs offered ultimately supported the goals of deinstitutionalization and decarceration. Yet the justification for TC treatments raised dystopian questions. The outcry against the new tools of behavior control stemmed from the fear that they “will restrict the individuality and political freedom not only of the inmates in publicly created institutions, but also of the citizens outside who had helped create them.”⁹¹ According to this frightful logic, restrictive institutions would be rendered irrelevant by new behavioral technologies that could “convert the community into the ultimate institution, a totalitarian society,” a la *1984* or *A Clockwork Orange*.⁹² Some TC leaders’ stated intention to

transform society stoked the fear.⁹³ The students at a HEW-funded TC featured in Ervin's report "have an informing system similar to that in Nazi Germany," complained one guidance counselor.⁹⁴ "Please let me not say that the Communist party is in control [of the organization]," wrote one concerned citizen "But us not be [sic] so ignorant as to believe that they are not."⁹⁵

"The Seed" TC was not a Nazi or Communist enterprise. But the ethical problems with its treatment approaches could not simply be dismissed as a conspiracist fantasy. Ervin explained that he had timed the release of *Individual Rights* to coincide with the formation of Senator Edward "Ted" Kennedy's committee on ethics in Biomedical and Behavioral Research; the report's findings would inform further investigation of government-funded research. Kennedy's committee hearings surpassed Ervin's in shock value and impact, and eventually led to a national code of medical research ethics (the Belmont Report) and a decentralized bureaucracy to enforce them (Institutional Review Boards). The new regulations streamlined the review process already in place at HEW and placed similar guidelines on other forms of government-funded research.

A series of hearings exposed troubling details of coercive, and covert, government research. In 1975 and 1977, Senator Frank Church held hearings investigating the secret CIA program MK-ULTRA, which administered LSD and other "chemical weapons" to knowledgeable and naïve test subjects. Some MK-ULTRA funds supported the ARC's experiments in Lexington. Ex-addict patients Eddie Flowers and James Henderson Childs testified that researchers had coerced their participation: as addicts, how could they have been expected to turn down the opportunity to take drugs? Flowers and Childs claimed that their ability to consent to research was compromised by their visceral craving for

drugs. Although Lexington researchers argued that they followed a scrupulous consent procedure, the research subjects' testimony grouped Lexington with the most notorious cases in bioethical history.⁹⁶

Complaints about the NIDA-funded "Seed" program emerged during the Matrix House crisis and threatened to taint the entire TC concept. Anthropologist Robert Weppner left Lexington, disgusted, and relocated to South Florida to work as a researcher in the Dade County drug program. The Seed had already sprung up when Weppner arrived— first in Broward County (Fort Lauderdale and the surrounding area) in 1970, and then expanding into Dade (Miami) in 1972. The rapid growth of TCs appeared to fulfill proponents' early goals. A decade earlier, psychiatrist Daniel Casriel emphasized the importance of developing peer counselor talent. "We are in need of people to 'seed' new Synanons throughout the country," wrote Casriel.⁹⁷

The Seed's founder Art Barker was a former stand-up comedian, not a Synanon graduate. Like Charles Dederich, Barker was a recovering alcoholic. He worked briefly in an alcoholism program in the New York area before winding his way to South Florida, where he founded The Seed, a "daycare" program designed to reform adolescent drug abusers.⁹⁸ Other TCs such as Odyssey House and Daytop offered programs for adolescent or young adult drug users, but these residential programs simply tailored the TC concept to a younger population. In contrast, The Seed placed young clients into a foster home lead by parents who had enrolled their own children in the program; this allowed the organization to operate as a "non-residential" treatment provider even though clients were under full-time supervision by foster families. The informal Seed foster system operated separately from the state foster system; parents signed paperwork that

voluntarily turned their children over the care of the non-profit corporation, which then placed them in “Seed families.” After a minimum of two weeks of non-stop intensive attack therapy, or “rap sessions,” the Seed staff evaluated whether clients could return home. Clients who returned home entered a three-month aftercare phase that included mandatory attendance at rap sessions three evenings a week and one full day on the weekend.⁹⁹

Although some concerned parents sought out The Seed’s treatment for their children (one article estimated that about two-thirds of The Seed’s clients were brought in by parents),¹⁰⁰ in Dade County an overwhelming number of referrals came from judges. According to The Seed’s own statistics, more than three quarters of clients were “users” or “abusers” rather than “addicts.” Pot, barbiturates, psychedelics, and amphetamines were the drugs clients most commonly used and abused.¹⁰¹ Heroin and opiates fell to the bottom of the list. Weppner and James Inciardi later used the Dade County case study in an argument for marijuana decriminalization. In the 1970s, non-residential TCs in Dade thrived on the courts’ diversion of young, male, occasional marijuana users into treatment. From 1971-1975, marijuana arrests (mostly possession charges) accounted for more than 60 percent of all drug arrests, with the rate rising each year.¹⁰² Weppner and Inciardi estimated that Dade County spent \$10.5 million annually in combined state, county, and federal funds on drug treatment and control.¹⁰³ The decriminalization of marijuana would strike a blow to the treatment-criminal justice-industrial complex; treatment centers could expect to lose millions of dollars along with their marijuana-using clientele. But Weppner and Inciardi argued that those funds would be better spent on

programs that had a greater public health impact. The Dade County Medical Examiner had not recorded a single death from marijuana.¹⁰⁴

As long as Dade County officials remained intent on eradicating all illicit drug use, the community would continue to invest in TCs.¹⁰⁵ Both Dade and Broward were traditionally conservative counties, and the Christian Right's political influence grew in South Florida in the 1970s.¹⁰⁶ The Seed promised to transform long-haired, pot-smoking, wayward youth into clean-cut, God-fearing citizens. The Seed delivered its message with considerable showmanship. While the Dade County Health Council deliberated about whether to grant The Seed a license for a new Miami branch, 500 Seed youth sat outside the building singing an anthem to the tune of "Greensleeves": "The Seed, the Seed, is all we need to stay off the junk and the pills and weed."¹⁰⁷

Yet according to a state survey, 17 percent of Seed clients had never used drugs of any sort.¹⁰⁸ Ben Sheppard, a physician and drug rehabilitation professional, served as a consulting doctor for the Seed before concluding that the treatment program amounted to "brainwashing" children who posed minor disciplinary problems to their parents.¹⁰⁹ Although The Seed attracted considerable support from powerful parents pleased with the program's results, drug abuse professionals in South Florida did not consider The Seed a model TC.¹¹⁰ The organization took an oppositional attitude toward fellow drug treatment providers. More than one evaluator recommended that The Seed adopt a more collegial and collaborative relationship with other organizations.¹¹¹ In a letter to the Health Planning Council, a concerned couple drew a distinction between the treatment their son received at The Seed—which culminated in his suicide attempt—and the more professional and supportive program offered by another provider, which also employed

ex-addicts. “To describe the differences between The Seed program and Here’s Help is like describing the difference between black and white or day and night,” wrote the parents.¹¹²

From a federal standpoint, The Seed’s distinctiveness made it worthy of funding. The Seed launched in Fort Lauderdale with an annual NIMH grant of \$230,000 and an additional \$35,000 from the LEAA; two additional LEAA grants supported the Seed’s expansion into Dade and Pinellas counties.¹¹³ The NIMH had difficulty monitoring The Seed from the time it first approved the grant. A clinical treatment specialist who managed the grant monies explained that the NIMH supported the project in order to learn more about “non-traditional treatment modalities” and to remain responsive to new trends in the field.¹¹⁴ NIMH grant reviewers originally pointed out substantial problems with the Seed’s program structure: the program was “built around one man,” the grantee’s understanding of heroin and barbiturate withdrawal was medically “erroneous,” an appropriate system for medical referrals was lacking, the program had not supplied evidence of its effectiveness, and the administrative and fiscal structure was ill-defined. But the grantors unanimously approved NIMH funding under the condition that Barker address these issues.¹¹⁵

During the first year of the grant, the NIMH directed The Seed to meet the conditions of the original grant by establishing a referral system, hiring a full-time drug abuse professional and an evaluator, and developing an organization chart and fiscal plan. Barker took small steps toward meeting these goals and the NIMH, following deliberation with both SAODAP and the state’s drug abuse office, decided to renew the grant for a second year.¹¹⁶

Then the NIMH received a letter from Ervin. As officials compiled material to comply with Ervin's request for materials regarding the Seed, they discovered that Seed officials had checked "yes" to the question about whether the organization placed human subjects at risk. The Seed's check on the second-year grant renewal form transformed the program from a non-traditional "demonstration project" into an experiment. This new designation subjected the Seed to another round of review, and the third year continuation of the grant became conditional upon the NIH's assessment of the risk posed to Seed research subjects.¹¹⁷ Rather than await the results of the review, Barker rejected the federal funds—LEAA as well as NIMH. By divesting the Seed of federal funds, Barker wrote, he would eliminate the "excessive demands, harassment, and bureaucracy created by these numerous agencies" and gain "the necessary autonomy for The Seed to continue its innovative and dynamic leadership in fulfilling its only purpose—saving kids!!!"¹¹⁸ Ervin republished Barker's fervent rejection in the *Individual Rights* report.

The report also included two opposing accounts of The Seed's treatment program published by the *St. Petersburg Times* in 1973. A former runaway explained that The Seed's program of total honesty reversed her life trajectory which included "living in Haight Ashbury for a while, capturing an ROTC building at the University of Kentucky, being in a psychiatric hospital, selling about \$1,000 a week of cocaine and being 'strung out' on a racetrack job in Florida where she heard about the Seed."¹¹⁹ But Seed leaders encouraged clients with less sensational histories to simply make them up. Former clients recounted coerced, explicit sexual confessions designed to humiliate them. One client escaped from the program after being locked in a room by his "foster" family. He called

his real parents, who took him back to The Seed, where leaders ordered his father to beat him. Convinced that the boy was on drugs, and the beating a matter of life and death, the father punched his son repeatedly while Seed staffers looked on.¹²⁰

In May 1972, Lois Chatham, chief of the Narcotic Addict Rehabilitation Branch, warned NIMH director Bertram Brown about possible controversy arising from The Seed. Chatham learned that Seed director Art Barker crowed that he had total control over the NIMH funds and “the political clout to go with it.” In response, Chatham wrote, the local community began questioning Barker’s competence and asking whether his grant “was approved as a political gesture.” The statements seemed to support the theory that Barker’s patriotic drug prevention program was a form of secret government programming. “If this situation persists, I am confident the Broward County Narcotic Council, local professionals, and health care agencies will begin to formulate a plan of action that will ultimately involve this Institute.”¹²¹

Ervin’s investigation predictably led to the end of The Seed. Before the publication of *Individual Rights* in November 1974, The Seed met with local and state resistance. The Dade County Health Planning Council advised against licensing the Seed, and Barker closed Dade branches and relocated clients to the licensed branches in nearby Fort Lauderdale (Broward County) in 1973. That summer, Florida Governor Reuben Askew, a “New South” Democrat, asked Tampa judge Herboth S. Ryder, chair of a special subcommittee of the Florida State Drug Abuse Advisory Council, to conduct a review of the state’s licensing procedures along with a special study of the Seed. The committee recommended licensing the Seed despite concerns about the safety of the

foster homes and the professionalism of the Seed staff.¹²² The publication of *Individual Rights* affirmed the Seeds' local critics and embarrassed high-profile supporters.¹²³ The Seed's non-traditional treatment model had garnered endorsements from high-profile figures; state legislators, judges, doctors, the chairman of the Broward County School Board, and the lieutenant governor all served on the Seed's board of directors.¹²⁴

Believers in the treatment model blamed the controversies on Barker's eccentricities. Seed boosters and graduates ousted Barker and planned to restructure the program under a new name.¹²⁵ Dupont's chaotic period of drug treatment expansion came to a close.

Indeed, the mid-1970s were a period of contraction. Second-generation TCs were not only concerned about their possible association with the controversies in Kentucky and Florida; they suddenly faced devastating reductions in public funds. By the end of 1974, drug-free residential TCs across the country enrolled 15,000 clients. Having reaped the benefits of treatment expansion in the early 1970s, TC leaders were unprepared for the economic recession, inflation, and funding cutbacks that befell the field from 1974-1976.¹²⁶ The high cost of long-term residential treatment (about \$5,000 a slot, in contrast to \$1,500 in a typical methadone program) made TCs especially vulnerable to local, state, and federal cutbacks.¹²⁷ The consolidation of federal drug treatment efforts probably also contributed to the contraction in federal funds. In 1973, NIMH grant reviewers unanimously awarded Odyssey House a \$65,000 grant for a research proposal that did not state the hypotheses, methods, sampling procedure, underlying theory, or timetable.¹²⁸ Future reviewers would be less generous.

In 1973, New York's Addiction Services Agency (ASA) became a high-profile case study in mismanagement when Democratic comptroller Abraham Beame published

a report that detailed waste and corruption in the city-funded treatment programs.¹²⁹ Beame's allegations bolstered his successful 1974 mayoral campaign, which emphasized his shrewd approach to city finance. Ironically, Beame oversaw New York's massive financial crisis, inheriting a \$1.5 million deficit and narrowly avoiding a devastating default on the city's debts. Beame's staff cuts to the ASA in 1974 foreshadowed the massive contraction of government support as former mayor John Lindsay's unfunded programs buckled under the weight of fiscal realities. A NIDA review of the ASA's 1974 federal treatment grant revealed that New York programs cost more, per treatment slot, than programs in any other metropolitan area. The ASA program's cost per treatment slot was even more expensive—more than double the city average.¹³⁰

As the in-house researcher at the ASA's flagship treatment program Phoenix House, George Deleon had a stake in the TC model's survival. In 1975, a variety of prominent TCs such as Phoenix, Daytop, Odyssey, and Gateway formed a non-profit professional association called the Therapeutic Communities of America (TCA). In January 1976, Deleon and NIDA official George Beschner held a planning conference. NIDA and TCA co-sponsored the conference, which presented the therapeutic community as a unified and professional treatment approach. Conference participants discussed the ethics of TC treatment, the need for rigorous evaluation, and possible responses to the addiction treatment industry's changing economic climate. The conference report concluded that the therapeutic community was "at a crossroads." One path followed the Synanon approach. TCs could maintain purity and autonomy by rejecting federal funds and maintaining "an existence of modest self-reliance."¹³¹ TC

leaders believed this insular strategy would almost certainly lead to the contraction of the TC modality and limit its impact on society at large. It was a dead end.

The other road merged with the health care establishment. The newly professionalized TC could claim space as a “significant (albeit unique) health care institution” and “assume a more visible place in the health care arena.”¹³² Charismatic authorities like Dederich, Deitch, Densen-Gerber, Wildes, and Barker had been savvy promoters of their individual treatment enterprises. “An institution is but the lengthened shadow of one man,” wrote Dederich’s role model, Ralph Waldo Emerson.¹³³ Dazzling personalities had both inspired and imperiled the first therapeutic communities. Now the hierarchical, drug-free, long-term, peer-based treatment structure truly needed bureaucratic legitimacy. By the end of Dupont’s drug abuse decade, the drug-free TC philosophy would—with a few important modifications— mature into national policy.

Notes

¹ Robert L. Dupont, “The Drug Abuse Decade,” *Journal of Drug Issues* 8 no. 2 (1978): 183. On the Controlled Substances Act as “Big Tent” Legislation, see Joseph Spillane, “Debating the Controlled Substances Act,” *Drug and Alcohol Dependence* 76, no. 1 (2004): 17–29 and David Courtwright, “The Controlled Substances Act: how a “big tent” reform became a punitive drug law,” *Drug and Alcohol Dependence* 76, no. 1 (2004): 9–15.

² The cover of the first edition of Michael Massing’s *The Fix* read “Nixon Was Right.” The College on Problems of Drug Dependence (CPDD), an organization of addiction researchers, gave Massing a Media Award for his work in 2001. See also Courtwright, “The Controlled Substances Act” and “NIDA: This is Your Life,” *Drug and Alcohol Dependence* 107, no. 1 (2010): 116–118; Nancy Campbell, “Review of Jeremy Kuzmarov, *The Myth of the Addicted Army: Vietnam and the Modern War on Drugs* (Amherst and Boston, MA: University of Massachusetts Press, 2009)” *Social History of Alcohol and Drugs* 24, no. 2 (2010): 176–177; Kevin Yuill, “Another Take on the Nixon Presidency: The First Therapeutic President?” *Journal of Policy History* 21, no. 2 (2009): 138–162.

³ David Greenberg, *Nixon’s Shadow: The History of an Image* (New York: WW Norton, 2004), 73–125. Philip Jenkins argues Watergate ushered in an “age of paranoia”: Philip

Jenkins, *Decade of Nightmares: The End of the Sixties and the Making of Eighties America*. (Oxford: Oxford University Press, 2006), 23.

⁴ Nancy Campbell, "The History of a Public Science: How the Addiction Research Center became the NIDA intramural research program," *Drug and Alcohol Dependence*, 107, no. 1 (2010): 109.

⁵ Cliff Linedecker, "Escape from Addiction: Drug Addicts Treated, Not Punished," *Philadelphia Inquirer*, March 30, 1970.

⁶ Robert S. Weppner, *The Untherapeutic Community: Organizational behavior in a failed addiction treatment program*. (Lincoln: University of Nebraska Press, 1983), 39.

⁷ Robert S. Weppner, "Matrix House: Its First Year in Lexington," *HSMA Health Reports* 86, no. 9 (September 1971): 762.

⁸ A note on identity: It is possible to determine the names of Matrix members through public records such as newspaper articles, court records, and open government archives. However, co-founder Terry left relatively early in the history of the organization and press accounts simply use his first name, as I have done here. Robert S. Weppner's book, *The Untherapeutic Community*, uses pseudonyms for Matrix leaders. However, the identities of other leaders such as John Wildes and Jay Theirren (called "Ron" and "Ray") can be easily determined by cross-referencing Weppner's account with the published newspaper articles cited in the book and with available government documents.

⁹ Cliff Linedecker, "Escape from Addiction: South Phila. 'Hustler' Turns Designer," *Philadelphia Inquirer*, March 31, 1970.

¹⁰ Weppner, *The Untherapeutic Community*, 39.

¹¹ Weppner, "Matrix House," 762.

¹² Luke Walden and JP Olsen (King Love Films) interview with Dick Shea, undated transcript, personal collection of author; Joan Roesgen, "After Matrix, Can They Make It?" *Kingsport Times News* (undated clippings from a series in October 1970 in Folder CRC Publicity, Box 1 CRC Public Relations 1939-1973 Clippings; Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia).

¹³ Luke Walden and JP Olsen (King Love Films) interview with Margie Smith, undated transcript, personal collection of author.

¹⁴ Luke Walden and JP Olsen (King Love Films) interview with Jack Croughan, undated transcript, personal collection of author.

¹⁵ Matrix Unit Quarterly Report, October- December 1971, Folder Quarterly Report October-December 1971, Box 4 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia.

¹⁶ Joan Roesgen, "Cured Addicts Fall Back Fast," *Kingsport Times News* (undated clippings from a series in October 1970 in Folder CRC Publicity, Box 1 Personnel 1961-1971 Administrative Office CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia); See also Matrix House promotional material republished in Nancy Campbell, Luke Walden, and J.P. Olsen, *The Narcotic Farm: The Rise and Fall of America's First Prison for Drug Addicts* (New York: Abrams, 2008).

¹⁷ Weppner, "Matrix House," 767.

¹⁸ Weppner, "Matrix House," 766.

¹⁹ Ibid.

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- ²⁰ Linedecker, "Escape from Addiction," *Philadelphia Inquirer*, March 31, 1970.
- ²¹ Ibid; NIMH Clinical Research Center Special Report for 1971 Budget Hearings, Folder Special Report for 1971 Budget Hearings, Box 2 CRC Financial Records 1937-1973 Working Capital, Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia.
- ²² "Ex-Addicts Hired by the Federal Government," HEW News Press Release, Folder Lexington Staffing Issues 1969-1971, Box 1 Personnel 1961-1971 Administrative Office CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia.
- ²³ Weppner, *The Untherapeutic Community*, 45
- ²⁴ Harold Conrad "A Word of Introduction," Matrix House Promotional Brochure, digital scan in author's collection. Conrad wrote "Matrix House is being studied intensively from the research point of view."
- ²⁵ Weppner, "Matrix House," 768.
- ²⁶ Weppner, *The Untherapeutic Community*, 149-150.
- ²⁷ Weppner, *The Untherapeutic Community* 67-8, 177.
- ²⁸ "Emerson, Thoreau, and Yablonsky": Weppner, *The Untherapeutic Community*, 89. Hoffman and Mao readings are confirmed in Luke Walden and JP Olsen (King Love Films) interview with Marty Panone, undated transcript, personal collection of author.
- ²⁹ Luke Walden and JP Olsen (King Love Films) interview with Margie Smith, undated transcript, personal collection of author. Later, Wildes claimed his work in Matrix had been a political protest for gay liberation. Weppner, *The Untherapeutic Community*, 149. This confirmed Lexington staff's assumptions about his sexual orientation, as discussed in Sidney Louis, "Matrix House," Folder 22, Box 7, Lexington Collection, Kentucky Historical Society
- ³⁰ Ibid; Weppner, *The Untherapeutic Community*, 149.
- ³¹ Some of Matrix's new members might be "people that would have been undesirable in the first year and a half," remembered former resident Dick Shea. "People that would bring down the house." Luke Walden and JP Olsen (King Love Films) interview with Dick Shea, undated transcript, personal collection of author.
- ³² Weppner, *The Untherapeutic Community*, 149-150.
- ³³ Harold Conrad to Acting Director, NDA "Memo: Annual Report-Fiscal Year 1971," July 1, 1971, Folder Annual Reports 1971, Box 4 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia.
- ³⁴ Luke Walden and JP Olsen (King Love Films) interview with Dick Shea, Margie Smith, and Marty Panone, undated transcript, personal collection of author.
- ³⁵ Luke Walden and JP Olsen (King Love Films) interview with Dick Shea, undated transcript, personal collection of author.
- ³⁶ Ibid.
- ³⁷ Green also charged Wildes with sexual abuse. Weppner, *The Untherapeutic Community*, 150-151; Bob Cooper, "Former Patients Relate Sex, Violence," *Kentucky New Era*, Friday, April 13, 1973.
- ³⁸ Luke Walden and JP Olsen (King Love Films) interview with Marty Panone, undated transcript, personal collection of author.

³⁹ Luke Walden and JP Olsen (King Love Films) interview with Margie Smith, undated transcript, personal collection of author; Weppner, *The Untherapeutic Community*, 153.

⁴⁰ Weppner, *The Untherapeutic Community*, 179.

⁴¹ Luke Walden and JP Olsen (King Love Films) interview with Margie Smith, undated transcript, personal collection of author. Jack Andersen was on a master list of Nixon's political enemies that emerged during the Watergate hearings. The list was compiled by Nixon's special counsel Chuck Colson. For more on the alleged plot to kill Andersen, see Mark Feldstein, *Poisoning the Press: Richard Nixon, Jack Anderson, and the Rise of Washington's Scandal Culture* (New York: Farrar, Strauss & Giroux, 2008).

⁴² Cooper, "Former Patients Relate Sex, Violence," *Kentucky New Era*, Friday, April 13, 1973.

⁴³ Associated Press, "Indictments Returned in Probe of Drug Center," *Harlan Daily Enterprise*, April 19, 1973; Weppner, *The Untherapeutic Community*, 165.

⁴⁴ "Ex-Matrix Head Derelict in Duties—Grand Jury" *Lexington Leader*, April 22, 1975.

⁴⁵ Minutes of Labor-Management Committee Meeting on June 18, 1970, Folder Lexington Staffing Issues 1969-1971, Box 1 Personnel 1961-1971 Administrative Office CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511 NARA-Southeast, Morrow, Georgia.

⁴⁶ In fact, Matrix House established storefronts, began a new initiative in Pee Wee Valley Women's prison, and even had plans to expand to Australia. "Matrix House Annual Report- Fiscal Year-1971," Folder Annual Reports 1971, Box 4 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA-Southeast, Morrow, Georgia; Luke Walden and JP Olsen (King Love Films) interview with Dick Shea, undated transcript, personal collection of author.

⁴⁷ Campbell, "The History of a Public Science," 109.

⁴⁸ "Ex-Addicts Hired by the Federal Government," HEW News Press Release, Folder Lexington Staffing Issues 1969-1971, Box 1 Personnel 1961-1971 Administrative Office CRC, Lexington, Kentucky; Records of ADAMHA, Record Group 511 NARA-Southeast, Morrow, Georgia. In a private letter to Conrad, Brown encouraged the Lexington chief's speaking engagements with Matrix members and suggested using images in promotional material: "You are in tune with the times! Equal employment and consumer participation are recurrent themes in the daily life of the Washington branch of the Institute." Brown to Conrad, October 13, 1970, Folder Special Report for 1971 Budget Hearings, Box 2 CRC Financial Records 1937-1973 Working Capital, Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia

⁴⁹ Weppner, *The Untherapeutic Community*, 103.

⁵⁰ "Matrix House Annual Report- Fiscal Year-1971," Folder Annual Reports 1971, Box 4 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia.

⁵¹ Harold Conrad to Director NDA, March 9, 1971, Folder CRC Publicity, Box 1 CRC Public Relations 1939-1973 Clippings; Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia.

⁵² Harold Conrad to Sidney Cohen, May 5, 1970, Folder CRC Publicity, Box 1 CRC Public Relations 1939-1973 Clippings; Records of ADAMHA, Record Group 511 NARA- Southeast, Morrow, Georgia.

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- ⁵³ Sidney Louis, "The Ex-Addict Speaker," Folder 10, Box 6, Lexington Collection, Kentucky Historical Society.
- ⁵⁴ Conrad is quoted in Cliff Linedecker, "Escape from Addiction: Local Center Needed to Aid Victims," *Philadelphia Inquirer*, April 2, 1970; Matrix House informational booklet attached to a memo from Harold Conrad to All Clinical Research Center Employees, "Subject: Open House," July 27, 1970 in Folder 22 Box 7, Lexington Collection, Kentucky Historical Society.
- ⁵⁵ Weppner, *The Untherapeutic Community*, 175.
- ⁵⁶ Harold Conrad to All Clinical Research Center Employees, "Subject: Open House," July 27, 1970 in Folder 22 Box 7, Lexington Collection, Kentucky Historical Society.
- ⁵⁷ Jack Miller, Speaker's Bureau to Charles Dederich, April 1, 1971, Folder Public Relations Information 1965-1971, Box 83, UCLA Synanon Collection.
- ⁵⁸ NARA II Quarterly Report- Jan-March 31, 1970, Folder Quarterly Reports thru March 1970, Box 1 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia.
- ⁵⁹ Sidney Louis, "Matrix House," Folder 22, Box 7, Lexington Collection, Kentucky Historical Society
- ⁶⁰ Luke Walden and JP Olsen (King Love Films) interview with Jack Croughan, undated transcript, personal collection of author; Luke Walden and JP Olsen (King Love Films) interview with Lexington guard Glynn Tucker, undated transcript, personal collection of author.
- ⁶¹ Folder Organization Charts, Box 12 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia.
- ⁶² Luke Walden and JP Olsen (King Love Films) interview with Jack Croughan, undated transcript, personal collection of author.
- ⁶³ Sidney Louis, "Matrix House," Folder 22, Box 7, Lexington Collection, Kentucky Historical Society
- ⁶⁴ Bertram Brown (NIMH Director) to HEW Secretary, December 13, 1972, Folder Memos and Correspondence, Box 7 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia.
- ⁶⁵ Ibid.
- ⁶⁶ Nancy Campbell, *Discovering Addiction: The Science and Politics of Substance Abuse Research*. Ann Arbor: University of Michigan Press, 2007), 136-137.
- ⁶⁷ Campbell, *Discovering Addiction*, 57-8.
- ⁶⁸ Campbell, *Discovering Addiction*, 136.
- ⁶⁹ Campbell, "The History of a Public Science," 111.
- ⁷⁰ Robert Dupont, "Reflections on the Early History of National Institute on Drug Abuse (NIDA): Implications for Today," *Journal of Drug Issues* 39 no. 5 (2009): 5-14.
- ⁷¹ Campbell, *Discovering Addiction*, 169.
- ⁷² For a detailed discussion of the "crisis of legitimacy" in the prison system, see Jessica Neptune, "The Making of the Carceral State: Street Crime, the War on Drugs, and Punitive Politics in New York, 1951-1973" (PhD dissertation, University of Chicago, 2012), especially chapter 7.

⁷³ NARA I Quarterly Report- Jan, Feb, March 1970, Folder Quarterly Reports thru 1970, Box 1 Administrative Files, CRC, Lexington, KY; Records of ADAMHA 1957-197, Record Group 511 NARA- Southeast, Morrow, Georgia

⁷⁴ Jessica Neptune, "The Making of the Carceral State," chapter 7.

⁷⁵ Ibid.

⁷⁶ For a summary of the trajectory of this argument, see: Gerald Kleiman, "Behavior Control and the Limits of Reform," *Hastings Center Report* August 1975, 40-45.

⁷⁷ Jessica Neptune, "The Making of the Carceral State," 406.

⁷⁸ Jessica Neptune, "Harshes in the Nation: The Rockefeller Drug Laws and the Widening Embrace of Punitive Politics," *Social History of Alcohol and Drugs* 26, no.2 (2012): 1970-192.

⁷⁹ Jessica Mitford, *Kind and Usual Punishment: The Prison Business* (New York: Random House, 1973).

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⁸² Radley Balko, *Rise of the Warrior Cop: The Militarization of America's Police Forces* (New York: Public Affairs, 2012), 101.

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⁸⁴ Kathleen Frydl, *Drug Wars in America, 1940-1973* (New York: Cambridge University Press, 2013), 290.

⁸⁵ Balko, *Rise of the Warrior Cop*, 95.

⁸⁶ Matthew P. Dumont, "The Junkie as Political Enemy," *American Journal of Orthopsychiatry*, 43 (1973), 539. Republished in *What Nixon is Doing to Us*, Alan Gartner, Colin Greer, Frank Riessman, eds. (New York: Harper and Row, 1973).

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⁸⁸ Ibid. Popular articles submitted with the report included (for example) Jessica Mitford, "The Torture Cure," *Harper's*, August 1973, 16-30 and Stephen L. Chorover, "The Pacification of the Brain," *Psychology Today*, May 1974, 58-09

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⁹² Ibid. See also the Feb-March 1974 special issue of the National Caucus of Labor Committees periodical *The Campaigner*, featuring articles such as: L. Marcus, "Editorial: Rockefeller's 1984-Plot," 5-18 and Carol Menzel, "Coercive Psychology: Capitalism's Monster Science," 33-54.

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Paper ‘Social Control in Therapeutic Communities’ by Dan Waldorf” *International Journal of the Addictions* 6 (March 1971): 45-50.

⁹⁴ Recorded statement from North Miami High School Guidance Counselor Helene Kloth, *Individual Rights*, 190.

⁹⁵ Robert J. Fournier to Florida Governor Rueben Askew, May 23, 1973, archived online at www.survivingstraightinc.com

⁹⁶ Nancy Campbell, “The History of a Public Science: How the Addiction Research Center became the NIDA intramural research program,” *Drug and Alcohol Dependence* 107, no. 1 (2010): 108-112.

⁹⁷ Daniel Casriel, *So Fair a House: The Story of Synanon* (Englewood, NJ: Prentice Hall, 1963), 176.

⁹⁸ Maia Szalavitz, *Help at Any Cost: How the Troubled-Teen Industry Cons Parents and Hurts Kids* (New York: Riverhead Books, 2006), 35.

⁹⁹ *Individual Rights*, 183-184.

¹⁰⁰ Judith Miller, “The Seed: Reforming Drug Users With Love,” *Science* 182 no. 4107 (October 5, 1973): 41.

¹⁰¹ Division of Youth Services Court Statistical Review of The Seed, Inc, March 23, 1973, archived online at www.survivingstraightinc.com

¹⁰² Robert S. Weppner and James A. Inciardi, “Decriminalizing Marijuana,” *International Journal of Offender Therapy and Comparative Criminology* 22, no. 2 (1978): 120.

¹⁰³ Weppner and Inciardi, “Decriminalizing Marijuana,” 117.

¹⁰⁴ Weppner and Inciardi, “Decriminalizing Marijuana,” 123.

¹⁰⁵ Robert S. Weppner and Duane C. McBride, “Comprehensive Drug Programs: The Dade County Example,” *American Journal of Psychiatry* 132 (1975): 734-738.

¹⁰⁶ Dade, for example, followed a typical New Right voting pattern. After voting for Hubert Humphrey in the 1968 presidential election, the county helped elect Nixon in 1972, Carter in 1976, Reagan in 1980 and 1984, Bush in 1988. Beauty queen Anita Bryant launched a Christian crusade against gay rights in Dade County in 1977. It served as a model for similar campaigns in Kansas, Oregon, Washington and Minnesota. (She also protested an “indecent” Jim Morrison concert in 1969). See “Anita Bryant” in *Culture Wars: An Encyclopedia of Issues, Viewpoints, and Voices*, Roger Chapman, ed. (Armonk, NY: ME Sharpe, 2010).

¹⁰⁷ Miller, “The Seed,” *Science*, 40.

¹⁰⁸ Miller, “The Seed,” *Science*, 41

¹⁰⁹ *Ibid.*

¹¹⁰ Miller, “The Seed,” *Science*, 40.

¹¹¹ The Governor’s investigation concluded that the Seed “has isolated itself from the mainstream of the Drug Rehabilitation Community by failing to establish and maintain a cooperative relationship with that community. We recommend the establishment of that relationship to the Seed.” Florida Governor’s Office Press Release, April 10, 1974, archived online at www.survivingstraightinc.com. This echoes the NIMH initial grant review, which required the Seed to put a referral system in place. Narcotic Addict Rehabilitation Branch Ad Hoc Review Committee Recorder’s Report for The Seed, Fort Lauderdale, FL (#1 HBO MH 618-01), September 23, 1971. NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD

¹¹² Mr. and Mrs. Don Lund to The Health Planning Council April 12, 1973, archived online at www.survingstraightinc.com.

¹¹³ *Individual Rights*, 192.

¹¹⁴ Elaine Murphy, Clinical Treatment Specialist, Technical Assistance Branch to Robert J. Robertson, Acting Director of Community Assistance, "Review and Comment on the Seed Documents," April 22, 1974, NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD

¹¹⁵ Recorder's Report for The Seed, September 23, 1971. NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD

¹¹⁶ The NIDA Grant Microfiche Collection documents Barker's steps: he hired an in-house evaluator, organized a list of referral organizations, and made a new organization chart. Despite these steps, the Seed continued to exhibit "serious" and "obvious" weaknesses such as "the lack of documentation of physical complications or medical care," reported an evaluator after an August 1972 site visit. Lucille Kester to Robert J. Robertson, "Trip Report to The Seed," September 21, 1972. NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD

¹¹⁷ Elaine Murphy to Robert J. Robertson, "Review and Comment on the Seed Documents," April 22, 1974, NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD

¹¹⁸ *Individual Rights*, 192-193.

¹¹⁹ *Individual Rights*, 195.

¹²⁰ *Individual Rights*, 199-200.

¹²¹ Lois Chatham, Chief Narcotic Addict Rehabilitation Branch to Bertram Brown Director NIMH, "The Seed Inc" May 2, 1972, NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD.

¹²² Florida Governor's Office Press Release, April 10, 1974, archived online at www.survingstraightinc.com.

¹²³ Szalavitz, *Help at Any Cost*, 51-53.

¹²⁴ Miller, "The Seed," *Science*, 40.

¹²⁵ Szalavitz, *Help at Any Cost*, 51-53.

¹²⁶ *The Therapeutic Community: Proceedings of the Therapeutic Communities of America Planning Conference January 29-30, 1976*, compiled and edited by George Deleon and George Beschner (Rockville, MD: National Institute on Drug Abuse, 1976), 2.

¹²⁷ *The Therapeutic Community*, 3.

¹²⁸ Odyssey House Grant Review, "Engagement and Success in a Therapeutic Community" (# 1 H81 DA 01109-01) March 19, 1973, NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD.

¹²⁹ Robert D. McFadden, "Beame Accuses Drug Unit of Losing Local Control," *New York Times*, August 12, 1973; New York Comptroller's Office, *Addiction Services Agency: A Study of Mismanagement* (New York: The Unit, 1973). Phoenix House was not the only organization that suffered public criticism about its cost and efficacy. See editorial discussion, John E. Imhof, "Is Odyssey House the Tiffany of TC's?" *Contemporary Drug Problems* 3 (1974): 443-456.

¹³⁰ “Results of the NIDA Special Review of ASA Treatment Services Grant FY 1974,”
NIDA Grant Microfiche Collection, NIH Office of History, Bethesda, MD.

¹³¹ *The Therapeutic Community*, 109.

¹³² *Ibid.*

¹³³ Ralph Waldo Emerson, “Self-Reliance,”
<http://www.emersoncentral.com/selfreliance.htm>

Conclusion **The Revolution's Aftermath**

In 1972, William Fine, a wealthy magazine publisher, anti-mini-skirt entrepreneur, and chairman of New York City's preeminent therapeutic community Phoenix House, told governor Nelson Rockefeller he wanted to do more to address the problem of drug addiction. For Fine, the social issue was also personal: Fine's son had become addicted to drugs. Rockefeller had heard that Japan had very low rates of addiction and asked Fine to investigate the nation's policies. Fine's report to Rockefeller ultimately praised the "zero tolerance" policy toward drug addicts that Japan enacted in the wake of a post-World War II amphetamine epidemic. Fine lauded Japan's decision to "give up the soapbox movement on human rights in order to rid the public of the evil abuses of drugs."¹

In fact, Japan's effective policy was not purely punitive: by funding new, expanded treatment efforts alongside criminal justice approaches, it both resembled and predated President Richard Nixon's multi-front drug war.² But Rockefeller had already funneled millions of dollars into drug-free treatment programs like Phoenix House; Japan's mandatory life sentences for drug dealers, on the other hand, had political promise. Despite the protestations of Nixon's treatment-focused drug advisor Jerome Jaffe, Rockefeller enacted the nation's harshest drug sentencing laws in 1973.³ Rockefeller planned to showcase the new punitive drug policy in a 1976 presidential campaign. When Fine mentioned the report to presidential hopeful Ronald Reagan, Regan asked for a copy. Rockefeller, guarding his anticipated platform, refused to share it.

While Fine promoted tougher policies that might have stopped the supply of illicit drugs before they reached his household, the winner of the 1976 presidential race humbly admitted that his son, Chip, had been discharged from the military for smoking marijuana.⁴ Rather than endorsing a crackdown, President Jimmy Carter appeared to forgive soft drug use on familial and federal levels. In 1977, Carter recommended the federal decriminalization of marijuana, a policy that would allow states to set their own regulatory policies for the drug. Nixon and Rockefeller's drug politics had played on amorphous fears about crime, social dysfunction, and the pernicious personal and familial effects of increasing countercultural substance use. The Carter administration unintentionally provided anti-drug activists with more specific symbolic targets for their outrage.

Their primary target was Peter Bourne. Bourne succeeded Jerome Jaffe and Robert Dupont as the chief presidential advisor on drug issues (the position went unfilled during the Ford administration). Bourne worked as a physician in the Haight Ashbury Free Clinic and, later, oversaw the statewide expansion of drug treatment during Carter's tenure as Governor of Georgia. Although Bourne himself never "dropped out"—he had a distinguished medical career when he took office in his late 30s—he smelled like a radical to social conservatives. His presidential cabinet files include a copy of the Port Huron statement, the foundational document of Society for Democratic Studies (SDS); his wife was a staffer for the Student Nonviolent Coordinating Committee (SNCC). Before Bourne met Carter, he wrote a column for the Atlanta counterculture weekly paper, *The Great Speckled Bird* under the pseudonym Dr. Aquarius. "Aquarius" dispensed scientific advice about the harms associated with drug taking.⁵

As Carter's drug advisor, Bourne followed a similar philosophy. He promoted a rational federal drug policy, guided by the population-level data about the medical harms associated with specific drugs. Using this logic, he advocated for marijuana decriminalization as well as increased regulations for barbiturates and benzodiazepines. Prescription sedatives ranked just behind opioids in the Drug Abuse Warning Network's (DAWN) rankings of substances associated with drug-related deaths when Bourne took office in 1977; in contrast, marijuana was rarely fatal.⁶ Yet Bourne's relatively permissive stance on marijuana use generated ire from a growing group of activist parents who perceived the drug as a threat to their childrens and adolescents. Bourne underestimated and dismissed the group.⁷ They courted other officials, such as Robert Dupont and Bourne's deputy Lee Dogoloff, and called for Bourne's removal from office.⁸

In the summer of 1978, they got their wish. Bourne wrote a prescription for 15 tablets of Quaalude, a sedative with a reputation for recreational use, for a White House staffer. He used a pseudonym to protect her privacy. The staffer asked a friend to fill the prescription for her and a state pharmacy inspector attempted to verify the prescription. The friend was arrested, and Bourne's prescribing practices became public knowledge; he later admitted to writing "ten to a dozen" prescriptions for other staffers who thereby circumvented the White House physician.⁹ The Controlled Substances Act had established a national system of prescription monitoring which depended upon accurate information regarding the prescribing doctor and recipient. Bourne theoretically

supported these restrictions, writing to a fellow physician that “the Administration intends to prosecute all ‘Pushers,’ be they physician or bellboy.”¹⁰

This stance exposed Bourne to charges of hypocrisy and led to a series of news articles that charged drug use ran rampant in the “hippie” White House cabinet.¹¹ He resigned. While Carter’s political opponents surely viewed the scandal as an opportunity to weaken the administration politically, Bourne’s departure also marked a turning point in the national discussion about substance use. Judianne Densen-Gerber, the conservative director of the therapeutic community Odyssey House, likened Bourne’s “Drug-gate” to Watergate and framed Carter’s advisor as a pusher with insufficient respect for current drug law.¹² The therapeutic community philosophy that emerged by the mid-1970s—which emphasized personal and familial responsibility, addiction as a disease of character or emotional development, and firm restrictions on drug use—came to dominate the public conversation regarding drug use. Bourne argued that his departure “ended the era of the focus on dealing with drugs as a public health issue.”¹³ The rapid national investment in methadone maintenance programs during the Nixon administration had been a public health response to an epidemic of heroin addiction in the long 1960s. Bourne’s departure ushered in an era of individualized, and privatized, treatment.

Politically charged anxieties about youthful poly-substance use helped rescue TCs, which struggled for relevance and funding in the mid-1970s. Concerns about marijuana and prescription drug use, which TCs were well equipped to treat, eclipsed fears about heroin. Conservative critics and politicians, along with a new “Parent Movement” of anti-drug activists, echoed the arguments set forth by early proponents of therapeutic communities such as Densen-Gerber in the mid-1960s. Synanon and second-

generation therapeutic communities began by designing a treatment model in response to the heroin crisis and later expanded into treatment for hallucinogen, prescription drug, and even marijuana use. In so doing, they successfully presented lax attitudes toward almost every type of substance use as a form of dangerous, but treatable, psychological immaturity. By the late 1970s, the health argument gained political resonance as an indictment of the legacies of the Sixties counterculture. One conservative columnist assessed the rumored drug use among Carter's cabinet members thusly: "The primary question is not whether the youth culture graduates can retain their [drug-using] vices while remaining in the employ of the most celebrated born-again citizen in the country. The basic question is: Are grown-up people honest enough to admit that the steady use of marijuana and other drugs eventually inflicts a penalty on the body and mind?"¹⁴

Foundational Parent Movement members like Marsha "Keith" Schuchard, Thomas "Buddy" Gleaton, and Sue Rusche made marijuana the drug of choice for their crusade. "*We were the real counterculture,*" said Schuchard.¹⁵ She made a variation of the original TC argument: in the wake of the 1960s, mainstream culture had grown increasingly drug-saturated. Parenting had become indulgent or absent. New federal research later supported her observation: the percentage of high school seniors using marijuana daily rose each year from 1976-1978, peaking at more than ten percent.¹⁶ The patterns of use were influenced by students' perceptions of the drug; in the 1980s, as students came to perceive the drug as risky and socially unacceptable, use decreased.¹⁷ Although Schuhard later cited drug use statistics,¹⁸ she found her first data points in her own wealthy neighborhood in Atlanta, Georgia. Schuhard launched the Parents'

Movement drug campaign after discovering her 13-year-old daughter smoking marijuana at a party in 1976.

Schuchard and Gleaton, a professor at Georgia State University, formed the group Parents' Resource Institute for Drug Education (PRIDE) in an attempt to beat back the countercultural tide. In 1977, Rusche formed DeKalb (County) Families in Action, or (FIA), an activist group with a legislative agenda. These educated Atlanta-based parents believed marijuana decriminalization would lead to the expansion of the drug market and criticized the promotional campaigns and "head shops" that catered to youth. They also believed researchers and government officials downplayed the health risks to adolescent cannabis smokers.¹⁹ Even if casual drug use didn't lead to addiction or hormonal irregularities, the supposedly rebellious habit threatened to derail the ambitions that middle-class parents had for their children. Thanks in part to Schuchard's best-selling book *Parents, Peers, and Pot*, written for NIDA at Robert Dupont's request, the grassroots parents' groups multiplied rapidly.²⁰ Lee Dogoloff, Bourne's parent-movement-friendly successor, counted 348 parents' organizations by May 1980.²¹

Then, almost as quickly as the nation seemed to embrace marijuana decriminalization, it reversed course. By 1977, eight states had decriminalized marijuana, but decriminalization efforts stalled the following year. By 1980, in large part thanks to the organized efforts of parent activists, adolescent marijuana use began a decade-long decline.²² By 1984, parent activist groups had introduced anti-drug paraphernalia laws in all fifty states.²³ In the months before Ronald Reagan's election, America's attitude toward pot followed Dade County, the swing county where the Seed therapeutic community took root. In presidential elections, Dade followed a typical New Right voting

pattern as majorities cast their ballots for Humphrey in 1968, Nixon in 1972, Carter in 1976, Reagan in 1980 and 1984. In the late 1970s, marijuana-using clients were contributing approximately \$2.5 million in revenue to the county's treatment centers.²⁴ As the heroin epidemic and federal funding waned, many of the drug-free treatment centers planted in the early 1970s relied on referrals from the criminal justice system and concerned parents of young marijuana users.

With the resurgence of anti-drug activism, conservative politicians found a winning wedge issue. The coalition of parents' groups, National Federation of Parents for Drug-Free Youth (NFP), formed in May 1980, would grow into a powerful conservative lobbying force. The larger message presented by drug prevention and treatment advocates—that a culture of permissiveness had devastating consequences—reinforced the beliefs of Christian social conservatives who had grown disenchanted with Carter, contributing to the party realignment that solidified in the 1980s.²⁵ In 1972, years before the Parent Movement's consolidation, former Synanon affiliate and Phoenix House co-founder Mitchell Rosenthal published *Drugs, Parents, and Children: The Three Way Connection*. Rosenthal argued that the youth market inspired by the baby boom had inaugurated a dangerous new life stage of protracted, anything-goes adolescence. In the face of these cultural challenges, parents needed establish clear moral boundaries: "There is some idea that young people can be driven to drugs by what amounts to a sense of political despair, that the war in Vietnam, the existence of poverty and racism, immoralities and inequalities, have pushed many youngsters over the line," wrote Rosenthal. He dismissed this idea: "There may be some logic to this, but it has considerably less to do with the alienation of the kids than the confusion and ambivalence

of their parents.’’²⁶

Nancy Reagan would visit Rosenthal’s Phoenix House repeatedly over the course of her husband’s presidency; the organization presented Reagan with an award for her drug education efforts in 1984.²⁷ An inspiring visit to the therapeutic community Daytop during the 1980 presidential campaign primed Reagan for her magisterial role as an anti-drug advocate.²⁸ The public confessions at a Seed-descended youth treatment center could move her to tears.²⁹ When, in 1981, the First Lady’s staff searched for a way to reform her image as cold, unfeeling, and out-of-touch, the drug abuse prevention issue appeared as a possible solution.³⁰ After attending a PRIDE conference earlier that year, Reagan staffer Ann Wrobleski suggested making drug prevention the First Lady’s pet cause. Wrobleski faced resistance from the White House, but the Parent Movement pushed; the NFP waged a successful campaign to get Carlton Turner, a University of Mississippi researcher and anti-marijuana crusader, appointed as the president’s drug advisor. Turner then secured Nancy Reagan’s full support as the nation’s preeminent drug prevention advocate. Turner planned to shift the national focus from treating inner-city addicts to preventing adolescent marijuana use. Federal funding during the Reagan administration adjusted accordingly; the combination of Carter-era inflation and Reagan budget cuts meant that federal treatment spending experienced a 43 percent reduction in the late 1970s and early 1980s.³¹

Whereas Nixon generously funded drug treatment, Nancy Reagan praised the privatization of addiction treatment at high profile stops to TCs such as Straight Inc, Gateway, and Phoenix House.³² According to the National Alcohol and Drug Treatment Unit Survey, the number of private treatment centers grew throughout the 1980s; by

1987, private centers had more than double the number of patients as publicly funded centers. Adolescents, particularly those covered by health insurance, were a desirable client base. The teenage population had decreased by the 1980s, but by 1987 individuals under the age of 21 made up almost 40 percent of the client population in drug-free treatment centers.³³

Scholars in several fields have argued that the drug war, supposedly initiated by Nixon and escalated by Reagan, resulted in a tiered addiction treatment industry that generally offered therapeutic solutions to the white middle classes and prison to disenfranchised minorities.³⁴ But some characterological, drug-free treatment models that the Reagan administration preferred for middle class youth were far from soft; they included tactics such as attack therapy, public shaming and confession, and sleep deprivation, all designed to break down supposedly immature, self-indulgent character of young drug users. Reagan-era conservatives' rationale for these treatment models co-opted the rhetoric advanced by some ex-addicts and allies who led early therapeutic communities in the late 1960s and early 1970s. The "hang tough" motto resurfaced as "Toughlove™", an Ann Landers-endorsed movement of parenting support groups founded in 1977 by a pair of married counselors who previously worked in a modified therapeutic community.³⁵

But the most infamous adolescent treatment center of the 1980s, by far, was Straight Inc. After The Seed's scandals caused the organization to scale back its treatment efforts, two wealthy South Florida men decided to create a new adolescent treatment center. Shopping mall magnate Melvin "Mel" Sembler and real estate developer Joseph Zappala founded Straight, Incorporated in 1976. Sembler and his wife Betty had been

impressed with the counseling their marijuana-using son had received at The Seed, and planned to replicate the program, with ethical improvements.³⁶ Though Straight failed to live up to its promises of more rigorous ethical oversight, its marketing made a clean break with its predecessor. Investigative journalist Maia Szalavitz noted, “Straight cleverly capitalized on drug-war panic. Its very name is emblematic of the drug war’s goal, whereas The Seed sounded like it could be a hippie commune.”³⁷

For anti-drug war activists and treatment center survivors, Straight symbolized the unlikely white, middle-class casualties of a domestic drug war. In 1983, Fred Collins, a former Straight client who had longish hair and a short history of smoking marijuana, won a lawsuit against the organization. A series of trials found Straight guilty of false imprisonment and awarded Collins more than \$200,000 for the damages inflicted by the organization. Following Collins’ lawsuit, former clients exposed Straight’s systemic abuses including false imprisonment of non-addicted teens, physical and sexual abuse, and profound psychological damage. Even as Straight faced serious allegations throughout the 1980s and early 1990s, new branches opened in Atlanta, Cincinnati, Boston, Detroit, and Orlando and high-ranking government officials continued to praise the organization’s methods. Former Straight client and researcher Marcus Chatfield discovered that Nancy Reagan’s highly publicized initial visit to Straight in 1982 followed a high-profile lawsuit by Atlanta’s chapter of the American Civil Liberties Union (ACLU).³⁸

Straight Inc. closed in 1993, but its opponents have only grown more vocal in subsequent decades. Parents who followed the movement’s advocates to its extreme conclusion rallied for a backlash. Wes Fager, the father of a Straight client, extensively

chronicled the organization's history on the internet. Several websites and forums feature newly declassified documents and function as organizing platforms for survivors of abusive reformatory programs. Their petition, requesting an apology from Straight's leadership and the Reagan and George H.W. Bush administrations, features hundreds of signatures and testimonials.³⁹

For critics like Fager, the growth of highly disciplinary private adolescent treatment centers—which included not only Straight, but other organizations such as CEDU, KIDS, and LIFE—was a dystopian realization of Synanon's original goal: to create a profitable, lauded rehabilitation program that operated without government interference or the oversight of biomedical authorities. Yet Synanon's appeal to hard-core heroin addicts in the early 1960s tapped into the same justifiable emotions that inflect more recent treatment survivors' protests: anger regarding an ineffectual and immoral treatment system, scorn for the willful ignorance of government authorities, and a desire to conquer past traumas.

But impulses alone do not lead to institutional change. The youthful psychoactive revolution of the 1960s was a global phenomenon, and by the mid-1970s, the US-based therapeutic community message and model successfully spread to England, Europe, and South America; the World Federation of Therapeutic Communities was founded in 1975, with the President of Gateway as its leader. If the reception of US-based therapeutic communities varied (Swedish officials were wary of Daytop's capitalist cultural imperialism; Argentinians employed the authoritarian TC model as tool for political revolution and repression) the nearly universal concern about youthful substance use and social upheaval in the Sixties made the treatment model a global phenomenon.⁴⁰ The

international history of the recovery revolution has yet to be written.

Meanwhile, the reformed addicts, utopians, researchers, change agents, politicians, parents, and business leaders created a mixed, but lasting, national legacy. The conservative culture warriors of the late twentieth century largely failed in their crusade to restore America to traditional values.⁴¹ Drug-free treatment leaders were more successful as entrepreneurs than as harbingers of a more moral future. Since the Sixties, we guiltlessly engage in any number of Victorian era vices: drinking, swearing, gambling, premarital sex, taking drugs (with prescription or without getting caught), eating sugary foods, and amassing personal debt—to name a few.⁴² Since the establishment of a nationwide treatment industry, we also have a wealth of cures for purchase if—as Synanon’s ex-addict advocates claimed—our bad habits become diagnoses.⁴³

Notes

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² David Courtwright, *Forces of Habit: Drugs and the Making of the Modern World* (Cambridge: Harvard University Press, 2001), 82.

³ Michael Massing, *The Fix* (Berkeley: University of California Press, 2000), 126-127.

⁴ Patrick Anderson, *High in America: The True Story Behind NORML and the Politics of Marijuana* (New York: Viking Press, 1981), 197-199.

⁵ Peter Bourne’s personal website, peterbourne.co.uk, accessed February 2013

⁶ *Drug Abuse Warning Network DAWN Phase IV Report, May 1975-April 1976: Submitted to the Drug Enforcement Agency (DEA) and National Institute on Drug Abuse (NIDA)* (DEA and NIDA: Washington DC, 1977), 203. Accessed September 2, 2013, <http://babel.hathitrust.org/cgi/pt?id=mdp.39015020241850;view=1up;seq=4>

⁷ Peter Bourne, interview with author, April 24, 2013.

⁸ Thomas Gleaton and Marsha Keith Schuchard to Patricia Yarham, July 25, 1978, 1/20/77-8/31/78 [HE 6-1] folder, Box HE-11, White House Central Subject Files: Health, Jimmy Carter Library; Michael Massing, *The Fix*, 143-155.

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- ⁹ Jack Nelson, "Drug Aide Tells Why He Quit: 'Too Painful' to See Carter," *Los Angeles Times*, July 21, 1978.
- ¹⁰ Peter Bourne to John J. Poland, June 13, 1977, 1/20/77-1/20/81 [HE 6] folder, Box HE-10, White House Central Subject Files: Health, Jimmy Carter Library.
- ¹¹ "Interview with Peter Bourne"; Massing, *The Fix*, 147-149; Musto and Korsmeyer, *The Quest for Drug Control*, 209-215.
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- ¹⁵ Massing, *The Fix*, 148.
- ¹⁶ Patrick O'Malley, Gerald Bachman, and Lloyd Johnston, "Period, Age, and Cohort Effects on Substance Use Among Young Americans: A Decade of Change, 1976-86," *American Journal of Public Health* 78, no. 10 (October 1988): 1315-1321.
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- ²⁰ Marsha Manatt, *Parents, Peers and Pot*. (Rockville, MD: DHEW/National Institute on Drug Abuse, 1979).
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- ²⁷ Ronald Reagan Presidential Archive and Museum website, <http://www.reagan.utexas.edu/archives/reference/flotustravel.html>, accessed May 2013.
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³⁰ Arnold Trebach, *Why We are Losing the Great Drug War*, 133-135; Michael Massing, *The Fix*, 157.

³¹ Michael Massing, *The Fix*, 157-162.

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