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The SYNANON Self Help Organization and its Contribution to the Understanding and Treatment of Addiction

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THE SYNANON SELF HELP ORGANIZATION AND ITS CONTRIBUTION TO THE UNDERSTANDING AND TREATMENT OF ADDICTION

Abstract

The Synanon Self Help Organization constitutes a milestone in addiction treatment. Its successful function has not only influenced the intervention practices but the science of Psychology and the field of Psychotherapy as well. This article presents an analysis of the key points that emerge from Synanon, and focuses on the new concepts that Synanon’s function introduced regarding the etiology of addiction, as well as on the resulting reconsideration of addiction treatment. The article also outlines the shortcomings of Synanon as it grew into a large organization, and how this affected the recognition of Synanon’s contribution to the treatment field. Moreover, emphasis is given to the political message revealed by the Synanon Self Help Organization experience, alongside the effect that this endeavour has had, as a whole, on the various mental health professions.

Key words: Self Help Organization, Synanon, Groups, Addiction, Therapeutic Communities (TCs), Humanistic Approaches to Addiction

INTRODUCTION

When Charles Dederich founded the Synanon commune in 1958, in Santa Monica, California, he could definitely not have imagined the enormous positive impact his endeavour would have on the treatment of addiction and mental health problems in general. Today, nearly 50 years after Synanon was founded, the extent to which Dederich’s ideas contributed to the understanding and treatment of psychosocial problems can be fully evaluated.
This contribution is not only limited to the birth of Therapeutic Communities (TCs) for Drug Addicts, but it extends to the development of new psychotherapeutic approaches and psychological theories. Actually, Dederich’s applied ideas influenced the theories of pioneer scientists such as Maslow (1967), Casriel (1972), Rogers and Moreno (Rawlings and Yates, 2001), and vice-versa.

This article does not aim to examine the extremely interesting and didactic history of the rise and the fall of Synanon, which is the ancestor of the modern hierarchical Therapeutic Communities (TCs) for drug addicts. The subject has already been extensively covered by Rawlings and Yates (2001), by Deitch and Zweben (1981), as well as by Janzen (2001). In addition, substantial historical information can be found in Soyez's and Broekaert’s article (2005). They vividly describe how a charismatic leader can lead to destruction, when intoxicated by power, and how total introversion can distort one’s grasp of reality.

This study primarily focuses on the “how and why” this novel endeavour undertaken by a team of drug, alcohol and, most importantly, crime addicts managed to change behaviours which were, up to that point, considered by the scientific community extremely difficult, or even impossible, to cure (Casriel, 1963; DeLeon, 2004; Kooymans, 1993; White & Kurtz, 2008; Yablonsky, 1994). The present author suggests that this “miracle” should be ascribed to the special characteristics of this attempt, which were unique in the history of addiction treatment.

As a contribution to the TCs’ movement, this article aims to demonstrate some of these characteristics, which inspired many people before Synanon's fall, and which were blatantly ignored by almost everyone thereafter. It is generally acknowledged that a movement which deletes its history, deletes its future as well.
1. The fall of Synanon and the veil of silence

There are many reasons which could explain why the professionals in the field of addiction and the therapeutic communities themselves decided to remain silent, and in denial, regarding Synanon. Deitch and Zweben (1981) suggest that in the late 1970’s – when the extreme and erratic behaviours in Synanon led to indictments against it - many TCs preferred not to make any reference to their ancestor, because they feared that public opinion would identify them with it. These were the same TCs that some years before were proudly advertising in their brochures the fact that they originated from Synanon. This new stance can easily be understood, since, as Synanon started to disintegrate from 1976 onwards, the subsequent negative publicity totally destroyed its public image.

This interpretation, however, does not justify the academic community's and the TCs’ movement persistent silence through the years. The academic community’s reaction was predictable. It always had a suspicious and reserved attitude towards new ideas, especially when the latter threaten the prevailing scientific paradigm. Its response to the movement of the Alcoholics Anonymous (AA) self-help groups, which were founded in 1935, was characteristic. It took more than 40 years of effective work before scientific research expressed any serious interest in them (Borkman, 2008). Similarly, the scientific community reacted to the early work of Freud and Rogers, by accusing them, that they did not apply a recognized scientific method to their clinical work. Furthermore, the dominant psychiatric model, even to this day, persists in underestimating, or ignoring, the social psychiatry movement, Basaglia (1981) and the psychiatric reform, M. Jones (1953) and the TC for psychiatric patients, Mosher (2001) and the Soteria movement, Laing and Cooper (1964) and the anti-psychiatry, as well as many others who applied novel ideas to the
treatment of mental health problems.

One might expect that in the course of time, and after the dust from the fall of Synanon had settled, the TCs for addicts would research thoroughly into the causes that led to the rise and the fall of the organization to which they owed their birth. One might also expect them, to try to examine, for example, whether the messianism, and the abuse of the power that society assigned to them, was the result of the organization’s big size and its concentrative administration, or whether those behaviours are inherent in all the therapeutic programs, which are strictly structured, because of their dogmatic persistence in absolute answers and their inflexible, vertical hierarchy. TCs would also be expected to give answers to questions such as why the sister organization Synanon Berlin (which took the name as well as the philosophy from Synanon USA), continues to work effectively (Fredersdorf, 2000); and whether an independent supervisory board with substantial power (which would be elected through democratic procedures), could, firstly, tame the uncontrollable, but charismatic leader, and, secondly, prevent the degeneration course Synanon took during its final years.

But this never happened, at least to the extend a landmark endeavour in mental health history would warrant. It is remarkable that, amongst all the European leaders of this movement, only Broekaert’s published work (1999, Soyez and Broekaert, 2005) refers to Synanon’s general contribution to the addiction field, while no discussions were held on this matter in a national or international conference (Deitch & Zweben, 1981; Ottenberg, 1984).

The refusal of the TCs’ movement to pay serious attention to Synanon's venture is subject to interpretation. Possibly, it is due to the fact that someone could recognize the early signs of “ruling paranoia”, a lack of moral principles and values,
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and the appearance of pathological projective mechanisms, like those that emerged at Synanon during its last years in many of the contemporary TC organizations and in other drug-free addiction treatment programs (Zafiridis, 1990). Through our work in such programs, we have all got a taste of the overgrown (uncontrollable) power we gain, when the exhausted families of the addicts and society, as a whole, entrust us their hopes for a cure; we have realized how fragile the balance is between the manipulation of this trust for our own benefit and its therapeutic use in favour of the addicts and their families. We are also aware of how easily this power, granted to us out of need, can contaminate a whole therapeutic organization and turn it into an institution which, on the one hand, allows its staff to cultivate the idea that they are the bearers of the “therapeutic truth”, and, on the other hand, it submits to the psychological self-interests of the leading team for power and control, just as it happened to Synanon during its last years.

Indeed, right before its final dissolution, Synanon seemed to be more interested in itself and the reinforcement of its power, rather than in a holistic treatment of addiction. By making this choice, it broke the rules that Synanon itself had established in the beginning. This happened, for example, when it allowed adult members to use violence on adolescents (Deitch & Zweben, 1981). In this way, Synanon seemed to distance itself from the moral principles and the way of life it had taught its members when it first started; it also forgot that it was those principles and values to which it owed its fame and its success, not only in quitting substance abuse, but also in bringing a real change to its members. During its final years of operation, its radical principles are encountered only in its manifestos. Its everyday practice was based on the same immoral tactics for which it once accused the rest of the society. According to Ianzen (2001), the vivid interest for social change that characterized the
early Synanon, gradually disappears.

It is by now obvious that Synanon has distanced itself from its founding philosophy, and has evolved to a big organization that provides services to addicts or other people who are searching for a meaning in life - while the ideological, political and moral characteristics of the early years are degenerated into a form of religious worship. Its founder's speeches were broadcast everywhere in the Synanon houses, while in the organization's schools the students reproduce them as if they were a type of prayer. Synanon sought to be recognized as a religion, and its leader tried, through improper means, to found a Synanon embassy in Washington, similar to the one at the Vatican (Deitch & Zweben, 1981; Soyez & Broekaert, 2005). The few clam and rational voices that still exist inside Synanon are covered by the uproar of Dederich's fanatic followers.

Regardless of Dederich’s religious delirium, it is evident that the leading team and the majority of the staff have become addicted to the benefits of the addiction treatment, such as status, money and power. This is an addiction to the … addiction treatment, which almost always emerges when an organization for substance abuse, in order to achieve other goals, abandons the principles and the moral values upon which it was founded in the first place. This development is far removed from what Synanon’s founder, Charles Dederich, had been repeatedly stating during the early years: “Synanon is not primarily interested in curing drug addiction, but that this seems to occur as a side effect of something else which Synanon teaches” (Garrett, 1965, p. 183).

During its final years, Synanon moved directly opposite its founding philosophy. It was not interested any more in sustaining the way of life that it had itself cultivated in its communes and which, incidentally, cured addiction radically.
On the contrary, it adopted a mechanical, symptomatic treatment for drug dependence, cut away from the principles and values it had been promoting in the past. Hence, this new idea of therapy was limited to some techniques and tools, the use of which was very familiar to Synanon due to its former experience. What escaped it, however, was the fact that these tools and techniques helped many people not only stop using drugs but also change their lives, because of the social, ideological and moral context in which they were used, but which no longer existed. Synanon was to pay a price for this: on the one hand, through the total failure in the treatment of adolescents who did not experience any external pressure (such as indictments, family pressure, or a ruined life which could, at least, lead them to the decision of quitting abuse). On the other hand, the corrupt, by now, life model that Synanon offers to these adolescents can not inspire them to change their lives. Consequently, they refuse to participate in Synanon, in the same way they refused to integrate into society.

Synanon did not comprehend that this new concept of a tool - centered intervening philosophy, which was adopted after 1976, may be effective and attractive only to the addicts that are interested in quitting substance abuse and, that these people as a rule are mainly adults. Synanon blamed the adolescents' impulsiveness for increasingly quitting therapy, and decided, through violence, to force them to stay in its programs, hoping that, in this way, its tools and techniques would eventually have an effect on the adolescents. Its failure proved once more that, what is decisive in therapy is its communal environment alongside its moral values and not its tools and techniques, which, under some particular circumstances could even prove to be dangerous. It was an overestimation of these tools and techniques, that allowed Synanon to believe that therapy can be forced, even violently, to those who deny it.

Apart from all these, the “adolescents’ case” signals the beginning of a new
era. From now on, Synanon abandons the idea of therapy-as-a-side-effect, and focuses on the treatment of the symptom. Its founder and its leading team know that an ability to cure by any means is what could guarantee them even more power, status and money, and not the social vision of its early years, which, according to Soyez & Broekaert (2005), characterized the time period between 1969 and 1975. It was obvious by then that they compromised with a society that showed no interest for new social proposals (even if these responded to the fundamental causes of addiction), and only cared for the elimination of the addiction symptom. In this fixed context, right before Synanon’s fall, it did not really matter if it had finally collapsed or not: even if it had survived, it could not have been a school of a different way of life for the addicts, and it could not have been a model of a different kind of social organization for the rest of the society.

All the above issues are of great importance; but will not concern the present study any further. They could provide, however, the basis for an open dialogue in the TCs movement. The article will focus, at this point, on the profound influence that Synanon has had over the formation of our ideas about the nature and the treatment of psychosocial problems, regardless of the fact that this was not, and could not be, included in the original intentions of its founder and his fellow companions. They were merely seeking an effective way of taking themselves out of addiction and criminal behaviour for good. Despite all these, their attempts constituted one of the greatest innovations that had ever appeared in the Mental Health field, and became an experimental laboratory for the emerging movement of humanistic psychology.

2. Synanon sheds light on the field of addiction by adopting a new research paradigm
From the moment it was founded, Synanon either strongly affected or negated all the existing scientific notions and stances towards the nature and the treatment of addiction. Up to then, confusion prevailed in the field of addiction, because the applications of the prevailing scientific theories did not lead to any reliable therapeutic suggestions (Casriel, 1963; DeLeon, 2004; Drew, 1991; Klingemann and Bergmark, 2006; Kooyman, 1993; Shaffer, 2007, 1986; White and Kurtz, 2008; Zafiridis, awaiting publication). Synanon, which Garret (1965) and other researchers described as a miracle, emerges in this context, and, through its success, provides us with reliable answers to questions that were up to that time unanswered.

It is a fact that in its initial stages, Synanon did not have any particular theory. It did have, however, an ingenious, broadly-educated leader, who had been influenced by the philosophical and sociological theories of others (Deitch and Zweben, 1981; Soyez & Broekaert, 2005; Yablonsky, 1994). As a former addict himself, he had every reason to be personally involved in the action, and he also involved all the other members that had the same addiction problem. They found themselves in uncharted territory, and, therefore, had to carve a path of their own. From this point of view, one might consider this attempt as a typical paradigm of “participatory action research”, which happened long before this type of research was officially adopted (Fals – Borda & Rahman, 1991, Winter & Munn – Giddings, 2001). As a result, a series of new ideas and methods were applied for the first time, in order to give answers to old questions. In fact, the early Synanon is something like an experimental laboratory. What is left to the scientific community is to discover the theory hidden behind these successful answers. This is not so difficult, but it never happened to the extend it should have.

Contrary to what was believed since the beginning of the 20th century - when
the scientific community first constructed addiction as an autonomous nosological entity (Alexander 2008; Szasz, 1974) – the Synanon movement was not initiated by mental health professionals. It was the addicts themselves who, inspired by the AA self-help movement, attempted to treat their problems by founding a commune. This constitutes a deep negation of the traditional therapeutic approach and the scientific paradigm that lies beneath, because, as it is generally accepted, the traditional approach makes the sufferer a passive individual who receives a treatment that specialists design for him (Borkman, 1999, Prilleltensky and Nelson, 2002). In contrast, the suffering individuals in Synanon tested their needs and, with the help of psychologists and sociologists (Soyez & Broekaert, 2005), they designed and organized an environment that can respond to these needs. It is to this completely novel approach that we could, perhaps, attribute the fact, that from 1958 until at least 1963, Synanon constituted the one and only solution for the treatment of drug addicts with criminal behaviour. In this year (1963), Daytop Lodge was founded on the principles and philosophy of Synanon. With the help of ex-Synanon members it became, as Daytop Village since 1964, the model of many TCs inside and outside the USA.

But this is not all. When Synanon appeared, the majority of scientists believed that addiction was an incurable “chronic relapsing disease” which could only be treated with lifelong symptomatic medication (Dole & Nyswander, 1967; Kooyman, 1993). On the same basis, the Somatic Withdrawal Syndrome, which appears right after quitting drugs, was considered as an extremely serious clinical syndrome with a strictly biological base. Hence, it was justifiably considered as the main cause for the prolongation and the incurable nature of addiction. Synanon’s members treated this without a specialized medical-nursing staff, but simply provided the newcomers with
love and safety, proving in this way its psychosomatic or psychological nature. The withdrawal syndrome was thus completely demystified, and the supporters of the disease-biological model lost one of their fundamental arguments.

Another contribution Synanon made to the understanding of the causal pathogenesis of addiction was that it showed the responsibility that the contemporary societies – and the way of life they dictate – have for the spreading of addiction. Dederich often accused society for its lack of supportive systems, coherence, solidarity, human relationships and justice, and he asked people to follow the Synanon communes’ example, as a response to an absence of life meaning and the ongoing spread of substance abuse (Ianzen, 2001; Yablonsky, 1994, 1965). Up to then, there were only a few scientific voices that correlated substance abuse with the social, political and cultural context in which it appeared. Even fewer were those who believed that putting an addict into a setting similar to the Synanon commune, could prove to be a crucial factor for his/her cure.

Apart from that, Synanon introduced the “tough love” idea into therapy as a mean of change for its members, who had been brought up in extremely hard family and social conditions (Kooyman, 1993; Rawlings & Yates, 2001; Yablonsky, 1994). That meant that all Synanon members could take for granted the other members’ (especially the eldests’) love and support, on condition that they behaved in accordance to the commune’s way of life. But, whenever their attitude did not support the common effort for a new life, and reproduced behaviours they had learned on the streets or in jail, they would face the others’ tough confrontation.

This confrontation was constant, and it was not confined to administrative measures, as it is prevalent in real society. On the contrary, it was expressed through high – pitched tones and emotional tension during the group meetings that were
taking place in the commune every night. In those meetings the hierarchy was abolished, and every member was free to express himself/herself in any way he/she wanted, provided that any opposition to another member was not intended to hurt him/her, but to change a negative behaviour. The directness and the absolute honesty made those confrontations extremely hard. This was a procedure Synanon invented in order to defuse pressure and work creatively on any tension or negative feelings that may have been caused to its members by the strict and vertical hierarchy as well as by the major requirements of communal life for personal responsibility and moral values.

Those meetings, which were called “The Synanon Games”, became part of psychotherapy history, due to their ability to unmask, reveal and eventually fulfill the basic psycho-emotional needs that every person has. The whole procedure was comparable to Greek tragedy, and the final catharsis which reveals the common needs and the common destiny of all people, regardless of race, social position or educational level. The effect that those group procedures had on the everyday life of Synanon and other communes of this type were remarkable (Garret, 1965; Sugarman, 1974; Yablonsky, 1994). Love, mutual concern, honesty and human closeness prevailed. Synanon has, therefore, taught us that the non-fulfilled psycho-emotional needs are what lead people to defensive rationalizations, egocentricity and negative behaviour (the latter being legal or illegal).

Synanon was preceded by psychoanalytical theory, which interpreted the human behaviour as a project of unconscious defensive mechanisms, instincts and repressed desires, as well as behaviorism, which considered human behaviour as a product of conditional reflexes. The Synanon games came to highlight the non-processed, negative emotions of psychic pain, insecurity, distrust, loneliness and fear, as the main
factors of the human behaviour. As a result they carved a path for the new movement of humanistic psychology and for the new ideas relating to the importance of the positive emotions of love, mutual concern and security.

3. Synanon changes the landscape of therapy

In the early 1960s, new “Houses” were constantly being opened, and the self-administered and self-financed Synanon communes were, to the majority of scientists and to public opinion, the only place in the whole world where a drug addict, even with a long criminal record, can totally change his/her values and way of life. Not only had the officially certified psychological and psychiatric services failed to cure hard core drug addicts, but they had also failed to offer a basic comfort to the millions of addicts and their families (Casriel, 1963, DeLeon, 2004; Kooymen, 1993; Sugarman, 1974; Yablonsky, 1965).

As a result, non-governmental and humanitarian organisations, as well as state services, turned to Synanon for help. Some Synanon members assumed responsibility by establishing and running new houses all over the US, cooperating, when necessary, with mental health professionals (Broekaert, Vandeveldt, Soyez, Yates & Slater, 2006; Rawlings & Yates, 2001; Yablonsky 2002). The new communes were inspired by Synanon’s principles and ideas of therapy. Unlike mother Synanon, many of them encouraged social rehabilitation for their members, accepted external funding, and included mental health professionals in their personnel. The professionals, as well as all the other members, were accepted on condition that they embraced the commune’s philosophy. They are also the ones who introduced elements of the TCs, described by Maxwell Jones (1953), into the new communes. However, regardless of their background, the staff members were inspired by high ideals. They showed genuine
concern for their fellow being and his/her personal growth and also for the social problems of the time. Some of the communes’ graduates founded or helped in the founding of a number of such houses all over the US. Therefore, the Therapeutic Community for Drug Addicts was born due to those pioneers’ concern and voluntary work.

Despite all these, the term ‘Therapeutic Community for Drug Addicts’ began to be used gradually after 1963 (Kooymann, 1993; Sugarmann, 1974). In the beginning, the name ‘Concept House’ was the most prevalent, since, as has already been mentioned, what all those communes had in common were Synanon’s ideas of therapy and philosophy. The ‘Concept’ was simple: addiction therapy means a real and permanent personal change; such a change cannot be realised in an inhuman social environment, which was formed to serve economic growth rather than the emotional and moral needs of humans. Such an environment not only fails to enhance recovery, but actually causes addiction.

Unlike the outside society, the ‘Concept Houses’ – that is Synanon and its descendants – made their members’ personal change and wellbeing possible because they provided them with an environment that was based on long-forgotten community traditions. It was far from being an imitation of the real world, much like a model of the first Christian or communistic micro-societies. In these micro-societies, well-established social equality and justice created an environment of safety, trust and solidarity, while they helped people to develop close human bonds. As a result, they managed not only to cure addiction and criminal behaviours, but also to uncover the human sensitivity that lies beneath the mask of addiction and criminality.

4. Synanon and the humanistic psychology
In fact, the TC can be perceived as the highest “educational” realization of humanistic psychology (Broekaert as cited in Soyez and Broekaert, 2005 p. 325).

Synanon’s attempt practically confirmed in many ways what the founders of the humanistic trend in psychology had been claiming. Firstly, it justified Rogers’ idea about the prerequisites for a therapeutic human relationship. Rogers (1961, 1980) emphasised the importance of honesty, empathy, security and unconditional acceptance of the other. He considered all these as the necessary and sufficient conditions under which people can take off their masks (which act as a self-defence mechanism) and meet each other as persons. Rogers (1977) went further, suggesting that all these factors unleash the therapeutic potential and the inclination for health that exist in every person. Consequently, for him, therapy is not a mechanical process based upon specialised knowledge and techniques. It does not “come down” from the therapist to the patient in a mechanical way. It is a dynamic procedure which aims to activate the client’s therapeutic potential, and in which the therapist serves as a catalyst, by creating the right environment. Synanon communes and other ‘Concept Houses’ did not have any professional psychotherapists, and they did not use the therapeutic tools of a particular school of psychotherapy. Therefore, it may be reasonably assumed that their therapeutic success can be attributed to their ability to activate the therapeutic potential of their members, purely because they provided the right context. This fact is a palpable confirmation of Rogers’ theory and, more generally, of the humanistic psychology.

Maslow’s pyramid of needs theory (1954) - which right after the basic needs places the psychological needs for love, safety, beauty and justice - was confirmed by Synanon’s experience: when people can freely fulfill these needs, they don’t have to turn to drugs, and they don’t take refuge in violent/criminal behaviours. The value of
honest but tough love as a prerequisite for true human relationships - as taught by Perls’ (1969) Gestalt psychotherapy - was also validated in Synanon’s experience, since it constituted the corner-stone of the Synanon games: that is the daily meetings which aimed to help the members solve their everyday conflicts. Besides, those groups focused on the “here and now”. They were not concerned about the “why”, which refers to explanations stemming from someone’s past, but the “how”, referring to someone’s feelings at present. They ignored the rational explanations for any negative behaviour and they emphasized the feelings of insecurity, fear and loneliness that lied underneath.

Moreover, Synanon, as long as it worked by showing responsibility and consistency, highlighted how strongly social environment and quality of life are related to mental health, long before the emergence of social psychiatry through Manheim's study (Häfner, Reimann, Immich & Martini, 1969), and many decades before socio-epidemiological studies proved this correlation (Kawachi & Berkman, 2000; Wilkinson, 1996; WHO, 2001). From this point of view, the message all those micro-societies named “Concept Houses” passed through their paradigm was definitely radical compared to all the other de-contextualized practices used at the time: any attempt for personal change and rehabilitation requires an environment that is friendly to human beings, and responds not only to their economic but also to their psycho-emotional needs. A social change in the direction of a re-humanization of social conditions is necessary, because it ensures a steady progress towards personal change and growth. This idea was what gave a political dimension to the concept of therapy, since the fulfillment of the conditions and requirements for a better social environment depends on our political choices. Therefore, as Synanon has proven, if our personal progress and our life choices depend to a great extend on the social
environment in which we are living, and if that environment is related to our political choices, then Synanon’s venture is not only a therapeutic suggestion for the treatment of addiction, but also a political suggestion/answer to the deadlocks of contemporary society.

5. Synanon’s redefinition of the meaning of therapy and its political message

As already mentioned, for the first time in the history of therapeutic attempts, the Synanon commune introduced social and political parameters into the treatment of drug dependence, using two different ways: firstly, it attributed addiction mainly to the immoral, hypocritical and unfair society. Secondly, it created a micro-society of its own on the other side of the real one (that contrasted prevalent societal models). Prior to this, in 1935, AA had brought an existential dimension to addiction therapy. In fact, Synanon led this attempt even further, by creating a communal environment that responded directly to the existential human needs. Up to the emergence of AA and Synanon, all the professional approaches limited the idea of therapy to its narrow, psychological version, which focuses on the observation and understanding of individual psychological functions, thus overlooking the dialectics of human problems with the socio-political setting in which they develop (Albee, 1998; May, 1960; Prilleltensky, 1989; Prilleltensky and Fox, 1997).

Contrary to the above, Synanon’s broader approach understood addiction as a product of the dynamic interaction between personal, social and political parameters. The conviction that society was sick, could not be used as an alibi for sick behaviour, especially if this behaviour turned against human life. Conversely, an unfair, immoral and passive society, when it does not consider its own need to change and improve, is not entitled to hope for its people to change, especially when it tries to suppress
violently any undesirable behaviour. Based on this philosophy, Unlike the prevalent disease model, Synanon never confined its approach to the narrow relationship between the pharmaceutical action of a substance and a human being. On the contrary, by interpreting addiction as an interactive product between a personal impairment (which makes human nature vulnerable) and an unfavourable environmental condition, Synanon focused both on personal development and the creation of a supportive environment, which would reinforce the members’ personal change and mental sanity.

In order to create this desired environment, Synanon overturned the dominant social “values” and perceptions right up to 1975 (when its deterioration started). Whilst money held an important role in society in general, it had absolutely no value in the Synanon commune. If lying, hypocrisy and dishonesty ruled the outside world, absolute honesty and decency prevailed in Synanon. By applying these radical ideas into every dimension of its internal social life, Synanon realized a utopian community. It was not the first time in history that there has been such a community. But Synanon was the first to give such palpable proof that a utopia can offer answers to the contemporary human impasse. This realization became – and is even today – a source of inspiration for the romantics of this world, since it lives up to their dreams of a more humane society. This explains why Synanon communes had members who were not addicted to drugs, but were addicted to a sick way of living caused by a society that had been thrown off balance by the effects of the free market.

In spite of all these, Synanon’s contribution to the field of addiction is not only due to its revolutionary ideas, but mostly due to their tenability and successful application. Regardless of its radical ideas, Synanon was the first to successfully apply a theory in the history of addiction. Up to then, the prevailing disease theories
and concepts, as well as the rest of the biological, behavioural and psychoanalytic approaches, were repeatedly failing in their practices (Kooyma, 1993; Yablonsky, 1994).

Above all, Synanon bequeathed us a clear political message: a society or a community of people, which seeks to cure and prevent mental illness, has to move continually towards social justice, democracy and equality. This message sent by Synanon in the beginning of the 1960s, was confirmed by more recent studies. Wilkinson (1996), Alexander (2001), Navaro (2002) and Wilkinson and Pickett (2009) have shown that societies with financial inequalities and evident social injustice have a lower social cohesion and face considerably more drug/alcohol abuse and criminality problems, compared with those with a high level of social justice. Both these studies’ findings and Synanon’s experience answer to those who de-contextualize psychosocial problems from the sociopolitical environment in which they are born, and to those who consider therapy as a neutral, non-political activity. At the same time, however, they question the rightness of the choices that today’s TCs movement makes.

6. Synanon and the addiction treatment professionals

The extreme criticism of Dederich’s model by many mental health professionals, and their inability to offer a real therapeutic scheme for the drug addict for nearly a century are due to their tendency to approach and interpret everything through their narrow – in comparison with the richness of real life – academic qualifications. Unfortunately, these qualifications proved entirely useless in the case of drug addiction.

By the beginning of the American Civil War (1861–1865), the US was facing,
indeed, major problems regarding substance abuse (including, initially, opiates, cocaine and alcohol and, later, barbiturates). After the Second World War and the rise of consumer society this problem was exacerbated and its consequences became gradually uncontrollable. Society is shocked, and the scientific community, which has managed to eliminate all the great epidemics, seems now unable to fight this problem (Casriel, 1963; De Leon, 2004; Kooyman, 1993; White & Kurtz, 2008; Yablonsky, 1994). This is the reason why Synanon’s success really surprised and posed a series of questions to mental health professionals. Many well-known, as well as unknown, scientists from all over the world were constantly visiting Synanon communes to study this phenomenon. By studying the internal life and the special characteristics of Synanon’s model (such as the devotion shown to the values of fairness, social equality, community, solidarity, undertaking personal responsibility and making deep human relationships, as well as the frequent philosophical seminars), one would come to the conclusion that all these values created an atmosphere of moral and spiritual uplift, and provided its members with a meaning in life.

It is these ‘eccentricities’ which Synanon respectfully served with reverence, and which cannot be found in any of the professional therapeutic proposals that explain the commune’s ability not only to change people’s behaviour, but also to transform mentally disturbed individuals with long criminal records into fulfilled human beings. Consequently, the total lack of all the above-mentioned characteristics can explain the traditional mental health services’ failure in treating addiction, and the society’s failure in preventing psychosocial problems.

Taking into account the above, Synanon’s experience served – and still does – as a challenge for both society and scientists in the field of mental health: in order to create effective treatment proposals, they have to broaden the idea of therapy towards
a more holistic approach, by introducing social, ideological and moral parameters into it. These new elements, however, will lead to new questions and challenges: what characteristics should a therapist possess in order to be responsive to therapy in the broader sense of the word? Should it be someone with social and existential concerns, who also has a decent, meaningful and thoughtful life stance? If this is true, is cultivating these qualities in health care professionals a matter of good education planning, or are these characteristics the result of personal choice and desire for self-development, where professional certified education plays a secondary role? Rogers (1980, p.244-245) gave his own answer to the latter:

“The second drawback I state sorrowfully: there are as many certified charlatans and exploiters of people as there are uncertified. If you had a good friend badly in need of therapeutic help, and I gave you the name of a therapist that was a Diplomate in Clinical Psychology, with no other information, would you send your friend to him? Of course not. You would want to know what he is like as a person and as a therapist, recognizing that there are many with diplomas on their walls who are not fit to do therapy, lead a group, or help a marriage. Certification is not equivalent to competence.”
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FOOTNOTES

i Apart from the bibliography noted, what also contributed to the formation of the author’s ideas and convictions was the personal conversations he had had with L. Yablonsky, D. Deich, M. Kooyman, U. Osterchues and J. Corelli.

ii The author referred to this earlier, suggesting the development of a third generation of TCs, which while it would maintain the social elements of the TCs’ founding philosophy, it would be free from all those negative factors which lead to power abuse and, which give credit to all those who never liked the ideological and social characteristics that the first hierarchical TCs brought into addiction treatment. The author also suggested we should view this as an alternative to the emerging threat of the total integration of TCs for addicts in the dominant policy of management. (Zafiridis, 1990).

iii In this phase of the transaction, perhaps the application of an increasing number of religious practices would favour the protection and the control of the organization, since, in the new reality that those new choices had formed, the ideological differences with the rest of the society had actually been wiped out.

iv Given the fact that being passive and not taking one’s own responsibility is a causal factor of addiction, that overturning was absolutely necessary, because it made possible the revocation of one of the most fundamental contradictions of the traditional, professional approaches of addiction. These approaches, which are influenced by the psychiatric treatment of psychotic patients, tend to treat addicts like incompetent, irresponsible beings, reinforcing their tendency to avoid taking responsibility of their lives.

v This idea was afterwards exploited by the big corporations which aimed
exclusively at an increase of productivity.

Synanon covered every member’s real livelihood needs, regardless of his/her education, specialization, or position in the hierarchy, whereas each member contributed to the commune according to his/her abilities and potentials.

The same values were adopted by the Humanistic Psychology movement, as a basic requirement for the creation of a psychotherapeutic relationship and for the clients' change. The difference was that only a few (Fromm, 1955; Reich, 1948; May, 1960; late Rogers, 1980) underlined the importance of social change, which would ensure the conditions needed for a personal growth. Later on, the Critical Psychology movement (Prilleltensky & Fox, 1997) fully adopted the idea of social and political change as a prerequisite for facilitating mental health.