Claire D. Clark. *The Recovery Revolution: The Battle over Addiction Treatment in the United States.* New York: Columbia University Press, 2017. xvi + 318 pp. Ill. $35.00 (978-0-231-17638-5).

Addiction treatment has always been a controversial matter. Back in the nineteenth century there was debate about whether this was a moral or a medical matter. Then there was the question of the relationship to the criminal justice system. And what should the goal of treatment be—reduction of harm or abstinence and moral reformation? Who should pay for treatment and where should it be located? These dimensions have concerned society for decades and vary across different national cultures as well.

Claire D. Clark’s *The Recovery Revolution* deals with addiction treatment in the United States from the 1960s to the present. Her focus is on therapeutic communities (TCs), organizations that offered residential rehabilitation services in the community. They had their origin in a democratic British model developed by psychiatrists like Maxwell Jones after the Second World War. This had some impact in U.S. prisons, but the model that flourished in the United States was different. It was exemplified by Synanon (derived from Sin Anonymous), established by Chuck Dederich in California in 1958. His confrontational methods were hierarchical, inspired by the AA (Alcoholics Anonymous) peer-led therapeutic approach. Dederich radicalized AA, which he saw as too soft for the hardened criminalized heroin addicts who needed not only to drop their drug use but to confront the character defects that had caused it in the first place. Synanon involved intense group therapy sessions—again a model that had been developed but in a different way in the U.K. mental health system for alcohol treatment .

Media exposure was central to the expansion of TCs. Dederich wanted Synanon to become “as well-known as Coca-Cola” (p. 77). Magazines and television popularized tag lines like “hang tough,” which crossed over from rehab subcultures to the political lexicon. *Life* magazine ran a feature on the organization in 1962. The later history of the organization as a self-declared social movement and as a corporatist new religion or “kooky cult” in the 1970s and 1980s came to symbolize the excesses of spiritual exploration and alternative living in the 1960s and 1970s. For Clark, the organization’s importance lies also in the second-generation TCs it inspired, which shared in the expansion of funding for treatment that began in the late 1960s during Richard Nixon’s presidency. Daytop (Drug Addicts Yield to Persuasion), Phoenix House, Odyssey House, and others developed multiple facilities.

TCs did not offer the only approach. The publication of a 1965 paper by Vincent Dole and Marie Nyswander in *JAMA* (*Journal of the American Medical Association*) betokened the rise of another treatment that came to have international influence. Dole and Nyswander viewed the craving of addiction not as the outcome of a personality defect but rather as a biological condition that could be treated with pharmaceuticals. Their research led to the reversal of the long-standing U.S. ban on maintenance treatment for opiate addiction. Nixon set up the Special Action Office for Drug Abuse Prevention (SAODAP), headed by psychiatrist Jerry Jaffe, whose reputation had been made running the IDAP program in Illinois that tested multimodal addiction treatment. In 1974, NIDA (National Institute on Drug Abuse) was set up under Robert Dupont, who had made his name with an expanding and successful methadone program in Washington, D.C. It incorporated most of the other research funding and research bodies.

Clark explores the changing fate of TCs against this background of changes in U.S. drug policy and treatment from the 1970s up to the Obama administration, from treatment to punishment and back again. TCs proved adaptable within these shifts, and their advocates reframed them as a peer-based treatment “method” rather than as residential treatment. They adapted to the rise of the “NIDA brain disease paradigm” in the late 1990s and to the rise of “recovery-oriented systems of care” under Bush and Obama.

Clark’s book is a valuable guide to these developments , although its detail sometimes make it difficult to discern the overall forest from the trees. The exchange of ideas between the United States and the United Kingdom is one strand that could have been developed—Phoenix was an important model that made the Atlantic crossing.1 And the idea of “recovery” itself, which has recently been much debated in the United Kingdom, as a new alternative to harm reduction, is never really dissected. It seems to have animated the whole U.S. drug treatment system as well as this book and its title.

Virginia Berridge

London School of Hygiene and Tropical Medicine, University of London.

<NOTE>

1. Alex Mold and Virginia Berridge, *Voluntary Action and Illegal Drugs: Health and Society in Britain since the 1960s* (Basingstoke: Palgrave Macmillan 2010).