

## **A DAY IS COMING: Visions of a New Recovery Advocacy Movement**

(Presented at Recovery Communities United's Recovery Month Celebration Dinner, September 14, 2001, Willowbrook, Illinois.)

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It is an honor to be with you tonight and to be asked to share some observations with you about grassroots recovery advocacy organizations and the larger recovery advocacy movement in America. I have had the privilege of working with many of these new grassroots organizations, and I will do my best to adequately convey to you something of their work and their passion. If you would have traveled the country these past few years, you could have witnessed recovering people and their families and friends of recovery once again organizing to change the way this country views addiction and the potential for recovery. You could have witnessed recovery celebration events with ever growing numbers. You could have been part of a 3,800 mile march from California to Washington D.C. to celebrate the growing "wellbriety" movement in Native American communities across the country. You could have witnessed coalitions of African American ministries pledging the combined resources of their churches to launch addiction recovery ministries. You would have seen new roles called "recovery coaches" and "recovery support specialists" added to many treatment programs. You would also have seen large numbers of recovering people and their families attended public policy meetings and walking through the halls of state capitals. It is indeed an exciting time in the recovery community in America.

### **There Was a Day**

I want to begin my remarks by talking about our past. There is much we can learn by sitting at history's feet. Comedian Lilly Tomlin once observed that, if we listened, maybe history wouldn't have to keep repeating itself. I have come to recognize the profound wisdom in her words.

There was a day in the late 19<sup>th</sup> century when an elaborate network of recovery support groups and addiction treatment institutions dotted the American landscape. There were Native American recovery circles, the Washingtonians, the fraternal temperance societies, and the reform clubs. There were recovery-oriented inebriate homes, medically-oriented inebriate asylums, for-profit addiction cure institutes, and religiously-oriented inebriate colonies. In that time, physicians in the American Association for the Cure of Inebriety proclaimed to all the world that addiction was a disease that could be either inherited or acquired and that this disease was one from which people could fully recover. On that day, recovery activists, alone and in organized groups, offered themselves as living proof that recovery from addiction was possible.

That day vanished in the opening years of the twentieth century, drowned in a wave of

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cultural pessimism that closed addiction treatment institutions and sent recovery groups into hiding. The demise of America's first era of institutional treatment and recovery support groups is a stark reminder that we can take nothing that exists today for granted.

As America's 19<sup>th</sup> century institutions and support groups collapsed, a new sunless day emerged. That day, less than a hundred years ago, witnessed addicted people locked away for years in rural penal colonies. Americans, believing that alcoholics and addicts were a "bad seed" that threatened the future of the society and the human race, passed laws providing for their mandatory sterilization. That was a time when people who had yet to achieve recovery filled the "cells" of "foul wards" in large city hospitals, and they were the lucky ones, as most hospitals refused their admission. That was a day when alcoholics and addicts spent their most despairing hours in city drunk tanks. That was a day when those not yet in recovery died in the streets and were swept up like discarded refuse. That was a day when alcoholics and addicts languished in the snake pits of aging state psychiatric hospitals. That was a day when alcoholics and addicts were subjected to brain surgery and shock therapies and every manner of drug insult—all thrust upon them in the name of help. That was a day when family members died a thousand emotional deaths in their desperate, unrelenting search for help for an addicted spouse, parent, sibling or child. Those days of professional condescension and public contempt were not so long ago.

The remnants of those dark days were present in the earliest years of my own entrance into the worlds of addiction treatment and recovery. In the 1960s, I witnessed alcoholics and addicts languishing in the most cold and callous of institutions. I have no words to convey the feel or smell of such places, places that conveyed in a thousand ways that you were not human, places that sucked the hope out of all condemned to live in them. I have vivid recollections of local community hospitals refusing to admit alcoholics and addicts for treatment of acute trauma: such people were perceived as not morally worthy to fill beds reserved for those who were "really sick." Working as an outreach and crisis worker, I have nightmarish recollections of the bodies of the addicted hanging from torn sheets in jail cells, and my own desperate attempts to find the words to communicate with families who had long feared just such a call or visit.

The invasive treatments—the shock therapies, the drug insults, the prolonged sequestration—are not ancient tales. I recently interviewed a woman who was hospitalized for acute alcohol poisoning in 1971. She and her family were given two treatment choices: a one year commitment in a state psychiatric hospital or brain surgery—a lobotomy—that they were told would remove her craving for alcohol. The woman herself thought the surgery a better alternative than being locked up for a year. But a chance encounter between her father and a man in recovery brought a woman from Alcoholics Anonymous to her bedside and the beginning of what has now been three decades of sanity, sobriety and service. Her story tells us that we are little more than a generation away from these infamous days. Her story also hints at what happened to open the doors of recovery.

## **Those Days Ended**

Those dark days passed not by accident but because small handfuls of people in communities across the country said, "No More!" and spent their lifetimes destroying drunk tanks and drunk jokes. Those days ended because a desperate stock analyst reached out to a desperate physician and started a fellowship of recovering alcoholics whose influence embraced the world. Those days disappeared because of the vision of Marty Mann, who dared to dream in 1944 that she could change the way a nation viewed alcoholism and the alcoholic. Those days

vanished because a senator, in gratitude for his own recovery, challenged a country to create local alcoholism education and treatment centers accessible to all of its citizens. The odds against success were enormous, but these remarkable human beings spent their lives building the world of addiction treatment and recovery that has touched the lives of many of us in this room. The bleakest days for the addicted in America passed because men and women looked beyond their own recoveries to advocate for the needs of others. The foul wards and drunk tanks and brain surgeries gave way to new treatment and recovery resources because real men and women made these changes happen. Consider for a moment what their lives rendered.

Imagine the degree of fulfillment that Dr. Robert Smith and Bill Wilson experienced at the sunset of their own lives as they reflected on the fruits of their work. Imagine what it must have been like for Sister Ignatia, who after working with Dr. Bob detoxifying early AA members, was later asked to address the 25<sup>th</sup> anniversary convention of AA in 1960. Imagine what this frail, humble woman must have felt as she stood and looked out at 17,000 sober and grateful alcoholics standing before her. Imagine what Marty Mann, after decades of barely acknowledged effort, must have experienced seeing the rise of local alcoholism treatment programs across the country. Imagine the import of such fulfillment in a woman who before her own recovery had repeatedly tried to kill herself. Imagine the fullness of lives that profoundly touched the lives of so many people.

The days of shame turned into days of hope because hundreds of unnamed men and women devoted their lives to changing the way a country looked at a disorder and those who suffered from it. The fruits of their work were indeed remarkable. Hundreds of thousands of people rose from the dead to live full lives because of the resources these people created. The national network of prevention and treatment programs are all part of their legacy as are the diversion programs in the criminal justice system and the early intervention programs in the workplaces and schools. By the early 1980s, it looked as if the dreams of these pioneers would be fully realized, but other forces were lurking in the background.

## **A Shameful Regression**

Today, the world they created is being dismantled, and their advances are being threatened. Three ominous changes threaten this progress.

First, America is again restigmatizing those addicted to alcohol and other drugs. The positive images of long-term recovery (First Ladies) are being replaced by what the public perceives as spoiled celebrities repeatedly checking in to “rehab” following their latest indiscretion. Treatment and recovery are degraded through such images. During the late 1980s and 1990s, pessimism replaced hope for recovery and treatment was portrayed not as a place where people initiated recovery but as a place where the irresponsible escaped the consequences of bad behavior. The portrayal of addiction as a medical disorder suffered by sons and daughters, mothers and fathers, and brothers and sisters was replaced by the worst racial and class stereotypes that consistently linked addiction with crime, violence, and insanity. Alcoholics and addicts became not people deserving of compassion and help, but people to be feared and who were deserving of punishment. It is all a matter of selective cultural attention. Thousands of celebrities will celebrate recovery anniversaries today and one will be arrested for possession of heroin. Which story do you think will fill the television screens this evening?

Second, after working for decades to place alcohol and other drug problems in the medical and public health arenas, we are now removing them from these very categories.

Health care coverage to pay for addiction treatment continues to erode. Many, if not most, of the hospital treatment units have closed. The management of addiction is moving to non-medical settings and toward a focus on control of the addict and addiction-related costs rather than personal recovery.

Third, alcoholics and addicts are filling our courts, jails and prisons in unprecedented numbers. There are now more than one and one half million drug-related arrests per year in the U.S., up more than 1 million since 1980.<sup>2</sup> The number of drug offenders in state correctional facilities has risen from 38,900 in 1985 to more than 227,000<sup>3</sup> in 1997 and drug offenders in Federal prisons have risen from 9,482 in 1985 to more than 55,000 in 1996.<sup>4</sup> I would be remiss if I did not talk about the racial disparity buried within these numbers. African Americans constitute only 15% of illicit drug consumers, but they make up 37% of those arrested for drug violations, 42% of drug offenders in federal prison and 60% of felony drug offenders in state prisons.<sup>5</sup> A recently released Human Rights Watch report<sup>6</sup> revealed that in my own state of Illinois, a young African American male is more than 50 times more likely to go to jail for a drug offense than is his Caucasian counterpart arrested for the same offense. The rise in addiction-related stigma and the transfer of alcoholics and addicts from treatment centers to correctional centers are deeply entwined with issues of gender, social class and race. We can't expose the former without confronting the latter.

## **A Day is Coming**

So where does that leave us? What should recovering people, impacted families, and the friends of recovery do about this bleak situation? What should all people of good will concerned about this problem do? They should do that which is so uniquely American: Organize and change it! And that is precisely what is happening.

We are reaching a critical milestone in the history of recovery in America. We are approaching a crossroads that will dictate the fate of hundreds of thousands of individuals and families and thousands of communities. Recovering people know more than anyone the deep truth in the adage that it is darkest just before the dawn. That darkened horizon is clearly evident across America today, but there IS a dawn arising. Emerging from that dawn are not government agencies or treatment professionals but a new generation of wounded healers. Recovering people and their families and friends are once again on the move—once again coming together

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<sup>2</sup>Department of Justice, Office of Applied Studies: 1.6 million drug-related arrests in 1998, up more than 1 million arrests per year since 1980.

<sup>3</sup>In 1997, Department of Justice, Office of Applied Studies.

<sup>4</sup>In 1996, Department of Justice, Office of Applied Studies.

<sup>5</sup>NIDA Household Survey on Drug Abuse, 1998; US Department of Justice, Bureau of Justice Statistics, Sourcebook of Criminal Justice Statistics, 1998. Also <http://www.csdp.org/factbook/racepris.htm>

<sup>6</sup>Key Recommendations from Punishment and Prejudice: Racial Disparities in the War on Drugs. Washington, D.C. Human Rights Watch, 2000.

not just for mutual support but to widen the doors of entry into recovery through education and advocacy.

A New Recovery Advocacy Movement is being born in this country. From Wall Street to Bourbon Street, from South Carolina to South Central, from Indian Country to the barrio to the wealthiest suburb, people are coming together to challenge the restigmatization, demedicalization and recriminalization of addiction in America. They are coming together to publicly reaffirm the hope for recovery from addiction.

In 1976, 52 prominent Americans publically proclaimed their recovery from alcoholism in a landmark event sponsored by the National Council on Alcoholism called Operation Understanding. A day is coming when that number will swell to 50,000 and then to 500,000—all testifying to the transforming power of recovery. A day is coming when we will gather at state capitals and in our nation’s capital and you will see recovering people in every direction as far as the eyes can see—all offering themselves as LIVING PROOF that recovery is not just a possibility but a living reality. On that day, young people with a month of hard-earned sobriety will march beside men and women with 50 years of sobriety. On that day, families will walk to honor their survival as a family and to celebrate their own personal recoveries. On that day, those who have lost a loved one to this disease will walk to save others. On that day, AA and NA members will walk beside SOS and WFS members. Those in supported recovery will walk beside those in solo recovery. Those from therapeutic communities will walk beside those in methadone-assisted recovery. On that day, we will set aside our differences and march arm-in-arm as a multi-hued network of local communities of recovery.

In 1893 an addiction mutual aid society organized itself under a banner that read: “The Law Must Recognize a Leading Fact: Medical Not Penal Treatment Reforms the Drunkard.” A day is coming more than a century later when we will protest outside jails and prisons to proclaim that same message. A day is coming when addicted people who fill those prisons will organize their own recovery advocacy organizations and link with us. In embracing recovery, they will go on strike--withdrawing the bodies and souls that feed the economies of these institutions.

A day is coming when recovery from addiction will be viewed not as a curse to be masked and hidden, but as a cause for celebration and a gift to be shared with the world. A day is coming when for one moment in the history of this country, recovering people will stand together and offer themselves as living proof of the fulfilled promises of recovery. To those around us, we will offer our gratitude for your forbearance and forgiveness. To those still suffering, we will proclaim:

You represent our past just as we represent a future that could be yours. You have been part of the problem; add your voice to ours and become part of the solution.

### **Before That Day**

We have work to do before that day can arrive. Movements that have created the most dramatic and enduring social change often began with an alteration of personal consciousness. The message from these movements is that we must change ourselves before we can change the world. We cannot confront stigma in the outside world until we discover how stigma works inside ourselves and our relationships with the world. The internal consequences of such stigma must be excised before one experiences the worthiness and the power to confront its external source. We must excise that stigma so that we can move beyond our own healing to find our

indignation, our outrage, and our sorrow that people who could be recovering are instead dying. We have to move beyond our own serenity and retrieve the fading memories of our own days of pain and desperation. Before that day, we need leaders who will jar us from our complacency and challenge us to hear the cry of the still-suffering. Stigma is real, but we need to confront the fact that our own silence has contributed to that stigma. Listen to the words of Senator Harold Hughes who before he died proclaimed:

*By hiding our recovery we have sustained the most harmful myth about addiction disease—that it is hopeless. And without the example of recovering people it is easy for the public to continue to think that victims of addiction disease are moral degenerates—that those who recover are the morally enlightened exceptions.... We are the lucky ones, the ones who got well. And it is our responsibility to change the terms of the debate for the sake of those who still suffer.*

How can addicted people experience hope when the legions of recovering people in this culture are not seen or heard? Where is the proof that permanent recovery from addiction is possible? We need a vanguard of recovering people to send an unequivocal message to those still drug-enslaved that they can be free. We need a vanguard of to commit themselves to become LIVING PROOF of that proposition.

Before that day, we will need to find ways to link those from all kinds of recovery backgrounds into a community of recovery. This is not an AA or Al-Anon movement or an NA movement or a WFS movement or an addiction ministry movement. It is a RECOVERY movement. The failure of various recovery groups and individuals in solo recovery to see themselves in terms of “we” is the most significant obstacle to fully realizing the potential of the New Recovery Advocacy Movement. We must get to know each other not as AA or Al-Anon members or NA members or SOS members, but as members of a recovery nation, each of whom contributes to its diversity and vitality. It is only by constructing our own identity as people in recovery and transcending the categories that separate us that we can transform our personal experiences into a new recovery advocacy movement. It is time we celebrated this coat of many colors that the recovery community has become. Our goal must not be to speak with one voice, but to share a recovery identity out of which we will speak with thousands of voices that achieve harmony on one issue: the potential for transforming and enduring recovery from addiction.

Before that day comes, we will need to find the systemic roots of stigma. We will need to confront the fact that addicted people have become the raw materials that run whole professional and community economies. Some of these institutions operate, not to help the addict, but to protect and extend their own institutional influence. Stigma provides the ideological justification for the perpetuation of these institutional economies. We need to either transform these institutions (shift them to a focus on care and recovery rather than control and profit) or advocate their closure. Confronting these systemic forces will be more about power and influence than about changing attitudes.

We must also find the personal roots of stigma. There are whole professions whose members share an extremely pessimistic view of recovery because they repeatedly see only those who fail to recovery. The success stories are not visible in their daily professional lives. We need to re-introduce ourselves to the police who arrested us, the attorney’s who prosecuted and defended us, the judges who sentenced us, the probation officers who monitored us, the physicians and nurses who cared for us, the teachers and social workers who cared for the

problems of our children, the job supervisors who threatened to fire us. We need to find a way to express our gratitude at their efforts to help us, no matter how ill-timed, ill-informed and inept such interventions may have been. We need to find a way to tell all of them that today we are sane and sober and that we have taken responsibility for our own lives. We need to tell them to be hopeful, that RECOVERY LIVES! Americans see the devastating consequences of addiction every day; it is time they witnessed close up the regenerative power of recovery.

It is not enough to come together and advocate for our own needs—to focus on the needs of those already in different stages of recovery. This movement must keep its eyes on ways the doorway of entry to recovery can be widened for those still suffering. And perhaps in the end it is not even enough to widen this door. Perhaps there is a larger agenda lurking in the background—the agenda of creating a better community and a better world—to take some of what has been learned in recovery and infuse that into the civilian community. To America, we say:

*You can help save us, but we can also help save you. We are the ones who courted, yet cheated, the grave. In our darkest hours, we discovered some things of value that through us you can rediscover.*

Some of you don't know it yet, but you were born to play a role in this movement. To those with long-tenured recovery, we need your wisdom, your stability, your hard-earned serenity. To those new in recovery, we need the freshness of your pain and the fervor of your passion. To those family members who have lived through the devastation of addiction and the demands of recovery, we need your love and patience and invite you as equal partners into the leadership of this movement. To the children who have lived in the shadow of parental addiction, we need your courage to break the intergenerational transmission of these problems. To those who have lost someone to addiction, we call on you to give that lost life meaning by wrapping it within your own story and passing it on to others. To professional helpers and other friends of recovery, we invite your involvement and challenge you to help us create recovery-oriented systems of care within local communities across the country.

I know some of you will see yourselves as unfit for this calling. You will identify an endless list of frailties and inadequacies that disqualify you from serving this movement. But if there is anything that history tells us, including the history of recovery, it is that the most perfect message can be delivered by the most imperfect of messengers. We have freed ourselves; it is time we freed our neighbors and our communities. There is much that we have yet to learn, but as a people we do know something about deliverance and liberation. A day is coming when we will help free America with the truth of our stories.

When will that day arrive? The dawn of that day is here but we must seize it! I invite you and challenge you to become part of this new recovery advocacy movement by supporting local recovery advocacy organizations with your time, your talents and your money. I invite you to find opportunities to tell your stories to those who know little about addiction or recovery. And I invite you to become an activist in advocating pro-recovery policies in every venue of influence you can reach. As Senator Hughes suggested, our own salvation as individuals and families bestows upon us a debt of obligation and an opportunity for service. When we step forward to pay this debt and accept this mantle of service, that new day will have arrived.