Maxwell Jones, Harold Bridger, Dennie Briggs and the 'two' therapeutic communities: an interview with Juan Parés y Plans (Corelli) about the development of the Centro Italiano di Solidarietà (CeIS) di Roma.

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ABSTRACT: There has always been a certain distinction between European democratic milieuoriented psychoanalytical therapeutic communities (TCs) and American hierarchical drug-free concept TCs. However, several authors, such as Maxwell Jones, have tried to build bridges between the 'two' types of TC. During the last years of his life (1986 – 1990), Maxwell Jones worked as a consultant for the Centro Italiano di Solidarietà (CeIS) in Rome, which was developed as a concept TC for substance abusers. Also Harold Bridger who took part in the Second Northfield Experiment at Hollymoor Hospital (1944) and Dennie Briggs, who developed some pioneering therapeutic communities in prison settings (initiated in the 1950s), have had an influence on the development of Centro Italiano di Solidarietà. This article presents the most striking excerpts of an interview with Juan Parés y Plans (Corelli), the vice-president of CeIS, focusing on how a democratic TC 'met' with a hierarchical one. The authors refer to the importance of the meeting between the two communities for the further evolution of the European concept-based TC (see Broekaert, et al., 1999).

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Introduction

The term therapeutic community (TC) is commonly used to define different types of treatment modalities (Kennard, 1998). Generally, two major traditions are identified: the (European) democratic milieu-oriented psychoanalytical TC, which was pioneered by Maxwell Jones, amongst others, in the beginning of the 1940s, and the American hierarchical drug-free concept TC for substance abusers (started in the late 1950s). Over the years, there has been an ongoing debate about whether these approaches operate within the context of comparable principles or rather have solely been coined with the same name.

It is the aim of this paper to illustrate how both traditions have 'met' each other in the past and how these encounters have made the rapprochement of the two therapeutic communities towards each other possible. The development of a concept TC for substance abusers (Centro Italiano di Solidarietà in Rome) will be highlighted, illustrating the undeniable influence of three well-known democratic TC-experts: Maxwell Jones, Harold Bridger and Dennie Briggs¹ on the development of concept-based TCs in Europe.

Rationale for the paper

Starting in 1968, a fascinating development of a therapeutic community for substance abusers has taken place at the Centro Italiano di Solidarietà (CeIS) in Rome, Italy. On the initiative of Don Mario Picchi (President) and Juan Parés y Plans (Corelli) (Vice-President) several prominent representatives with a diverse background but with a genuine interest and expertise in therapeutic community development invested their knowledge in 'Progetto per l'Uomo' ('Project Man'), as the Italian model has been labeled.

More specificly, Maxwell Jones, Harold Bridger and Dennie Briggs, who had already a lifelong experience in implementing democratic therapeutic communities, were attracted as consultants for the initiative in Rome during the 1980s. Besides them, also several proponents of the concept-based therapeutic community for substance abusers acted as consultants. Donald and Martha Ottenberg² were amongst them.

Even if this meeting of influences by both therapeutic communities on the basis of the complex daily reality in CeIS was not flawless and cannot be described 'sine ira et studio', it merits more attention. As only a few articles on this matter (to which the authors refer in this paper) are public, it was decided to address the issue from an interview with one of the keynote representatives: Juan Parés y Plans (Corelli), the Vice-President of CeIS. The authors maintained regular contact with Dennie Briggs who was so kind to comment on the paper and Donald Ottenberg with whom the issue was discussed several times. Moreover, it was the privilege of one of the authors (Eric Broekaert³) to know Juan Parés y Plans personally for many years.

It is not the goal of the authors to be exhaustive on the topic, neither to be conclusive on the question of whether real integration of the approaches is possible. They solely aim to inspire further research on the matter.

The two therapeutic communities

A short historical overview as well as a definition and summary of the most important attributes of both therapeutic communities will be presented to clearly sketch the context of the article. For more extensive accounts on these issues, see Clarck (1977) & Kennard (1998) with regard to democratic TCs and Acampora and Stern, (1992), Bratter et al. (1985), Broekaert et al. (2000) & De Leon (2000) concerning concept TCs. Moreover, the development of concept-based TCs in Europe will be more thoroughly described, as this might be less known to the readership of this journal and because of its importance for the topic of this paper.

The 'democratic' Maxwell Jones-type TC

Clarck (1977, p. 554) described a democratic TC as 'a small face-to-face residential community using social analysis as its main tool.', characterized by social (Socratic) learning, shared decision-making by consensus and multiple leadership (Jones, 1968). The democratic TC originated during World War II and is most attributed to Maxwell Jones, who became in charge of the Mill Hill Effort Syndrome Unit in 1940, established for soldiers suffering from effort syndrome and traumata (Clarck, 1977; Murto, 1991). After working in the 'ex-prisoner-of-war unit' (Southern Hospital, Dartford) from 1945 until 1946, Jones starts developing the most well-known democratic therapeutic community at Henderson Hospital (which at that time was called Belmont Industrial Neurosis Unit), where he stayed until 1959. After working some years in the United States, acting as a consultant for several (innovative) therapeutic communities in different settings (such as prison), he returned to Scotland (Dingleton Hospital) and stayed there until 1969. During the last years of his life, he resided in the United States and Canada, where he became interested in open systems, social ecology, spiritualism and education (see also Broekaert et al., 2000). The historical background of this development

is commonly known and has been described extensively elsewhere (e.g. Jones, 1952 and 1968; Murto, 1991).

In the same years and also due to the outbreak of World War II, other innovative treatment programmes for soldiers suffering from shell-shock syndrome were established at the Hollymoor Hospital (Northfield), which became known as the 'Northfield Experiments' (Harrison and Clarcke, 1992). Harold Bridger was one of the leading figures of the so-called 'Northfield II', which took place from 1942 – 1948. There, he started to develop his ideas of 'the hospital-as-a-whole' and the 'social club', which proved to be key-concepts in the development of the democratic TC.

Besides these innovative social psychiatry experiments, several authors (Broekaert et al., 2001; Kennard, 1998; Rawlings and Yates, 2001) also clearly stress the importance of a long European tradition of therapeutic education and care for emotionally disturbed (maladjusted) children. Rawlings and Yates (2001, p. 14) state: 'Indeed, it is this work, focusing as it did upon therapeutic interventions with a resistant and antisocial group of young people, which offers the most compelling antecedent for the American therapeutic community model imported into Europe in the early 1970s'.

Jones' prime concepts were summarized by Rapoport (1960) as permissiveness, democracy, communalism and reality testing. These attributes became well-known and gradually found their way in to the therapeutic work in other settings and for different target groups. For example Dennie Briggs established some democratic therapeutic communities in secure settings. He was influenced by Harry Wilmer's pioneering work (running his ward as a therapeutic community) in the Naval Hospital in Oakland (U.S.A.) (Wilmer, 1958). On the initiative of Wilmer, Briggs visited Maxwell Jones in Belmont Hospital (1956) which provoked Briggs' later efforts to apply democratic TC principles in corrections (e.g. the Chino

prison in California, U.S.A.) (see Briggs, 1972 and 1991). Jones acted as a consultant for those programmes (Vandevelde et al., forthcoming).

The concept-based TC: definition, characteristics and development

A concept-based therapeutic community can be described as 'a drug-free environment in which people with addictive problems live together in an organized and structured way to promote change toward a drug-free life in the outside community' (Broekaert et al., 1998, p. 595). According to De Leon (1997), 'community as method' is the main characteristic, stressing the importance of the peer community in which everybody is considered the main agent of his or her own treatment process, while the other residents act as facilitators or mediators. Living and working together in a hierarchically structured way (i.e. each member has own well-defined responsibilities, reports to peers which have higher positions in the hierarchy of the community and can earn or lose privileges/positions in accordance to the way they behave), people act essentially as if they have no problems (i.e. they behave already as the person they would like to become). This creates tension, which is expressed within the clearly structured boundaries of the encounter group meeting. During the encounter group (the primary tool of the TC), people can disclose emotions, frustrations, and so forth by confronting the negative behaviour or attitudes of other residents. Broekaert et al. (forthcoming) state: 'Confrontation is mostly direct and takes place in 'the here and now' of a given situation. It leads to open emotional expression and acceptance of positive values through identification and role modeling.'

The American concept TC originated in Synanon (founded in 1958 by Chuch Dederich) and developed in the United States through several pioneering therapeutic communities such as Daytop Village (O'Brien, Casriel and Deitch, see for example Acampora and Stern, 1992; O'Brien and Henican, 1993; Casriel, 1963; Deitch and Zweben, 1980), Phoenix House (Ramirez, Anglin and Rozenthal, see De Leon, 1974) and Odessey House (Densen-Gerber, 1973). For various reasons, including the lifelong obligation of Synanon community membership, the concept-based TC, broke with Synanon and developed quite independently (see Broekaert, 1996 & Broekaert et al., 2000). For the purposes of this paper, it is interesting to sketch how the concept-based TC found his way into Europe during the 1970s. These communities were obviously inspired by their American predecessors (Broekaert et al., 1999), although cultural differences provoked an evolution towards an adaptation to European standards.

As concept-based therapeutic communities flourished during the 1960s in the United States, European professionals visited these programmes and started to develop TCs in their own countries (Kooyman, 2001). One of the first therapeutic communities for substance abusers in Europe was founded by Ian Christie, a psychiatrist, at the end of the 1960s. It was called Alpha House and was located in Portsmouth, U.K. Griffith Edwards established the Featherstone Lodge Project (FLP) in London some months later. This was directed by Denny Yuson, an American ex-addict and a graduate of Phoenix House (New York) (Broekaert and Slater, 2001; Kooyman, 2001). This clarifies a direct link between American and European concept TCs. Although Yuson stayed the director of FLP for a relatively short period (18 months), he remained influential during the further development of the drug-free TC in Europe. In the Netherlands, Martien Kooyman, the founder of the TC Emiliehoeve (1972) was influenced by Yuson, who introduced the method of encounter groups within the TC. It is important to notice that many of the European concept-based TCs started as a reaction against a failing Maxwell Jones approach, which was considered being too tolerant for the destructive 'character-disordered' residents, who misused democratic decision-making and led a laity life of pleasure and neglect of responsibilities. For example, the leading Dutch TC Emiliehoeve was initially based on the model of the democratic TC and worked according to the principles of Maxwell Jones, but this turned out to be counter-therapeutic (see e.g. Kooyman, 1993 and 1976). Under the influence of Yuson, the TC became more strictly structured and the introduction of the confrontational encounter group method is considered by Kooyman as the most important turning point for the well-being of the therapeutic community Emiliehoeve (Kooyman, 1976). At the same time, the ideas of Casriel, identifying substance abusers as people suffering with personality disorders, characterized by 'frozen' personalities were influential and had an impact on the therapeutic techniques used within the European TCs (Broekaert and Slater, 2001).

Throughout the 1970s, a similar evolution from Maxwell Jones-type TCs into more structured and hierarchical models could be observed in other European countries as well. In Sweden, Bremberg founded 'Vallmotorp', inspired by Jones' ideas and the theory on Transactional Analysis by Eric Berne (Berne, 1972). Vallmotorp was later influenced by Daytop. In Switzerland, Deissler (a physician which had had a advisory function within Synanon) assisted in developing Aebi Hus, influenced again by Jones' theory. In Belgium, the Sleutel started as an representative of anti-psychiatry and the Maxwell Jones-type TC but evolved gradually into a structured therapeutic community (Broekaert and Slater, 2001).

Further, Emiliehoeve had an impact on other Dutch and Belgian TCs (such as De Kiem, founded by Broekaert in 1976), but also played a very important role within the establishment of the first concept-based TC in Italy, founded by CeIS (Rome) in 1979 (cf. infra).

Different and yet not different

Although both types of TC undoubtedly differ substantially in some aspects, such as origin, historical development, target group and clients and used methods, they also share several common characteristics. Broekaert et al. (1999, p. 258) e.g. write: 'Jones' (1984, pp. 29–35) principle of 'social learning' is now considered one of the cornerstones of the drugfree TC'. Furthermore, other parallels are outlined in the interaction between the concepts in following dichotomies: democracy and hierarchy, self help and professionalism, psychoanalysis and behaviourism and concept and social learning. These findings lead some authors to consider the two therapeutic communities on converging pathways. Lees, Manning and Rawlings (1999) indicate five articles in which the author(s) discuss an integration (to some degree) of the two therapeutic communities. Both hierarchical (De Leon, 1983; Sugarman, 1984; Rubel et al, 1982) as well as democratic TC-experts (Jones, 1979 and 1984 a) are represented. Importantly, Maxwell Jones (as well as Harold Bridger and Dennie Briggs) actively tried to

build bridges between the democratic and the hierarchical TC. For example, by acting as consultants for Centro Italiano di Solidarietà, a concept TC for substance abusers and by lecturing at conferences in the field of substance abuse treatment. Later, the rapprochements between the two communities meant an important step towards the current evolution of the drug-free TC towards more professionalism, networking and family-oriented approach, encounter and dialogue groups and research (see Broekaert, et al., 1999).

Centro Italiano di Solidarietà and the two therapeutic communities

In this section we outline a series of interesting historical events which concern early attempts to discuss the similarities and differences between the two therapeutic communities. Due to the lack of published material, the major sources which have been used can be defined as 'grey' literature (i.c. the proceedings of the earliest World Conferences of Therapeutic Communities). There is a focus on the interesting role of CeIS within these events, in order to highlight the importance of its historical development.

1968

CeIS was founded by Don Mario Picchi in 1968 in Rome (Italy) (Parés y Plans (Corelli), 1984 and 1998; Briggs, 1993) in response to the question of how to better understand troubled youth. The resurrection and development of man and (Christian) humanity were identified as the main values of the Centre.

1976

Some years later (before CeIS developed a therapeutic community), Maxwell Jones attended the First World Conference of Therapeutic Communities (for substance abusers) in Norrköping (1976), where he presented a 'classic' lecture on the (democratic) therapeutic community. In the lecture 'Theory and practice in therapeutic communities' (Jones, 1976) Jones however did not discuss the relationship between the 'two' communities, democracitic and hierarchical. Don Mario Picchi (as a speaker) and Juan Corelli (as his companion) attended the conference, after which they visited various European Therapeutic Communities, such as 'Emiliehoeve' in the Netherlands and 'De Kiem' in Belgium (Picchi, 1994).

1977

However, during the Second World Conference of Therapeutic Communities in Montreal, the 'two' therapeutic communities (democractic and hierarchical) were highlighted by several speakers. Donald Ottenberg gave a lecture on 'The Bastard child of public health'. He reported on the discussions during the conference, saying 'The issue revolved around some of the differences of views and feelings expressed on the one hand by many of the Americans, representing "classic", "concept" therapeutic communities, and on the other by some of the Europeans from more eclectic, less rigidly controlled TCs. At times this difference was expressed as the "Concept TC" versus the Maxwell Jones type TC a shorthand way of stating the question that I found grossly inaccurate' (Ottenberg, 1977, p. 4). Martien Kooyman (1977, p. 30) spoke about concept TC workers in his lecture on 'The history of the therapeutic community movement in Europe'. He said, 'The democratic principles in a TC ,however, can themselves become anti- therapeutic when carried to excess. Patients will stay in a regressed state, when staff do not apply any pressure towards making them act responsibly'. Maria Teresa Terassi and Bruno Costa (Terassi and Costa, 1977, p. 53) reported on CeIS Roma, and situate it as 'un centre de documentation, information et animation, specialisé dans le domaine de la drogue [a centre of documentation, information and animation, specialised in the field of drugs]'.

Mario Picchi was one of the members in the panel of the 6th plenary session. He was also a member of the international organizing committee. Maxwell Jones was not present at this conference.

1978

At the Third World Conference of Therapeutic Communities in Rome, Donald Ottenberg gave a lecture on the 'TC in conflict'. He said, 'How about the use of various "learning experiences" such as the wearing of signs, "haircuts", and other reprimands ? Are these a denial of human dignity or a useful and necessary means of helping some one to acquire a

sense of dignity ?'. Maxwell Jones did not attend the conference. As the event took place in Rome, Juan Corelli was the co-coordinator of the conference.

CeIS opened its first concept-based drug free TC (based on community education), predominantly for young substance misusers. It was largely influenced by Daytop Village, not the least because a former resident, Tony Gelormino, acted as a consultant for CeIS. Due to the translation of the ideas of this American TC to the Italian context, quite substantial innovations were realised, e.g. the involvement of the social network as a possible resource (see e.g. van der Straeten, 1996).

1979

During the Fourth World Conference of Therapeutic Communities in New York, Ottenberg lectured on 'Education within the TC in America and Europe'. Zerca T. Moreno gave a demonstration on 'Psychodrama as a technique in the therapeutic community' (1979, p. 56). While Maxwell Jones did not attend the conference, he wrote an article on the two therapeutic communities, which was published in the American Journal Drug and Alcohol Abuse (Jones, 1979).

Again, Juan Corelli was a member of the coordinating committee of the conference. He invited Donald and Martha Ottenberg to come to Rome. In the mean time, the first therapeutic community 'San Carlo' was established. 'Progetto per l'Uomo' was from this point on gradually developed and signified the real mission of CeIS. It was not a method or a therapy, it was 'una scuola di vita' (a school of life) which drew attention to the human person (Picchi, 1994, p. 14). Corelli and Briggs (1989, p. 1-2) describe it as a philosophy in which mental, psychological and spiritual growth are important, stating 'The new approach draws its evidence from a wide range of fields – science to religion and arts – where there is a growing body of evidence that speaks of the unity of the human experience with all things. The search

for this unity – this wholeness may well be one of the forces 'positive' in itself, that brings a person to become addicted to chemicals'.

1980

At the Fifth World Conference of Therapeutic Communities in Noordwijkerhout, The Netherlands, Zerca T. Moreno gave a workshop on pychodrama. After a three year absence, Maxwell Jones gave a lecture on 'Therapeutic communities in perspective', in which he declared his profound appreciation for the work of George De Leon. He said, 'I find more similarities than differences in the two approaches and this applies particularly to Phoenix House in New York' (Jones, 1980, p. 135). He continued: 'The basic similarity is the establishment of a therapeutic culture ... both create a supportive world which for most clients has been lacking all their lives... (Jones, 1980, p. 146). As in previous years, Juan Corelli was a member of the international organizing committee of the conference.

1981

The 'Scuola di Formazione Casa del Sol' was opened by CeIS at Castel Gandolfo. From that point on, important scholars and practitioners as Maxwell Jones, Dennie Briggs, Harold Bridger and Martha & Don Ottenberg were invited as consultants on a regular basis.

1983

Donald and Martha Ottenberg started their collaboration with CeIS in 1983 – 1984 (after their retirement) which lasted until 1993 (Ottenberg, 2000). They acted as trainers and facilitators at the Basic Training Courses at Casa del Sole, and were the consultants of the senior staff.

In the beginning of 1984, Maxwell Jones published the article 'Why two therapeutic communities?' in the (American) Journal of Psychoactive Drugs. In this paper, Jones (1984 a, p. 26) describes the characteristics of the two therapeutic communities (democratic and hierarchical) and ends with the thought that both approaches could learn from each other: 'As a psychiatrist, this author has much to thank the programmatic TC movement for, not the least of which is their belief in the patient and in the social forces associated with the intensely dedicated families that they create. That they, themselves feel ready to learn from those skills that healing professionals have to offer can only increase overall knowledge and facilitate growth.'

In August, CeIS organised the First World Institute of (drug-free) Therapeutic Communities in Castel Gandolfo (Italy) (Ottenberg, 1984). At the Institute, Maxwell Jones and Harold Bridger, representing the democratic milieu-oriented TC, were invited as key-speakers. One might say that, during this event, a real break-through took place concerning the possible integration of the two therapeutic communities (democratic and hierarchical). Bridger prepared a paper, but after it was distributed to the audience, came to the conclusion that this document did not reflect exactly what he wanted to say and presented another lecture (Ottenberg, 1984). During the consequent Conference Jones did a presentation, entitled 'The two therapeutic communities – a review' (Jones, 1984 b). In this, Jones (1984 b, p. 29) describes the similarities and differences of the 'two' therapeutic communities, concluding: 'It may be that a more generic concept of TCs will emerge that integrates some of the characteristics of both models, and especially the concept of social learning'. One of the other speakers during the conference was Elisabeth Lukas, a pupil of Victor Frankl, and it is important to stress that his ideas have had a great influence on CeIS (Lukas, 1984).

In 1985, CeIS became a non-governmental representative to the United Nations and supported and designed substance abuse treatment and prevention programmes in Argentina, Bolivia, Colombia, Ecuador, Peru, Mauritius and Thailand (Corelli and Briggs, 1989, p. 9). In this way, 'Progetto Uomo' had an important impact on the development of the therapeutic community in Southern Europe and South-America (where it was called 'Proyecto Hombre') and influenced the further dissemination of the therapeutic community across the world.

1986

During the last years of his life (from 1986 till 1990), Maxwell Jones, as well as Harold Bridger and Dennie Briggs were invited by Juan Parés y Plans (Corelli), the vice-president of CeIS, to work as consultants for CeIS. The influences (and the concurring difficulties) of these (democratic TC-) experts on the organisation and development of the drug-free TC of CeIS can be considered as an outstanding example of how both TC-traditions 'met' at the development of several treatment services throughout Europe. After the death of Maxwell Jones in 1990, Dennie Briggs was expected to continue to be a consultant at CeIS. However, Juan Parés y Plans (Corelli) decided not to perpetuate the consultancy (cf. interview) with Briggs, who indicated his feeling of being disappointed about this 'discharge' (Briggs, 1993).

Methodology

The authors went to the administrative centre of CeIS in Rome⁴ (on May 31, 2001), for a meeting and interview with Juan Parés y Plans (Corelli). Beforehand, a document, explaining the main topic of the research, was sent (by email and fax) for preparation to Juan Parés y Plans (Corelli). It was deliberately decided not to forward the actual questions, in order to prevent any sort of bias. It was the aim of the authors to use a questionnaire to interview Juan

Parés y Plans (Corelli), but he proved to be so well prepared that the interview took place as a sort of monologue, in which all the questions appeared to be answered. The original questionnaire is kept at the Department of Orthopedagogics and included questions on the origins of CeIS, the specificity of 'Progetto per l'Uomo' and its influence, the democratic TC consultants of CeIS (such as Jones, Briggs, Bridger, ...), the position of CeIS towards the 'two' therapeutic communities and the existence of more (published and unpublished) material on the topic of this paper. No questions were asked about the current situation of CeIS, since it was not the aim of the paper to investigate the recent developments of the centre.

What follows is a slightly modified⁵ version of the transcription of the most interesting excerpts of the tape-recorded interview⁶. The interview concerned how the development of CeIS was influenced by the democratic therapeutic community movement in general and by Maxwell Jones in particular. The modified text of the most striking excerpts of the interview (as used in this article) was sent to Juan Parés y Plans (Corelli). At the same time, he was asked to add supplementary and/or correcting remarks.

Interview with Juan Parés y Plans

Juan Parés y Plans (Corelli): 'What I will say is, of course, influenced by my own point of view. It is – in many ways – my personal story.

When we decided to open a TC in 1978, we went to Daytop in the United States and asked its President, Mons. O'Brien for some of the staff members there to help us in establishing a therapeutic community (for substance abusers). I expected from the start that this would be done in a critical and constructive way because I always thought (and still think) that training supposes discussion. For me, transmitting knowledge is elaborating; it is not simply communicating information. This was especially true when you focused on knowledge about the TC, which, at that time, was actually very limited. So, certainly for me, discussion is the most important aspect of training.

About 6 months after we started cooperation with Daytop, I became a little disappointed with the whole training programme. I tried to encourage the staff members of CeIS to become more critical, to analyse more why they acted one way or another. So I felt not very comfortable about the TC programme in CeIS anymore, which led me to distance myself a while from its activities. At that time, I started to develop the international aspects of CeIS, which lasted until 1988. I have to say that although I was not directly responsible anymore for the programme, I did cut myself a space in the Training Institute. This gave me the opportunity to add issues to the training, that could facilitate a contrasting perspective, which was more humanistic than the Daytop-model was. I would not say democratic because I do not like the word, but I would say more...'

Eric Broekaert: '... human ?'

Juan Parés y Plans (Corellli): '... more flexible, open and, yes, human. Well, in my opinion, you have to work with your head and heart, not just play stereotypes. I prefer staff members willing to 'work' and 'grow' in their job, rather than just 'act' professional.

I went to London and asked Harold Bridger to supervise me, which he thoughtfully accepted. Besides the meetings with Harold, we also organised some Tavistock-conferences in Rome: some of them were exclusively for staff members of CeIS, others were open to everyone interested. We favoured the meetings in which everyone was welcome, because these major conferences were – from my point of view – excellent opportunities to learn and to integrate with other areas of the wider TC community. This was particularly interesting because we were constantly looking for things to learn which could increase our knowledge.

Next to Harold, Maxwell Jones was also a very valuable consultant, not only for CeIS as an organisation, but also for me, personally. However, it was sometimes very difficult for him to work in an area which he was not used to. Dennie Briggs was also important for the development of CeIS, he was really excellent! We considered keeping him as a life-time consultant, but I realised that this was not advisable. Everybody is constantly in evolution. I think that it is not always possible for people fully to share the common beliefs of an institution for a very long time. Of course, I can understand people's remark about me, being already more than 30 years at CeIS, although I have never been part of the direct services, I've never worked clinically; I am just a policy maker and strategic planner, which is inevitable when you work close to the clients. When I came to CeIS, being in my forties, my life was already 'lived', and I can honestly say that whilst CeIS has given me a new stage, an opportunity of being in a creative space, that is all. I simply enjoyed being here.

Being a consultant, Dennie wrote a very interesting report. Yet, Dennie was not exactly a 'traditional' consultant. Personally, I am more used to the 'English' way of consulting, which means essentially that I never expect an 'English' psychoanalytical trained consultant to instruct me what I have to do. Dennie is more American and even if he has 'grown' with Maxwell Jones, he cannot avoid being emotional or having the 'save the world' syndrome. This may be partly because American people often believe strongly in what they do. It may also be because there is an important Jewish influence in social work in America, perhaps explaining a bit why American people are sometimes 'Messianic'. I found that somewhat difficult because it did not leave enough space for experimentation, for success and failure. I preferred, and still prefer, a more open way of consulting.

I think it is very important to have trustworthy consultants. I don't know how long I'll continue to work here, but I am sure that nobody can cope with the organisation of CeIS without a consultant. And Harold is not a teenager any more...'

Eric Broekaert: 'Yes, isn't he in his nineties...?'

Juan Parés y Plans: 'We were influenced by a lot of people: the things we learnt from Maxwell Jones - and this typifies Maxwell - were mostly not written anywhere. Instead, he was constantly 'creating situations'. I remember one amusing example of him creating a situation. When he came here for the Institute, everybody expected to see Maxwell Jones speaking. But instead of giving a prepared presentation, he simply said: 'I have nothing to say'. That is creating a situation, because – at that moment – he worked with the angriness of the people .The people were open enough to analyse themselves and to reflect on themselves in the group, which was a very interesting learning experience for them. Another time he asked Mario and me to come 45 minutes late to a staff meeting. All the staff gathered, sitting there and waiting for Mario and me and Max said: 'Don Mario Picchi and Juan are late.' And the staff said: 'We are sure they are sick or they had an accident.'. But Maxwell insisted on the fact that we were late. Yet, the staff members kept saying we were never late and that something had happened. It was interesting to see Maxwell Jones handling the situation, creating a living-learning experience. It had a positive counter-effect because Maxwell was a very strong man, using paradoxal effects in a positive way. He worked a lot with the paradox. But as already said, the experiences have not been written down, which is so typical for Maxwell.

In 1988 Mario asked me to leave the international relations area and to engage myself more directly in the programmes. You have to know that, at that time, the American consultants

such as Don and Martha Ottenberg, who had facilitated a lot of change and development, were leaving CeIS. First, I refused, because I was not really interested in some aspects of the programme. Don Mario told me that perhaps the time was ripe for development – a development of the whole concept of the organisation and everything that was part of it. 'But why put me in charge in the first place ?', I asked Mario. 'I may be ruining the whole programme, because I am *new* here, I know nothing about drug abuse, I know nothing about psychology, I know nothing about groups. In short, I am the perfect 'dilettante' (novice)'. But I suggested that I would give more freedom to the staff members, because – in my opinion – they had not enough space at that moment. Actually, I felt that the staff were kept in a situation of being dumb. They were not allowed – so to speak – to make a mistake, which is a pity. Personally, I learned more from the wrong steps in my life than from my successes. It is not healthy when you are not allowed to analyse your mistakes in order to learn from them. Finally, I agreed to engage myself in the programme. At that point, I tried to get a sort of collaboration with some 'experts' who were actually working in the programme.

I said to them: 'I am like a sail, I catch the wind, I will also catch the progress, the change. My aim is to travel to a better place, figuratively speaking. But I need an anchor, someone who stops me, confronts me, with whom I can discuss. I need someone to whom I can say: 'Sorry, you are wrong' and vice versa'. Later, some more members of the staff felt the same because they noticed that I was not planning to change the actual programmes but that I was going to change the structure of the whole organisation instead.

At that time, we had the programmes Santa Maria and San Carlo and the 'only way to go was up': climbing the ladder of success in a quite competitive way. First you were an ordinary staff member. Then you could rise to become an assistant, go on to be a director and finally a co-ordinator. I tried to change the structure of the programme, as it looked like a monarchic model. That is, what I would call monarchy: Don Mario Picchi was the King and I was the Prince Regent, or whatever you want to call it and then you had the supervisors who were like the prime ministers.

The first thing we did was - in a way - milieu-therapy. We took away the offices. There were no desks anymore, so you could not work alone. You had to work with the groups. And I refused to go to any hierarchically organised staff-meeting.

And then, we noticed that a lot of the things that Maxwell and Dennie said became true, not in the sense that we did what was written on page 120 of the report, which Dennie wrote for us. No, quite the contrary, we found a theoretical basis in the report having already executed the change. Because the most important aspect when changing the structure of a programme like CeIS is that it always has to be oriented on the person asking for help, the client. This has heavily influenced 'our' theory and methodology. If this is not the case in a programme, all reports are just 'nice' pieces of paper. Luckily, we were able to change a lot because Mario gave us a lot of experimentation possibilities.

The second thing I did was to cancel 'accoglienza' (entrance or induction). In my opinion, accoglienza was a way of keeping the community unaware of what happened outside. Accoglienza was already a selection. Don't misunderstand me, I am not against selection, but selection has to be very scientifically controlled. I am not against planning. I am against an emotionally determined planning, you understand ?

During the changes, we felt theoretically supported by the work of some leading authors. The motivation, sense of values,... comes from Viktor Frankl. Self-analysing, sharing,... comes from Moreno. You can actually find a lot of influences in the programme, but you really have to look for them. I mean, I know they are here because I know the story of CeIS and I - in some respects - am digging to see them. But, I don't think that you can see it very easily. Yet, I think everybody can see and understand that the humanistic part of a TC is very important.'

Discussion

It cannot be denied that Maxwell Jones, Harold Bridger and Dennie Briggs have had a major influence on the development of CeIS, which evolved essentially from a rather behaviourally oriented programme into a more 'humanistic' approach. Also the ideas of V. Frankl (Frankl, 1962), in search for the meaning of existence and Z.T. Moreno – the wife of J.L. Moreno – known as the initiator of 'psychodrama' (see e.g. Moreno, 1914) had their impact.

When identifying some further key-points in the development of CeIS, discussion and exchange of thoughts should be emphasized. Training is considered as an 'encounter' of different (culturally influenced) viewpoints, in which everybody is 'teacher' and 'pupil' at the same time. The domination of one set of beliefs (one could call that a 'theory') at the expense of other ideas is always prevented.

A respectful cooperation with field workers of CeIS invoked a deep and intensive discussion, making the change within CeIS sufficiently supported by clients and the staff members who were in a direct relationship to them. This resembles the concept of 'social learning' (Jones, 1982), focusing on facilitating the knowledge from within the group, rather than 'teaching ex cathedra'. This powerful and sometimes painful 'method' was often used by Maxwell Jones in CeIS (see e.g. the example of Maxwell refusing to lecture at the Institute of 1984) and typifies his way of handling group processes in general. The use of 'the paradox', putting everything in an upside down perspective and creating situations in which one was actually 'forced' to disclose his or her personal point of view, appeared to be used quite often by Jones. Combined with the difficulty of translating this mode of working into printed resources, it clarifies the obvious emergence of theory from practice. From this point of view, the construction of theoretical concepts is always grounded in practical and personal experiences. This seems to have become one of the characterising attributes of Maxwell

Jones' professional career, since he was constantly trying to explain - *post hoc* - observed change and evolution (see e.g. 'The process of change', 1982). Also Bridger, who was originally educated as a mathematics teacher and who was familiar with 'project learning' (cf. the 'New School Movement'), recognized the importance of practice: 'In Coventry, he had found that by concentrating on a practical task (such as running a school stock exchange) otherwise reluctant pupils became involved in mathematical concepts and processes'. (Harrison and Clarcke, 1992, p. 702). This focus on the process rather than on the outcome has always been an important concept in therapeutic communities and was also often focused on by Maxwell Jones.

In CeIS, Jones also had the opportunity of teaching people the importance of really 'working together'. Formally, possibilities to work on group-level were created by 'closing' offices and removing desks, by which the necessary structural change was made possible. Bridger (1984) describes how he always worked with the institution as a whole, indicating space-time (transitional) experiences as the *conditio sine qua non* for change, whether it is for substance abusers, soldiers suffering from effort syndrome and traumata. In particular, Harrison (2000, p. 212) states: 'Bridger characterized this process as a transitional one, prefiguring the concept of the transitional object later developed by Winnicott. This is an object that acts as a psychological bridge between the individual baby and others. Bridger described the move from the initial closed group to the external world'. The ideas of Bridger within the development of CeIS can be regarded as a social implementation of psychodynamic theory, by which he was far more influenced than Maxwell Jones.

When considering the (structural) development of CeIS, the emphasis has always been laid on the client's perspective, for whom the programme is designed in the first place. The broadened implementation of humanistic (e.g. the belief in the 'power' of the individual) and psychoanalytical (e.g. self-analysis) ideas within CeIS provoked the evolution of the

organisation towards the therapeutic community as it is today. Amongst the primary characteristics of the concept based therapeutic community (of which CeIS is an example) in Europe, one could identify the growing importance of professionalism, the involvement of social network and family members, the evolution of harsh encounter groups into dialogue groups and the TC becoming more humane (cf. Progetto per l'Uomo) instead of behaviourally oriented (see Broekaert et al., 1999). Research also gradually found its way in the TC (Broekaert et al., 2002).

Centro Italiano di Solidarietà might be considered as an excellent example of how the democratic TC (and especially Maxwell Jones and Harold Bridger) influenced the development of the (hierarchical) therapeutic community in Europe. It is clear that the concepts of 'social learning' and 'the-institution-as-a-whole' are extremely important when considering the core characteristics of any therapeutic community, whether it is a 'hierarchical' or a 'democratic' one. When focusing on CeIS more particularly, the following 'conditions for change' seemed to be indispensable within the development of the organisation. A thorough discussion of critical concepts on all levels; the translation of principles to the cultural context; respect for the client, who is always the primary focus; theory follows practical experiences; the process of change is considered more important than the actual outcome; structural changes can facilitate the development of a TC towards an open system; psychodynamic concepts are socially implemented within the therapeutic community and creating situations by using 'the paradox' (living-learning experiences).

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References

- Acampora, A. and Stern, C. (1992) The evolution of the therapeutic community. In
 Paradigms: past, present and future. Proceedings of the therapeutic communities of America. 1992 Planning Conference, p. 1 14. Washington: Therapeutic communities of
 America.
- Berne, E. (1972) *Games people play: the psychology of human relationships*. Ringwood: Harmondsworth: Penguin Books.
- Bratter, T.E.; Collabolletta, E.A.; Fossbender, A.J.; Pennacchia, M.C. and Rubel, J.R. (1985)
 The American self-help residential therapeutic community. In: Bratter, T.E. and
 Forrest, G.G. *Alcoholism and Substance Abuse. Strategies for clinical intervention.*New York: The Free Press.
- Bridger, H. (1984) Groups in open and closed systems. In: Ottenberg, D. (Ed.) (1984) The therapeutic community today. A moment of reflection on its evolution. Proceedings of the First World Institute of Therapeutic Communities, Castel Gandolfo, Italy, August 27 31, 1984. Rome: CeIS, p. 54 70.
- Bridgeland, M. (1971) *Pioneer work with maladjusted children: a study of the development of therapeutic education.* London: Staples Press.
- Briggs, D.L. (1972) Chino, California. In: Whiteley, S.; Briggs, D.; Turner, M. (Eds.) *Dealing with deviants*. London: Hogarth Press.

Briggs, D. (1991) A conversation. Craig Fees talks with Dennie Briggs. Planned Environment Therapy Trust Archive and Study Centre, United Kingdom. Online Publication, <u>http://www.pettarchiv.org.uk/cf018pdf.pdf</u> (Accessed on 3 December 2002).

Briggs, D. (1993) *Record of a friendship. A memoir of Maxwell Jones*. San Francisco: Special Collections. The library of the University of California.

Briggs, D. (2002) A life well spent. London: Jessica Kingsley Publishers.

- Broekaert, E. (1996) Geschiedenis, filosofie en grondstellingen van de therapeutische gemeenschap. In: Broekaert, E.; Bracke, R.; Calle, D.; Cogo, A.; van der Straten, G. & Bradt, H. (Ed.) *De nieuwe therapeutische gemeenschap*. Leuven, Belgium: Garant, p. 9–32.
- Broekaert, E.; van der Straeten, G.; D'Oosterlinck, F. and Kooyman, M. (1999) The therapeutic community for ex-addicts: a view from Europe. *Therapeutic Communities*. *The International Journal for Therapeutic and Supportive Organisations*, 20 (4), 255 265.
- Broekaert, E.; Vanderplasschen, W.; Temmerman, I.; Ottenberg, D.J. and Kaplan, C. (2000)
 Retrospective Study of Similarities and Relations Between American Drug-Free and
 European Therapeutic Communities for Children and Adults. *Journal of Psychoactive*Drugs, 32 (4), 407 417.
- Broekaert, E. and Slater, A. (2001) The development of the early TC movement in Western and Southern Europe. *EFTC News Letter*, 7, 16-20.
- Broekaert, E., Vandevelde, S., Vanderplasschen, W, and Poppe, A. Two decades of 'researchpractice' encounters in the development of European therapeutic communities for substance abusers. Nordic Journal of Psychiatry, 56(5), 371-377.

Broekaert, E.; Vandevelde, S., Schuyten, G., Erauw, K. and Bracke, R. (forthcoming)Evolution of encounter group methods in therapeutic communities for substance abusers. Accepted for publication in Addictive Behaviors.

Casriel, D. (1963) So fair a house: the story of Synanon. New York: Prentice Hall.

- Clarck, D.H. (1977) The therapeutic community. *British Journal of Psychiatry*, 131, 553 564.
- Corelli, J. and Briggs, D. (1989) *Drug addiction and levels of consciousness*. Rome: Centro Italiano di Solidarietà.
- Deitch, D.A. and Zweben, J.E. (1980) Synanon: a pioneering response in drug abuse treatment and a signal for caution. In: Halperne and Levine (Eds.) Proceedings of the Fourth International Conference of Therapeutic Communities, p. 57 70. New York: Daytop Village Press.
- De Leon, G. (1974) *Phoenix House, studies in a therapeutic community (1968 1973)*. New York: Mss. Information Corporation.
- De Leon, G. (1983) The next therapeutic community: autocracy and other notes toward integrating old and new therapeutic communities. *International Journal of Therapeutic Communities*, 4 (4), 249 261.
- De Leon, G. (1997) Community as method. Therapeutic communities for special populations and special settings. Westport: Praeger.
- De Leon, G. (2000) *The Therapeutic Community. Theory, Model and Method*. New York: Springer Publishing Company.
- Densen-Gerber, J. (1973) We mainline dreams. New York: Doubleday and co.
- Frankl, V. (1962) Man's search for meaning: an introduction to logotherapy. New York: Pocket Book.

- Harrison, T. and Clarcke, D. (1992) The Northfield Experiments. *British Journal of Psychiatry*, 160, 698 – 708.
- Harrison, T. (2000) Bion, Rickman, Foulkes and the Northfield Experiments. Advancing on a Different Front. London: Jessica Kingsley Publishers.
- Jones, M. (1952) *Social Psychiatry. A Study of Therapeutic Communities*. London: Routledge and Kegan.
- Jones, M. (1968) *Beyond the therapeutic community. Social learning and social psychiatry.* New Haven, Connecticut: Yale University Press.
- Jones, M. (1976) Theory and practice in therapeutic communities. In *Proceedings of the First World Conference of Therapeutic Communities*. Norrköping, Sweden.
- Jones, M. (1979) Therapeutic Communities, Old and New. American Journal of Drug and Alcohol Abuse, 6 (2), 137 149.
- Jones, M. (1980) Therapeutic communities in perspective. In *Proceedings of the Fifth World Conference of Therapeutic Communities*. Noordwijkerhout, The Netherlands.
- Jones, M. (1982) *The process of change*. Boston, London, Melbourne and Henley: Routledge and Kegan Paul.
- Jones, M. (1984 a) Why two Therapeutic communities? *Journal of Psychoactive Drugs*, 16 (1), 23 26.
- Jones, M. (1984 b) The two therapeutic communities. A review. In *Proceedings of the Eighth World Conference of Therapeutic Communities*. Rome, Italy: Centro Italiano di Solidarietà.
- Kennard, D.(1998) An Introduction to Therapeutic Communities. London: Jessica Kingsley Publishers.

- Kooyman, M. (1976) From chaos to a structured therapeutic community. Treatment programme on Emiliehoeve, a farm for young addicts. *Bulletin on Narcotics*, 27(1), 19-26.
- Kooyman, M. (1977) The history of the therapeutic community movement in Europe. In Proceedings of the Second World Conference of Therapeutic Communities. Montreal.
- Kooyman, M. (1993) The therapeutic community for addicts: intimacy, parent involvement and treatment success. Lisse: Swets and Zeitlinger.
- Kooyman, M. (2001) The history of therapeutic communities. A view from Europe. In:Rawlings, B. and Yates, R. (Eds.) *Therapeutic communities for the treatment of drug users*. London and Philadelphia: Jessica Kingsley Publishers, p. 59-78.
- Lees, J.; Manning, N. and Rawlings, B. (1999) *Therapeutic community effectiveness. A* systematic international review of therapeutic community treatment for people with personality disorders and mentally disordered offenders. York: York Publishing Services.
- Lukas, E. (1984) The therapeutic concept of logotherapy. In *Proceedings of the Eigth World Conference of Therapeutic Communities*. Rome, Italy: Centro Italiano di Solidarietà.

Moreno, J.L. (1914) Einladung zu einer Begegnung. Vienna: Anzengruber Verlag.

Moreno, Z.T. (1979) Psychodrama as a technique in the therapeutic community In *Proceedings of the Fourth World Conference of Therapeutic Communities*. New York.

- Murto, K. (1991) *Towards the well functioning community*. Jyväskylä studies in education, psychology and social research Nr. 79. Jyväskylä: University of Jyväskylä.
- O'Brien, W.B. and Henican, E. (1993) You can't do it alone: the Daytop way to make your child drug free. New York: Simon & Schuster.
- Ottenberg, D.J. (1974) Evaluation of Eagleville's combined treatment program. In *Proceedings of the National Drug Abuse Conference*. Chicago, Illinois.

- Ottenberg, D.J. (1977) The Bastard child of public health. In *Proceedings of the Second World Conference of Therapeutic Communities*. Montreal.
- Ottenberg, D.J. (Ed.) (1984) *The therapeutic community today. A moment of reflection on its evolution. Proceedings of the First World Institute of Therapeutic Communities*, Castel Gandolfo, Italy, August 27 – 31, 1984. Rome: CeIS.

Ottenberg, M. (2000) Writings. Selected lectures, talks, letters. Rome: CeIS.

- Parés y Plans (Corelli), J. (1984) Introduction in Ottenberg, D. (Ed.) (1984) The therapeutic community today. A moment of reflection on its evolution. Proceedings of the First World Institute of Therapeutic Communities, Castel Gandolfo, Italy, August 27 31, 1984. Rome: CeIS.
- Parés y Plans (Corelli), J. (1998) Personal Communication (Email message of 20/10/1998).
- Picchi, M. (1994) *Un progetto per l'Uomo*. Roma: Associazione Centro Italiano di Solidarietà Di Roma.
- Rapoport, R.N. (1960) *Community as a doctor*. New perspectives on a therapeutic community. London: Tavistock Publications.
- Rawlings, B. and Yates, R. (2001) Introduction. In: Rawlings, B. and Yates, R. (Eds.)
 Therapeutic communities for the treatment of drug users. London and Philadelphia:
 Jessica Kingsley Publishers, p. 9-25.
- Rubel, J.G.; Baker, K.G.; Bratten,; Hartwig-Thomson, L. and Smirnoff, A.M. (1982) The role of structure in the professional model and the self-help concept of the therapeutic community: different strokes for different folks. International Journal of Therapeutic Communities, 3 (4), 218 – 232.
- Sugarman, B. (1984) Towards a new, common model of the therapeutic community. Structural Components, learning processes and outcomes. *International Journal of Therapeutic Communities*, 5 (2), 77 – 98.

Terassi, M.T. and Costa, B. (1977) Etude, documentation et recherché: organisation d'un centre de documentation, information et animation culturelle, repondant aux exigencies des Ce.I.S. In *Proceedings of the Second World Conference of Therapeutic Communities*. Montreal.

van der Straeten, G. (1996) De ontwikkeling van de T.G. in Europa. In: . In: Broekaert, E.; Bracke, R.; Calle, D.; Cogo, A.; van der Straten, G. & Bradt, H. (Ed.) *De nieuwe therapeutische gemeenschap*. Leuven, Belgium: Garant, p. 33 - 39.

Vandevelde, S., Broekaert, E., Yates, R. and Kooyman, M. (forthcoming) The development of the therapeutic community in correctional establishments: a comparative retrospective account of the 'democratic' Maxwell Jones TC and the 'hierarchical' concept-based TC in prison. Accepted for publication in International Journal of Social Psychiatry.

Wilmer, H. (1958) Social Psychiatry in Action: A Therapeutic Community. Springfield,

Illinois: Charles Thomas..

NOTES

¹ Before getting involved in therapeutic communities, Dennie Briggs worked as a psychologist in the U.S. Army. In the 1950s Briggs was appointed to the Naval Hospital in Oakland (U.S.A.) where he met several pioneering professionals in the field of social psychiatry. Amongst them was Harry Wilmer, who ran his ward at the hospital as a therapeutic community. Briggs was inspired by this and consequently visited Belmont Hospital, ran by Maxwell Jones. When he returned, Briggs left for Japan and spent two years implementing therapeutic community principles at the Naval Hospital in Yokosuka. Upon his return, Briggs leaves the army and starts working in the prison of Chino (California, U.S.A.). From that point on, he regularly works together with Maxwell Jones, who acted as a consultant on several occasions. Throughout his life, Dennie Briggs has remained a close friend of Maxwell Jones (Briggs, 1991; Briggs, 2002)

² Until the beginning of the 1980s, Donald Ottenberg was the executive director of Eagleville Hospital (Pennsylvania, U.S.A.), which was founded in 1909 as a treatment centre for people suffering from lung diseases (primarily TBC). From 1965 on, after TBC could be well treated and prevented, the hospital shifted towards a centre for alcoholics. Five years later, also drug dependent individuals were treated. From that point on, Eagleville Hospital was turned into a concept based therapeutic community and Donald Ottenberg became an important representative of the TC for substance abusers. Martha, his wife, was a social worker in the same facility (Ottenberg, 1974).

³ Since the first World Conference of Therapeutic Communities (for substance abusers) in 1976, Eric Broekaert has been actively involved in the development of the European concept-based TC, as the initiator of the (concept) therapeutic community 'De Kiem' (Belgium) and as Vice-President of the 'European Federation of Therapeutic Communities' (EFTC).

⁴ Centro Italiano di Solidarietà (CeIS), Via Ambrosini 129, 00147 Rome, Italy

⁵ The modifications are solely meant to improve the readability of the text, without touching the actual content of the interview. Unnecessary repetitions, unintentionally omitted words, etc. were corrected in order to make the text more clear and transparent.

⁶ The literally transcribed text is kept at the Department of Orthopedagogics, Ghent University, Belgium