**M3-A. Community-as-Method Overview**

The TC is distinguished from other treatment approaches by the use of the community as the primary method of treatment to bring about positive pro-social and psychological changes in individuals. In a TC:

* The daily regimen and social milieu of the TC are designed to facilitate emotional healing, social learning, and changes in behavior patterns and self- identity, 24 hours a day, 7 days a week.
* All community members (staff members and residents) create a social learning environment.
* TC residents experience being in a supportive family-like atmosphere that allows them to heal emotionally and change their lifestyles and self- identities.
* Recovery occurs through interactions with peers and through the self-help and mutual self- help learning process.

**Eight Basic Concepts of Community-as-Method**

1. *Member roles:* Residents gradually become integral members of the community by acting in a variety of work and community roles and contributing to all the activities of daily life in the TC.
2. *Continual feedback from peers and staff members:* Residents are observed by all members of the community and are held accountable for their own actions. They receive continual feedback (both reinforcing and corrective) from peers and staff members, expressed with authentic and responsible concern for their well-being and progress.
3. *Role models:* Residents adopt principles of recovery and right living and gradually aspire to become role models for others. As they progress through the program, residents provide feedback to others about what the others need to change about themselves and serve as examples of such change.
4. *Friendships and healthy family-like relationships:* At the beginning, residents attempt to continue their deceitful patterns and want merely to “hang out.” As they progress through the phases of treatment, they learn what friendship is by sharing their feelings and thoughts and by challenging others. The friendships may last a lifetime and become the basis for the residents’ new social networks.
5. *Collective learning:* Residents work, learn, and heal in group settings such as meetings, classes, work teams, and recreational activities. Virtually all the learning and healing  experiences, essential to recovery and personal growth, take place with positive peer role models.
6. *Internalization of the TC culture and language:* Residents gradually adopt and internalize the language used in the TC. This is a sign of their assimilation into the culture of the TC change process and of the progress they are making.
7. *Hierarchical work structure and communication system:* The hierarchical work structure and communication system teach members to be responsible and to work, following organizational rules and procedures. Residents become people on whom others can depend, by adhering to procedures, accepting and respecting supervision, and behaving as responsible members of the TC. The system of sanctions and privileges guides residents’ learning as they experience the positive and negative consequences of their actions.  The hierarchical structure of the TC, the chain of command, is similar to the organization of mainstream culture. It is designed to teach residents the skills and behaviors they will need to be successful outside the TC. Gradually and with practice, residents are able to generalize what they have learned in the TC to the outside world.  The communication system in the TC, including such activities as surveillance, data collection, reporting, and giving feedback, is designed to promote productive, prosocial behavior, as well as to correct self-defeating behavior.
8. *Open communication and personal disclosure:* Residents gradually engage in open communication and personal disclosure when they feel that the TC is a safe environment. Residents eventually learn how to communicate with others and to reveal their inner thoughts, which help them build self-esteem, develop trust and relationships with others, heal, become self-aware, and grow. This process begins initially with staff members and then in group settings with peers.  Sharing feelings in public is an important part of the self- help recovery process. Sharing feelings is part of the mutual self- help recovery process as well because residents realize that they are not alone and that other people experience the same feelings.  No secrets exist in the TC. When rules are broken, the infraction is discussed publicly to ensure that everyone feels safe and to maintain the integrity of the community.