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Evolution of encounter group methods in therapeutic communities for substance abusers

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Abstract

Some literature indicates an evolution in the concept underlying therapeutic communities (TC, for substance abusers), where encounter group methods evolved from harsh confrontation to dialogue and discussion. The literally transcribed proceedings of two similar encounter groups, held at a 20-year interval, were systematically analyzed on four main variables: *direction* of communication sequences and associated *behavior*, *emotions*, and *attitudes* of all participants (staff members and “older” and “newer” residents). In general, “toward” and “back” messages are relatively more balanced in the “new” encounter (2000) as compared with the “old” encounter (1980). Furthermore, associated behavior in the “new” encounter is found to be more supportive, whereas ventilated emotions are more negative than in the “old” encounter. The number of communication units within the “old” and “new” encounter, characterizing a positive or negative attitude, seems to have remained stable over the years. These findings support the reported evolution in encounter groups, where the focus has moved from mutual confrontation toward balanced and respectful dialogue.

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1. Introduction

The drug-free hierarchical therapeutic community (TC) originated at Synanon (Broekaert, 1999; Broekaert, Vanderplasschen, Temmerman, Ottenberg, & Kaplan, 2000; O'Brien, 1993).

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The concept incorporates early Christian values (Glaser, 1977; Mowrer, 1976), the Oxford Group (Moral Rearmament) of F. Buchman (Lean, 1985), Alcoholics Anonymous (Bassin, 1977), and “Synanon philosophy” (Garfield, 1978). Although grounded in a tradition of behaviorism (De Leon, 1974), the TC was influenced by the American humanist wave in psychology and by several important leaders including Maslow (1967), the promoter of the “third way in psychology,” Rogers (1961), the developer of the “client-centered therapy,” and Casriel (1976), the initiator of “the new identity process.” They all visited or commented on Synanon. Over the years, the classic TC evolved into a “new” one (Broekaert, Kooyman, & Ottenberg, 1998). In the 1970s, families of residents became directly involved. Influential family therapists such as Kaufman (1979) and Stanton (1985) initiated a more individual approach to the needs of residents and their families. A family approach, such as the contextual therapy of Boszormenyi-Nagy and Krasner (1986), was an essential part of Buber’s (1970) tradition, which is based on dialogue. In Europe, Picchi (1994) contributed to the change from behaviorism to existential humanism. Influenced by Moreno (1914, 1969) and Frankl (1963), they stimulated the rapprochement between the TC for substance abusers and the European democratic TC (Jones, 1984). From the 1990s, the evolution was characterized by an expanding vision that sought to include new target groups (such as adolescents, psychiatric patients, homeless people, ethnically and culturally diverse clients, prisoners, people using substitute drugs, such as methadone, etc.) and by an enlarged methodology (De Leon, 1997). Professionals assumed the responsibilities of ex-substance abusers, and researchers gradually gained admittance (Broekaert, Van der Straten, D’Oosterlinck, & Kooyman, 1999). The recent evolution toward managed care and new economic thinking has forced the TC into the development of “Integrated and Comprehensive Treatment Systems.” “New Management” initiatives demand flexibility, interaction, and dialogue between different model units and therapeutic functions (De Leon, 1996). Some literature—often “gray” literature—points to an ongoing evolution in encounter group methods from one of harsh confrontation to one of dialogue and discussion (Bracke, 1996; Pouloupoulos, 1995; Shankman, 1994; Van der Meer, 1997).

The encounter is the primary therapeutic tool of the concept, drug-free, hierarchical TC (Bratter, Collabolleta, Fossbender, Pennachia, & Rubel, 1985; Kooyman, 1992; Nash, 1974). In Synanon, the encounter group was commonly referred to as “the Game” (Dederich, 1973). It was seen as “an uninhibited conversation, an arena for discussing all human feelings, community issues, and relationships among people” (Garfield, 1978, p. 8). “There is usually a brief silence, a scanning appraisal as to that is present, and a kind of sizing one another up. Then, the group launches into an intense emotional exchange of personal and collective problems. A key point of the sessions is the emphasis laid on extreme uncompromising candor about one another. No holds or statements are barred from the group effort at truth seeking about problem situations, feelings, and emotions of each member of the group (. . .) This often left them with a clearer view and a greater knowledge of their inner and outer world” (Acampora & Stern, 1994, p. 3). To a certain degree, the encounter group formed a behaviorist reaction to psychoanalysis. It was felt that psychoanalysis, while providing insight, failed to change negative behavior (Bratter et al., 1985, pp. 461–507). Consequently, encounter groups in TCs for substance abusers should be distinguished from groups in

European democratic TCs who were mainly influenced by psychoanalysis (Bridger, 1984) as well as from the “Encounter Group Movement” (T(raining)- and Sensitivity Groups) of the 1970s (Lieberman, Yalom, & Miles, 1973), which were less confrontational.

The encounter methods were often described (Ames, 1976; Broekaert, 2001; De Leon, 2000; Kooyman, 1992; Sugarman, 1974). Confrontation with one’s behavior is an essential aspect. Experienced group members (“older” residents) have many “tools” at their disposal such as humor, exaggeration, contradiction, acceptance, and support. Newer residents have not fully acquired these group skills yet. Consequently, older residents act as examples for the newer ones and can be considered as real role models (cf. De Leon, 2000).

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. Positive values can be defined as in accordance with the value system of the TC, referring to common human feelings (such as showing respect, support, acceptance, etc.) that are generally considered as constructive and valuable. Although having certain emotions cannot be considered as negative in se, the expression of certain feelings can be regarded as opposite to the value system of the TC. Being irritated, cynical, mocking, etc., are examples of feelings that are considered as negative in a TC setting, when they are used for resisting personal change. Showing certain negative attitudes (built on these emotions) can masquerade real emotions and impede a personal introspection and development, whereas positive attitudes implicate a readiness to change, honesty, belonging, etc.

Although the basic principles of the “old” encounter remain the same (De Leon, 2000), an important evolution has taken place. During the years, the encounter groups became less intensive (extreme) and more sensitive, evolving from harsh indictment into an intense form of dialogue. Moreover, the old encounter groups were characterized by confrontation, during which the attention was primarily aimed at the person who was confronted. “Toward messages” (i.e., expressions from the one confronting toward the one who was confronted) prevailed. In the new encounter, much more attention is given to the person who started the confrontation, indicating the growing importance of considering “back messages” (i.e., expressions from the confronted person toward the one who is confronting) (Bracke, 1996). Pouloupoulos (1995, p. 103) made the following observation: “The way of dealing with the client and a respect for human rights comprises the greatest challenge for every therapeutic system. Increasingly, new techniques are coming to the surface that include that of positive support and limit the negative confrontation.” Bracke (1996, p. 73), an addiction therapist in the TC “De Kiem” (Belgium) since 1977, adds: “the encounter and its hard confrontations strove to “break” the image of the addict. However, it often happened that this radical method did not destroy the “image” but that the person himself felt broken, devalued, humiliated, and without support. Consequently, many stopped their treatment prematurely because they did not get time to experience the support and comprehension that made the therapy tolerable”. These clinical observations reflect current scientific findings on early client dropout in TC. Several authors (Holland, 1986; Marlatt, 1985) warn us not to provide too intense treatment during the first period of admission in a TC. To improve client retention, also, Goldapple and Montgomery (1993) recommend demonstrating “understanding, empathy, and tolerance toward new admissions,” early trial-and-error learning behaviors, different

Table 1
Categories and subcategories of coding protocol

Code	Function	Direction	Behavior	Emotion	Attitude
1	Staff	Toward	Confrontational	Positive	Positive
2	Old resident	Back	Supportive	Negative	Negative
3	New resident				

rates of learning, and behavioral responses to depression, anxiety, and distress. In this context, Van der Meer (1997, p. 37) speaks of “the necessity to avoid destructive confrontation.”

It is the aim of this study to investigate whether the emergence of a new encounter culture in drug-free TC can be empirically underpinned: “new” encounter groups should change from harsh confrontation to dialogue and discussion. Hypotheses, deduced by means of a standardized protocol (see Table 1), are put forward. It is assumed that comparing the material of the “old” and “new” forms of encounter will confirm the following:

1. There will be a more equal “dialogue” between participants in the new encounter in the form of a more balanced equilibrium between “toward” and “back” messages, whereas the old encounter will reveal a preponderance of “back” messages.
2. In the new encounter, the participants (both residents and staff members) will discuss more and be more supportive in their behavior. Behavior is more confrontational in the older form of encounter.
3. In the new encounter (as compared with the old one), more positive feelings will be noticed.
4. In the new encounter, more positive attitudes than in the old one will be observed.
5. When the above-mentioned hypotheses are focused on subgroups of people taking part in the encounter (staff members and “older” and “newer” residents), differences between “older” and “newer” participants will be noticed.

2. Method

Due to the “historical” context (i.e., the lack of availability concerning congruent text material of past encounters), the research was based on a $n = 1$ comparative case study. The literally transcribed text material of an old encounter, which took place at the drug-free TC “De Kiem” (Belgium) in 1980 (Broekaert, 1980), was compared with that of a recent encounter (Broekaert, Bogaert, et al., 2000). Both encounter groups took place under similar circumstances in the same community and were led by the same therapist. In 1980, during a period of 1 month, all eight ongoing encounter groups (each of which lasted approximately 90 minutes) were tape recorded. The proceedings of one encounter group—selected at random—were literally transcribed (Broekaert, 1980). In 2000, the same procedure was repeated (Broekaert, Bogaert, et al., 2000, Broekaert, Brouckaert, et al., 1999). Obviously, all the other group members were different. Six master’s-level students in Educational Sciences

(Broekaert, Bogaert, et al., 2000) analyzed the material to its basic elements (“hermeneutic units”) and coded and classified the elements according to the standardized protocol, as outlined in Table 1. They made use of the statistical software package WinMAX97 (Kuckartz, 1997), which facilitates the code-and-retrieve process.

These fifth-year students received a comprehensive training in quantitative and qualitative research methods, including the methodological background and usage of qualitative software package (such as WinMAX). Moreover, they have been working as trainee staff members for 1 month in the TC “De Kiem” (in which the encounter groups took place). During this period, they actively participated in the daily life of the TC, which is structured according to a detailed time schedule and work planning. Next to taking part in these activities, they also were present as observers during several therapeutic groups, such as encounter groups, emotional groups, etc. The students’ presence in the TC created an atmosphere of trust and acceptance between residents and students, which facilitated the data collection.

After this 1-month period of participant observation, the students first transcribed the tape-recorded proceedings of the encounter groups and analyzed the transcripts by means of the text analysis software package WinMAX97. They compared and discussed the results together and consequently refined and attuned the definitions of categories and subcategories (see Table 1) that constituted the hypotheses.

This way, a common tree structure developed out of the raw material. Later, in two separate groups of three people, they recoded the material, after which a new comparison and discussion of the results took place. The coded segments of these two groups were systematically reviewed, compared, and proved to be the same for 97.7% of the cases in the old encounter and for 97.8% in the new encounter.

A “toward” direction in the communication sequence consists of everything that one person (or those supportive him) tell or ask the person being confronted. Every reaction to this forward confrontation is considered a back direction.

Behavior can be attacking, frustrating, disdainful, protesting, . . . (confrontational) (e.g., “I feel like you have betrayed me”) or encouraging supportive, opening up, sustaining, . . . (supportive) (e.g., “Please continue to express your feelings”).

Emotions can be aggressive, angry, sad, bitter, . . . (negative) (e.g., “I am sick and tired of it”) or happy, caring, friendly, released, . . . (positive) (e.g., “I really feel relieved now”).

Attitudes can be in accordance with the value system of the TC: open, honest, constructive, understanding, . . . (positive) or in discordance: closed, obstructive, dishonest, rejecting, . . . (negative).

Participants are coded as staff or older or newer residents. Older residents are defined as those clients who have spent already some time (generally 2–4 months) in the program successfully and who are formally recognized by their peers and staff members as role models in the TC. They are the carriers of the TC culture and have the most important responsibilities at client level in the community.

Newer residents (cf. “Phase 1” in De Leon, 2000, p. 200) identify themselves as community members, increase participation in groups, and accept the seriousness of drug use and other problems, showing some separation from subculture, street language, etc. Older

residents (cf. “Phases 2 and 3” in De Leon, 2000, p. 200) set an example for other residents, accept full responsibility for behavior problems and solutions, acquire group skills, and are accepted to act as facilitators in the encounter group. They run the house as coordinator and assist the staff in monitoring the facility (De Leon, 2000, p. 200). Staff members have primary responsibility for the operation of the facility and the clinical status of the residents as well as supervising and conducting the groups (De Leon, 2000, p. 121).

3. Results

The exact numbers of coded communication sequences drawn from both old and new encounters were systematically compared, taking the four main variables into account: direction ($n=1525$), nature of behavior ($n=1441$), sort of emotion ($n=1444$), and kind of attitude ($n=1441$), which accompanied the communicated expression. The observed differences in exact numbers of communication units can be explained by the decision to exclude all expressions categorized as “not situated” or “neutral” on the relevant variable.

A three-way frequency analysis “communication characteristic by encounter group by participant category” was performed to develop a hierarchical log-linear model for each communication characteristic.

3.1. Results for the communication characteristics (first-order effects)

Partial χ^2 tests for first-order effects were statistically significant ($P=.000$) for all communication characteristics (direction, behavior, emotion, and attitude) (see Table 4). Considering the communication units in both encounters, generally,

- more toward (79.5%) than back messages (20.5%) can be observed,
- more supportive (82%) than confronting (18%) behavior can be identified,
- the ventilated emotions are more positive (61%) than negative (39%), and
- the associated attitudes are more positive (93%) than negative (7%).

(see Table 2).

3.2. Results for the communication characteristics in the old and new encounters

All partial χ^2 tests for two-way interactions with encounter group were significant for direction ($P=.000$), behavior ($P=.000$), emotion ($P=.012$), and attitude ($P=.001$) (see Table 4).

3.2.1. Direction

In the new encounter, the relation between “toward and back” messages is more balanced than in the old encounter. In greater detail, a decrease in toward messages from 86% in the old encounter to 73% in the new encounter can be observed (see Table 2).

Table 2
Cross-tabulation communication characteristics: old and new encounters

	Total n, frequency (%)	Old encounter, frequency (%)	New encounter, frequency (%)
<i>Direction</i>			
Toward	1213 (79.5)	657 (86)	556 (73)
Back	312 (20.5)	107 (14)	205 (27)
<i>Behavior</i>			
Confrontational	264 (18)	194 (26)	70 (10)
Supportive	1177 (82)	551 (74)	626 (90)
<i>Emotion</i>			
Positive	877 (61)	478 (64)	399 (57)
Negative	567 (39)	268 (36)	299 (43)
<i>Attitude</i>			
Positive	1342 (93)	679 (91)	663 (95.5)
Negative	99 (7)	68 (9)	31 (4.5)

3.2.2. Behavior

A decrease in confronting actions from 26% in the old encounter to 10% in the new encounter can be identified (see Table 2).

3.2.3. Emotion

A decrease in positive emotions from 64% in the old encounter to 57% in the new encounter can be observed (see Table 2).

3.2.4. Attitude

An increase in positive attitudes from 91% in the old encounter to 95.5% in the new encounter can be identified (see Table 2).

3.3. Results for subcategory (staff members and older and newer residents)

The exact numbers of communication sequences were also compared on the four main variables, itemized for three specific subcategories of participants (staff members and older and newer residents). Again, communication units (per variable) categorized as “not situated” or “neutral” were excluded from the analysis.

All partial χ^2 tests for two-way interactions with participant category were significant for direction ($P=.000$), behavior ($P=.000$), emotion ($P=.000$), and attitude ($P=.000$) (see Table 4).

3.3.1. Direction

Almost all communication units of staff members were coded as toward messages (near 100%)—a tendency that could also be observed for the older residents (70%). The general

tendency toward a balanced equilibrium between “toward and back” messages could only be observed for the newer residents (toward messages 57% and back messages 43%) (see Table 3).

3.3.2. Behavior

When focusing in greater detail on communication sequences of the different participants of the encounter, the general trend of the majority of associated behavior as being supportive could be identified for staff members or older and newer residents. Almost all (96.5%) associated behavior of staff members was coded as “supportive” followed by the newer residents with 80.5% of supportive behavior and finally the older residents with 67% of supportive behavior (see Table 3).

3.3.3. Emotion

The general conclusion of less positive and more negative emotions ventilated through the communication sequences in the new encounter can be identified for the staff members (76.5% of the expressed emotions were negative). Older (85%) and newer (91%) residents both expressed a majority of positive expressions (see Table 3).

3.3.4. Attitude

Focusing on the attitudes of the different participants within the old and new encounters, the associated attitudes are mostly positive. Almost all (near 100%) of the attitudes associated with the communication units of staff members were positive. The older residents (94.5%) also showed an overwhelming majority of positive attitudes. The same tendency could be observed for the newer residents; they expressed 75% positive attitudes versus 25% negative attitudes (see Table 3).

3.4. Results for subcategory (older and newer residents) in the old and new encounters

The partial χ^2 tests for three-way interactions with participant category and encounter group were significant for direction ($P=.000$), behavior ($P=.000$), and attitude ($P=.000$). Only the partial χ^2 tests for three-way interactions for emotion was not significant ($P=.176$) (see Table 4).

3.4.1. Direction

Partial cross-tabulation tables of subcategory of participant with associated direction for the old and new encounters show that in the old encounter almost 100% of the older residents and 29% of the newer residents express a toward message when communicating within the encounter group. When focusing on the new encounter, 41% of the older residents and 86% of the newer residents express toward messages. This indicates a decrease in toward messages for the older residents in the new encounter together with an increase in back messages. When looking at the newer residents, however, an increase in communication sequences toward as well as a comparable decrease in back messages should be noted (see Table 3).

Table 3

Cross-tabulation communication characteristics/participant category: old and new encounters

	Total <i>n</i> old and new encounters, frequency (%)	Old encounter, frequency (%)	New encounter, frequency (%)
<i>Staff direction</i>			
Toward	612 (100)	303 (100)	309 (99)
Back	2 (0)	0 (0)	2 (1)
<i>Older resident direction</i>			
Toward	437 (70)	312 (100)	125 (41)
Back	186 (30)	3 (0)	183 (59)
<i>Newer resident direction</i>			
Toward	164 (57)	42 (29)	122 (86)
Back	124 (43)	104 (71)	20 (14)
<i>Staff behavior</i>			
Confrontational	21 (3.5)	15 (5)	6 (2)
Supportive	575 (96.5)	282 (95)	293 (98)
<i>Older resident behavior</i>			
Confrontational	191 (33)	149 (49)	42 (15)
Supportive	387 (67)	157 (51)	230 (85)
<i>Newer resident behavior</i>			
Confrontational	52 (19.5)	30 (21)	22 (18)
Supportive	215 (80.5)	112 (79)	103 (82)
<i>Staff emotion</i>			
Positive	140 (23.5)	85 (29)	55 (18)
Negative	456 (76.5)	212 (71)	244 (82)
<i>Older resident emotion</i>			
Positive	494 (85)	265 (86)	229 (84)
Negative	87 (15)	42 (14)	45 (16)
<i>Newer resident emotion</i>			
Positive	243 (91)	128 (90)	115 (92)
Negative	24 (9)	14 (10)	10 (8)
<i>Staff attitude</i>			
Confrontational	592 (100)	296 (100)	296 (100)
Supportive	1 (0)	1 (0)	0 (0)
<i>Older resident attitude</i>			
Positive	550 (94.5)	307 (100)	243 (89)
Negative	32 (5.5)	1 (0)	31 (11)
<i>Newer resident attitude</i>			
Positive	200 (75)	76 (53.5)	124 (100)
Negative	66 (25)	66 (46.5)	0 (0)

Table 4
 Partial χ^2 tests (hierarchical log-linear analysis)

	Partial χ^2	<i>P</i>
Direction	568.663	.000 ^a
Behavior	625.183	.000 ^a
Emotion	67.072	.000 ^a
Attitude	1276.375	.000 ^a
Direction × Encounter	51.720	.000 ^a
Behavior × Encounter	65.612	.000 ^a
Emotion × Encounter	6.378	.012 ^b
Attitude × Encounter	11.980	.001 ^a
Direction × Participant	377.274	.000 ^a
Behavior × Participant	195.827	.000 ^a
Emotion × Participant	632.012	.000 ^a
Attitude × Participant	160.163	.000 ^a
Direction × Participant × Encounter	326.314	.000 ^a
Behavior × Participant × Encounter	15.498	.000 ^a
Emotion × Participant × Encounter	3.480	.176
Attitude × Participant × Encounter	114.309	.000 ^a

^a *P* < .01.

^b *P* < .05.

3.4.2. Behavior

When focusing on communication sequences of the different participants of the encounter, the general trend of increased supportive behavior and the consequent decrease of confrontational behavior is especially true for the older residents. Partial cross-tabulation tables of participant category with behavior for the old and new encounters reveal that in the old encounter 51% of the older residents and 79% of the newer residents express supportive communication units, whereas in the new encounter 85% of the older residents and 82% of the newer residents show supportive behavior (see Table 3).

3.4.3. Attitude

Partial cross-tabulation tables of participant category with associated attitude for the old and new encounters show that in the old encounter 100% of the older residents and 53.5% of the newer residents express positive attitudes, whereas in the new encounter 89% of the older residents and 100% of the newer residents have positive attitudes. This indicates that more negative attitudes can be identified for the older residents in the new encounter as compared with within the old one. Newer residents show more positive attitudes in the new encounter as compared with within the old encounter (see Table 3).

4. Discussion

Summarizing the main findings of the present research, the following results are most obvious: In the new encounter, the relation between “toward and back” messages is more

balanced than in the old encounter. Associated behavior in the new encounter is found to be more supportive, whereas ventilated emotions are more negative than in the old encounter. The number of communication units within the old and new encounters, characterizing a positive or negative attitude, seems to have remained stable over the years. When focusing on subgroups of participants (older and newer residents and staff members), it is not always possible to identify the main results for all three groups.

When comparing both encounters, it is worth noting that although the back messages increase in the new encounter, the toward messages still constitute the largest number of analyzed communication units. This can probably be explained by the fact that direct confrontation remains (and should remain) the prominent tool within the encounter group (Broekaert, 2001; De Leon, 2000; Sugarman, 1974). Consequently, supportive behavior is essentially associated with confrontation. This was true in the past and is perhaps even more true now. An increase in dialogue, however, should not be at the expense of the intensity, sharpness, and directness of the communicated message. Giving more attention to the person confronting promotes true introspection. It leads to greater depth, enhances the significance of the message, and prevents counterproductive acting out. More meaningful and less aggressive confrontations also decrease male chauvinism and macho-like behavior during the encounter groups. In both old and new encounters, the staff members predominantly provide support and this fact confirms their position as “facilitators” rather than as “directors” of the group process. They are the guarantors of security and trust. It is interesting to notice that in the new encounter the older residents who are the primary role models in the TC confirm in their interventions the move toward support. Instead of taking over and continuing the confrontation, they rather try to build up a dialogue with their “partners.” The newer residents on the other hand get more time to learn how to act during an encounter.

The staff members often use irony and provocation while facilitating the encounter process. It is unclear to what level this is suitable. In the past, “overacting” could also be observed, e.g., ventilated through exaggerated hugging and embracing at the end of the session. It seems clear that “negative feelings” should not be pushed away but “lived” through. The fact that we experience now (as well as in the past) a stabilization of positive attitudes proves that in general the TC is enthusiastically devoted to its project. Even if techniques and approaches are in a constant state of evolution, the dedication of staff members remains essential. Belief in the concept increases its chances of success. However, how is it to explain the tendency toward a less positive attitude as displayed by older residents in the new encounter? Older residents become more critical toward the program and start to question the concept and philosophy behind it. They feel safe in the community in general and act freely within the encounter group. They have discovered a space in which they can be themselves. This is actually a big step forward in the healing process of a formerly addicted person. However, newer residents could regard criticism as a negative attitude due to difficulties of interpretation.

While discussing the conclusions in greater depth, intriguing questions emerge concerning possible changes in the target population over the years. Undoubtedly, the treatment systems have further developed, going together with a more advanced selection of the target population toward adapted approaches. The implementation of diagnostic and motivational

instruments in TC could preselect individuals who are more open to communication and dialogue. Moreover, a general tendency can be observed (certainly in Europe) toward a more open disclosure and discussion of personal problems. The demystification of drug problems might also be a factor.

The position of the therapist remains a very pertinent issue. It is probably an exceptional situation that the same therapist continued to lead the sessions for a period of 20 years. It is likely that his skill developed over that period. It probably requires a lot of experience to implement the more dialogue-like encounter in the TC. One must not forget that “professionals” took over a lot of knowledge of the early TC ex-addicts, which undoubtedly influenced the introduction of their “own” therapeutic approaches.

Although generalization of the findings presented in this paper is impossible because of the limited client-level data (obtained in one TC), the results are in accordance with the current literature and clinical observations in the field of TC practice (Bracke, 1996; Poulopoulos, 1995; Van der Meer, 1997). Undoubtedly, further research has to be undertaken to reach a deeper understanding of the evolution in encounter group methods, which is imbedded in the maturation of the TC movement in general.

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