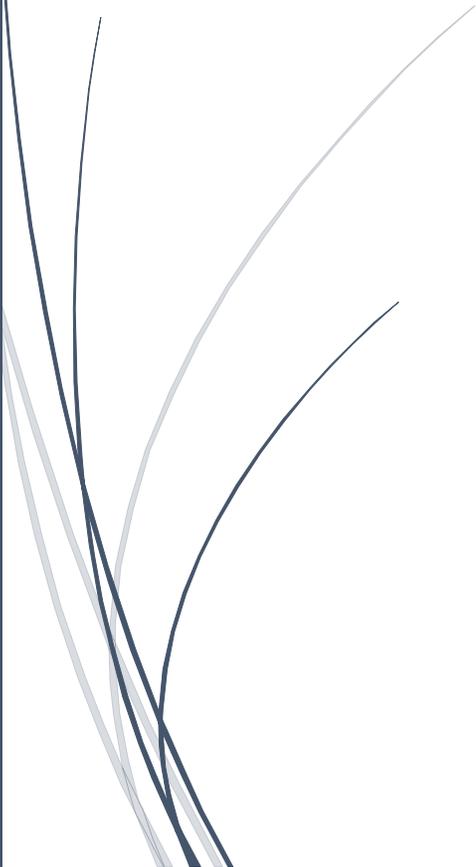


CANAM INTERVENTIONS

The Disease Model



What is the Disease Model?

The “Minnesota Model” also known as the abstinence model, of addiction treatment was created in a state mental hospital in the 1950s by two young men, one who was to become a psychologist, the other who was to become a psychiatrist, neither of whom had prior experience treating addicts or alcoholics.

The model spread first to a small not-for-profit organization called the Hazelden Foundation and then throughout the country. The key element of this novel approach to addiction treatment was the blending of professional and trained nonprofessional (recovering) staff around the principles of Alcoholics Anonymous (AA).

There was an individualized treatment plan with active family involvement in a 28-day inpatient setting and participation in Alcoholics Anonymous both during and after treatment. The education of patients and family about the disease of addiction made this a busy program from morning to night, seven days a week.

Throughout the 1950's, Hazelden built on this foundation by adopting some working principles developed at another Minnesota institution, Willmar State Hospital. Among them were these:

- Alcoholism exists. This condition is not merely a symptom of some other underlying disorder. It deserves to be treated as a primary condition.
- Alcoholism is a disease. Attempts to chide, shame, or scold an alcoholic into abstinence are essentially useless. Instead, we can view alcoholism as an involuntary disability--a disease--and treat it as such.
- Alcoholism is a multiphase illness. This statement echoes an idea from AA--which alcoholics suffer from a disease affecting them physically, mentally and spiritually. Therefore treatment for alcoholism will be more effective when it takes all three aspects into account

Minnesota Model is as follows:

- Alcoholism is an Involuntary, Primary Disease that is describable and diagnosable.
- Alcoholism is a chronic and progressive disease.
- Alcoholism is not curable, but the disease may be arrested.
- The nature of the Alcoholic's initial motivation for treatment, its presence or absence, is not a predictor of treatment outcome.
- The treatment of Alcoholism includes physical, psychological, social and spiritual dimensions.
- The successful treatment of Alcoholism requires an environment in which the Alcoholic is treated with dignity and respect.
- Alcoholics and addicts are vulnerable to the abuse of a wide spectrum of mood altering drugs. This whole cluster of mood altering drugs can be addressed through treatment that defines the problem as one of chemical dependency.

- Chemical Dependency is best treated by a multi-disciplinary team whose members develop close, less formal relationships with their clients and whose activities are integrated within an individualized treatment plan developed for each client.
- The focal point for implementing the treatment plan is an assigned primary counselor, usually themselves a recovered Alcoholic, of the same sex and age group as the client, who promotes an atmosphere that enhances emotional self-disclosure, mutual identification, and mutual support.
- The most effective treatment for alcoholism includes an orientation to AA, an expectation of step work, groups that combine confrontation and support, lectures, one to one counseling, and creation of a dynamic learning environment.