Millions of people around the world are living proof that recovery is stronger than addiction. And living proof that treatment works. Families heal. Recovery lasts. Life gets better.

For more than 65 years, our nonprofit organization has devoted each new day to helping more people reclaim their lives from addiction. Our expertise reaches across clinical care, published resources, professional education, and research—wherever, however, whenever we can help one more person find freedom from addiction.

Together, we will overcome addiction. We are proof.

Are you or a loved one struggling with alcohol or other drugs?

Call us toll-free, 24/7, at 800-257-7800 or visit us at HazeldenBettyFord.org.
For a disease that strikes 1 in 10 Americans over the age of 12*, addiction to alcohol or other drugs is surprisingly misunderstood by most people.

Three things you should know—

**Addiction is a disease.**
Addiction has been recognized as a disease by the American Medical Association since 1956. The American Society of Addiction Medicine describes addiction as “a primary, chronic disease of brain reward, motivation, memory and related circuitry.” Like other chronic diseases such as diabetes, asthma, and hypertension, addiction often involves cycles of relapse and remission.

**Addiction doesn’t discriminate.**
It is an equal opportunity disease. It reaches across age, race, gender, and socioeconomic status, striking more than 20 million Americans.

**There is hope.**
Like other chronic diseases, addiction can be managed successfully. Most people who go to treatment programs not only stop using drugs but they also improve their occupational, social, and psychological functioning.**

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*2012 National Survey on Drug Use and Health (Substance Abuse and Mental Health Services Administration)
**Principles of Drug Addiction Treatment: A Research-Based Guide, National Institute on Drug Abuse
Meet Elizabeth D., age 23. Today, with four years in recovery from opioid/heroin addiction, Elizabeth describes the awakening during treatment that saved her life.

When did you start drinking or using drugs?

When I was 15, in high school. It started with drinking and study drugs [Ritalin, Adderall]. On weekends, mostly. I had good grades and was involved at school; I was in marching band and took Advanced Placement classes. But by senior year, my weekends got crazy. I drank a lot, and I don’t really remember much of what happened. Even today, friends from high school tell me stories about what we did, and I don’t remember.

I went away to college, and I was on my own for the first time. That’s when I went completely overboard. I was taking Oxycontin. Later, when it was difficult for me to get Oxycontin, I switched to heroin. I didn’t go to classes. Didn’t make friends. Just wanted to do drugs or “have fun,” as I called it.

What was your day like?

I would wake up at two or three in the afternoon; missed all of my classes. And I’d immediately go to the bank and withdraw cash from the savings account my parents set up for me. I’d withdraw $200 or so, thinking it would get me through a few days, which it never did. It lasted one day. I had a guy living in my all-girls dorm room with me. He would drive me about an hour away from campus where we picked up what we needed at a hotel room. Then I would go back and hole up in my dorm room and watch Netflix until I passed out. That was my life.

I didn’t do anything else. I didn’t eat. I didn’t want to spend money on food when I could use it to buy drugs. I don’t know where all of that time went. Sometimes on Sundays I would try to clean up and eat something and not use. But by the end of the day I would feel so sick that I always ended up back at the hotel room buying drugs.
When did you know you needed help?

I didn’t. My family did an intervention when I was home for winter break. It was the classic scene where they each read their notes to me about how my actions made them feel. Right out of the TV show, I was thinking. Even then, I didn’t think I had a problem. I mean, I wasn’t using needles. I wasn’t out on the streets. Those were the kinds of thoughts going through my head.

My family had an assessment and treatment program all lined up for me at Hazelden and a plane ticket to Minnesota. I was extremely angry and didn’t want to go but decided to play it out so my family could see I didn’t have a problem. I was completely convinced the assessment would show I wasn’t an addict and didn’t need treatment.

Were you scared to go to treatment?

I didn’t know anything about treatment outside of what I saw on TV. I thought it would be cold, sterile, scary, uncomfortable. It’s not like that at all. It’s a really nice place to be. You’re completely taken care of the whole time. Everybody gets their own treatment plan, so each morning your schedule is printed off for you listing your appointments and assignments for the day.

What changed in treatment?

My counselor told me I was in denial about my situation and gave me the assignment to talk with a peer about it. So I asked one of the other girls in treatment what she thought. She told me to think about myself before I started using, to look at my 19-year-old self through my 14-year-old eyes.

And to ask myself what, back then, I thought my life would be like. And that’s when it dawned on me. I’d pictured going to Duke University. Becoming an attorney. Being surrounded by lots of friends and family. Instead, I was alone. Miserable. So, so low.

That was your turning point?

Completely. I got a before-and-after picture of my life, and I could finally see that drugs and alcohol were ruining everything. Once I realized where my life was going, I was so extremely grateful to be in a place where I could get help. There was a solution for me. Things could be different. I was thirsty for this new knowledge. That’s how I started to learn about my addiction and how to start living again.

The First Lady of Recovery

Betty Ford’s legacy of hope

Former First Lady Betty Ford put a courageous new face on recovery in 1978 when, at age 60, she openly sought treatment for addiction to alcohol and prescription medications. Her candor created a national dialogue and lifted the shame surrounding addiction, unlocking the door to recovery, especially among women.

In 1982, the former First Lady opened the door to recovery even wider when she cofounded the nonprofit Betty Ford Center in Rancho Mirage, California, modeling the clinic after Hazelden. She became an outspoken advocate for treatment, raising awareness about the disease of addiction and the potential for recovery. Her legacy of courage and compassion, now united with Hazelden, ensures countless more individuals and families will find new life in recovery.

Closer than you might think

Patients come to the Hazelden Betty Ford Foundation from across the country and around the world. With treatment centers in California, Minnesota, Oregon, Illinois, New York, and Florida, we’ve been a place of new beginnings for hundreds of thousands of people from all walks of life.

See a list of our locations at HazeldenBettyFord.org.
The Hazelden Betty Ford Foundation’s earliest clinicians developed the addiction treatment approach most widely used in the world today, known originally as the Minnesota Model. Combining medical care with the emerging Twelve Step mutual support practices, addiction treatment for our patients was, above all, provided with empathy and dignity.

Fast-forward to today. The innovation continues. As science further reveals the complex biological and behavioral workings of addiction, our treatment approach integrates the latest research and proven-effective practices—always leading with the respect and compassion that has set our care apart from the beginning.
A plan built for you.

Addiction doesn’t happen overnight. It’s a gradual process so incremental that it’s often not recognized until someone else intervenes.

And, with addiction, every person’s situation is different. At the Hazelden Betty Ford Foundation, we take into consideration physical and mental health, gender, family history, types of drugs being abused, and many other variables.

Understanding those differences is important in developing the best possible plan to help you or your loved one get well and stay well.

Assessment
A careful process to ensure an accurate diagnosis.

Residential Addiction Treatment
Campus-based intensive care to meet the unique needs of each individual.

Outpatient Addiction Treatment
Programs that meet during the day or evening so you or your loved one can tend to work and family responsibilities.

Structured Sober Living
Structured sober living environment paired with outpatient treatment provides comprehensive care and support for lasting recovery.

Continuing Care
Ongoing counseling to support and reinforce development of healthy behaviors, relationships, and lifestyle.
Being there for families.

Addiction is called “a family disease” for good reason. Families are in pain. By the time most families reach out for help, the disease has progressed to a crisis level. Families feel traumatized and overwhelmed; they’ve been lied to and betrayed. There are arguments and confrontations, slamming doors, and sleepless nights. Often, there’s more serious trouble—an accident, a lost job, an arrest.

Families need help in their own right. Our educational and support programs help families learn about the disease of addiction and how it affects them. With care and support, families are able to work through the chaos they’ve experienced, understand how to set healthy boundaries, and begin to rebuild a trusting relationship with their loved one.

Knowing that the disease of addiction is passed from one generation to the next, our prevention programs embrace children who are directly affected and educate K–12 students, their parents, and school communities.

Family Programs
Social Communities
Parent Recovery Groups
Parent Coaching
Children’s Programs
Prevention Programs

To learn more, visit HazeldenBettyFord.org
Getting your whole picture.

The way you think. How you feel. What you believe. Addiction changes everything about a person. It affects judgment, emotions, and beliefs. That’s why our treatment approach is holistic and personalized, providing care for the mind, body, and spirit. Our multidisciplinary teams take into account everything you or your loved one needs to get well.

At the Hazelden Betty Ford Foundation, we provide a comprehensive continuum of care for:

- **Men**
- **Women**
- **Adolescents & Young Adults**

Our residential treatment centers maintain separate programming and lodging for males and females.

To learn more, visit HazeldenBettyFord.org
INTEGRATED CARE

Designed to meet your needs.

More often than not, addiction comes with complicating factors, including mental health issues related to anxiety, trauma, eating disorders, or depression. As many as 80 percent of alcoholics experience symptoms of depression.*

With such complex disorders, the most-effective approach is to integrate addiction and mental health treatment so that both issues are addressed at the same time. Your treatment team includes medical and mental health professionals who design your care plan with whatever therapies, mental health services, and medications are appropriate.

Mental Health Assessments
Psychiatric Consultation
Medication Management
Individual & Group Therapy
Family Therapy

*Treatment and Mental Illness,” Research Update, published by the Butler Center for Research, Hazelden Betty Ford Foundation.

To learn more, visit HazeldenBettyFord.org

TREATMENT & RECOVERY
TARGETED CARE

Extra focus when needed.

The more we learn about addiction, the more our treatment efforts can be targeted to address specific risks and challenges. For those who suffer from chronic pain or are in recovery from addiction to painkillers, careful medication management can be an important part of aftercare. Peer group support can be an especially important part of treatment for physicians, attorneys, and other licensed professionals who face significant risk and recovery issues unique to their professions.

Informed by the latest research and best practices, specialized treatment programming for you or your loved one ensures the most-effective care.
With you every step of the way.

The changes made in treatment—the way you think and react and care for yourself—are new ways of living that take practice. Regaining and maintaining health means learning to live differently, learning to manage a chronic disease.

Staying connected with others in recovery is one of the healthiest moves you can make. Whether you want to be part of a structured recovery support program or you prefer informal support networks, our services and resources are designed to help you get answers when you need them and share that wisdom with others along the way.

Web-Based Recovery Tools, Coaching, and Support
Recovery Support Apps
Recovery Support Text Programs
Recovery Coaching & Monitoring
Online Recovery Social Network
Alumni Groups & Activities
Recovery Retreats
Recovery Celebrations & Special Events
Daily Inspirational Emails
Books & e-Books

To learn more, visit HazeldenBettyFord.org
In 1954, Hazelden published a book written by a man who simply wanted to help other alcoholics. The book’s format was untried—a daily reading, meditation, and prayer. Selling almost 5,000 copies in its first year, Twenty-Four Hours a Day launched Hazelden’s publishing division and introduced a now iconic self-help tool: the daily meditation book.

Today, we are the world’s leading publisher of addiction treatment and recovery resources. Our mobile apps and e-books, online bookstore, and on-demand curricula and videos for professionals put this world of information and inspiration at your fingertips, 24/7.
Isn’t treatment for the addict the end goal families need most?

Treatment for the addict is a starting place for the rest of the family to begin healing. Families need help in their own right. When an intervention is done properly, family members rally together and are educated about the disease of addiction and supported in taking action against addiction. I’ve seen families come together in unbelievable, amazing, beautiful ways through an intervention. The family is able to set the anger aside and move into empathy. Then their loved one goes off to treatment, the family is left on their own, and nothing more changes for them. Most alcoholics and addicts coming out of treatment have a recovery plan, but families are left to figure things out for themselves.

What kinds of things do families need to change?

Families are profoundly affected by the disease of addiction, but they don’t realize the extent. More than anything, family members need help in recognizing and changing the fear-based behavior patterns they’ve developed in response to the
disease of addiction. They have been living in crisis mode and, as a result, have developed some unhealthy survival skills that carry over into all other areas of their lives. These survival skills become behavior patterns, or what’s called “character defects” in Twelve Step language.

Some of the more common behaviors include the need to control others, perfectionism, hanging onto resentments, or behaving like a martyr. These are ways we learn to protect ourselves from pain. Peel back each of these behaviors and you’ll find the same thing: fear. Families who live with addiction live in a state of fear, behaving in ways to keep themselves safe—not understanding that those survival behaviors further perpetuate the fear.

How does the family get out of that cycle of fear?

There are simple, practical strategies families can put into action to build a circle of support for each other. I call it “Structured Family Recovery.” It begins when family members learn to take focus off of the addict and, instead, begin to focus on their own behaviors. More than anything, families worry about relapse. Everyone’s focus is on the addict. This has been the pattern. For months or years leading up to treatment, the family has been in crisis and watching the addict like a hawk, fearing whatever the next consequence might be. During treatment, all attention is on the addict, too. And after treatment, everyone’s attuned to the addict’s every move, terrified at the prospect of relapse. But families can change their focus and work in a collaborative way to not only reinvent their relationships but also be of support to one another, which reduces the probability of relapse.

So, you use the term “circle of support” to describe a family?

The circle image came to me in working with a young man whose family was at a loss after years of experiencing his mother’s struggle with addiction to opiates. His mother would go to treatment, stay sober for a while, and then relapse. Each time she relapsed, he said it felt like his family was standing outside a circle, turned inward, and all pointing at his mother in judgment. When his family finally got help for themselves, he described it as standing inside the circle—holding hands, working recovery together. That’s what Structured Family Recovery feels like for the family. You’re all in it together, including the recovering alcoholic or addict, each taking personal responsibility for yourselves and at the same time supporting one another.
Hope, to share.

As long as people in recovery and their families courageously tell their stories.
As long as clinicians and researchers push for new approaches and more answers.
As long as educators and community leaders believe in reducing risks and building resilience.

We will continue to publish resources to build that better tomorrow.
Our earliest leaders believed there were too many people suffering with addiction for us to keep our knowledge and experience to ourselves. That’s why our doors have always been open to other treatment providers and professionals—physicians, psychologists, social workers, clergy—to come and learn with us.

Today, our Hazelden Betty Ford Graduate School of Addiction Studies is an accredited institution of higher education where the next generation of addiction counselors gains the professional competencies to deliver the most-effective help. And with each new clinician comes the uncharted potential to save hundreds, if not thousands, of lives.

If you or a loved one is struggling with alcohol or other drugs, call 800-257-7800. HazeldenBettyFord.org
Meet Manuel G. of Mexico and Ahmed E. of Egypt, licensed and practicing addiction counselors and alumni of the Hazelden Betty Ford Graduate School of Addiction Studies. Both in long-term recovery from addiction, Manuel G. and Ahmed E. started graduate school with a special place in their hearts for people still suffering from the disease. What they gained was a different education in addiction recovery: the clinical skills to deliver the most-effective help.

What brought you to the graduate school?

Manuel: I first heard of Hazelden when I was 16 as one of the treatment options my parents considered for me. At 18, after I got clean and sober, I needed to decide what to do with my life. I realized I wanted to help other addicts. That was an important turning point for me because I was a guitarist, a performer, and was accepted at the Berklee College of Music in Boston. Instead, I stayed in Mexico City to earn a bachelor’s degree in psychology, with the goal of going on to become an addiction specialist through the Hazelden Betty Ford graduate school.

Ahmed: I was working as a counselor in the addiction unit of a psychiatric hospital in Egypt. I am a recovering addict, and I’d actually gone to treatment in that same hospital. I knew of Hazelden through its books and pamphlets on addiction and recovery. I had a bachelor’s degree in psychology, and my supervisor suggested that I continue my education if I wanted to work as a clinician. Hazelden seemed the obvious choice. I didn’t know it at the time, but our treatment model in Egypt was based on the Hazelden model of care. That’s something I discovered after arriving at the graduate school.
A Big Reveal

Professionals gain insight into addiction treatment.

A week-long summer institute held at the Betty Ford Center in Rancho Mirage, California, and also Hazelden in Center City, Minnesota, puts a face on the disease of addiction for medical students. Shadowing treatment patients or family program participants, medical students learn about addiction, treatment, and recovery from the patient’s perspective.

It’s quite an awakening, as described by medical student Sahbina E., from Meharry Medical College. “I was overwhelmed by the honesty and openness of the family members who were a part of my group. I will never lose sight of the fact that addiction is a disease and that, as a future physician, I carry the responsibility to use the information I’ve acquired to help patients and their families.”

Social workers, health care professionals, educators, and other helping professionals have opportunities for on-site learning at the Hazelden Betty Ford Foundation, as well. Through residential study programs, visiting professionals get an up-close look at the challenges of addiction and the effectiveness of treatment.

Online and in-person continuing education courses, delivered by our clinicians, authors, and other experts in the field, connect professionals with the latest thinking and best practices in addiction prevention, treatment, and recovery.

Does your recovery experience make you a better counselor?

Manuel: A natural and important part of recovery is sharing your experience with other people who are working a Twelve Step program. Having that shared experience is still important, but now, as an addiction counselor, I’m able to clinically guide people through the stages of change.

Ahmed: Being in recovery gives me a better understanding of challenges the addict and family members face, but I don’t think it makes me a better counselor. My education through the graduate school makes me a more-effective counselor, a skilled clinician. I have the knowledge and skills to be effective—the scientific approach to treat the disease using evidence-based practices.

What does the world need to know about addiction?

Ahmed: What people don’t understand is that treatment works. We tend to hear and see only the bad outcomes, the news stories about famous people who get DUIs or commit other crimes or relapse and die. There are so many more people who go through treatment and are doing well. I think we will start hearing more and more of the good news. People in recovery are beginning to speak up.

“NOW, AS AN ADDICTION COUNSELOR, I’M ABLE TO CLINICALLY GUIDE PEOPLE THROUGH THE STAGES OF CHANGE.”

“I WILL NEVER LOSE SIGHT OF THE FACT THAT ADDICTION IS A DISEASE . . .”
We know addiction treatment is effective, measurably so. And treatment outcomes improve even more for patients who participate in continuing care or stay involved with recovery support groups. But more can be done. By studying the dynamics of addiction—how change happens, what internal and external factors matter most—we can help even more people.

Through clinical and institutional research, the Butler Center for Research at the Hazelden Betty Ford Foundation asks the questions that lead to increasingly effective methods of addressing addiction, from prevention to treatment to lasting recovery.
Together, we will overcome addiction.

Millions of people die because of the stigma that surrounds addiction to alcohol and other drugs. Our Hazelden Betty Ford Institute for Recovery Advocacy is dedicated to breaking the silence around addiction and promoting policies aimed at helping people more easily access treatment and recovery support.

As the nation’s largest nonprofit treatment provider, we rely on the generosity of donors who make hope and healing possible. We see a future where no one suffers or dies from addiction, a disease that can be treated, managed, and overcome. And every day, through expert care, published resources, professional education, research, and the support of donors, we are helping to build that promising new world.

HazeldenBettyFord.org
If you or someone you love is struggling with alcohol or other drug abuse, there isn’t a better place to find help and answers than the Hazelden Betty Ford Foundation.

Reach out today. We’ll be there for you.

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The Hazelden Betty Ford Foundation is a force of healing and hope for individuals, families and communities affected by addiction to alcohol and other drugs. It is the nation’s largest nonprofit treatment provider, with a legacy that began in 1949 and includes the 1982 founding of the Betty Ford Center. With 16 sites in California, Minnesota, Oregon, Illinois, New York, Florida, Massachusetts, Colorado and Texas, the Foundation offers prevention and recovery solutions nationwide and across the entire continuum of care to help youth and adults reclaim their lives from the disease of addiction. It includes the largest recovery publishing house in the country, a fully accredited graduate school of addiction studies, an addiction research center, an education arm for medical professionals and a unique children's program, and is the nation’s leader in advocacy and policy for treatment and recovery.