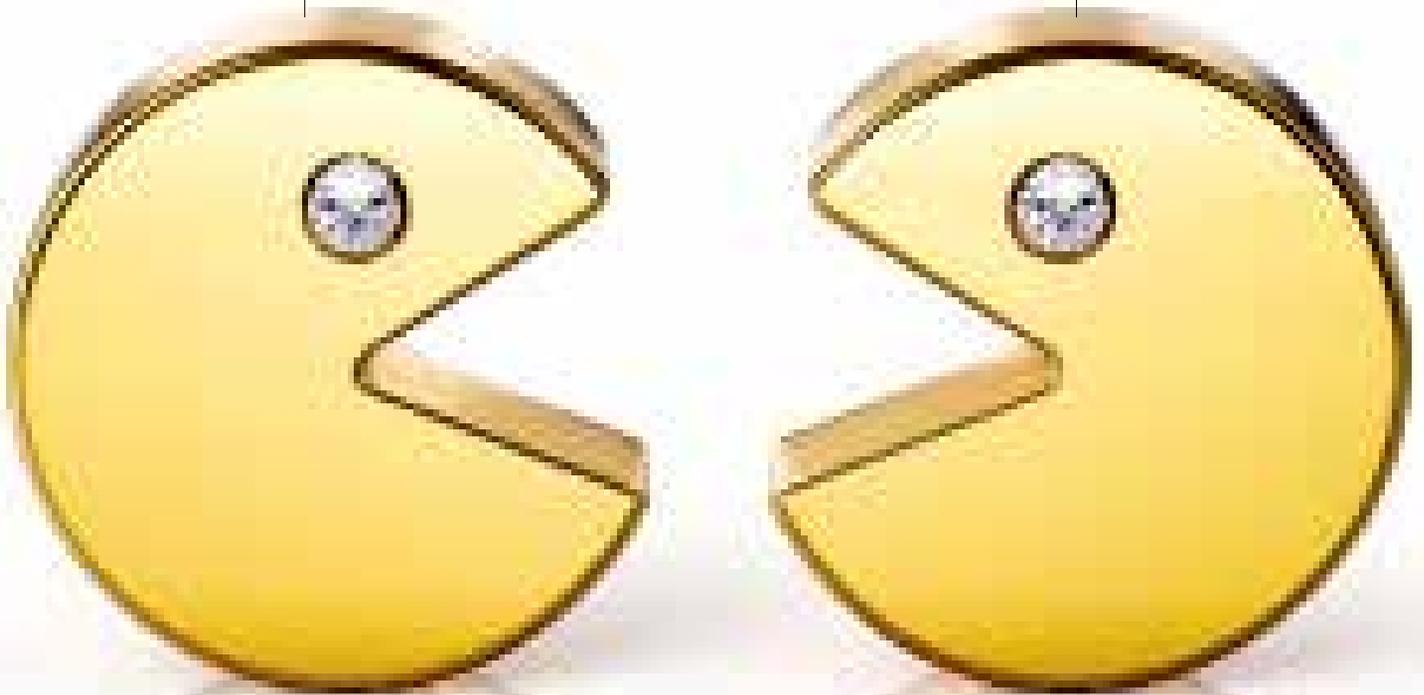


I'm OK

You're OK



HOW REHAB BECAME BIG BUSINESS

There used to be only one way to get clean, but now ex-junkies and entrepreneurs are getting in on the game, offering everything from wilderness therapy to ultra-luxurious one-on-one treatment – at a price. David Jenkins investigates

Cosmo Duff Gordon is a tall, laidback Old Etonian who 'never had a job till I was 30' – which was when the now 47-year-old emerged from a failed attempt at rehab, gave up injecting speedballs (heroin and cocaine in one syringe) and got work 'as a telephonist, basically' at a friend's food-delivery firm. But he carried on smoking heroin – 'my work enabled me to fund my addiction' – until, in 2004, an uncle seduced him with the suggestion that he 'pack my golf clubs and some suits', go to South Africa and give rehab another shot. It worked. He spent 'six or seven months' at a well-thought-of facility called Kenilworth, got clean and became a counsellor at a treatment centre. Returning to England in 2010 with a wife, Mint, and two small children, Cosmo opened his own treatment centre, Start2Stop, described to me by one Mancunian ex-junkie as 'the Eton of rehabs'. So, I asked Duff Gordon, who are your clients?

'They're all dukes,' he said, without missing a beat. 'Or belted earls.' Actually, he agrees, he does get a lot of Old Etonians – he advertised his clinic in the Old Etonian Association's journal this year – and Old Harrovians. His clientele is mostly in west London – he's based in a mews in South Kensington – and, when I met him, he had journalists, lawyers, a model, an office manager and other professionals on his books.

He's come to the field at an interesting time. Treatment, all agree, has become an 'industry'; people speak not only of their 'higher power' but of 'niche markets' and of 'propositions'. It's no surprise: City traders who've had their own troubles with drugs have scented an opportunity and joined the burgeoning field of private clinics, doing well by doing good.

Everyone knows Amy Winehouse said 'no, no, no' to rehab, but the whole notion of addiction has permeated society. Nowadays, it's not just drink and drugs that rehabs treat, but also eating disorders, post-traumatic stress disorder (PTSD) and even sex and love addiction – a trend made most famous by the clinics that populate California's 'Rehab Riviera'. Meanwhile, state funding for the treatment of addicts and alcoholics is drying up. And the model that underpins almost all clinics – the hallowed Twelve Step programme of AA – is being criticised for failing, in the end, to work and is being topped up by new approaches like 'trauma treatment' or 'eye movement desensitisation and reprocessing' (EMDR). Professionals increasingly emphasise the need, after 'primary' residential rehab, for 'secondary' and even 'tertiary' residential treatment before their clients make their way

back into society. And the costs – well, the costs are not to be sneezed at, especially if you don't have your firm's health insurance to pay for it.

But what sort of rehab to go for? The one I went to, back in 1987, was in a beautiful, run-down country house, based on confrontational group therapy and very austere – no books could be read, no TV watched, no sexual relationships entered into. It adhered rigidly to Twelve Step orthodoxy. What's on offer now is very different.

Duff Gordon, for instance, has two USPs to bring to the party. The first is a 100-day-long outpatient programme (called Foundations) to which binge drinkers and druggies come in the evening for rigorous group therapy, lectures et al. He reckons that only about 15 per cent of addicts are 'chronic', people for whom 'addiction is their lifestyle', drinking vodka or smoking heroin for breakfast – they need residential rehab. Another 20 to 25 per cent or so are 'top-up' types, who tipple or snort through the day before tipping and snorting a great deal more at night, and yet still function. The rest are those with 'impaired control – if you plan to go out to the pub tonight and have three to four pints and instead have six or seven, score some coke, go to a lapdancing bar, have sex with a hooker, get some sort of disease and give it to your wife, that's impaired control.' The 100-day programme suits them; they must enter clean (they're tested) and the programme is rigorous, though Cosmo's not surprised if there's a 'using episode' in the first few weeks; but they can continue doing their jobs – lots of them are time-poor. Not always for the right reasons, though: he's had clients 'who've done assessments in August and want to come, but say, "I can't do Saturdays because I'm shooting."'

His second USP is a 19-bed residential 'proposition' for tertiary treatment: ie, post-primary residential treatment ('starts with a detox, then group therapy, lectures and psychiatric and medical treatment') and secondary (less rigorous, but keeping up the good work). It is, he says, the only one of its kind in London and 'clients' can 'come and live here for probably six months, develop a support system in London, form friendships and go out to work if they want to, or volunteer. The outcomes are much better than if you go straight home after 28 days, which is an incredibly hard thing to do.'

Twenty-eight days is the standard UK rehab stint. And, says Lowell Monkhouse, founder of the Kusnacht Practice in Zurich, which charges a cool 10,000 Swiss francs (£6,600) a day, 'I call it the spin-dry. All the research shows it's not enough time. But this

28-day thing, which grew out of [what] the US insurance industry [would pay for], still seems to play a role, in Britain certainly.' Duff Gordon charges an 'affordable' £4,500 a month for residential treatment, and £7,500 for his 100-day programme. These are, he admits, 'big chunks of cash'. But compare them to the Priory (a reported £4,000 plus per week for addiction problems) and the estimable Life Works (£19,180 for 28 days) and you can see why Daniel Gerrard, the former City man who founded the online referrals service Addiction Helper, 'likes the mid market'.

Gerrard's 'gift' was trading and he made a lot of money very young, blew it all by 32 (primarily on coke), got clean and saw a way to use his business savvy. Addiction Helper is up at the top of the Google list – a spot that costs £100,000 a month – and fields 5,000 calls a month, of which 4,500 are looking for advice on free treatment; 500 are looking to go private, of whom Addiction Helper will place 120 to 150 or so a month. Cadres of employees listen to the caller's needs and make their suggestions as to where might be suitable. 'We're like a travel agent,' Gerrard says. 'We know every rule, every bedroom layout' – and everything about the treatment on offer. Addiction Helper then pays the fee the chosen treatment centre demands and takes a percentage from that fee – 'usually about 20 to 25 per cent', Gerrard says. It's the discount he has negotiated with the rehab centre. 'The clients pay us, we pay the rehabs, and the counsellors and doctors – whoever we work with – we pay them.'

Eytan Alexander is another City alumnus who got clean through the Twelve Step programme and he's founded his own treatment centre, Sanctuary Lodge, in Essex, charging a competitive £9,500 a month. Its bedrooms have ensuite bathrooms and flatscreen televisions, but Alexander says his USP is the excellence of his therapists. How did he get them? 'I paid them' – he's a believer in Jimmy Goldsmith's adage that 'if you pay peanuts, you get monkeys'. He and his delightful clinical director, Hilary Betts, are big on trauma therapy – the fact that for many people there is a trauma that precedes addiction. The 17-year-old Daniel Gerrard, for instance, was in a car with his best friend when the car crashed and his friend died. In Betts's view, 'in this country there's been a reluctance to dig too deep with people when they're in primary treatment. The story has been to settle the addiction down, sober them up, and then a bit further down the line open them up and sort things out. But I think the Americans realised, maybe 15 years ago, that sometimes people need to look at that ▷

< stuff in treatment.' Betts is particularly keen on the approach developed by Pia Mellody at the Meadows in Arizona, but trauma therapy is, everyone in the field says, the happening thing in addiction circles these days.

'There's always a new big thing,' says Chip Somers, a longtime big cheese in treatment circles. 'First it was cognitive behavioural therapy, then neuro-linguistic programming. Then it was tapping [of foreheads], then it was equine therapy, now it's EMDR. Equine therapy!' He rolls his eyes. 'Everyone knows if you have a dog in rehab, dogs are good. Dogs don't talk back, they trust you, it's reassuring, it's great. But it's not canine therapy. It's just a dog. Same with a horse. Please don't think it's some miracle breakthrough. You might as well have free-fall-parachute therapy. For the adrenalin, for a new experience.' (The well-regarded Oasis, in South Africa, offers swimming with dolphins, and Vincere-Huguenot, also in South Africa, talks of 'the opportunity to closely interact with elephants'. And Betts, excellently, once did EMDR 'and it was very helpful. I tried to try the things that people are cynical about, and people charging £300 a session for moving eyes backwards and forwards... well. But I really experienced a relief from the trauma that had happened to me.') Somers until recently ran Focus12, a

of the private clinics – Life Works, for instance, offers free treatment for combat veterans. But, as Somers says, 'The one place you can make a cut and nobody gives a shit is in drugs and alcohol treatment.'

But, I say, is that any surprise? Aren't rehab outcomes very poor? Somers shifts in an armchair in the handsome Harley Street flat in which he practises as a therapist – £120 an hour in London, £85 in his Cotswolds practice, near Chipping Norton, which, given the nature of the neighbourhood, is unsurprisingly busy. 'I've always faced that straight on,' he said. 'Even at the best rehabs, you might get 20 to 25 per cent [success]. If you do better than 25 per cent, you're doing bloody well. But 65 per cent fail their driving test the first time. You don't say that if you've failed, you can never drive.' Still, Somers goes on, 'Twelve [one-on-one] interventions with a therapist actually have the same outcomes as rehab – with a bit of extra support from AA meetings, even better. CBT – roughly the same outcomes.'

Nonetheless, Somers thinks rehab is worth it: 'I would still want your daughter to go. No one comes having not tried to stop using. They've tried and failed due to peer pressure, stress, the habit of it. Going into rehab breaks that cycle, gets you into a safe place.

Kusnacht's 67-year-old founder has both his cost rationale and the thinking behind his insistence on one-to-one therapy ready. Monkhouse has worked at both the Priory and prestigious American rehabs, and 'what I noticed was that people were leaving anxious and depressed and often insomniac, and sometimes still craving. And these seemed to be the reasons they were self-medicating in the first place. So I concluded that the underlying causes of addiction weren't being addressed. And I think that's one of the reasons the Twelve Step programme is being criticised – the incidence of relapse is so huge.'

So, since starting Kusnacht in 2007, he's taken another tack, even though the Twelve Step programme is still the 'basis' of Kusnacht. He believes the 'brain chemistry' of addicts is up the spout but that his medical team can deal with that via, for example, personally tailored amino-acid supplements and micronutrients to remedy vitamin and mineral deficits, and that you need to 'repair your neurotransmitters'; that 'once we get the brain functioning properly, [it's time] to do some in-depth psychotherapy', including trauma therapy. As for group therapy – the sine qua non of almost all other rehabs – 'if you sit in group therapy all day, how are you to do EMDR, or Somatic

'KINGS OR HEADS OF STATE WILL NOT BE GETTING DOWN AND DIRTY WITH YOUR EVERYDAY ADDICT'

centre near Bury St Edmunds, to which my Mancunian source went: 'It's got all these celebrity associations. You walk in and there are pictures of Boy George, Davina McCall and Russell Brand on the wall. If you're not self-medicated already, you fucking well will feel you are when you see those pictures, I can tell you.'

Eytan Alexander (coke, drink, sex) got clean through 'the rooms' – the church basements and scruffy halls where AA and NA meetings are held for free. And it is AA's teachings that almost all treatment centres rely on. This prompts what can be seen as the treatment-centre paradox: how can you make money ethically from something that was given to you free? And people do make serious money – Mitt Romney's private-equity company is the largest owner of rehabs in the USA, where there are 14,000 of them. In the UK, government funding is likely to get yet scarcer in these austere days, though there are, of course, pro-bono beds in many

There aren't abusive boyfriends, screaming children. It's intense, you'll probably have a life-changing experience, you learn a lot about yourself.'

Some people still like the stern sort of treatment centre I went to – Daniel Gerrard says policemen and ex-Army personnel yearn for a strict regime – but many want something more loving and physically comfortable. Gerrard's not really a fan of expensive treatments – 'a room's a room' – but he has dealt with both Life Works and the super-costly Kusnacht Practice.

Experiencing, or mindfulness work, or nutritional and lifestyle work?'

What's key is 'creating a medication for your body that's one-off. And it's very, very expensive to produce these one-off formulations. And to do that, you need to charge a lot of money. So then it became a question of finding the clients who can afford this.' Included in that reassuringly expensive price tag is a 'clinical residence' – ie, a villa or multiple hotel suites – and the personal services of some 12 people, including a butler, a chef, a maid, a trainer,

a reflexologist, an acupuncturist and a live-in psychologist. All of which comes after a spell in hospital, where all the biomedical work is done. Eating disorders constitute a surprisingly large treatment pool, but a lot of it is 'the traditional alcohol and cocaine'.

And how many patients, I asked, could he take on at one time? 'Well, initially, one.' He laughed. 'And then we moved to about three. Now we have capacity for six.' When we spoke,



there were five patients at the clinic: two had committed to staying for three months, one to four months. A recent client had stayed for nine months. At 10,000 Swiss francs a day – well, do the maths. Monkhouse talks of kings, members of royal families, heads of state, senior military personnel. As such, they require total privacy. Yes, says Monkhouse, some clients have gone into Zurich for AA/NA meetings, but it certainly wouldn't do for those kings or heads of state to be seen getting down and dirty with your everyday addict. So private meetings are organised – as we spoke, a group was being brought in from London to huddle with a client.

Such exclusivity isn't unknown – the CIA is said to have private meetings at which operatives can open up about their part in, say, assassinations. But Londoners have been used to seeing 'Eric' (Clapton) and 'Elton' at their meetings; even Michael Jackson was toted, unhassled, round the London rooms when he was trying to get clean. Meanwhile, another source told me, a colossally rich Euro was showing up at NA meetings in London in a chauffeur-driven limo, with bodyguards and a 'stunningly beautiful' girlfriend who had her own 'sober buddy' with her. Paid sober buddies are another newish development – essentially, they shadow their employer, preventing relapse, encouraging sobriety, providing counsel – and Kusunacht has its own version. It will send the live-in psychologist home with its clients once they've left Switzerland to help organise their life in the place where all the old using 'triggers' reside, for as long as six months or more. Such one-on-oneness is what's also on offer from Topes Calland, an ebullient 30-year-old ex-Oxonian with a hugely self-confident voice, a man bun and Dries Van Noten trousers. As he talked in the Patisserie Valerie on Old Compton Street, a neon sign in the shop across the road seemed to sit on his shoulder, screaming the words 'ADDICTED ADDICTED ADDICTED'.

But that's not what Calland deals with – and if he did, he certainly wouldn't vouch for 'the Malibu Model, which mainly appeals to celebrities who are very entitled and used to getting what they want: lots of sushi and shiatsu massages and optional treatments'. That's the antithesis of what he offers his clients – his clients being the often equally entitled and difficult adolescent offspring of the very rich, be they rock stars or industrialists. His recommendations are 'entirely tailored to the client, to their personality. And it's very rarely just a substance-abuse problem.'



CLOCKWISE FROM LEFT, THERAPIST COSMO DUFF GORDON; A HALFWAY HOUSE IN WEST LONDON; A LUXURY RESIDENCE IN ZURICH USED BY THE KUSUNACHT PRACTICE



Anyway, with teenagers, he finds a Twelve Step programme hard to sell. 'If you're a 50-year-old man who's lost his wife, his home, his job, everything – then you're prepared to say, "I'm powerless to this addiction." Whereas if you're a 17-year-old boy who lives on pocket money and has probably just gone a little bit further than his friends...' Mainly, Calland reports, 'it's extreme entitlement and lack of motivation. The drugs are symptomatic of other issues.' Calland has had only 'six or seven' clients since he started his career in 2009 – he won't tell me his fees. They move in with him and he's with them 24/7; one parent signed guardianship of his son over to Calland, who took him round the world, tutoring him academically and 'generally mentoring him' for two years. A recalcitrant teen, who'd been thrown out of several schools, became a motivated young man.

Were drugs an issue, wilderness therapy would be Calland's initial suggestion: hiking for miles across the Utah desert, camping out and having therapy under the stars. Then he'd put his 24/7 programme in place, marrying academic work with a project to engage his charges – one kid was keen on shisha, and Calland helped him open a shisha bar, which sparked the boy's entrepreneurial zeal; the young client now works in antiques. (With Micheál Neeson, Liam's son and an 'old family friend' of Calland's rather than a client, he's been involved in setting up the Maison Mais Non fashion gallery in Soho, after Micheál checked himself into rehab.)

The wilderness-therapy outfits that Calland admires are Aspiro and Second Nature, both in America – he says all the best ones are. (Aspiro, for instance, has been going since 2006 and costs £300 a day, plus an initial 'gear' charge of £1,700, and sorts its clients into groups of no larger than nine; the average length of stay is 50 to 60 days. The whole trend has been gathering pace since the late Nineties.) That's why he'd like to found a 'therapeutic boarding school, probably somewhere really remote in Scotland, which has a wilderness element to start with. Scotland's good because their Right to Roam Act also allows the right to wild-camp for three to four days at a time. And I'd follow that up with an eight-month academic programme. Because when you're a teenager, what do you have to gauge success? How well you're doing at school. That's your main barometer.'

Boarding school, eh? With a wilderness side to it? And, no doubt, a rigour that would rid it of such namby-pamby modern comforts as mobile phones, 10-day half-terms and weekday-only boarding. Sounds like good old-fashioned Gordonstoun to me – and that sort of school brings well-known problems with it. As Chip Somers remarks: 'I've never known a dependent person without an absent father, either emotionally or physically.' There you have it: a traumatic event the addictive effects of which Life Works, Kusunacht, Hilary Betts, Daniel Gerrard, Cosmo Duff Gordon and many more will strive to heal. Providing you've got those 'chunks of cash', of course. □