



Recovery International

“The History and Development of Recovery International and Self-Help: How Dr. Low Revolutionized Psychiatric Care” Accessibility Video Transcript

Accessibility Transcript

The following is a transcript of the audio from The History and Development of RI and Self-Help: How Dr. Low Revolutionized Psychiatric Care. This transcript is provided to improve accessibility for visitors who are deaf, hard of hearing, or prefer reading the content.

Transcript

For anyone who doesn't know me, I'm Celinda Jungheim and I live in the Los Angeles area. I'm currently the President of Recovery but that does not qualify me to give the history of Recovery. I know a lot of you can be giving this history. But this is a specific part of the history and we will take some questions at the end. Please, if you would just write down your questions and we'll do those toward the end.

What I wanted to focus on is how Dr. Low really revolutionized psychiatric care and started the consumer movement. Those were things so unheard of when Dr. Low came onto the scene. I do want to thank Hina. She not only did all these slides but helped me tweak them and is here today. I just really thank her for all her help.

So first I'll give you my sources of where I got my material. We'll look at what the treatment was like when Dr. Low came on the scene in the 1930's. His early efforts to offer more compassionate care for people who were suffering. And we want to look at our RI development and some of the people that were the early pioneers. And by all means I am not covering everybody today - I just can't. Then we'll talk about Mrs. Low and Dr. Low's unique relationship with his patients. And then we'll have a little time for Q & A.

This picture, of course, we recognize Dr. Low in the middle. I think that is Beatrice Wade on the left. He did have a lot of correspondence with her. She was very supportive. I do not know the other people in that picture. So, my sources are first *My Dear Ones* by Neil and Margaret Rau. If you haven't had a chance to read it, I do hope you will. It's a wonderful story of both a biography of Dr. Low from his childhood onward and also a history of many of our pioneer people and of Recovery. It's a really good read. But it was published in 1970 so we need someone to come along and write 1971 on. Because that was a valuable part of our history. And then we have *Mental Illness, Stigma and Self-Help* which was written by Dr. Low. That's a much more clinical nature. His thoughts about the early beginnings of Recovery. Then we have *Lost and Found* - one of the early bulletins that came out. It not only included



Dr. Low's articles and lectures but also had things like gossip - what was going on in the organization. And I'll mention a couple of other things that come along there later. We have *Historical Development of Recovery* dialogue by Treasure Rice and Phil Crane. This was published in the Reporter in the early 1970s and I recently gave it to Jessica Shurba, our Administrator at Headquarters. She did a great job of putting all together, typing it up and getting it ready. So, I'm hoping that at some time we can print it and use it in some way so that you can all read it. And then the *Recovery's First 50 Years: A Pictorial History* that was done for the 50th Anniversary of Recovery in Chicago. It has a picture for every year and a little description of the things that happened that year. It's a lot of fun. We have a few copies of that around various places. Some of you may have them. And some of this is my personal history as I've been around a long time and had the privilege of knowing some of these people. But never Dr. Low. Never met Mrs. Low.

I just want to talk about treatment in the 1930's before Dr. Low came around. There was really minimal treatment. If you had one of the more severe mental illnesses, you were locked up unless you spontaneously recovered. And a lot of people suffered greatly with their thoughts, with their manic phases, with their depressions and most of the treatments were just to manage the symptoms, not to try to cure or have a lasting management of symptoms. So, some drugs were just sedatives which just suppressed the patient's nervous system. There were a few mind/body therapies that didn't really work. Hot and cold baths known as hydrotherapy. Those were to keep people as calm, if possible. And a few different types of shock treatments - insulin, Metrazol and electro-convulsive therapy (ECT). That's still used but has been greatly improved since that time.

I wanted to look at the difference between Freudian Analysis and the benefits of Dr. Low's self-help model. Remember Dr. Low was trained in Freudian Analysis. That was his training in Europe. But as he got to the Institute, he rejected that training. It was far too expensive, and it took a long time. People were often in therapy for many years. It wasn't available to many people partly because of the cost and partly because there weren't enough people trained to provide the therapy. And over the years, it's been shown it has dubious outcomes.

The benefits of Dr. Low's self-help model was that it could be widely replicated. Look at the many places people are attending today. We've gone around the world without any medical director to supervise it. It encourages peer support and self-leadership. Most doctors say, "I'm the doctor and you're the patient" and that's as far as it goes. In his model, the patients were a very important part. Our Group Leaders are the most important part, I think, because they provide this Method. It could reach many people. It's inexpensive. We still don't charge to go to a meeting. We ask for a donation, but we do not require anything. And it allowed a doctor to oversee many patients at a time. And, of course, it practiced social skills. Many of whom either never developed social skills because of their illness or lost them when they became ill.

One of Dr. Low's early goals was to eliminate the stigma. The stigma kept people from going home



and they didn't socialize, they didn't get in touch with one another, they couldn't get jobs and there was so much stigma. Often people were committed in a court of law and were taken away by a sheriff or some other authority - not like we do with a medical team these days. And people were treated with suspicion and as violent and dangerous. We know that most people with a mental illness are not violent and dangerous.

Dr. Low wrote in *Lost and Found*, "Our main objective is the fight against the stigma." I remember a woman who was an Assistant Group Leader in the Los Angeles Area in the late 1960s or early 70s and she was a school teacher. She was so afraid of losing her job that she used an alias when she came to Recovery.

Let's go on to the beginning of the consumer movement. Dr. Low never followed the path before him but always looking at what the patients need, began to realize that a person could be hospitalized at noon and then released and back home into the same environment in which they got sick at 12:30. He said, "We need to find a way to have a slow reintegration, so a person doesn't have that shock of being hospitalized in a very secluded environment and suddenly back with their family.

He started the weekly parties where people practiced their social skills and family members and former patients were encouraged to visit. And then the "Newsletter on the Ward" encouraged people in a meaningful activity and connected patients by forming friendships and social connections. He said there was a dead spot of time between four in the afternoon and seven in the evening when patients went off to their own rooms. People either sat around and stared or read a book, but very little socialization. Suddenly, as Phil Crane began to get better, he asked Phil to start the Retriever Newsletter. He said, "It's not just you. You need to find some people to help you, and it isn't what you say, it's what you get other people to say." Suddenly, people were very interested to see who was written up in the newsletter. Susie danced with David at the social. Mary Sue and James were seen talking by the punch bowl. They got all excited about it. And it really helped. Plus, the former patients came back and socialized, and they promised to get together when they got out.

And the patients became activists. The picture on the right is Lucy Fernandez in the front row and others in the front row, and they are the ones who translated *My Dear Ones* into Spanish. That's a picture from a later time. The picture on the left is from one of the parties they had. They were very active and tried to change the Illinois Commitment Law into a more humane thing. And we don't have time to go into that today but they were almost successful, except the governor vetoed it at the last minute - he waited until there was no time to appeal and he vetoed it. There was a lot of activism there.

They also refused to let Dr. Low shut down Recovery in the early 1940's. They started several committees which was new. This was self-directed, patient-directed. And they started up some committees like an innovative employment committee. Because of the stigma, people had trouble getting jobs. People would put an ad in the *Lost and Found* - I'm a plumber, or I do car repair, or I'm a cobbler, or I do washing and ironing. That way they began to tell each other and word of mouth



spread and they were able to make a living. I'm going to talk more about them not allowing Recovery to shut down later. But when he said he was going to do that, Annette Brocken in particular, said "We want it to continue," and they signed up 90 new members! They weren't going to take "no" for an answer.

So then became an emphasis on after-care. Before Dr. Low, as patients were released from the hospital, they were considered to be "on parole" and they had to come back to the hospital and check-in and they all hated it. It was a demeaning procedure. Instead, now patients wanted to come back to hear Dr. Low's lectures, they wanted to get together and attend the social events, to be able to discuss Dr. Low's literature. This picture on the right is also a little bit later. The person in the back that you see is Doug Elbert. He was from Texas and an early Executive Director for Recovery. Next to him is Phil Crane, who was the first Director of Leader Training. Next to him is his wife, Maxine. Other people I can't identify but I can make some guesses, but I won't do that. They also started up a club for transportation for people who didn't have funds to either go back to the hospital events or to the home groups.

Next, we'll look at some of the people who were the early patients and were so vital to our organization. Our first one is Harlan Tarbell, who was not a typical patient. He had not been sick for a long time like most of the patients. He was a well-known person, a nationally known magician. He traveled and toured around the country and did not know anything about Recovery until he got ill. During his tours, he met a doctor who had a "treatment spa" and he kept encouraging Harlan to come there. Harlan preferred to go on vacation and go fishing and camping but finally relented and went to this treatment spa where the doctor totally cut him off from any connection with his wife and his friends. He put him on a starvation diet to cleanse his body. His system just shut down. He was unable to eat. And finally his wife insisted on talking to the doctor who said, "He's mentally ill. He delusions of grandeur. He thinks he knows Houdini and Amelia Earhart and a number of our governors. And he gives me telegrams to send to them. Of course, we don't do that." And she said, "But they are his dearest friends and you've cut him off." And she got him out of there. When home, he was unable to eat again and finally went to the Psychiatric Institute where he met Dr. Low. He was treated and recovered and absolutely loved Recovery and talked about it from the stage. He had absolutely no stigma and thought of it as broken arm and told people about it across the country.

Unlike our next person-Phil Crane. Phil had so much stigma and when he came into the Psychiatric Institute he was severely ill. He had delusions. He thought he was a black man and needed to move into that community. He did not recognize his illness which was called Anosognosia. That's not uncommon with schizophrenics. In particular, that they don't recognize that they are ill. While at the Psychiatric Institute, he had 60 shock treatments. Dr. Low saw him everyday. He would say, "Hello, Phil, how are you today?" Phil was very uncooperative. Dr. Low would say to someone else that was there "Why do you think it is that Phil won't talk to me?" He always had some little back and forth with Phil. But as Phil began to get better, he remembered that Phil had edited his college newspaper and he asked Phil to start *The Retriever*. And I told you before how popular that became and how it really changed the energy on the wards of the hospital.



But after seven months, Phil was well enough to leave the hospital. Dr. Low told him that he must stay in connection with Recovery or he would not remain well. But Phil had so much stigma that he would not continue his Recovery until later. So, Phil did come back after a number of other hospitalizations. He finally realized he did need to follow Dr. Low's regimen and they became very close. He was the first Group Leader that Dr. Low trained. He later became our Director of Leader Training for many years. And as Dr. Low was ill those last few months of his life, before he went off to the Mayo Clinic, Phil went everyday to the hospital. And Dr. Low always had some notes for him. They would talk about how the meeting went. Dr. Low wanted to know exactly what examples were given and how it was handled. He told Phil to "keep it simple" make it very average. It's not what you say, it's what you get someone else to say. They were very close and of course it was a huge blow to Phil and all the others when Dr. Low did pass away.

I remember that Phil and Maxine used to go to San Diego in the winter to visit Betty Keniston, who is another pioneer - a wonderful person who was a President of Recovery. And we'd often see them there. They would come to Los Angeles to stay with Ralph and I either a few days before or after. That was always a treat. We'd try to get them to meet our Los Angeles Recovery members.

Let's go on to Annette Brocken, who never has gotten as much recognition as she deserves. She was truly vital to the development of Recovery, She was a brilliant woman. Annette had very severe colitis and agreed to be hospitalized as she realized her real problems were psychological. She was severely underweight when she was admitted. She didn't particularly like Dr. Low. She saw him in a rather negative light. She thought he was rather brusque and very abrupt and when somebody criticized Dr. Low, he said, "If your car doesn't work, you take it to a professional and you don't tell the professional how to fix it." And he said, "I'm the professional here." And she realized how much sense that made and he was totally unabashed by someone criticizing him. She really became very devoted. I mentioned earlier, that she refused to let Dr. Low shut down Recovery in 1942. Dr. Low had hoped to get a commission in the Armed Services Medical Corps and that was denied him. And when he came back (by this time Recovery was a separate organization outside of the Institute), she encouraged him to not only continue his Saturday lectures, but start up more lectures and have home groups. And she said, "I think we should have 15 home groups with no more than 15 people in each group." She had that all organized and finally talked him into doing it. He realized then that he would have to do some leader training.

I put Frank Rochford in mostly because we have so many examples of Frank in *Mental Health Through Will-Training*. And also his wife, Harriette, who he met in Recovery. Frank also didn't like Recovery and Dr. Low but he liked the people who came. We've learned over the years that we often have people who come and they come back for social ability of it. They like the people and they come long enough that they finally begin to learn the Method.



We have examples from Frank like procrastinating in doing the newsletter stencil, filling the sugar bowl, meeting his mother, offering to have Harriett mail the letter - all those with his temperamental deadlock with his mother. You're familiar with him.

Maxine White became Maxine Crane in 1963. Maxine is shown on the right side of this photo, Dr. Low on the left. She was a widow and lived in Louisville, KY and worked for Montgomery Wards. She had many symptoms and every doctor said, "I don't know what that is. It must be nervous as I can't find any physical problem." By the time she got to Dr. Low, he was her 112th doctor. She suffered for about nine years and then she read an article about Dr. Low and Recovery and she called him and asked if she could come to Chicago for his treatment. And he discouraged her because it was 1945 right after the war and housing was very difficult to get. He was afraid she would get lost in the big city. He encouraged her to find help by reading some of his articles to get some help. But she went on still seeking more help. A couple years later, she came across the article again and took it to her current doctor who said she could be hospitalized here at Vanderbilt and we'll do our best for you or you go to Chicago to see Dr. Low.

She decided to come to Chicago without telling Dr. Low. She had Montgomery Wards transfer her to the Chicago office, she left her son with her family and she came to Chicago and luckily Dr. Low was willing to see her. She came in with her usual long list of notes and complaints and he said, "Those are very common nervous symptoms." She said, "But I know my symptoms are imaginary. And he said, "Never let me hear you say your sensations are imaginary. Although they are not caused by organic troubles, they're still very real. It's an imbalance in your nervous system."

As he usually did, he asked her to go over to Headquarters to meet some of the other people. And slowly she began to get better. And then Dr. Low asked her to take notes. He asked a number of people to take notes during his lectures. He wanted to be sure that his message was coming across the same for all people. So, we can all read *Mental Health Through Will-Training* and we can say, "Oh, he must have been writing about me." We all understand what's there even though we have different symptoms that bring us in.

Then he began to ask her to do some outreach. He'd say, "Would you talk to this mother and tell her how Recovery has helped you and good it would be for her daughter?" And she said, "Oh, I couldn't do that." And he's say, "Yes, you can." That's the way he was with all his patients - very firm but very compassionate. He said, "Yes, you can." And that way she began to do it, to the point that when she finally took a job as a hostess at restaurant she could talk to people about Recovery when she seated them at a table. Imagine that today! And then she transferred to a restaurant where many politicians went. She wanted to talk to politicians. And she became our long-time publicity chair person. I remember in 1978, Phil Donahue, who passed away just recently, had his talk show just in Chicago. They had a white-out snowstorm and all the guests had to cancel. They called up Recovery and said, "Would you like to come be on the Phil Donahue Show." And they never gave a thought about the weather and said, "Sure! We'll be there!" So off they went and got some great publicity for Recovery.

In 1963, both she and Phil Crane were getting a small salary from Dr. Low, and they were able to get married. I remember that Maxine later in life was legally blind. She never talked about it and she never complained. But I noticed that couple techniques she had. One was if you were walking somewhere, she would take your arm and just chat with you as you were walking along. That balanced her and let her know where she was. And in a restaurant, she'd say, "Oh, I don't know what to have." She'd look at a menu and apparently she couldn't read it. She'd look at it and say, "Oh, I don't know, what are you going to have?" And I'd say, "I'm going to have the chicken." And she'd say, "That sounds so good I think I'm going to have that, too." And then I began to realize what she was doing so I'd say, "I'm having trouble making up my mind between the chicken and there's this nice shrimp salad and something else. She say, "Oh, I like the idea of the shrimp salad. I'm going to get that." So she coped very well with her disability that she never complained about.

Let's go on to Caroline Phillip. I also never met Caroline. She became our office manager. She came to Dr. Low in 1944. She suffered for nine years and her doctor sent her, telling her that Dr. Low was a nerve specialist, because she wanted nothing to do with a psychiatrist. She came in and she saw Dr. Low and she started to list all of her complaints. He listened for a short time and then said, "You will get well in Recovery." And then she noticed his Psychiatric Diploma and she left very angry. She refused to come back even though she liked what he had to say and liked him. But she suffered on for another month. And finally, humbly, she came back and asked Dr. Low to see her again, which he did. Then he saw her and her symptoms were so bad that he thought she should be hospitalized. But he was very concerned about people who couldn't afford that so he asked her husband if he would bring her to the Recovery meetings and lectures. Then eventually he asked him not to bring her so she could become self-reliant. And then she was one that he asked her to take notes. And he asked her to go to the library with him to copy down some information. The first few times were very painful for her. She suffered so. And he said, "You can do this, just write one more address for me." And pretty soon she was able to go on her own and she was deciding what things she should make notes of. She became our long-time office manager.

And we have to talk about Treasure. And I can't think of anyone who more aptly named than Treasure. What a wonderful person she was. This picture is obviously Treasure on the left and Dr. Low on the right. They are out at the beach. Dr. Low always dressing rather formally going to the beach - nobody ever saw him in his swim trunks! She was a very sensitive and sickly child. She had panic attacks and was very shy. And she just suffered so as a child that her mother, even while she was in elementary school, kept her home for for a full year and treated her as an invalid. Spontaneously she seemed to come out of that so she had a long spell of wellness through her high school years and even into college. She went to the University of Michigan and then she even became a big band singer one summer. She had a wonderful time - something she and my husband used to talk about because my husband was also in the music business and they loved that music. She came back to school and went back to Michigan state and finally she needed to go back to Bad Axe, MI where her mother lived. She had a dress shop, and she needed Treasure's help in running the dress shop. She became engaged to a young intern name Bill Rice. For those of you who know Joan Rice, Joan married Bill's brother John, so Treasure and Joan became sisters-in-law. She was spontaneous and happy that she got married to Bill and was doing very well. But



one day she suddenly had a panic attack. And it went away. But as we know these things do, a few weeks later they came back. And they came back more often until she was right back into her old system of trembling and fear.

And then she found she was having a son - or a baby and in those days you didn't know what she was going to have - but she had Bill. She thought having a baby would be good and it would take her mind off of things. But after Bill was born, she spent most of her days terrified, she was trembling, she was afraid to do anything. She finally realized she needed to do something to get some help. She went to a psychoanalyst which she totally disliked. She refused to go back. He wanted to see her four or five times a week. She refused to do that. Shortly thereafter, she had Treasure Ann, her daughter. But by then after she was born, she was sinking lower and lower. She wasn't taking care of herself. She wasn't taking care of her family. She wasn't taking care of the house.

Finally, her sister had to come and take care of them. But she read an article about Dr. Low and Recovery, and she called him and he encouraged her to come to Chicago for some treatment. And her husband was kind of dubious, but he agreed and they went. She was so afraid. She feared all the way there. One of her real strong symptoms was eating in front of other people. But as soon as she walked in to see Dr. Low, she could see he had an understanding look. He seemed so compassionate. And she started off with the usual list of symptoms and Dr. Low said, "You will get well in Recovery." He also said that when she questioned him further, "I believe there is much a patient does not need to know about to get well. You will get well in Recovery." And he then urged her to go over to headquarters. She went and peeked in, but didn't see anyone who looked sick and she was about to leave when Gertrude (Gertie Beres) encouraged her to come in. And there she met some other volunteers who were sitting around talking. She said nobody looked like they were sick. They were doing a mailing so she sat down and began to fold papers and put them in an envelope to help and then they just casually started talking about their symptoms and how they're learning to manage them. And she couldn't believe these people were as sick as they told her they were. They said it was all because of their Recovery Training.

She stayed on only for about a week and she even went out to eat with these people, she obviously was a quick learner and was getting it and Dr. Low could see her potential and he told her that she could start up her own group when she got home. But what she witnessed in Chicago was very different from when she got home. She didn't know what to do about a group or how to have it. She met a woman named Lillian from Detroit. The two of them got together and they didn't practice much but they did offer each other support. Eventually, they began to have a few more people coming and finally they got an article in the Detroit Free Press. And hundreds of people suddenly contacted Treasure. At her next meeting, 36 people showed up at her home! Luckily one member of that group was a minister and he offered his church. And that's when we began to move meetings out of the homes and into our public space as we do today - unless we're on Zoom, of course. There's so much more. We could do a whole session on Treasure - she was a marvelous person. After Dr. Low's death, she, Annette Brocken and Mrs. Low were the ones who stepped in and take the helm. And then she served, of course, as Recovery's President, and was a mentor to probably many of the people here today - certainly to me, which I will



always appreciate.

And let's go on to the unusual nature of Dr. Low's relationship. This picture is actually probably from the 1960s or early 1970s. Treasure's the second one in the first row from the left. Mary Jane Maggio Spudeus (middle), Phil's on the right and many other people I recognize in this photo. They went off on a leadership Board retreat. If you think back, people went to a psychiatrist or psychologist or to whatever treatment they were getting and they were to treat this professional in a very revered way. The professional never divulged anything personal about themselves. They were the doctor. You were the patient. Dr. Low was very different. He socialized with his patients. He treated them as equals, as people. He still said he was their authority as a doctor, but he treated them as people. Here they are having a good time. This is the Companion Club, one of their social clubs. In fact, this is a Press Association photo. He went to their social events, he had them over to his house for dinner, and they were all involved in the everyday activities. The patients became the ones who actually took charge of the social events. They organized them. They did all the work. Somebody had to organize the Recovery picnic. All of those.

Mrs. Low was such a supporter and partner to Dr. Low. She had been a working girl. She had no interest in home and family like many woman did. And Dr. Low, too, was a little oblivious to social norms. Lots of details of that in *My Dear Ones*. But when they met and became a partnership and a marriage, she was very much supportive of what Dr. Low did. She took phone calls from patients. She edited *Mental Health Through Will-Training*. Of course, she was the mother of Phyllis and Marilyn, Dr. Low's daughters, who were both very active in Recovery throughout all the years. And we are very grateful that they were. All of his family could have just said "That's my dad or that's my husband. That's what he does." But instead, they became vitally involved in the whole thing. And Mrs. Low stepped in to take the helm with Annette and Treasure after Dr. Low's death. And she adopted Dr. Low's highest compliment because he considered her to be "average."

I just wanted to look back and think about the genius of Dr. Low. We do thank you, Dr. Low. Because of his insights, he looked at what the patients needed and a developed treatment around that in our self-help system. He thought outside the box. Just because patients were never able to socialize and have an active role in their treatment, didn't mean it wasn't a good idea. And he was very highly criticized during his career to the point that he was afraid he would lose his medical license. He endured all of that for his patients. That's a touch of the thing and we're at the end. Let's open up and take some questions or comments if people have them.

Q: Thank you for that wonderful presentation. My first question is was *Lost and Found* an RI publication?

A: Yes, that's what Dr. Low had Phil start on the ward at the Psychiatric Institute.

Q: Was that before *The Retriever*? A: Excuse me you asked about *Lost and Found*. *The Retriever* is what was started on the ward and *Lost and Found* came after that. Sorry about that.



Q: Also, "consumer." Did Dr. Low say that word and do you know where it came from?

A: I don't think he coined that word. He still called us his patients – “my dear ones” he called us. I think "consumer" came along later. There's been a number of words but I think that's a term we use now that we didn't use then.

Q: One more question. Was your Ralph in RI?

A: Yes, actually we met at Camarillo State Hospital. He was in the group that used to come up and visit the Recovery meeting once a month. He was the first person that came from the outside that I met. When anybody would ever ask us how we met, he'd say, "I discovered this girl in Camarillo State Hospital." And I'd say "it's true!" It started a lot of interesting conversations.

Q: Thank you so much, Celinda. Excellent presentation. I have a couple of questions. What year did you start Recovery?

A: I started in May of 1968.

Q: And you referred to 1942 and Dr. Low trying to shut RI down. Why? And after 1942, did he get on board with keeping it going?

A: Yes, there was some friction within the medical community - at the Psychiatric Institute. And in 1942 they (Recovery) moved out and didn't have any connection with the Institute anymore. They became an independent organization. He said, “This has been a good experiment and it's worked but I think we'll shut it down.” Partly because all the criticism he got for this novel treatment that he had. Then when he didn't get the commission in the medical corps, he came back and Annette really encouraged him to keep Recovery going, to start up the home groups, to train some leaders. And of course, after that he was totally on board to develop this organization.

Q: I always learn so much more. I always think I know so much. Celinda, thank you, as always. Endorse. I had the privilege of meeting Maxine. She called me the "west coast Maxine." Even when she was sick in a retirement home, she was still sharing Recovery. She told me she had brochures at her table. (Dr. Low called her "Magzine" because of his accent.) I heard Marilyn share that Dr. Ellis and Dr. Beck always gave credit to Dr. Low. Is that true?

A: Well they did in the first version of their book but that credit disappeared in later editions. They should have kept it going and made it bigger.

Q: Is there a spot about "helplessness and hopelessness" coming from Dr. Low's personal experience when he was training as a psychiatrist and he got jumped on by a Dr. when he uttered something about the “patient being helpless or hopeless” - but it came from his own training, didn't it?

A: I know "there is no hopeless case" came from his training. When he was in school, he once diagnosed as being "hopeless" in front of that patient and he failed the class. He learned that no one is hopeless.



Q: I got the impression from reading *My Dear Ones* that the steps that we use today came directly from Dr. Low. Is that correct or have they changed?

A: Yes, in 1952 he set down the four steps in a different form than we use today. He was the one that developed the four steps and set out the rest of the format for the meeting and trained Phil on how to lead that meeting. That's why he asked Phil very detailed questions about exactly what was said and how it was said.

Q: Albert Ellis is considered the biggie in Cognitive Therapy. Did he and Dr. Low ever meet?

A: I don't think so but I don't know that definitively. But it was too bad he didn't give Dr. Low the credit he deserved. Apparently, he had read Dr. Low. Yes, very definitely.

Thank you all for coming. It's really fun to be with you and I love sharing about Recovery and hearing your thoughts about Recovery. Thank you so much for coming.

Accessibility Note

This transcript is intended to accompany the audio recording so that all visitors have access to the same information in a text format.