Building the “Mecca” of Recovery: The St. Paul Sober House Network

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Abstract

The St. Paul sober community is a compelling area of research. Most people involved in this community are extremely willing to be an open book for anyone willing to listen. Many have stated that St. Paul is the sober capital of the country due to the strength and fellowship found within it. We wanted to investigate through the avenue of interviews why it’s such a hub that draws people looking to gain sobriety from across the country. Sober housing plays an imperative role in the success of sober folks in St. Paul and should not be overlooked when it comes to the draw of this community as it aids in building the foundation for sobriety. The dynamics and encouraging characteristics of sober housing are key for people working their way towards sobriety. Folks travel from their usual stomping grounds, coined as treatment migrants, to be a part of this camaraderie. Rather than work on sobriety in isolation, they need the support of St. Paul’s strong community. Dependence on substances can throw curveballs into people’s lives, but the St. Paul sober community offers ways to reduce the negative impacts that addiction can have.

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Throughout drug treatment, many clients are advised not to go straight home. In many cases, long journeys of addiction have weakened or destroyed earlier social ties, “burning bridges” and leaving people profoundly isolated. In other cases, remaining friends and romantic partners may still use alcohol and drugs. Even for those with strong support networks, it takes time to establish a new routine before returning to a familiar environment. The recommended new path, in practically all treatment facilities, is to deepen a relationship with Alcoholics Anonymous (AA) or Narcotics Anonymous (NA), but many facilities also urge clients to move into sober housing, which provides a supportive platform from which to enter employment and develop healthy relationships. Before going to sober housing, some people start with transitional care such as a halfway house or “recovery residence,” which offers additional counseling and often helps to find employment.

Once entering sober houses, the primary focus is not on expert help but on the social support of peers, a “social model” approach to recovery developed within and using the philosophy of Alcoholics Anonymous (Polcin and Borkman, 2008). People join single-gendered houses, where everybody agrees to stay sober, sharing a modest living expense. Many

1 The exception to this rule is the world of evangelical conversion-based treatment facilities. These are traditionally not state licensed, although this is changing (Gowan and Atmore 2012).

1 More structured forms of “sober housing” may include programming and services, but do so in a different location.
houses are set up with two twin beds in a room, understanding that isolation is the antithesis of sobriety. They foster community with pleasant common spaces, and they also have weekly house meetings and dinners. There are drug and alcohol tests weekly, although less so as people prove their sobriety over time. Most houses ask for a “sober deposit,” meaning that if someone relapses, not only do they have to move out pretty much immediately, but they lose that money. There are typically a mandated number of meetings that residents have to attend. Our research suggests that most people living in sober houses welcome the structure which “keeps them accountable,” as they say in AA.

We were drawn to study the St. Paul sober community because it is famous in Minnesota (and beyond) for its camaraderie and strength. In our interviews, we tried to figure out how and why St. Paul is such a magnet for the sober community. One of the questions we asked was why so many people traveled from out of state to obtain sobriety here. We interviewed ten men and five women, all of them former sober house residents, three of whom had followed the road from resident to manager. All of them were white, which is unfortunately indicative of the whiteness of the community. Jeanelle made several ethnographic visits to the “Sober Bou” - a Caribou Coffee location. The research was enlightening, fun, and enjoyable for the author, who had a personal interest in the subject. Interviewees involved showed great enthusiasm for the project, keen to share their experiences in St. Paul’s large network of sober houses.

“You can’t just throw a foundation together really quickly”

One of the most common stories heard in AA meetings is that of coming out of treatment and falling back in with old “people, places, and things.” Old stomping grounds can create an unbearable itch, often sent into overdrive by friends that enable drinking and drugging looking to renew their “using” companionship. In such circumstances, many relaxed, finding themselves quickly backsliding. Luz, a sober housing coordinator for a major Twin Cities treatment facility, described this process as trying to build a house too quickly:

Well you know, you can’t just throw a foundation together really quickly and start building this amazing house over it. You know that the foundation is going to crumble. So sober living really factors into that in a way where it’s the supportive environment. Right? And so, we talked to a lot of our guests about sober living and they know that we recommend sober living.

Addiction is commonly understood as a disease of the will that damages the individual’s moral and ethical core (Valverde 1998). This means that recovery is about repairing and restoring the self. So, despite differences of age or gender, sober house residents share an enormous commonality, the great challenge of finding and stabilizing a new sober self. Sober structured living situations can provide immense support, family-like dynamics, and launch lifelong friendships.

Luz, a joyous soul with a sharp suit and bright blue eyes, connected everything that he did as a treatment professional to his own recovery odyssey:

I think it goes back to, to me, about building the foundation, and continuing to do the work in my own recovery and
continue to progress through that, that ends up enabling me to continue to progress in other areas.

Like the vast majority of his peers, this senior treatment professional himself lived through years of addiction and failed attempts at treatment before slowly and steadily establishing his recovery for 16 months in a sober house. The combination of personal experience, AA membership, mutual support, and his professional role have made him an eloquent spokesperson, as he makes the case that the dynamics and supportive character of sober house living are crucial for people on their way to sobriety.

The Hunger for Community

Renowned psychologist Bruce Alexander argues that addiction is a disease of dislocation, of being lost without sufficient social support and shared values (Alexander 2008). One very prominent theme in our interviews is people’s hunger to feel “a part of,” to find their community, people, and purpose. This sense of dislocation is propelled by migration and job insecurity, Alexander argues, but it is also connected to adverse childhood experiences which isolate people by making it hard for them to regulate their emotions, often creating a lasting sense of insecurity (Zucker et al. 2008; Taylor, Way, and Seeman, 2011). Many describe chronic negative self-talk throughout the entirety of their lives - that inner voice telling them they’re not good enough.

Sarah from Ohio, an athletic middle-aged white woman with bold dark hair, laid out this experience powerfully. She never felt adequate socially or physically, reinforcing isolation and growing addictions:

Why doesn’t anybody want to be with me? .. [I would think]. "skinny, ugly," all that stuff. So this is just the constant tape in my head and the constant insecurity and putting myself down. ...I drank a lot, I drank so much and I went through jobs. Running through jobs too frequently further increased Sarah’s sense of dislocation. It was finally in her sober house that she found a sense of community, that sense of being a part of something valuable.

Similarly, Ashley explained that she had never really had friends that were women. Ashley is a 30-year-old white woman, from Michigan originally, with a brunette bob and a great wit. She has a history of alcoholism, and it took her about three times to go through the treatment into sober house process before her sobriety stuck. Ashley explains how the support in the sober house brought her to where she needed to be:

I never made female friends before, and this is for a lot of people too that come. And I always had like guy friends, or just a boyfriend and a bottle and I drank. So moving into the sober house and having the, like, built-in friendships and built-in support of these women going through the same thing that I was, was huge. And so I really enjoyed it. I am still the longest standing Safe Haven resident because I lived in it for two years.

This pattern of having a “boyfriend and a bottle” and falling into alcoholism is common: a lot of women who struggle with alcoholism share a history of relying on men and alcohol for support. As Ashley had discussed, she felt that relying on co-dependent and unhealthy relationships with men hindered her. Women in recovery need other women to foster healthy relationships with. Support systems for women, by women during
trying times can birth a healthy foundation that is key to maintaining. Creating a network with other like-minded women trying to reach sobriety was imperative to Ashley’s success. The thing about sober houses is they are practically a ready-made support system - there to launch their peers into sobriety. Living in a sober house and making her first female friends was a pivotal moment for Ashley in her journey to becoming sober. At that moment, she found her people and her support system.

**Treatment Migration: St. Paul as the Recovery Mecca**

Seven members of our fourteen person sample had come to Minnesota for treatment and then stayed. This ratio of transplants to Minnesota seems to conform roughly to the general pattern, according to the estimates of Luz, who manages 78 sober house beds. The most well-known Minnesota treatment facilities play a large role in treatment migration. In our group, most from out of state had gone to treatment powerhouse Hazelden, and several more to The Retreat, another highly respected facility deeply rooted in AA tradition and practice.

One of the treatment migrants was Ashley, who had first attempted to kick alcohol in Michigan, then in Chicago, arriving for a third attempt at Hazelden, and then moving into a sober house in St. Paul. Ashley described feeling surrounded by “recovery people” wherever she went in the city:

[H]ere, it’s the Mecca. It’s the Mecca of recovery people. Everyone comes here to get sober and I mean, you can’t go... and I can’t go anywhere without seeing at least three people I know. They’re in recovery and stuff like that... the community is just fantastic.

Through strong relationships in her sober house, the AA meetings and the sober spaces of St. Paul. Ashley compared her sober house to “almost like a sorority without alcohol,” as she found new means of sisterlike support within the sober house.

When asked if she considered herself a treatment migrant, Ashley replied with a swift “yes.” The term seemed to resonate with the interviewees from out of state. People from all over the US stressed how healthy it had been for them to stay in St. Paul and build on the connections made in sober houses and AA meetings.

Sarah’s experience demonstrates something of how people come to Minnesota in the first place. Her own move from Columbus, Ohio represented a desperate last-ditch attempt to save her life. She remembered being in the ICU and hearing her mother talk to the doctor about bringing Sarah to Minnesota, with the belief that she would get something different at world-renowned Hazelden.

And the doctor said… he said “she's gonna be - ’ I think I was 30... or 30. and he said "she is going to be dead by the time she's 31." He said "her organs are shutting down" This is them talking at the end of my bed. Yeah, to my parents. My mom's like, "well, we're looking into this place in Minnesota. It's called Hazelden." And I remember he was like, "well, what's wrong with places here?" She's like, "she's gone here like 600 times.

The situation from Sarah’s story truly encapsulates why people make that drastic move from out-of-state to Minnesota. Sarah’s body was shutting down, her life was in shambles, and her family knew where they needed to bring her.

Sarah called Hazelden “the mothership,”
and it does seem to bring people to Minnesota to then feed them out into sober living in the Twin Cities, especially into St. Paul, where Hazelden’s after-care services are located. The Minnesota sober community holds a large support network of people similar to Sarah that came from out-of-state and ended up staying, content with their support systems. Conforming to this pattern, after treatment at Hazelden, Sarah lived first in the Fellowship Club, the Hazelden halfway house, and finally moved into a sober house in St. Paul.

Sarah didn’t need to stay here. She could have moved back to Columbus, where she had family support. The choice to stay in Minnesota shows the powerful pull of the local recovery community.

Sarah admitted that sober house relations could be complicated but emphasized how the broader St. Paul community offered “so many people ...willing to help you.”

But yeah, I mean, [there was strong] community, the girls in my house, but then there was also fighting, you know, I mean, five girls together trying - I mean, there’s so many emotions, trying to stay sober. And who’s, you know, taking other people’s inventory? Like, "you’re not doing this right" and stuff like that. But if you want it, there’s so much support in St. Paul. There’s so many people that are willing to help you. Just like I learned early on, like, you just have to find the winners.

Perhaps St. Paul’s most famous treatment migrant is William C. Moyers, a former cocaine addict from the East Coast who authored the 2006 bestseller Broken: My Story of Addiction and Redemption with Katherine Ketcham. Son of the broadcaster Bill Moyers, William Moyers has lived in St. Paul for 25 years, rising to become the vice president of public affairs and community relations for the Hazelden Betty Ford Foundation. In Broken, Moyers describes a moment of rock bottom, transformed when he heard God’s voice telling him to go back to St. Paul.

This was my fourth time in treatment. Why did I think I would make it this time? Where would I find the strength to stay clean and sober when I had given into my weakness so many times before? “Help me,” I prayed into the darkness. I shut my eyes, and then I heard it…. “St. Paul.”

I had no doubt then and I’ve never doubted it sense that it was God’s voice I heard. God was speaking to me, urging me to go back to St. Paul, the city where I first got sober, the place where I first met Allison and discovered a community of people who loved and accepted me in all my weakness and imperfection. “St. Paul.” I felt peace spinning around me, wrapping me tight. (Moyers and Ketcham, 2007, 300)

Unlike Moyers, many of St. Paul’s sober community downplay explicit Christianity in favor of a non-denominational Higher Power, but Moyers’ account still typifies those of many of our interviewees. A portion of the large sober community could be attributed to St. Paul’s sober network focusing on aspects outside of the religious rhetoric other sober communities so often have. Like Ashley, they describe St. Paul as a global “Mecca” of sober living, a place where struggling addicts find a large, loving community, united by their commitment to the Big Book and working the 12 Steps.

Tommy, a 28-year-old man originally from Connecticut with a hipster edge and a knack for skateboarding, drifted around with sporadic attempts to get clean. Tommy had substance issues
for a long time. His father had overdosed when he was a young child, and he feared where his substance use would lead him. He went to California, lapsed after treatment there, then his parents sent him to Hazelden after hospitalization in California. In general, the theme of people crossing the country to Hazelden was that they were desperate, many lying on hospital beds, when they decided to start their sobriety journey. They were very grateful for a chance to save their lives.

Tommy had much to say about the liveliness and fellowship within St. Paul’s sober community:

It’s pretty solid. I mean, there’s some pretty famous meetings in Minneapolis and St. Paul. That has hundreds of people who have recovered from issues of addiction. There’s one on Mondays in St. Paul called House of Hope. That’s got like 300 people there every week. And it’s people who show up every single week. So, I would say St. Paul and Minneapolis are very involved. There’s a lot of people who are willing and able to help, whether that’s picking a new guy up for a meeting, or introducing them to friends, bringing them out to eat with everybody after the meeting.

Tommy found himself situated nicely within a new community. People were not just willing to help, they wanted to help other people with similar experiences as them. St. Paul’s sober community pulls people in to push them towards a healthy, sober life. The influx of treatment centers and sober housing creates a nest of people ready and willing to support others in their sobriety journey. Again, the community is so welcoming because everyone is looking to give back by helping others, by sharing their gratitude at deliverance from suffering.

The Journey of Acceptance and Service

The 12 step road to sobriety requires a journey of acceptance: accepting that your addiction has made you powerless and becoming willing to give that burden over to a higher power. Yet while the relationship with the higher power is fundamental, many AA members feel that their true higher power is the AA community itself. It is a truism that the most profound healing happens when people learn to give to others through sponsorship and other kinds of relationships. This emphasis of AA on peer support infuses the organization and operation of sober houses. All members are empowered in decision-making and management, and house managers encourage strong mentoring relationships between residents (Polcin and Borkman 2008).

Luz goes into detail about how embracing these connections made between others through the mass acceptance of the 12 step identity and higher power has been impacted by the global pandemic of COVID-19:

One thing I’m trying to do is change the language around social distancing. I like to talk about it as socially connected, physically distanced. And because when you think about the fundamental kind of what we do and what recovery is, is teaching us to do, it’s connection. And so it's connection to our fellow travelers, it's connection to our community, it’s connection to our higher power. It's all about connection. Right? And right now, we're being instructed to be going to disconnect right and to create distance. And that’s absolutely it's presented challenges for the recovery community.

A crucial aspect of spirituality in sober housing and in AA is the joyful sense of connection, what Emile Durkheim called
“collective effervescence” (Durkheim, Pickering, and Redding 1975). This is particularly intense in meetings, the ritual gatherings of the AA community. People expressed anxiety as meetings were all moved online because of COVID-19. They wanted the in-person connection felt at meetings and their gathering spaces.

Yet Luz describes how he felt this spiritual connection alive among residents in sober living houses during this global pandemic:

I have been experiencing remarkable grounding, and a spirit of recovery and gratitude in our homes that I didn’t fully know was going to be there. I had fear that this was going to trigger a larger fear response. There could be some mass exodus, there could be just chaos, you know, chaotic behavior. And, but what’s happening is that there’s this gratitude for being in this community in a sober home, for these people and individuals saying like, I don’t know what I would be doing, if I wasn't in this.

The spiritual grounding felt within the sober community during a turbulent time in the world speaks volumes as to how powerful the comradery is for folks within the community. Luz had a rational fear that there would be a huge fear response. Instead, what he saw happen within his lens of COVID-19 was that the AA principle of acceptance helped people feel gratitude for AA and their sober living homes. The spiritual cohesion within the sober house community led people to enjoy a great collective strength during a global pandemic.

It’s the plethora of resources and support in St. Paul that fosters the consistent flow of people coming from out-of-state and the outskirts of the Twin Cities. There are other wonderful sober communities around the nation, but something makes St. Paul particularly special. May that be the warmth of thousands of people in the same boat as Ashley, Luz, or Sarah that drew them in, or the draw of the top-notch treatment facilities beckoning people to find their healthiest selves. The hip, long-running community is a key part to the draw of sobriety in Minnesota. The support it has given for decades has changed many people’s lives. The push from treatment centers to sober housing creates an aftercare plan that helps so many. It is unclear where St. Paul’s sober community would be without the collection of people rooting for newcomers. How would people have survived if their AA meetings hadn’t adapted during the COVID19 pandemic and guided people in droves? How has the COVID19 pandemic impacted people’s sobriety journeys? There is a profusion of potential for further research on sober housing in St. Paul and the community surrounding it. This is such a complex, kind-hearted community with many ways to aid people, even outside of their sober bubbles. Addiction can be isolating, especially amidst a global pandemic. However, the St. Paul sober community shows that there can be different outcomes than isolation and “burnt bridges,” demonstrated by the positive cohorts and connections that they have created for sober people within the community.

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References


