
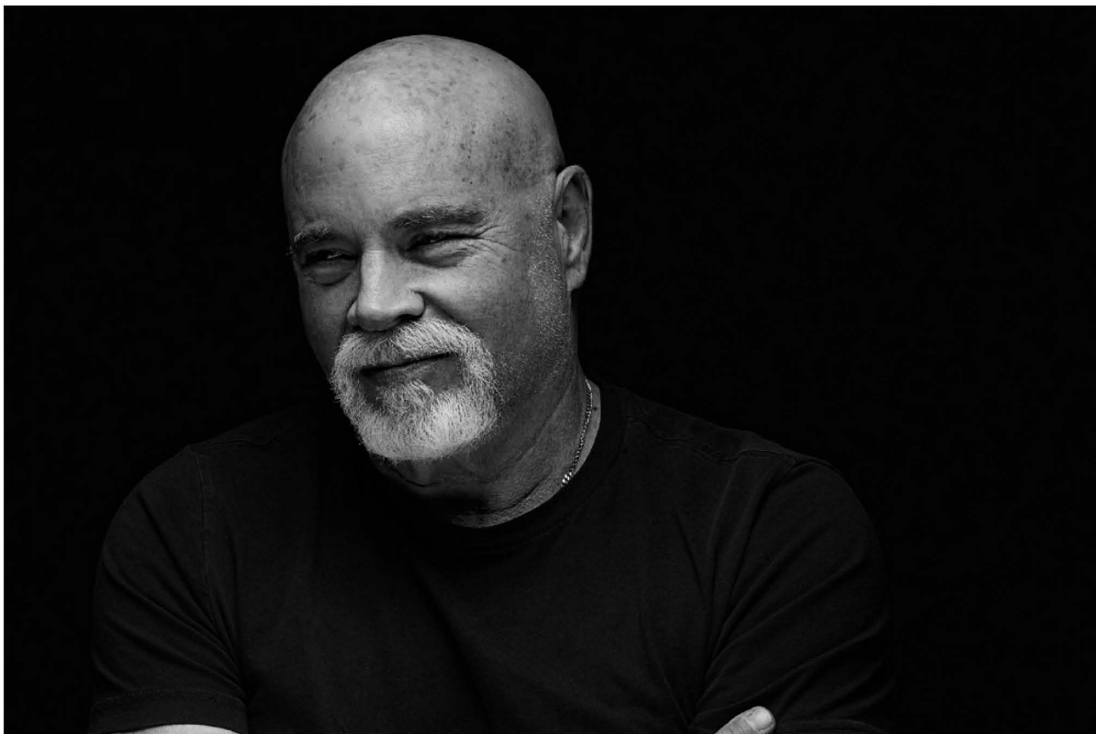




Heroes Of The Addiction Crisis: How Walter Wolf, Author of The Right Rehab, Is Helping To Battle One of Our Most Serious Epidemics

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Oct 25 · 13 min read ★



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As a part of our series about "[Heroes Of The Addiction Crisis](#)" I had the pleasure of interviewing Walter Wolf.

Walter Wolf is the pen name of a 30-year veteran movie and television producer whose family, like millions of others throughout the nation, was hit by addiction 11 years ago. Today, he is an interventionist helping families nationwide find the right rehab for their loved ones. Frustrated that there still was not a "how-to" playbook for families searching for the right treatment, Wolf wrote it himself.

Thank you so much for doing this with us! Can you tell us a bit of your backstory?

As a producer, I certainly heard about those in the business with addiction issues and those who went to treatment, but I knew absolutely nothing about treatment. Treatment was behind the curtain, conventionally thought of like taking your car to the mechanic and 28-days later, presto, all fixed. Most of all, addiction was considered a stigma, a sign of weakness, a lack of willpower, certainly not a disease. When addiction hit my family, I was staring at the Mt. Everest of learning curves and realized that I didn't even know what I didn't know. It's only when you reach the summit that you realize how addiction is universally misunderstood.

Is there a particular story or incident that inspired you to get involved in your work with opioid and drug addiction?

It really was not one incident, but rather a series of calls from friends, friends of friends then those who I did not know at all, but who had heard about my family's struggle and course of action. I have to credit the late Chris Lawford for introducing me to the most ethical and renowned treatment professionals in the world (particularly Mike Neatherton and Mike Early) who taught and continue to teach me the tools of how to match the right person with the right rehab.

Can you explain what brought us to this place? Where did this epidemic come from?

Like that cousin you dread seeing every Thanksgiving, addiction just keeps coming back. The best way to understand why and its societal effects upon the U.S. is to know the three waves that have hit our shores over a 100+ year period. One can confidently mark the 1850s and 60s as the birth of this country's First Wave of mass addiction when opium was brought into this country by Chinese laborers building the first transcontinental railroad. By the turn of the century, opium dens were commonplace throughout the nation. The First Wave reached adulthood in 1898 with the introduction of a fourth opium poppy extract — heroin. It was commercialized by the uber-drug maker, Bayer Pharmaceuticals, for the U.S. market primarily as a cough suppressant. America's First Wave was now a full-blown addiction epidemic. It literally took an act of Congress in 1914 to bring the end of the first wave with the Anti-Heroin Act, banning the manufacturing, importation, distribution and sale of heroin.

Our Second Wave is widely thought to have been conceived in the 1930s and 40s among mainly black musicians (racist trope?) pejoratively referred to as "hopheads" in the *New York City* jazz scene. Heroin's reach to a wider audience was confirmed by the *New York Times* in 1951 when there was a tremendous spike of teenagers being admitted into New York local hospitals as well as an increase in drug-related arrests. It wasn't until 1956 when the American Medical Association (AMA) declared that alcoholism is an illness. Finally, in 1966 the federal government and several states established methadone clinics accompanied by some access to treatment. However, the final years of that decade into the 1970s witnessed Vietnam veterans returning home with alcohol and drug disorders. Those developments led to the establishment of the DEA (Drug Enforcement Administration) and an expansion of prevention and addiction treatment services. Among a plethora of progressive milestones was the establishment of the National Institute on Alcohol Abuse and Alcoholism (NIAAA). In addition, in 1970 a coalition of reformers, chiefly from the American Medical Association and the American Bar Association, was able to pass tighter regulations on pharmaceutical companies, doctors and pharmacists. A key result was the decrease in the illicit use of pharmaceuticals. The ending of the second wave was a result of these progressive moves. Alas, government programs that were working.

The Third Wave is distinctly different and certainly much more deadly than the previous two waves. The CDC says the Third Wave is comprised of three distinct “mini-waves” creating an addiction epidemic of epic proportions that still ravage our nation today. According to the CDC, “the first mini-wave began in the 1990s with the increased prescribing of opioids developed in the 1980s as alternative therapy for chronic non-cancer pain. The second mini-wave began in 2010 with rapid increases in overdose deaths involving heroin. And, mini-wave 3 began in 2013 with significant increases in overdose deaths involving synthetic opioids, particularly those mixed with licit or illicitly manufactured fentanyl which is found in heroin, counterfeit pills and cocaine.” Here’s the big problem: those addicted to painkillers who have had their doctor-prescribed pharmaceuticals cut off resort to purchasing pills at a huge mark-up on the black market. When they run out of money, they turn to a much cheaper, more accessible and quicker-acting substitute that carries far greater life-threatening risks. That next best thing — heroin. In February 2021, per the CDC, the U.S. reached a milestone over 100 years in the making — at least 95,133 souls died over the previous 12 months — a 29.7% increase over that same period 12 months earlier due to drug overdosing. 39.8% of those deaths were due to opioids, mainly fentanyl. Those deaths are in addition to the 841,000 deaths from 1999 to 2020 — a staggering 448.71% increase over 21 years. All of these statistics are from the CDC’s National Center for Health Statistics.

Can you describe how your work is making an impact battling this epidemic?

It would be the height of hubris for me to say my work is making an impact in battling this epidemic. I prefer to think that my work is making a contribution — albeit infinitesimal relative to the global struggle — to that effort. Then there are the treatment professionals who work with the afflicted. It takes a special type of person who goes to work each day knowing there’s a good chance their work will meet with relapse. But relapse is frequently part of the journey and it’s the patients who eventually succeed, who attain a life of recovery, who drive that health care professional to change people’s lives. Finally, it’s the individual who lives one day at a time to maintain sobriety (a life none of us without the gene could ever imagine) and achieve a life of recovery who is the hero of this battle.

Wow! Without sharing real names, can you tell us a story about a particular individual who was impacted by your initiative?

One 20 something individual I took to treatment in Tennessee hated being there. The first four nights I received long tearful calls begging me to get him out of there. He doesn’t fit in, the treatment is stupid, the other guys hate him, he hates the food, it went on. The fifth night, no call. Night six, no call. On day 30 of his 90-day stay, I’m at a Five Guys in Tallahassee during one of my 3,000-mile rehab road trips. I get a call. It’s him. “Walter, you saved my life, I love you. I love it here.” When I asked about the other guys he replied, “I love them. We are brothers.” Yes, he continues his recovery to this day. The point is, it’s when the individual eventually realizes that he needs to be there, when he surrenders, that’s when recovery starts its work.

Can you share something about your work that makes you most proud? Is there a particular story or incident that you found most uplifting?

It’s when parents stay in touch with me years after working with them and are thankful that they called me in the first place. They cannot thank me enough for inexorably changing their family’s life. I simply was the one who showed them how to do it. They are the ones who did the hard work and deserve the credit.

Can you share three things that the community and society can do to help you address the root of this problem? Can you give some examples? Here’s a big one:

It doesn't take a genius to know that the best tool in helping those with SUDs and mental disorders is treatment. The best way to get treatment is through health insurance. The best way to provide insurance is by expanding the ACA and Medicaid for every adult citizen and without work requirements that have proven to take insurance away from those who need it and do nothing to increase employment. It also doesn't take a genius to recognize the myriad of studies proving that treatment provides net-benefits way beyond its costs — and provides stimulus for economic growth. Want a healthy economy? Get people healthy.

If you had the power to influence legislation, which three laws would you like to see introduced that might help you in your work?

Provide a public insurance option for treatment of behavioral health and terminal diseases through a stand-alone program, a public plan, or Medicare. Treatment for life-threatening diseases for Americans of all ages should be considered a service, not a business. It is also an investment, an economic stimulus since only healthy citizens can grow a nation's economy.

Reinstate the individual mandate to ease upward pressure on premiums for the entire pool of enrollees. Here's a fact that those on the right who oppose the ACA don't like to be reminded — the personal mandate was originally promoted in the early 1990s by the Heritage Foundation, a conservative think tank. As a knee-jerk reaction to "Hillarycare," it was conceived to prevent "a government takeover" of our insurance and promoted personal responsibility — unquestionably conservative pillars for their vision of America. The personal responsibility part was the individual mandate.

Despite the increase in the number of those who now have health insurance since 2014, the number of those who are underinsured has increased to more than 97.8 million due to higher deductibles and out-of-pocket maximums for plans through the Marketplace, private plans, and especially employer-provided ones. Since the government already subsidizes roughly \$1.697 trillion per year to existing health insurance plans, why not convert a portion of those subsidies into a public option that could either supplement those already with existing plans or those with no plan at all? It's time to help employees with the burden of too high deductibles and employees' portion of premiums.

I know that this is not easy work. What keeps you going?

I've been on this earth long enough to have questioned, "So, what's the point? Why am I here and what's my role in this life?" Listen, I'm not a Saint and I'm not trying to convince you that I am someone different than who I really am. But, at this point in my life, I realized my destiny is to help those who need help in this struggle with addiction and mental illness. Lord knows I have been the recipient of way more support, love and kindness from countless others than I probably deserve in my life. What's all that worth if I don't at least try to do the same — to push that forward to others? It all crystalized for me early in our family's struggle. My then wife and myself were the recipients of remarkable help and support from those in the LA recovery community. They circled the wagons around us with the emotional support that only they know how to give. They also protected us from the imposters and grifters who were ready to pounce upon our vulnerabilities in our desperate time of need. When I remarked to a young mother how supportive she was despite having known us for such a brief amount of time, she remarked that "helping you, Walter, is part of my recovery as well."

Do you have hope that one day this leading cause of death can be defeated?

Defeated? No, I don't see that happening. What I do see is fewer numbers of deaths and treatment more readily available when all our citizens eventually understand that addiction and mental illness are chronic diseases, not lifestyle choices. For instance, in my book you'll notice that when referring to one suffering from addiction I don't use the term "addict." Too frequently it is used as a pejorative and disparaging label. It is

not the correct way to refer to someone suffering from the disease of addiction. Would you describe a cancer patient or one fighting diabetes with a term that connotes a lack of character or low morals — as if they got what they deserved? Addiction is a chronic brain disease causing the inability to control the impulse to use a substance or stop repeating a process despite devastating consequences. It is not the result of a moral failing, bad character, or lack of will, though some unenlightened people still believe that. It is a chronic disease that alters a person's brain structure and function; it cannot be stopped by the simple "Just say no" or "Buck-up, will ya!" Like those with other life-threatening diseases, those battling addiction are "victims" or "patients," and they deserve the same respect.

How do you define "Leadership"? Can you explain what you mean or give an example?

John Kennedy said it best, "Man in his quest for knowledge and progress is determined and cannot be deterred." Leadership is when one knows that despite the path to knowledge and progress being beyond difficult and frequently unpopular, it is still the right path. It is the duty of every leader to "do the other things not because they are easy, but because they are hard." A true leader leads. He doesn't follow for the sake of keeping his office. A true leader commits himself to show the right path despite the costs. The path of least resistance may be the easiest, but it is the path of ignorance, lack of progress and fear. Despite the loss of blood and treasure in his misguided attempt to bring democracy to Vietnam, Lyndon Johnson held fast in his quest for civil and voting rights and Medicare and Medicaid because he knew they were the right paths to follow. Despite the vitriol, ignorance and his political enemies' fear of the unknown, Johnson held fast and strong. Today, we are a better nation for his strength and leadership. However, sadly today real leadership is more often drowned out by a cult of personality and grievance — and not reason.

What are your "5 things I wish someone told me when I first started" and why. Please share a story or example for each.

Actually, there are six:

First, addiction is a family disease. Although one person is addicted, it affects the entire family.

Second, addiction is a chronic brain disease causing the inability to control the impulse to use a substance or stop repeating a process despite devastating consequences.

Third, a mental disorder more often than not accompanies addiction. The question is which one is driving the other.

Fourth, I learned from those in recovery that the resources don't get the victim sober. They are only the tools in helping the individual get sober. Sobriety occurs when the victim genuinely wants to get sober and is willing to put in the work to get there — it is completely up to the individual.

Fifth, in my experience, relapse is frequently part of the journey — especially for Gen Z — not the failure of treatment.

Sixth, there is no such thing as "the best rehab." It doesn't exist. What does exist is the *right* rehab for a particular individual.

You are a person of enormous influence. If you could inspire a movement that would bring the most amount of good to the most amount of people, what would that be? You never know what your idea can trigger. :-) See #15...

Can you please give us your favorite "Life Lesson Quote"? Can you share how that was relevant to you in your life?

"The true measure of any society can be found in how it treats its most vulnerable members." — Mahatma Gandhi

See #9 for the explanation of its importance to me.

Is there a person in the world, or in the US whom you would love to have a private breakfast or lunch with, and why? He or she might just see this, especially if we tag them.

Why go for only one when I want two to hear me out — Pope Francis and Barak Obama.

His Holiness Pope Francis is the spiritual leader of over 1.3 billion souls world round. That's a lot of followers. He oversees at least 70 million of them spread out over 17 thousand parishes in the U.S. and over 37 thousand priests running them.

Former President Barak Obama accomplished something that has eluded U.S. Presidents for the past 100+ years — health insurance for every American who needs it. Obama carried the torch ignited by Theodore Roosevelt-to-Harry Truman and finally himself who made healthcare a reality for more than 30 million Americans who before did not have insurance. Starting over pasta with pesto leading to the main course of branzino, I would explain how the Church could underwrite the education and licensing of addiction and mental health counselors for assessment and therapy in those parishes. Their services (for a four-year term in exchange for underwriting their education) would be available for a small donation (\$10.00 for parish members, \$20.00 for non-members). The goal would be to make those services more affordable and accessible to those who desperately need it. President Obama would be the one to sell it to those Americans who need help, but don't know how to get it. Pipe dream or not, it should be and could be done.

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Anytime, thank you!

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