

This is an Accepted Manuscript of an article published by Taylor & Francis in The Design Journal on 19/09/18, available online:
<https://www.tandfonline.com/doi/full/10.1080/14606925.2018.1492793>

**Recovery by Design: Developing tools to initiate and sustain
engagement in a creative recovery from alcohol misuse**

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Jack Champ is a designer, researcher and photographer based in Brighton. His ongoing research interest focuses on the use of design methods from across disciplines to innovate in the field of substance misuse recovery.

Recovery by Design: Developing tools to initiate and sustain engagement in a creative recovery from alcohol misuse

This research aims to use design techniques to facilitate creative research activity with service users in an alcohol rehabilitation setting, to discover how individual recovery journeys might be supported and developed.

An initial pilot study was undertaken using a cultural probe, which included participatory workshop activities and design review sessions, held at a substance misuse rehabilitation centre in Brighton during 2017.

The initial data produced and feedback from participants uncovered potential therapeutic value. Service users reported that the tool helped them see where their addiction had previously taken them and how recovery could develop.

This finding highlighted an opportunity to develop a Creative Recovery Toolkit, which could sow the seed of creativity in a structured treatment setting during early recovery. This tool may then assist in the building of creative confidence and recovery capital, which would allow a smoother pathway out of addiction and reduce the chance of relapse.

Keywords: alcohol; addiction; recovery; creativity; toolkit; engagement; signposting

Introduction and scope

It is estimated that 1.2% of the population are likely to be dependent drinkers (those who present AUDIT scores of 20 or more) (McManus et al. 2014), with around 94% of this group thought to not be engaged with support services (Ward and Holmes 2014).

This statistic suggests that innovation in this area is lacking, with new strategies most needed to engage the most resistant, entrenched and challenging drinkers. This group is responsible for a substantial strain on public service funding through their impact on emergency and social care services. This is largely due to frequent A&E visits, involvement in the criminal justice system, committing acts of anti-social behaviour and regular arrests or dispersals (Anderson 2013).

Heavily dependent drinkers are often faced by a complex web of issues alongside their addictions, for example: insecure housing, mental health issues and unemployment. Navigating such a landscape to develop impactful outcomes is a significant challenge and could be described as attempting to address a wicked design problem (Buchanan 1992). This is where the issues around a social problem are affected by a wide variety of stakeholders and the interaction between the strands can be confounding. This complexity is compounded by the idea that each individual recovery is unique. Therefore, methods used to assist in attaining a sustained and successful recovery need to be tailored to individual experiences, for the process to be at its most effective and supportive (Roberts 2009).

An initial literature review uncovered a variety of existing designed recovery and engagement methods. A well-known and established example is Alcohol Star, which is a version of The Outcomes Star. This tool is specifically focused on measuring change in recovery and is currently in use by alcohol or substance misuse services (Triangle Consulting 2018). Another technique is participatory mapping, an acknowledged engagement method, which has been used successfully in a feasibility study to explore alcohol service engagement among Polish street drinkers in London. This study researched participants' social networks, details of alcohol use and relationship to support services. Illustrating that it can be a powerful way to explore social and emotional factors which may otherwise be difficult to access or elicit (Bayley and Thickett 2013). Additionally, life history calendars and photography activity (through Photovoice) have been used to explore the impact that significant life events had on the participants' level of alcohol consumption (Ross-Houle 2016).

Other approaches aim to provide novel ways to understand addiction. Whole Person Recovery (Broome and Daddow, 2010) is a project that uses systems mapping and

service design techniques to understand how individuals with hazardous alcohol and drugs issues come to be in that situation and what factors help or prevent recovery.

Finally, *Working with change resistant drinkers* (Ward and Holmes, 2014) is structured in the form of a manual and challenges the long-standing impression that if a problem drinker does not want to change then nothing can be done. Recommendations in this manual propose strategies to work more effectively with this group and persevere with the most entrenched individuals. One of the co-authors of this manual is an external supervisor for the PhD project.

This review of existing literature alongside discussions with support staff and alcohol service users highlighted four key areas where changes could be made to engage and support some of the most problematic drinkers:

- (1) Giving people time and space to tell their stories and to have a voice in their recovery, whilst ensuring that they are not expected to repeatedly relive painful life events when engaging with different services.
- (2) Ensuring services are accessible and connected, with information readily available to potential service users and that individuals do not fall through gaps within or between services.
- (3) Allowing more inclusive access to mental health support for dependant drinkers, who may be stigmatised or excluded from generic mental health services.
- (4) Building self-belief, motivation and confidence in change. Allowing individuals to explore what they want to do with their lives as their recovery develops and provide positive activities to occupy their time.

Research aim and contribution to knowledge

The aim of this design PhD is to adapt existing design tools to support and engage individuals in recovery from alcohol dependency. This is being undertaken through the

development of several design studies which aim to address the key points identified above. These studies are designed to directly engage service users and use creativity as the principle catalyst for change.

Little evidence has been identified of toolkits which employ a variety of creative practices as a primary engagement and recovery tool directly with service users. Therefore, the contribution to knowledge is anticipated to be through the novel development and application of a toolkit designed to facilitate new ways of connecting with and supporting the most dependant and vulnerable of service users.

Methodology and tool design

The design studies were initially devised to explore the following:

- Provide a method of investigating the key intervention points highlighted above.
- Learn more about typical recovery journeys and service provision.
- Identify opportunities for recovery from a service user perspective.

In the first design study methods from service and graphic design (including icon development, journey mapping and personas) were used to develop recovery persona journey maps. These were based on the collation and structure of real life substance misuse case study data. This study was designed to illustrate the typical life events, support and drivers, which can lead in and out of addiction.

The second design study involved conducting semi-structured interviews with a cross section of key support services and stakeholders in Brighton. The aim was to create a map to understand the level of service provision in the research locale and initiate conversations with services.

The third design study has developed into the key focus for the PhD. The intention was to work directly with individuals in the middle stage of substance misuse recovery to discover more about their lives, networks and desires. It was considered essential that participants felt part of the project rather than simply being required to tell their recovery story again. As it was expressed by several service users that throughout the recovery process they are asked to tell their story repeatedly, especially if multiple support services are accessed, which can understandably lead to frustration. The process of verbally describing past experiences is widely undertaken as part of normal assessment and keyworking processes and whilst it is extremely important, this project was not intending to re-design or replicate this process. An alternative form of engagement was proposed through the design of a self-reporting style cultural probe research kit (Gaver et al. 1999).

The use of a cultural probe was considered appropriate in such an emotive and personal setting. Firstly, as it was a way to engage and empower people with creative activities and encourage self-expression, rather than to research or assess clients. Secondly, as a traditional ethnographic approach might be considered intrusive, the cultural probe felt more respectful to the personal nature of the issues faced by the participants.

The initial cultural probe research kit contained a variety of tasks focused on the following activities:

- Asking participants to describe themselves and pick a nickname to maintain anonymity in the research.
- Mapping the places visited during periods of substance misuse on a local city map.

- Completing past and present day diaries.
- Offering thoughts on current support provision and access.
- Drawing graphic maps of relationships to substances and social networks.
- Photographing significant places in the city which symbolise recovery and other things which are significant to the participants or inspire them.

The kit was self-contained and included all the materials required by the participants.

The physical design was intentionally low cost and low tech, with a balance struck between a design which was too polished and one which appeared to be put together with little care, overly institutional or clinical. It was considered critical that participants did not view the kit as something not to be spoilt or any mistakes made on, they were encouraged to be messy and creative. The wording of the task questions was carefully designed not to lead responses and ensure the tasks were straightforward and easy to understand (Figure 1).

Ethical considerations and researcher role

Anonymity within the research and confidentiality of the information collected was provided to those taking part. This was to protect vulnerable participants and to allow them to feel as comfortable as possible engaging in the process. There was a risk that individuals might use street names which could be recognisable from the data and responses may have contained candid descriptions of past criminal behaviour. Also, the activity of completing the tasks during the pilot was group based, so other participants may have been recognisable from the data produced. Therefore, full confidentiality for participants was considered critical to promoting confidence, protecting participants, encouraging strong engagement and minimising the potential for anxiety towards the

activities.

Another decision which was influenced by ethical considerations was the role of the researcher. It was decided that experienced support staff would undertake the workshop facilitation, as the process might bring to light difficult past experiences and feelings. The workshop facilitator could manage any personal discoveries which may be challenging for the participants to deal with. Therefore, the researcher was designing and co-ordinating rather than facilitating, which would also minimise researcher reactivity. Reactivity occurs when the presence of the researcher during data collection may influence or create errors in the data due to their effect on the participants (Maxwell 2012).

Initial pilot and findings

As a pre-pilot the cultural probe was tested with MA Sustainable Design students at Kingston University London. This course undertakes projects based on addressing social issues, so they were an appropriate test group, whilst not being in recovery themselves. Three case study Personas (a technique from service design) were produced from extensive case study research. These were used by the students to inhabit the life of an individual with substance misuse issues, to allow them to complete the tasks and feedback on their experience.

A final draft of the cultural probe was reviewed with senior staff at a local rehabilitation centre and presented at an internal meeting to obtain comments from the wider staff team. Feedback from these meetings was then implemented to refine the kit further. The pilot was then undertaken in 2017, with eight residents in the middle stages of residential alcohol and substance misuse treatment.

The returned kits and feedback from workshop leaders showed that this method not only worked well as a research tool but suggested that involvement in the activity was beneficial to both participants and services. The responses were reviewed with the supervision team and appeared to be honest and largely unguarded in nature.

Participants and workshop leaders expressed that the process, whilst at times challenging due to the emotive nature of the thoughts and discussions that the activity elicited, really helped individuals to see the progress made and where their addiction had taken them. As one workshop facilitator noted, “They enjoyed it, the reflective part really helped them to see where substance misuse had taken them, quite an eye opener.’.

These findings highlighted an opportunity for further development of the kit as a recovery tool, which could encourage creative activity in a structured treatment setting. This could facilitate reflection and looking to the future, whilst gradually helping build creative confidence (Kelley 2012). Once residential treatment ends and participants are maintaining recovery in the community they may be accessing creative group work sessions to support their ongoing recovery. This is where creative confidence is extremely important, so that service users feel able to engage with these social support opportunities. A future version of this tool may also have the potential to assist in the building of recovery capital, which would allow a smoother pathway out of addiction and reduce the chance of relapse (Granfield and Cloud 2001), by encouraging and empowering participants to try new ways of designing their own individual recovery. As once structured treatment has ended it is vitally important for individuals to have enjoyable and accessible activities to attend in the community and places to go to socialise and meet new people (Daddow and Broome 2010). Finally, another possible use for the developed tool could be to facilitate links between structured treatment and community groups, as an alternative method for services to signpost activities.

Further development

A revised version of this tool called a Creative Recovery Toolkit, based on the knowledge and feedback gained during the initial pilot has recently been completed (Figure 2). The development has been undertaken with a wider network of organisations in Brighton, to forge strong links from treatment to the wider creative recovery community. In the new toolkit several significant developments have been made. Firstly, the physical design has been improved to be more attractive and tactile. Secondly, the task structure was split into separate past and present sections, to allow participants a clear comparison between past and present behaviours. Thirdly, the introduction card was developed to include information about confidentiality and anonymity. Finally, the revised tasks include a stronger focus on creativity, community and relationships. This new tool iteration has now been provided to the rehabilitation centre to be tested through similar workshop sessions with a new cohort of service users.

Thanks to Kingston University London and the project supervisory team comprising of Paul Micklethwaite (Kingston University London) and Mike Ward (Alcohol Concern) for guiding this research. Thanks to the London Doctoral Design Centre (AHRC) for funding this research.

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