



A new way

David Best and **Stephen Bamber**
explain why they have just
created a UK Recovery Academy

There has been a flurry of activity around addiction recovery in recent years – just as in the mental health field – with public debates, definitions and conferences proclaiming a ‘new way’ of responding to the complex and apparently intractable difficulties of substance problems. Yet this is not reflected in research publications, publicly funded research or even evaluations of the recovery model or explorations of what it means for users, professionals or communities.

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In the mental health field, Bradstreet suggested in 2004 that the switch to a recovery focus is characterised by opportunities for the restoration of a person’s quality of life and positive identity. In the same year, Grant reported that this aspiration is often challenged by ‘treatment’, with mental health services in Scotland often characterised by ‘an organisational culture... of inertia and hopelessness, due to perceived under-funding, increased demands and continual negative feedback from service users’.

A second potential area of learning is the existing body of recovery focused addictions work, much of it encapsulated in a series of monographs produced by William White. In the most recent in the series, White describes a recovery orientation, focusing on long-term recovery rather than remission. There is emphasis on personal self-determination, a focus on strengths rather than symptoms, and an increased commitment to recovery as embedded in families and communities. While the monograph series provides strong and compelling evidence, very little of this originates in the UK and the questions of translating evidence from ‘over there’ apply just as much to the US literature as to findings from the mental health recovery field in the UK.

Our basic aim in attempting to put together a Recovery Academy was to gather knowledge and ideas about something that seems to have been beneath the radar of the addictions research community in the UK and so is treated warily by commissioners who are increasingly pinioned by the demands for evidence-based practice. When we first started discussing the possibility of bringing some people together to move this agenda forward, our ideas were primarily academic – what is the

evidence base for addiction recovery and how has that been tested in the UK? – but we were aware that this was not going to be a traditional research review process.

Our preliminary discussions led to two conclusions – that this should be an inclusive exercise inviting anyone with a commitment to contribute to our understanding of recovery, and second, that we needed to find out what a wide range of stakeholders and interested parties believed about the recovery process and what they wanted. Within days of the invitation being forwarded to a few people we thought would share our interest, the capacity for the venue was filled, and a reserve list swelled by the hour. So there was a clear demand for the event and considerable desire to participate.

Recovery as the art of life

Conceiving the title for these inaugural events, we wanted to look at questions surrounding the recovery concept in a more expansive context, to reflect and engage with the diverse ensemble of voices and viewpoints that constitute this emerging field. Furthermore, the symposia title, 'Recovery as the art of life itself' reflects a tacit understanding of those involved – that recovery is a multidimensional and creative process over time, extending far beyond the horizons of biomedicine and worthy indeed of multidisciplinary attention.

Our original aim was to bring together eight to ten people, so it is some indication of the commitment to the topic that we received around 90 requests to participate – and that was without any advertising and with us making clear that organisations were to be restricted to one invitation only. The breadth and depth of interest delighted us. Something was happening here – could this be the genesis of a new, dynamic interface between research and practice? The diversity of representation and the quality of discussion suggests that this could very well be the case. The thirst for knowledge and discussion on recovery is quite remarkable.

In the end around 70 commissioners, providers, clients, directors, researchers – an eclectic mix of committed individuals with passion and commitment for their own spheres of work – came together across two days to consider and discuss a set of questions designed to help explicate the mission, research focus, culture, and ethos of the embryonic academy.

It was encouraging to see how keen people were to explore theoretical components of recovery discourse alongside more pragmatic concerns. For example, it was argued that statements about recovery are value-based, which opens up a challenging thematic thread for recovery research and practice. This led into a fascinating and important discussion regarding the nature of recovery evidence itself, the viability of various innovative research pathways, and conceptual questions of identity, embodiment, and personhood. There is not space to do justice to the energy, experience and commitment of the contributions so the bullets below are simply an attempt to summarise some of the major points from both questionnaires and contributions:

- There was a concern that recovery is not the aim for many people, and that 'discovery' was a much more appropriate term than 'recovery' to describe a transcendence to something much better than life before addiction.
- The nearest to a definition that the groups came up with was 'not being dependent on professionals' and not being 'defined in negative terms'.
- It was felt that it was essential that the academy reflected the ethos of recovery in focusing on strengths and the positive goals of celebrating recovery as a personal journey and achievement.
- The academy is an opportunity to exchange information about what is going on in recovery and to provide a means through which much of the ongoing recovery activity can be disseminated and discussed.
- The focus must be on individuals, their families and their communities – and those communities must include the helping professions that contribute to 'recovery-oriented systems of care'.

What are our goals?

This was not an exercise in generating consensus. The Recovery Academy will be home to manifold viewpoints. With that in mind, we were heartened by the verve with which people authentically engaged with each other and the notable lack of vacuous 'recovery rhetoric'. Despite expected divergences of opinion, there was an atmosphere of irrepressible positivity and tangible sense that people were listening, reflecting, and negotiating rather than simply restating well-rehearsed opinions.

The process generated enough material to fill several volumes and an agenda that would take us the rest of our careers and beyond, but we have distilled this down to a basic mission statement:

'Our rationale for a Recovery Academy was to chart, in some kind of systematic way, what is happening around addiction recovery in the UK and what an evidence base might look like that records innovation and success.'

'The Recovery Academy is a coalition of interested individuals and organisations committed to evidencing the effectiveness of recovery from addiction and mapping personal growth and transformation in individuals and communities. Our aim is to map recovery activity across the UK and to develop a body of knowledge that charts recovery success. This will be done through an open and participative process that will reflect the warmth, humility and strength of those in recovery, and that will aim to provide the foundations for a science that is based on the art of recovery.'

In practice, what this means is that we will aim to develop a body of people who are actively engaged in promoting recovery (as they understand it). We want them to chart the recovery activities that are blossoming across the country, and the evidence – from a range of research methods and perspectives – that evaluates these initiatives. We hope to be able to develop a coherent body of methods and measures consistent with assessing recovery journeys, recovery communities and recovery-oriented systems of care, and assess interventions that attempt to overcome obstacles to recovery at personal, community and systems levels. Not least, we hope the academy will provide a focal point for debate and discussion around recovery journeys from addiction in the UK.

Where do we go from here?

Within days of the close of the events, a PhD research project was linked in to the Recovery Academy, and colleagues have fed back that the networks established on the days are already alive with animated exchanges and the sharing of skills, knowledge, and understanding.

The Recovery Academy will now start the hard work of developing a structure for our growth and a method of communicating with all the likely key stakeholders. While this will include those sceptical of the recovery agenda, our primary aim is to engage those involved in recovery and related activities. Success would appear to be assured in the short term as a result of the enthusiasm and commitment of those participants who have signed up to move this agenda forward, but we must grow and so we are reliant on your help to make this movement possible. The recovery movement in the UK addiction field has challenged the pessimism pervading the field and has given us hope.

'Recovery' as a central organising and motivating principle, supported by a diverse and robust evidence base, has the potential to translate this common goal into a panoramic vision of radically plural integrated provision for the UK – and to transcend some of the polarised and arguably retrogressive debates that can fracture our field. This may be an idealistic vision, but one that is shared by all those who took part in these events. An auspicious start indeed!

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