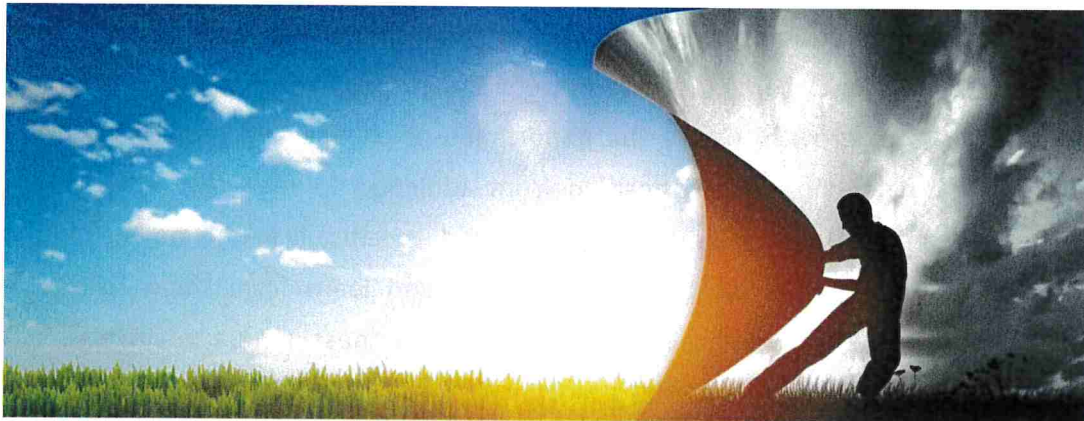


Positive Addiction Recovery Therapy

*A positive approach to recovery from drug
and alcohol addiction*

A foundation for positive recovery



Addiction recovery is considered by many as a lifestyle choice, not an end destination. For this reason, how an individual conducts themselves in their daily life is seen as influential to the type of recovery they lead. Research looking at what sustains a successful recovery has identified six components important to this lifestyle. Growth, connectedness, hope, identity, meaning in life and empowerment. Growth to realise the changes needed to learn and adapt. Connectedness for positive relationships. Hope to link aspirations with desired outcomes. Identity to accept addiction and identify as someone in recovery. Meaning in life to gain new purpose, and empowerment to have the autonomy and motivation to live a recovery lifestyle. This has been documented in a model aimed at addiction recovery known as G-CHIME, a model that takes knowledge of the recovery process and aspects of positive psychology to offer a framework that can aid intervention design, inform clinical endpoints, and provide practitioners and people in recovery with an understanding of important pillars to a positive addiction recovery.

Positive addiction recovery therapy (PART) is an innovative therapeutic approach designed to strengthen recovery and endorse it as a valued state to be in. It is

focussed on improving wellbeing, and in doing so, set the foundation for people to flourish. G-CHIME forms the underlying structure for the PART programme, with sessions dedicated to each component. In addition, there is a session on the use of character strengths based on the Virtues in Action (VIA) character strengths model, and a session which delivers a mini bundle of 'on the go' interventions, that can help mitigate the risk of relapse in challenging situations.

How it works

Each of the G-CHIME components is taken as an overarching intervention containing exercises and activities that pertain to it. By means of this, PART takes a holistic approach, ensuring that the pillars of positive recovery in the G-CHIME framework are catered for within a complete programme. This starts with the delivery of a set of relapse prevention tools that can help mitigate the risk of relapse, such as "fast forward and repeat," where clients are encouraged to visualise the likely outcome of breaking abstinence in direct comparison to the envisioned positive events of not doing so. This leads to growth, where the importance of change and growth is explained, and how it supports the transition from addiction to recovery. The difference between growth and fixed mindsets is explored, specifically in how having a growth mindset helps people accept their mistakes and learn from them to safeguard their recovery. The next session looks at connectedness, where positive relationships are considered, and how they can provide valuable support, as well as improve wellbeing. As part of this, recovery community and connection are considered, with interactive examples of how simple this is to engage with, if one is willing? Once the value in positive connection is appreciated, the identity that is linked with addiction and recovery is examined. There are two aspects to this intervention, an exercise in humility and honesty, which highlights where identity has been manipulated by addiction, and an exercise that transfers personal focus to the identification of a life in recovery. This uses plausible scenario cards to reinforce recovery identity. Once recovery identity has been individualised, the character strength session is delivered using the VIA character strength model. This model identifies 24 positive character strengths that are universal to the human condition. The VIA character strength survey is completed to identify each person's top five strengths, known as their signature strengths. Examples of these are kindness, fairness, honesty, curiosity, perseverance, perspective, and bravery. These are analysed to highlight how they are presently used, how they are beneficial to recovery, and how they can be practised and developed to build on what works and spotlight personal capabilities in dealing with adverse situations in a constructive way.

Equipped with awareness from the sessions on relapse prevention, growth, connectedness, identity and character strengths, the hope intervention moves the individual forward by considering how present goals link to future aspirations. Knowledge from hope theory and the use of agency and pathway thinking is used in an interactive exercise that encourages autonomy and motivation in adapting to changing circumstances, when completing a task. The positive message of recovery that can impart hope in others is also considered with an inspiring first hand account given to demonstrate that hope can be instilled from personal experience of self and others. The personal awareness gained in the identity session, which is linked to accomplishment in the hope session, provides key input to the meaning session, where life purpose in recovery is explored. A group activity investigates what recovery is and means, with emphasis on moments of pride and achievement in reaching it. A personal recovery metaphor is created that epitomises the individualised meaning of recovery as a personal and thought provoking statement. This leads to the final session on empowerment. This session is celebratory and designed to emphasise the positive choice which has been made in embracing a recovery lifestyle. An empowering exercise gives the opportunity for everyone to demonstrate the progress they have made, the awareness they have gained, and the skills they have acquired to strengthen their recovery and flourish in life. This is concluded with an entertaining quick fire positive thinking game that serves to recognise, without rumination, personal facets of what is good about a life in recovery.

Results that make a difference

To corroborate the success of the PART programme, research was undertaken to evaluate the level of wellbeing, recovery capital and flourishing in participants at the beginning of the programme, and again at the end. This provided the necessary data to assess how these three factors had been affected by engagement with the PART programme. To collect this information, three validated measures were chosen for their suitability to the aims of the programme, as well as their established use in existing research. These were the short Warwick Edinburgh Mental Wellbeing Scale, the Brief Assessment of Recovery Capital, and the PERMA Profiler measure of flourishing. All participants were in early recovery. This was classified as having been abstinent for between three and six months. Thirty people participated in the research which was conducted in several groups over a period of nine months.

When the wellbeing data were analysed, a significant and positive improvement was seen. All participants reported feeling optimistic about the future and better able to

deal with problems 'often', if not 'all of the time'. This was in comparison to the start of the programme when half of the participants said this was 'rarely' or only 'sometimes true'. Overall, 93% reported better wellbeing having engaged in the PART



programme. A similar trend was seen with recovery capital, where 90% of the participants reported an increase. When asked, all participants 'agreed' or 'strongly agreed' that they were making good progress in their recovery, with 63% saying they 'strongly agreed' their life was challenging and fulfilling compared with 23% at the start. When the data were analysed for evidence of flourishing, it was found that only one participant reported a decrease in flourishing. All other participants reported a positive increase, with the biggest difference being seen in domains relating to meaning and accomplishment.

These findings show the PART programme is successful in meeting its objective of improving the wellbeing and strengthening the recovery of those who are in early addiction recovery. Furthermore, it has demonstrated that not only did participants report an increase in wellbeing and recovery capital, but they also demonstrated higher levels of flourishing at the end of the programme.

To summarise

PART considers all the pillars of positive addiction recovery as outlined in the G-CHIME model, as well as the efficacious use of character strengths, and the need to protect against relapse. This holistic approach takes knowledge of the recovery process and integrates it with elements of positive psychology to create a whole programme

designed to improve wellbeing, strengthen recovery, and facilitate flourishing. The improvement seen in those who have completed the programme is auspicious, with the majority reporting better wellbeing, recovery capital and flourishing. This substantiates the concept of recovery being a chosen lifestyle, where attention is needed in different domains, in this case components of the G-CHIME model, to maintain and enjoy a balanced life, one where it is possible to exist in a state of flourishing by virtue of being in recovery.

