

The treatment of alcohol dependence by total abstinence: The experience of residents at Studio House, Nottingham

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# **Key findings**

- For residents of Studio House, facilitators and barriers for the successful completion of the programme vary along the recovery journey.
- The Studio House programme can be viewed as a learning experience.
- The meaning of recovery for residents goes beyond alcohol abstinence to include mental, physical and relational wellbeing.
- Staff ability to connect with residents, skills development, programme understanding, and, to a certain extent, peer support are the main facilitators to recovery.
- Misunderstanding of the 'consequences system' could be a barrier to the successful completion of the programme.
- Mental health issues might play a role in relapse among senior residents.

#### Researchers

Paola E. Signoretta is a social scientist and a Bid & Grant Writing volunteer at Studio House.

Jayne Jackson is a Registered Mental Health Nurse and Director of Studio House.

### **Background**

The aim of this project was to explore the treatment of alcohol dependence by total abstinence from the perspective of present and past residents of Studio House, Nottinghamshire. Studio House is an abstinence-based dual-diagnosis Therapeutic Community run by Two Ways Ltd., which can host a maximum of 20 residents.

Studio House is run by 10 staff and 15 volunteers, with the majority of staff having experienced an alcohol and/or drug recovery journey either at Studio House or through a different service. Residents commit to an abstinence model of recovery, which means that no drugs or alcohol can be consumed during the programme. Successful completion is defined as the attendance for the entire programme period, which is around 12 months.

Studio House uses the principles of therapeutic community (Vanderplasschen et al., 2013). It includes forms of group psychotherapy (feelings and encounters groups facilitated by Studio House staff members), practical activities (photography, sewing, cleaning duties), attendance at Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings, and skills development (such as maths and literacy). The nature of the approach is also holistic as it pays attention to physical and mental health and wider personal and financial issues. The programme normally lasts between 9 and 12 months and is divided in three stages: Induction, Community and Senior Stage. All group work takes place within

For a description of the properties see http://www.studiohouse.org.uk/life-studio/our-sites/



the Phase 1 residence which also accommodates Studio House headquarters. During each phase residents live in three distinct buildings and follow a specific part of the programme.

### **Methods**

The research sought to understand the facilitators and potential barriers that exist for residents who undertake the recovery programme at Studio House for the successful completion of the programme.

A small purposive sample of 8 Studio House residents was recruited. This included both current (5) and former (3) residents. Three participants were male and five were female. Semi-structured interviews were carried out alongside observations over the period of the programme.

The small sample means the findings of this report may not be representative of all residents and time periods at Studio House. However, all the participants provided positive comments on the experience at Studio House independently of whether they completed the programme or dropped out. Those who left early believed that the learning from Studio House would help them cope outside.

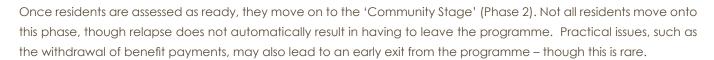
Studio House has strict ethical guidelines in place. The study followed these guidelines to ensure that access to residents, informed consent and anonymity were addressed appropriately and that all residents and participants were treated with dignity and respect. The project was conducted in accordance with the Data Protection Act 1998 and Studio House policy on data protection

## **Findings**

The Participants' journeys start when, having reached a turning point - due to personal difficulties ('rock-bottom experiences') caused by their alcohol dependence, they contact (either directly or via health workers) Studio House. Through each stage residents are expected to make the required changes and learn to live without alcohol dependence.

Phase 1. In the 'Induction Stage' (usually lasting around four months), residents follow a 'Day Programme' including working within the residence (cleaning and cooking duties, for instance), training and attendance at therapeutic groups. The main focus of this stage is behavioural change through learning 'by doing'. Residents are expected to identify those behavioural issues that they need to address to overcome their alcohol dependence. As one resident put it: 'I am being brainwashed but in a good way'.

Induction Stage can be a difficult time, and participants described how they resisted the changes required by the programme. The 'consequence system' (a system of highlighting resident behaviours that need to be changed) was often perceived at this stage as a form of punishment (rather than learning), though this perception changed through group work and introspection.



The 'Community Stage' lasts between 4 and 6 months, during which residents take responsibility for some aspects of the day-to-day running of the project through taking on one of five 'Coordinator' roles, responsible for: induction, maintenance, cleaning, catering and grounds. Residents are only able on these roles if staff assess them possessing the required abilities. Not taking on a Coordinator role may mean it is not possible to continue the programme.



In Phase 3, the final 'Senior Stage', Residents involve themselves in voluntary and learning activities outside Studio House, pursuing personal interests and living in a shared household. They are expected to determine their own standards of living and maintain their abstinence lifestyle successfully, with support from staff at Studio House. They also meet with keyworkers at regular intervals to discuss any concerns they may have. It was noted that mental health issues may play a role in relapse among some residents at this stage, but this could not be shown conclusively given the small sample size.

# **Implications for Practice**

The 'consequence system' is a potential barrier to completion. The system should be explained clearly to new residents to ensure they understand the expected role it plays in creating links between consequences for behaviour and the behavioural changes needed to achieve recovery.

The coordinator roles at stage two are very important in terms of the recovery journey and personal growth. Given the significant amount of work involved in Coordinator roles, it is recommended that need for additional support is assessed at regular intervals, including assessing whether the role of coordinator creates some resentment among other residents. For those residents that cannot take on a coordinator role, it is recommended that complementary roles are identified.

To prevent the relapse at the last stage of the programme, it is essential that their wellbeing is monitored. It is recommended that the existing Health and Wellbeing volunteer role is made permanent and a formal health and wellbeing assessment put in place. A priority should be the identification of potential funding for the development of this post.

More clarity around financial arrangements should be provided in order to clarify the service cost for residents. This is especially relevant in instances in which resident statutory benefits are stopped. Clear procedures should make the process transparent and understandable by those affected.

The structures already in place to monitor the wellbeing of residents at Induction and Community Stage should be further reinforced especially in relation to the mix and dynamics of a peer group. This is to prevent the abandonment of the programme of particularly vulnerable residents who cannot manage, in certain instances, the pressure of living with peers.

Women's wellbeing should be regularly assessed and monitored within the first period of the programme. This recommendation is aimed at strengthening the existing rules at Studio House for the protection of vulnerable individuals.

### **Further Information**

For information on the study, contact Paola E Signoretta

For information on how to apply for a place at Studio House, contact Jayne Jackson on (0115) 9704245 or by email admin@StudioHouse.org.uk or visit http://www.studiohouse.org.uk/



## **References**

Vanderplasschen, W. et al. (2013) 'Therapeutic Communities for Addictions: A Review of Their Effectiveness from a Recovery-Oriented Perspective', *The Scientific World Journal*. Hindawi Publishing Corporation, 2013, p. 427817. doi: 10.1155/2013/427817.

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