

Exploring social support and identity in recovery: a photovoice study

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Key findings

- Recovery is embraced and sustained by embedding the tools used in early recovery into an ongoing lifestyle to support an emerging recovery identity.
- Over time, strategies such as structuring time, being positively occupied, going to meetings and connecting with others become a stable base from which people can reach out for new experiences.
- Embedding these tools in an ongoing lifestyle provides individuals with the safety and security to try new things beyond the recovery community.
- Visible recovery networks and role models encourage access to recovery and help individuals to develop and sustain their own identity in recovery.
- Supportive social spaces to build networks and share experiences are central to enduring recovery.

Research team

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Background

Recovery from addiction can be a challenging and fluctuating journey and individual support needs vary throughout. Services for people in recovery have changed significantly in recent years, with emphasis placed on solutions and service-user experiences rather than traditional treatment approaches. However, the 'key ingredients' that help people to sustain recovery are not yet fully understood. This project aimed to explore what helps people to achieve and sustain recovery, in relation to social support, and both social and individual identity changes.

Methods

This study adopted a qualitative approach, using the participatory research method developed in the 1990s called photovoice. Photovoice uses photography as a way to tell the stories of people whose voices are often not heard and enables engagement and empowerment through a participatory approach. Eight people who self-defined as being in recovery were recruited and were given a camera, if they wished to use one, to keep for eight months. Over the study period, participants were asked to take photographs that represented their recovery journey, their experiences of social spaces where support can be provided and obtained, and their reflections on identity. The photographs and participants' experiences were discussed at three different time points; i) in individual interviews, ii) in a focus group mid-way through data collection, and iii) two focus groups at the end of the data collection period.

Data were analysed iteratively using thematic analysis, with input from a peer researcher who is in recovery and could provide insights into the identified themes. Identified themes were discussed within the team at several time points to contextualise their importance and meaning. Narratives were chosen to correspond with the participant who took the photo, to give the most accurate possible representation of their experience and photo.

Findings

The results showed that overall the participants rebutted the idea of different or novel active ingredients in recovery. They argued that the same set of ingredients exist for all people but may be used in varying degrees. All participants embraced recovery and incorporated it into their personal identity, using the tools or 'ingredients' in different ways to sustain themselves and this developing recovery identity. Participants agreed that core activities such as going to meetings, being positively occupied, and connecting with others were key to early recovery. Consistent use of these tools provided confidence in recovery and allowed participants to develop a strong base from which to reach out for new experiences. By embedding these tools in their lifestyle, participants experienced a sense of security which in turn allowed them to explore new experiences, developing relationships and a sense of identity beyond the recovery community.

Recurring themes were feelings of gratitude for having the opportunity of another chance at life and to be in a place where they felt they fit in. This was something that they had not felt when they were actively using alcohol and was, in many cases, one of the reasons that they had turned to alcohol. Several participants noted that recovery is for many people invisible, something participants believed inhibited access to recovery. Ensuring that recovery is visible and portrayed as the desirable and positive outcome the participants believed it to be, was considered essential to support recovery. Role models were seen as

a positive influence for people at various stages of recovery highlighting the importance of visibility in supporting access to and sustenance of recovery.

The photographs taken by participants, to a large extent, involved exploration of their surroundings, wherever they felt most 'at home'; for some nature was a place where they found positive energy whereas others labelled themselves as being more connected to city life. Photographs centred around places they felt at ease, sometimes in places where they had felt sadness or misery during their period of active substance use. The positive narrative around life in recovery was contrasted with the notion that even after many years in recovery, it can be a challenging process requiring energy and work. For this reason, some participants strongly disagreed with the expression of being 'better than well', which they saw as almost an unobtainable state. To some extent this phrase, which had been used by previous research participants, induced false hope for people in early recovery and did not promote appreciation of the plateaus that some people in long-term recovery identified were features of several stages of their recovery.

Implications

Our findings from this study resonate with previous work around recovery and key resources and processes that enable people to access and sustain recovery. The findings do not suggest any novel 'ingredients' in recovery that can inform future service development. Conversely, our conclusion is that investing in services and support mechanisms that provide the basic recovery tools is the most useful utilisation of resources. Socially supportive environments and spaces where recovery is visible allows participants an opportunity to meet role models, see a positive future in recovery and model behaviour which shapes an emerging recovery identity. We hope that the findings from this project can contribute to the evidence base by emphasising the crucial role social support plays in recovery, to underpin future decisions about funding and support to community-based services.

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