

BTW First Year Report

Better Than Well (BTW), the University of Birmingham Collegiate Recovery Program (CRP), has completed its first year of operation, and this report reflects on the progress made and the next steps in its development. Addiction recovery support is available on approximately 150 university campuses in the USA, but this is the first university-led CRP in the UK. It has been supported by a philanthropic donation by the CrEdo Foundation and was over a year in development prior to its launch in July 2021.

The name Better Than Well was chosen by its student members to reflect the idea that being in recovery from addiction not only affords you the level of health and wellbeing that others take for granted, but also allows you to use your understanding of the experience of addiction to help others. A range of behaviours can become all-consuming, changing from a rational means of coping with stress or trauma to a source of new problems and distress. It is often said that the opposite of addiction is connection, and the Better Than Well community ensures that students in abstinent recovery are supported to enjoy the enormous benefits of a university education.

Section 1 provides a timeline of the key events that have formed part of the programme development. This illustrates the wide range of people within the university and beyond that came together to make BTW work and can provide a blueprint for other universities wishing to replicate the process. The next section lists the core team that met weekly to coordinate the development and promotion of BTW within the university and beyond. This is followed by a description of the work that has gone into promoting BTW and engaging participation across the university campus and beyond. The section ends with the weekly timetable as it stood at the end of the academic year.

Section 2 provides a quantitative and qualitative description of the student population that has made contact and/or engaged with BTW over the first year. This includes a description of the basic demographics, a summary of the results of the focus groups conducted by New Philanthropy Capital (NPC), and an analysis of the themes from nine individual interviews with the Programme Director.

Section 3 presents reflections on the first year of operation, including things that have gone well and the barriers that we have come against in developing the programme. Future development plans are then outlined, guided by the Theory of Change developed in conjunction with NPC (1). Finally a strategy for evaluating the outcomes of BTW is proposed.

Section 1: Processes and People

Timeline

March 2021

- Funding from CrEdo Foundation signed off
- Conference call with Prof Tom Kimball (Texas Tech University) + Tim Rabolt (Association for Recovery in Higher Education, ARHE) to seek guidance and support
- Meeting with Drew Linforth, Assistant Director Student Services (Wellbeing & Partnerships) to plan co-produced activities

April 2021

- First Project Management Group
- Communications Plan developed
- Meeting with Guild Welfare Lead
- Meeting with Universities UK and UK Government about CRPs

May 2021

- Project Manager starts
- 'Call to Action' prepared, inviting students in recovery to make contact
- Asset Based Community Development (ABCD) map of campus resources to support recovery developed
- Meeting with College Wellbeing Lead to discuss dissemination of information about CRP to other Wellbeing Managers. Other suggestions for presentations to College Forums, Staff Student Forums, and Personal tutors, as well as adding details to the Wellbeing Resource Directory

June 2021

- Meeting with 3 other universities to discuss national network of CRPs (Coventry, Chester and Teesside)
- Presentation to the Wellbeing Leads team
- University Wellbeing Team agree to buy SMART Recovery licence to train 6 therapists
- Contribution to a session at the Association for Recovery in Higher Education meeting about international CRPs
- First students make contact + interest from staff and students not in recovery after promotion by Wellbeing Teams

July 2021

- Meeting with central University Communications Team and Social Media Team to plan strategy
- Webpages established on both internet and intranet
- Promotional flyers printed
- Official launch via press-release and video by Luke
- Article about Collegiate Recovery Programs written for Birmingham Brief <https://www.birmingham.ac.uk/news/2021/collegiate-recovery-programs-for-addiction>
- Presentation to Wellbeing Team Psychological Practitioners

August 2021

- Inaugural Celebration of Recovery Meeting held (online) with 5 students attending

September 2021

- Permission granted to use the Lodge for daily drop-in sessions and first one-to-one meetings with students held
- Large room in Aston Webb building (central campus) secured for weekly Celebration of Recovery meeting @5pm on a Friday
- Information about local recovery meetings prepared and disseminated via intranet
- DARO event for potential funders (online) including Prof Tom Kimball from Texas Tech University, Drew Linforth (Assistant Director Student Services) and Gavin Maggs (DARO Director)
- New term starts – CRP has daily presence in the Welcome Week Wellbeing Marquee, and 5 new students make contact
- Students choose the name Better Than Well (BTW) for the CRP
- Campaigns and Reputation Team give permission for BTW branding that can be 'locked' to the University logo
- Article about BTW written for the 'Old Joe' magazine, distributed to all University of Birmingham alumni (<https://www.oldjoe.co.uk/article/new-initiative-supports-and-celebrates-students-recovery>)

October 2021

- Presentation about BTW to the Guild Student Mentors and Hall Reps
- Meeting with University Accommodation Services secures agreement to potentially create 'Recovery Residences' i.e. dedicated flats for students linked to BTW.
- Celebration of Recovery meetings become face-to-face and weekly
- First national UK CRP network meeting held (online) and attended by 25 UK Universities

November 2021

- Public Engagement Meeting at the Exchange in central Birmingham. Presentation by Prof John Kelly about the mechanisms and outcomes of Alcoholics Anonymous and a public launch of Better Than Well. Attended by 150 people
- Presentation about BTW at four College meetings within the University.
- Presentation about BTW at a Collaborate Explained meeting
- Presentation about addiction, recovery and BTW at an evening meeting of 4 UoB student societies focussed on psychology and mental health
- First business meeting of BTW students

December 2021

- Project Manager starts to develop individual Recovery Plans with BTW students at one-to-one meetings
- BTW branding and logo launched
- Bid submitted to university QR research funding scheme to support consultancy work to develop a Theory of Change
- BTW featured on HEART on campus: <https://heartoncampus.co.uk/posts/being-better-than-well-at-birmingham-university>

January 2022

- First meeting with Consultancy team from NPC to plan the Theory of Change development work
- Contact with Tamsyn Warde about bringing the Sober Exposure photographic exhibition to campus

February 2022

- Twitter (@BTW_UoB) and Instagram (@btw.oub) accounts launched
- BTW branded hoodies and sweatshirts distributed to students

March 2022

- NPC conduct student focus group
- Meeting with Philippa Hawkins, head of Staff Wellbeing, about starting a staff support group for addiction
- Second BTW Public Engagement Event, a showing of the film The Anonymous People followed by a discussion of the themes raised
- BTW showcased at the Universities UK Task Force meeting about drug use on campus
- BTW showcased by Drew Linforth at the Ahead conference on 'Navigating Disruption in Higher Education' in London

April 2022

- Institute for Mental Health Lunchtime Webinar on Better Than Well (<https://www.youtube.com/watch?v=vdFzkjGgBbk>)

May 2022

- Short video commissioned for promoting BTW on website and through social media
- End-of-year meetings held with BTW students
- Luke Trainor selected to be a baton bearer for the University of Birmingham leg of the Commonwealth baton relay (<https://www.birmingham.ac.uk/university/birmingham-2022/batonbearers/luke-trainor.aspx>)
- Meeting with Rebecca Mitchell (Global Engagement) and Rachel Gamble (Careers Network) about linking BTW students to the mentoring and internship scheme at the University of Birmingham

June 2022

- Workshop about developing a Collegiate Recovery Program at the NUS SOS Conference (see <https://www.drugandalcoholimpact.uk/>)

July 2022

- Presentation about BTW and addiction recovery on campus at the UKESAD conference in London
- Presentation to Wellbeing Leads from 5 Birmingham universities at the Universities Mental Health Forum

BTW Project Management Team

The team has met on a weekly basis throughout the academic year:

Programme Director – Dr Ed Day, Reader in Addiction Psychiatry, Institute for Mental Health, School of Psychology

Project Manager – Luke Trainor, MSc student

Communications Team – Caroline Durbin, Research Communications Manager, College of Life and Environmental Sciences

Development and Alumni Relationships Office – Louisa Day, Charitable Funding Partner

Student Services & Wellbeing – Drew Linforth, Assistant Director Student Services (Wellbeing & Partnerships)

Guild of Students – Welfare and Community Officer: Charlotte Minter (2020-21), Aaliyah Simms (2021-22)

Promotion and Engagement Activity

The earliest activity involved the University Wellbeing Teams. A presentation about BTW was made to the Wellbeing Managers in each of the 5 university Colleges, and they then disseminated this information to students through email communication, presentations at the start of the academic year, and permanent information on the Wellbeing pages of the Canvas teaching platform.

Information about BTW has been presented on both the University of Birmingham external website and the intranet since July 2021:

- Launch in July 2021: <https://www.birmingham.ac.uk/news/2021/a-fellowship-of-abstinent-friends-to-be-created-in-university-campus-addiction-recovery-programme>
- Main University of Birmingham pages: <https://www.birmingham.ac.uk/study/student-experience/advice-support/health-wellbeing/better-than-well>
- Birmingham Brief feature on Collegiate Recovery Programs: <https://www.birmingham.ac.uk/news/2021/collegiate-recovery-programs-for-addiction>
- Brum briefing for students: <https://intranet.birmingham.ac.uk/student/news/public/summer-2021/university-launches-new-recovery-programme-for-students.aspx>
- Article about BTW written for the 'Old Joe' magazine, distributed to all University of Birmingham alumni (<https://www.oldjoe.co.uk/article/new-initiative-supports-and-celebrates-students-recovery>)
- Institute for Mental Health pages: <https://www.birmingham.ac.uk/research/mental-health/better-than-well.aspx>

- University of Birmingham intranet pages: https://intranet.birmingham.ac.uk/student/taking-care-of-yourself/campus-recovery-programme.aspx?_ga=2.168467113.925165431.1660488716-1894429645.1611594603

The launch Twitter coverage included a video made by Luke, which was viewed nearly 10000 times through the University Facebook channel: <https://youtu.be/s0bO8bdv-8o>

The CRP was represented in the Wellbeing marquee through the first 'Welcome' week of term in September 2021, and several students made contact with us in this way.

The university gave the CRP permission to develop its own branding in October 2021, and to 'lock' this to the University of Birmingham logo for use in all engagement activities. Business cards and posters were created and disseminated across the university, and sweatshirts and hoodies made for BTW members.

Every opportunity has been taken to promote BTW to the University community. Ed and Luke have given presentations to various Schools and Colleges within the University (e.g. Sport & Exercise Science, Biosciences, Life and Environmental Science meetings), the Student Mentor program at the Guild of Students, various Student-led welfare groups (Uob Psychology Society, Health and Wellbeing Society, BreatheUni and Headucate), and the quarterly 'Collaborate Explained' meeting.

BTW has also been active in disseminating the concept of the CRP to Universities across the UK. A first 'CRP Network' meeting was held on Zoom on 18th October 2021, attended by 36 people. This included Prof Tom Kimball and Vince Sanchez from Texas Tech University, representatives from 16 Universities, Universities UK, and the UK Government (Department of Health and the Department for Education).

Instagram (@btw.uob) and Twitter (@BTW_UoB) accounts have been run by BTW students since October 2021.

A Public Engagement event in November 2021 was held at the Exchange, the new University of Birmingham building in the city centre. Prof John Kelly visited from Harvard University and presented his research on the mechanisms and outcomes of Alcoholics Anonymous. This event sold out (200 free tickets) in 24 hours, and also included a presentation about the aims and structure of BTW. The full presentation can be viewed at <https://bham.cloud.panopto.eu/Panopto/Pages/Viewer.aspx?id=deef77cb-2159-4280-8221-adda012b6ac8>

A second Public Engagement event occurred in March 2022, a showing of the film The Anonymous People followed by a discussion panel.

The BTW project is showcased on the NPC webpages: <https://www.thinknpc.org/examples-of-our-work/organisations-weve-worked-with/university-of-birmingham-better-than-well/>

Luke was chosen as a baton bearer for the Queen's Commonwealth baton relay in recognition of his work for BTW. This included a lot of local and national publicity. <https://www.birmingham.ac.uk/university/birmingham-2022/batonbearers/luke-trainor.aspx>



Weekly Timetable

| | MON | TUES | WED | THURS | FRI | WEEKEND |
|------------------|--|--------------------------|--------------------------|--|---|--|
| Morning | Drop-in (the Lodge) 9-11 | Drop-in (the Lodge) 9-11 | Drop-in (the Lodge) 9-11 | Drop-in (the Lodge) 9-11 | Drop-in (The Lodge) 9-11 | Periodic social events |
| Afternoon | Drop-in (The Lodge) 12-3 | | SMART Recovery meeting | Meditation & Dhamma Group 2-3pm (last Thursday of month) St Francis Hall | Drop-in (the Lodge) 12-3 | Support via WhatsApp group Online or local recovery meetings (separate timetable) |
| Evening | | | Sober Social (monthly) | Recovery Share meeting, 6-7.30pm (ERI) | Welcome to Recovery meeting 5-6.30pm (Beale Room) | |
| | Local recovery meetings (separate timetable) Online or face-to-face BTW member will accompany on request | | | | | |

Section 2: The Students

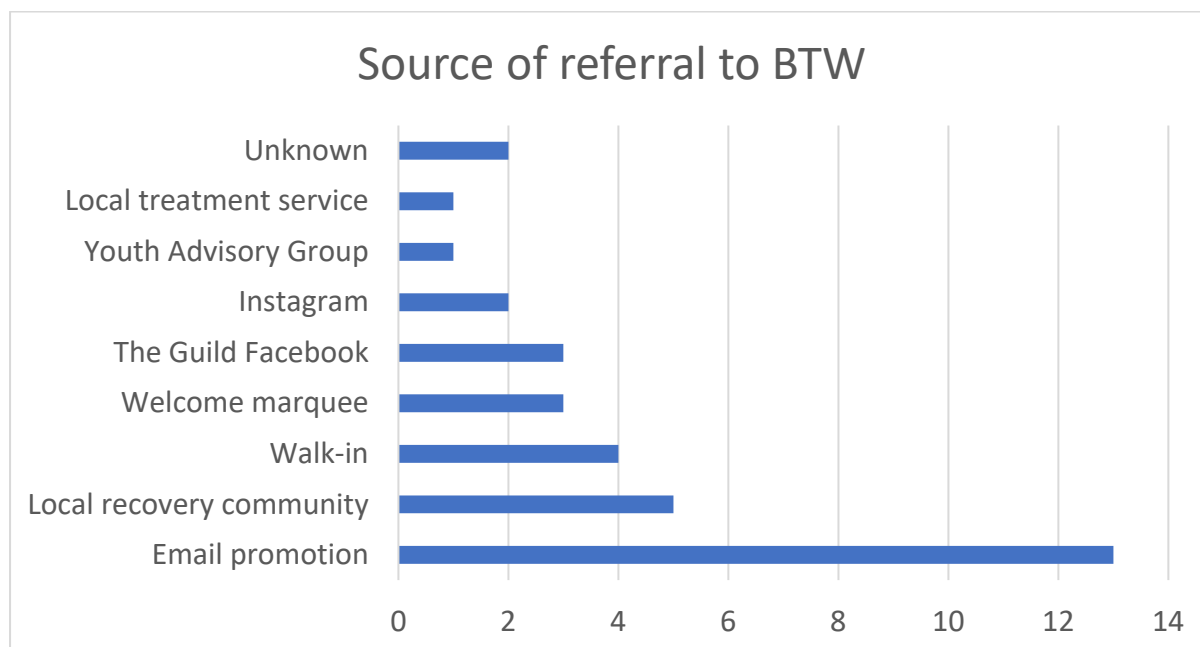
Demographics

All students who have made contact with the service in 2021/22:

A total of 34 students made contact with BTW since September 2021. Of these, 19 (56%) were male and 15 (44%) female. The mean age of this group was 23.7 (range 18 to 43), and the students were studying over 20 different degree subjects (Computer Science, Liberal Arts & Natural Sciences, Medicine, Biomedical Sciences, English Literature, Creative Writing, Nursing, Philosophy, Psychology, Climatology & Applied Meteorology, Rivers Management, Mathematics, Theology, Marketing, International Relations, Educational Psychology, Religious Studies, Engineering, Chemistry, Geography).

Students were in abstinent recovery from a range of addictive behaviours, including use of alcohol and psychoactive substances (including prescription medication use), sex and pornography, over-eating, gaming, internet use, and self-harming.

The majority of students email Luke or Ed directly having seen information circulated by the UoB Wellbeing Teams, including material on the Canvas teaching pages and the intranet. Some students first made contact at the BTW stall in the Wellbeing marquee in Welcome week in September 2021, and others walked in to the BTW drop-in during the term. Several students first heard about BTW through various social media channels (Instagram, Facebook), and a significant number made contact through 12-Step meetings in the local community.



Eighteen of this group (53%) participated face-to-face in the group programme at some point during the year.

Year of Study

| | All students who have contacted BTW | Students participating in BTW programme |
|----------------------|-------------------------------------|---|
| Undergraduate | | |
| 1 st year | 3 | 1 |
| 2 nd year | 9 | 5 |
| 3 rd year | 8 | 4 |
| 4 th year | 1 | 1 |
| Unknown | 3 | 1 |
| | | |
| Postgraduate | | |
| Masters | 6 | 3 |
| Doctorate | 4 | 3 |
| | | |
| TOTAL | 34 | 18 |

NPC focus group

A focus group with six students participating in the BTW program was convened by BTW and run by Consultants from NPC in March 2022. The aims of the focus group included:

- Gaining a student perspective in order to facilitate co-production of the Better Than Well programme's theory of change (TOC).
- Understanding student goals and barriers to achieving these goals to feed into outcomes and impact in the TOC.
- Exploring programme activities that help, or could help, them achieve goals and reduce barriers.
- Understanding how students engage with the programme to determine change mechanisms for the TOC.

The focus group was structured by three exercises.

Exercise 1: Goals and barriers to achieving goals

In the first exercise the students were asked to write down their goals in relation to recovery and life at university, and the challenges to achieving these goals.

The main themes identified by the students in terms of their goals were:

- Skills for sustaining my recovery, including dealing with acute stress during and after university.
- Having a community that I can reach out to.
- Being able to live a fulfilling life and ensuring I enjoy the little things.
- Being part of something bigger and more important than my addiction.

The main challenges to achieving these goals were:

- Isolating myself from my community, or my community not supporting me when I reach out.

- Stigma and stereotypes surrounding addiction and the different forms it can take that prevent me reaching out for help.
- Focusing on myself without considering the bigger picture.
- Mental health including insomnia and intrusive thoughts, and the lack of good, accessible mental health support.
- Thinking about my life in abstinence particularly within the university environment where there is social pressure.
- Other external factors such as the university's policy on drugs and unexpected change e.g. Covid-19.

Exercise 2: The role of Better Than Well

Building on the previous exercise, students discussed as a group the question: "How does Better Than Well help to overcome barriers and achieve goals?" Four key themes emerged:

1. Helping me with self-thoughts
 - Speaking about myself, verbalising thoughts and providing reality checks.
 - Reframing how I think about myself through feedback from others.
 - Providing space and time to think for myself.
2. Creating a community
 - A place I can go where people understand and that is not 'cliquey' or exclusive. It is more accessible than a 12-step group as it is just students. This provides space for when I mess up, unlike friends who don't understand or think I'm not ready for recovery.
 - A place that holds me accountable and helps me keep going. This makes recovery at university feel attainable. A community offers a variety of approaches and recognises that everyone's readiness to change is different.
 - A place where people share their experience ("shares"). I Realise that I'm not the only one and that the whole group is going through the same thing. This gets me used to having uncomfortable and honest conversations as I see other people doing better as a result of being honest.
3. Preparing me for the outside world
 - Providing people I can talk to about ideas for what to do next at university or beyond.
 - Providing links to placements and connections.
 - Providing sober socials so I can learn how to function in the outside world.
 - Providing access to recovery groups in the community beyond the university.
4. Reducing stigma around addiction and recovery
 - Helping me feel more able to open up about being an addict and helping me to share with family and friends.
 - Changing perceptions of what an addict looks like.
 - Providing a safe space without judgement or legal implications, with the freedom to be able to speak freely.
 - Being more visible on campus and normalising recovery from addiction.

Exercise 3: Engagement with Better Than Well

Finally, the students worked in pairs to discuss what students would be thinking, feeling, saying and doing as they engage with the programme at various points in their journey (first finding out about BTW, 1 week into the programme, 1 year into the programme).

On finding out:

Students will feel a strong sense of relief in finding a group of other students who might understand their situation, having thought that they might never meet someone like them. They will be looking for understanding and a feeling of safety, but they will not be sure that they can trust other people. There will be a desire to create some permanent relationships, but this will be mixed with a desire to be in control of their situation. For those new to abstinence there is a worry that they will not be able to enjoy social activities any more, or that they will become a social outcast. They may feel that they need help to understand an addict's thought processes.

One week in:

The concern about being able to trust other people may still be there, along with a concern that they might get into trouble for talking about their addiction. Those with less experience of recovery will be asking themselves 'how are others so open about their addiction?' and 'will I ever be that open?'. They may be worried that they can't keep up or anxious about sharing every week but will be lifted by the realisation that there are others like them and they are not alone. They will start to feel that they can be honest with others about a wider range of issues. They will have questions like 'will I ever be able to have a night out again?', 'can I have a relationship with someone who drinks or uses?', and 'should I tell my friends and flatmates?'. They will start to feel more confident but may still be scared of relapse.

One year in:

After a year of working with the group they will trust others more and feel braver, doing things that they wouldn't have done before. They will start to feel pride in their situation, and an acceptance of themselves on their own terms. They will feel better but will start to think about what they will do when they leave university and how they will keep moving on.

Some key themes that cut across the three points in time included:

- Trusting others and being able to open up to them.
- Feeling a sense of belonging with people who understand their situation.
- Acting more confident and 'in control'
- Experiencing discomfort as they move through the programme and their recovery journey.
- Being fearful of the future.

Student Interviews

End-of-year interviews with 9 students were undertaken by the Programme Director. This group represented a demographic cross-section of those who actively engaged with the BTW program over the first year (4 male/5 female, 6 undergraduates/3 postgraduates, 9 different degree subjects). They also represented a range of lengths of time in recovery (from less than a year to over 10 years), pathways to recovery (4 active members of 12-step Fellowships, 5 using a range of approaches), and primary addiction (Alcohol, cocaine, cannabis, heroin, sex and food). Face-to-face interviews were conducted with each student lasting between 30 and 75 minutes and following a semi-structured interview schedule.

How did you find out about BTW?

The students found BTW through four main routes.

- Two students saw notifications on the Canvas learning platform posted as part of the initial promotion of BTW through the University Wellbeing Services on their course. However, two others students commented that they didn't see anything via the University, although both 'tend not to read emails' from these sources'.
- Two students connected with BTW after attending 12-step Fellowship meetings in the local Birmingham community. In both cases a Fellowship members suggested that they contact Luke after they shared that they were students at UoB.
- Three students saw posts on social media (Facebook) when looking for related issues. This information had usually been reposted by other students (e.g. on the Fab & Fresh pages through the Guild of Students).
- Two students attended the Pause mental health drop-in at the Lodge on campus, and were signposted to Luke who was also doing drop-in sessions in the same building.

Students agreed that there is a need for a wide range of engagement and promotion strategies for BTW, as there is no 'one-size-fits-all'. Some commented that they were suspicious of discussing addiction-related issues on social media, fearing a breach of anonymity. Others highlighted the importance of frequent messaging, as timing was crucial in determining whether the message was acted on. For example one student saw a Canvas notice not long after deciding to stop drinking, and may not have acted on it a few weeks before or afterwards.

What was your treatment/recovery strategy prior to coming to BTW?

Only two of the students had received professionally-led treatment for addiction prior to contact with BTW. One had completed more than one period of treatment in a residential rehabilitation centre during the university holidays, and another had received a variety of group approaches for sex addiction in the USA that were both professional- and peer-led. Two others had been active members of 12-step Fellowships (Alcoholics Anonymous) for between 3 months and 3 years prior to finding BTW. Two had received treatment from NHS or private therapists for other mental health issues, both commenting that they had actively lied about or downplayed the impact of alcohol consumption on their symptoms.

However, the majority of the interviewees had never sought specialist treatment or mutual aid. Some had found social media pages by young people in sobriety to be helpful, or podcasts by 'celebrities' with addiction. Online forums and YouTube channels were other sources of support mentioned. One student commented that he would never have gone to discuss addiction issues with his GP as he was scared that it would impact on his future career in the armed forces. Two students had attended an initial assessment with an NHS specialist addiction service but found this extremely unhelpful and did not engage in any ongoing treatment. Both found that the services failed to understand the context of their issues and the unique challenges facing a student in addiction. Long waiting times and inaccessible services were also an issue.

What is your current situation?

Students reported abstinence from their problem substance or behaviours for between 25 days and 12 years at the time of the interview. Two had just graduated and obtained places in further education or job placements that they were enthusiastic about. Both had used the platform of BTW

and the 12-step Fellowships to engage with a network of recovery support in their new living environments. Another two students were approaching their first year of sobriety from alcohol and one was pleased that she could now tell people that she doesn't drink and why. Despite concerns when she first decided to stop drinking she now finds that people rarely judge her, and those that do 'appear to be reflecting their own insecurities around alcohol'. The student with the longest period of recovery recognised that he would have struggled to walk around a university campus in early recovery as there were 'relapse cues everywhere'.

Two students had overcome relapses during this academic year and had now entered a period of stability. One had been abstinent from his drug of choice for over 6 months, but his situation had really improved when he got a prescription for ADHD medication. When combined with Cognitive-Behavioural Therapy aimed at improving his study skills, this had enabled him to work more effectively towards finishing modules that he had missed earlier in the year. The other was still avoiding campus due to the shame of her relapse but had a new 12-step sponsor and was attending meetings every day. She also had deferred exams to sit in the next few weeks but felt she was working effectively for them.

Two students felt slightly less positive. The first had been abstinent from alcohol for 3 months with the support of weekly BTW meetings. Although he had now decided to return to controlled drinking within strict rules, he had 'needed the period of abstinence through BTW engagement to 're-set' and re-evaluate. He noted that he recently broken one of his rules, and planned to start attending the weekly BTW meeting again. Another student described being abstinent from alcohol but that she was 'white knuckling it'. Although she was physically sober she was struggling with 'emotional sobriety' and trust of others. Her initial experience at BTW meetings was supportive, but more recently they had felt like 'another source of scrutiny rather than a source of support'.

What have your impressions of BTW been?

Several students described the culture at a university as unhelpful if you are trying to remain abstinent. They had found it hard to tell their peers about their issues, but if you don't disclose 'it is impossible to go out to most social events with a group'. The overall 'social norms' of a group of students favour drinking alcohol and sometimes taking drugs. One student who was struggling with abstinence from cannabis, ketamine and stimulant use described how rarely people talk about drugs at university. She had always carried the fear of being 'thrown out' if she asked for help. Most of her friends at university were drug users, but none of them seemed to experience the internal battles that she did about whether to continue or not. She initially felt intimidated by meeting the group as she had not achieved total abstinence at that point and couldn't see how she would ever achieve this. After she had a one-to-one chat with the Project Manager she felt at home and 'recognised' and made progress in reaching her goals.

All the students described the peer support of BTW membership as helpful, but in a variety of different ways. One student felt that the weekly sharing of 'experience, strength and hope' had really helped her understanding of addiction. She had tried AA but struggled with some of the basic concepts and didn't feel comfortable with people discussing problems that felt much worse than her own. BTW was a bit more relaxed and 'it was helpful to meet people who understand me'. The BTW community contains a range of lengths of time in recovery, and several students found this helpful e.g. 'I always felt my experience was valued, and although I am older I am aware that many of the students 20 years younger are so much recovery wiser. I learn a lot from them'.

The weekly Celebration of Recovery meetings were the best attended part of the programme and felt to be the most useful. Some acknowledged that the recovery language used could be awkward at first if you had no experience of such groups, and that it took some people 3-4 meetings to feel comfortable. The atmosphere was described as welcoming and comfortable, and several students thought the group allowed everyone present to share their thoughts in sufficient depth. One student felt that student-focussed groups were essential, and he likes telling people his story as he feels it makes him more accountable. Two students described the overwhelming emotional release of meeting a group that completely understood their issues, struggles and successes.

Although the Celebration of Recovery meeting is explicitly based on all paths to recovery, the students fell into two broad groups. Some students were active members of the 12 Step Fellowships and shared a common language and understanding of recovery, whereas others did not follow one model of recovery over another. This could make students without Fellowship experience feel uncomfortable at times. One student commented 'I think the only downside to the group is that it has a tendency to promote that there is a preferred way to recovery, often 12 step, which I have no issue with. However, I do struggle with some of the terminology and themes that come from that such as the role of 'self'. Developing stronger alternatives such as SMART Recovery was thought to be one way of guarding against this, and one student suggested having a theme for each meeting circulated in advance. However, this split in opinion was not generally felt to be a problem. One student commented that 'it is good to know that regardless of differences there is a common thread that gives everyone a mutual respect and understanding'.

The one-to-one meetings with the Project Manager were also highly valued, and several students had utilised this option on a weekly basis. The 'Thursday share' was described as a great way of introducing the students to the Fellowships. One student felt it was 'really nice to hear people talk about struggles that I could relate to'.

The students whose recovery was from behavioural addictions described how much more difficult it is to talk about issues such as food or sex. This was true of talking to fellow students in general ('no one understands it (over-eating) and it is very hard to talk to others about it'), but also in speaking openly about it at BTW groups. One student had chosen to talk in generalities about his addiction, judging that it was better to wait until others knew him better before being more specific. However, he was aware that getting specific was also important as 'you will not get as much progress if you don't'. Students with behavioural addiction were aware that their issues 'don't usually make life so bad that you cannot cope', and this might explain why there are less students presenting to BTW with these issues. A specific weekly BTW group aimed at behavioural addiction may help integration into the wider programme in the long term.

How can we promote BTW better?

The students had found out about BTW in a variety of ways and they suggested a range of potential options for reaching and engaging other students. Social media was an important route in and tapping into the main university Instagram account was one option. Others felt that BTW could be advertised more through the Guild of Students and a BTW 'sober social' event promoted by the Guild at the start of each semester would be one way of doing this. The BTW presence on campus could be increased by putting up a flyer in all the student residencies, and advertising on the welfare hub in the Library would also be useful.

Offer a termly induction through the wellbeing teams. Get it included in all Canvas welfare pages.

One student had done a stint at a university in the USA, and before starting was asked to do complete a compulsory module about how to tell people you were abstinent and how to respond when someone tells you. He wondered whether something similar might be used in Birmingham.

When asked specifically about how to attract prospective students in recovery to the university, university Open Days were felt to be important. Targeting parents wasn't felt to be helpful in all cases, as students don't always allow their parents to be involved in their choice of university. One student commented that if she had seen BTW advertised on the University website she would have assumed that Birmingham has a significant alcohol problem and perhaps avoided it.

Emphasising the confidentiality of the service was thought to be crucial. One student argued for more sophistication in how the message was disseminated, urging consideration of the techniques of motivational interviewing, saying 'It can take time to get there and the message if done with too much throttle too early on might leave people feeling uncertain about what the programme is aiming to achieve'.

Suggestions for moving forwards

Finally the students were asked to suggest elements to add to the BTW programme over the next year. The current weekly Celebration of Recovery meeting would be aided by a topic posted in advance, allowing people to think through it beforehand. The expansion of SMART Recovery was considered important, and the option of a specific group for behavioural addictions would be welcomed.

Several students mentioned a weekly educational session about recovery. This might include different ways of understanding addiction and practical strategies for coping with challenges such as how to be comfortable and how to enjoy socialising, dating sober, living in a 'normal' student house and how to deal with sports clubs/sports night. Expanding the range of sober social events was also considered important. It was noted that sports societies only have social events that are alcohol-related and that more imagination was needed in developing new ideas. Events with physical elements that help to build trust are one option e.g. climbing, and one student drew on her previous experience of being exposed to physical and mental challenges as part of the cadets. Another option was expanding the role of the Lodge to a 'recovery clubhouse' where BTW students could socialise throughout the day. Events linking students to nature were also suggested e.g. canal walks, visits to the Lickey hills.

Students liked the idea of broadening the understanding of addiction and recovery amongst their university peers through a Recovery Ally programme. Watching and discussing films was one way to reach a wider audience and raise relevant issues.

Section 3: Reflections and Future Plans

Reflections

What has gone well?

The growth of the BTW programme has exceeded all expectations in 2021/22. Based on feedback from more established programmes in the USA, our goal at the start of the year was to establish a regular weekly Celebration of Recovery supporting up to 5 students. By the end of the academic year there were 18 students participating on a weekly basis in BTW activities, and a further 16 students had made contact and received at least brief advice or support.

Highlights have been:

- **Steady growth in student numbers throughout the year.** The end-of-year interviews show that students found BTW through a wide range of sources including university welfare emails, visiting the welfare marquee in Welcome Week, social media, posters, personal recommendation or referral from the local recovery community. Despite this success, we have learnt that we need to promote BTW in as many ways as possible on a daily basis to ensure we make contact with students.
- **Integration into existing Welfare and Wellbeing Services.** BTW has had extensive support from Drew Linforth and his team, and the service sits comfortably under the umbrella of university wellbeing provision. This is likely to have many benefits moving forward, with the possibility of referrals going in either direction
- **The utilisation of one-to-one support.** Luke's wide personal experience of recovery and strong links to a range of local recovery activity has provided an individually-tailored service for BTW members. He has provided one-to-one meetings, helped create individual recovery plans, and personally linked students to other recovery supports.
- **Strong peer support.** Although the structure of the programme is set out by the Project Manager, the BTW community has started to support each other through formal and informal routes on a daily basis. This confirms the power of peers in providing 24/7 recovery support.
- **Linkage to local recovery community.** Although students have reported struggling to access meaningful treatment for addiction in the local community, many have benefitted from linkage to peer-led recovery support outside of the university. The creation of both 12-Step and SMART Recovery meetings for young adults in the city is likely to be the next step in this evolution.
- **An evolving programme driven by student needs.** The BTW programme now has activity on every weekday and support at weekends if required. Future activities will be in response to student feedback.
- **A Theory of Change elaborating mechanism of action and areas for development.** The work with NPC has created a detailed Theory of Change to help us understand and maximise effective strategies and develop new initiatives. This will be used as the basis for an evaluation process moving forwards.
- **BTW has a national profile.** Our initial communication strategy has led a wide range of online and in-person presentations to local, national and international audiences about addiction, recovery and the CRP. BTW is recognised by the UK Government, a Universities UK Task Force and other universities as a pioneering initiative to benefit students by supporting wellbeing, improving mental health, maximising academic achievement and broadening participation in university life.

We are delighted that our first three students will be graduating later in 2022, and that we have had communication from other young people saying that they have chosen the University of Birmingham as it has a Collegiate Recovery Programme. We look forward to potentially starting recovery accommodation for new students in 2022/23, and developing initiatives such as addiction recovery ally training.

Barriers to growth

- **COVID-19.** The achievements outlined above have occurred despite the widespread disruption produced by the COVID-19 pandemic. We anticipate that it will be easier to communicate with students face-to-face in the next academic year
- **The stigma of addiction.** When talking to BTW students it becomes clear the extent that the stigma of addiction impacts on all areas of their life. Most were reluctant to discuss their addiction with even their closest friends and family, and everyone was wary of 'getting into trouble' by revealing details to the university. This increases the challenge of engaging students in the programme, and prompts us to develop strategies to counter stigma at both an individual and institutional level.
- **Communication.** Such is the impact of stigma, our efforts to communicate the benefits of BTW need to be both intensive and extensive. There is no one strategy that works, and it requires experience and local knowledge to harness the communications networks in a large organisation like a university. We will employ a communications lead in the new academic year and develop a social media strategy.
- **Behavioural addictions.** A third of students making contact with BTW reported that their primary addiction was a behaviour (sex, pornography, gaming, eating), but this group was the least likely to engage with BTW. We are planning a public engagement event centred on behavioural addiction and will explore the possibility of running a behavioural addictions group to help engage this population.

Future Plans

Our plans for 2022/23 will be driven by the Theory of Change (1). In particular, the following areas have been highlighted:

Students in Recovery

- **BTW delivers yoga & other body awareness/fitness classes** - we are exploring the possibility of partnering with The Phoenix (<https://thephoenix.org/>) to develop these activities for BTW students, whilst also engaging other students interested in sober activities.
- **BTW provides access to quality psychotherapy** – we are in discussion with Reset Psychology about the provision of trauma-focused educational work for BTW students
- **BTW transfers key roles to students over time** – BTW student members already organise social events and run the Twitter and Instagram accounts. Over the course of the next 12 months we will create peer mentor roles for more senior students within the programme.
- **BTW supports students to become future recovery leaders** – we will continue to stay in contact with BTW alumni and include them in our programme wherever possible. In developing a weekly

recovery seminar, we aim to build skills to communicate more effectively in advocating for recovery.

Students on Campus

- **BTW provides recovery ally training** – We will launch a recovery ally training for staff and students in 2022/23, initially built on established programmes in the USA.

Prospective students

- **BTW seeks funding for a funded recovery scholarship** – we will continue to work with DARO to seek full or partially funded bursaries for students in recovery to attend university
- **BTW provides information to school/college staff at UCAS events** – we will supply enhanced information to UCAS events in order to promote BTW at the University of Birmingham.

University of Birmingham staff

- **Mandatory welfare training includes recovery/BTW**
- **BTW info included as part of staff induction** – we will provide materials about addiction and recovery for welfare and wellbeing staff working with students on campus. They will be encouraged to attend recovery ally training as part of the role
- **BTW holds celebration events on campus** – in addition to the termly public engagement events we will organise a Recovery Celebration event around the graduation ceremony for our first BTW graduates.

External universities

- **BTW launches a targeted LinkedIn campaign** – we will explore this option when our admin/communications lead is in post
- **BTW runs a national survey on recovery with other universities and shares the findings** – we are in discussion with other universities about developing a national survey

Evaluation Framework

BTW has been established quicker than anticipated, and there is now a need to build in an evaluation process to demonstrate the impact on students and the mechanisms of action of the programme. A recent paper by Emily Hennessy and colleagues proposes a recovery capital perspective in evaluating the CRP (2), measuring both strengths and barriers at the outset of CRP engagement and changes in personal, social and community recovery capital over the course of their university life.

From a recovery capital perspective, university students in recovery from addiction bring their own unique strengths and weaknesses, which will interact with the resources and barriers in their immediate (e.g., accommodation, teaching, work, extracurricular activities) and community (e.g., university resources, location, culture) environmental contexts. These factors then influence each other in a bidirectional manner. For example, building human capital (e.g. self-confidence and

motivation) makes it more likely that the student will engage with BTW (increased social capital), which in turn will lead to new peer relationships and more self-efficacy (human capital)

There are four areas to consider in planning the evaluation:

1. Baseline resources and barriers

Using the Hennessy model, these can be considered under three broad headings:

- i. Personal Recovery Capital and Barriers:*
 - The severity of the addiction problem
 - The extent of the student's problems-solving and coping skills
 - Social determinants of health, including adverse childhood experiences
 - Financial resources available
 - Previous experience of treatment or peer-led recovery
- ii. Social Recovery Capital and Barriers:*
 - Support from friends and family
 - The student needs to develop a new social network in transitioning to university, and has to negotiate a variety of social influences on campus e.g. academic staff, close friends, other students
- iii. Community Recovery Capital and Barriers:*
 - The Collegiate Recovery Programme
 - The wider Recovery Community beyond the campus
 - The culture on campus, including policies towards various forms of addiction

2. Inputs and Process Factors

In BTW these currently include:

- Peer-led recovery support meetings
- One-to-one recovery support meetings
- Recovery plan development
- Recovery community meetings on campus (e.g. AA, SMART)
- Sober social events
- Meditation and mindfulness

Future plans will add

- Recovery accommodation
- Recovery skills workshop

To ensure that CRP activities are implemented as planned and thus can be causally linked to outcomes of interest, a series of process objectives needs to be identified and evaluated for each activity. For example, in the group recovery support meeting, we would expect several process objectives to be examined, including: (a) deciding on meeting structure or mutual help format (e.g., all recovery, Alcoholics Anonymous, Dharma Recovery), (2) how to be inclusive of diverse recovery pathways, and (3) recruitment and advertising strategies. Examining whether and how these activities happened would help to determine whether this broader activity was implemented as planned or if changes to any parts of its implementation are needed to increase engagement or improve chances of participants achieving aims.

3. Short-term outcomes

The BTW Theory of Change provides expected outcomes that can be measured:

| ToC item | Potential measure |
|--|--|
| <i>Students develop an identity as a student in recovery</i> | Social Identification Scale Social Identity Mapping |
| <i>Students support one another</i> | Social network variables |
| <i>Students grow in self-confidence</i> | Resilient Coping scale Hope and Coping in Recovery |
| <i>Students feel they have more self-agency</i> | Brief Abstinence Self-Efficacy scale |
| <i>Students experience less self-stigma</i> | Substance Abuse Self-Stigma scale |
| <i>Students improves their wellbeing</i> | WHOQoLBREF |
| <i>Students finish and excel in their degree</i> | University transcript |

4. Longer-term outcomes

Participation in BTW could result in many long-term outcomes related to building recovery capital. As described by Hennessy et al., students who experience positive short-term outcomes through BTW (e.g., having fun while sober) are more likely to stay engaged in university, have higher grades, and be more likely to graduate, thus generating human recovery capital through employment and greater financial recovery capital. Similarly, we might expect these students to report feeling more engaged in university, choose to participate in additional extracurricular activities (e.g., sports, hobbies, clubs), and demonstrate stronger ties to the university and the local community (e.g., volunteering), all indicators of social and community recovery capital. This process can be captured by measures of recovery capital such as REC-CAP (3).

Ed Day will work with Dr Hennessy and other researchers in the field to develop an evaluation structure with appropriate measures delivered at baseline and throughout the course of the academic year. The Theory of Change will be utilised to build a model of potential mechanisms of change, which can then be tested through data collection. This will also allow us to test the impact of new additions to the BTW programme.

References

1. Birmingham J, Boswell K. Better Than Well Theory of Change. London: NPC; 2022.
2. Hennessy EA, Nichols LM, Brown TB, Tanner-Smith EE. Advancing the science of evaluating Collegiate Recovery Program processes and outcomes: A recovery capital perspective. *Eval Program Plann.* 2022;91:102057.
3. Best D, Edwards M, Cano I, Durrance J, Lehman J, White WL. Strengths Planning for Building Recovery Capital. *Counselor.* 2018:32-7.