

Sea Changes

Introduction

Through this project I hoped to improve my understanding of addiction and recovery, especially the impact that this has on individuals. I had limited experience of how addiction is managed before the voyage. By taking part in the “at sea with recovery” voyage I hoped to improve my understanding of addiction and the process of recovery so that I could improve my future medical practice. The voyage enabled me to achieve this as well as improving my confidence and developing skills in a unique way.



What did I learn about Addiction and Recovery?

Prior to the voyage

Before the voyage I had limited knowledge of addiction and recovery from my own experience. I had visited rehabilitation centres as part of my psychiatry placements during my third year of medical school where I spoke to some of the service users who described their journey of addiction. What struck me the most was how everyone seemed to have a different story and a different experience of recovery: some had been in rehabilitation multiple times, others had tried various methods before reaching the rehabilitation centre. Many of the service users had gone through a long process in order to receive funding before they could attend the residential rehabilitation centre. There did not seem to be a pattern to people's experience of recovery.

When I found out that I was going to go on this voyage I was extremely excited but also very nervous. I did not know what to expect. I have always enjoyed water sports and had experience of power boating, but I had never been sailing before. I was excited about learning how to sail and also to build relationships and work in a team with the service users. I hoped that I would be able to learn about what they found helpful and challenging throughout their recovery process. I also hoped that they would tell me what they found helpful or not helpful about doctors they had encountered so that I may use this in my future practice.

Prior to the voyage we visited the rehabilitation centre to meet the service users that we would be going sailing with. I felt less nervous about the trip after this as everyone spoke so openly about what they were looking forward to, and what they were nervous about.

I read the book "Wasted" by Mark Johnson.¹ I found this incredibly interesting and it opened my eyes to the challenges of addiction and recovery, as well as the thoughts and feelings of those during the process of recovery. I found some aspects of the book shocking and I could not believe how many tragic experiences the writer had

experienced throughout his life. I was glad that I read this before embarking on the voyage as I felt it helped me to start to develop an understanding of the challenges and struggles of those recovering from addiction.

Before the trip I looked into the treatments available for those with an addiction to drugs or alcohol. There are a variety of treatments available, all provided by different services. Services include drug agencies, GP's, community drug teams, needle exchange schemes, outreach services, residential services, telephone helplines and self-help groups.² Not all services are available in all areas and there are different criteria to meet or waiting times which can make access difficult at times. Phoenix futures, who ran the residential centre that the service users on the voyage were based at, also take part in alternative projects which focus on building community links and creating a social impact.³ These include art, sport and conservation. The aim of these is to give service users skills and form relationships so that they can experience life without alcohol and drugs, therefore enabling them to achieve more in their future.

During the voyage

Day one

We arrived a couple of hours before the service users to meet the crew and help with preparing the boat ready to sail that evening. When everyone arrived we chose bunks and had a safety talk and split into two groups. We set off that evening and sailed through the night in three hour watches. There was an air of excitement. As the night progressed, the sea state became rougher and the majority of the group were very sea sick, including myself. I knew that I would probably be sea sick for the first day of the journey, as this has been the case in the past, so I felt prepared for this challenge. When we woke up to do the 3am until 6am watch it was clear that some members of the group were really struggling with this, especially due to the lack of sleep. One member of my team was finding this extremely hard and decided she did not want to join in but went to sit at the back of the boat. I spent some time talking to her about how she was feeling. She had only been at the rehabilitation centre for a few weeks so was fairly early on in her recovery process. The

conversation we had that night was the start to building a relationship and her opening up throughout the voyage. After some encouragement she came back to join in with the team. This showed me how as a doctor, just by speaking to patients this can be helpful in their recovery process. It can help us to understand individuals as well as building a relationship.



Day two

As we arrived into Falmouth, you could almost see a line where the weather changed from being very grey with the sea being rough, to blue sky and sunshine with calm waters. This was a welcome relief and finally the sickness had passed. We left the boat to have showers and a walk through the town. This was a great time to get to know some of the service users on the other team who I had not really got to know yet. I was shocked at how quickly people would open up about their journey of addiction, and how honest they would be about their feelings.

One service user spoke to me about his experience of detox. I was unaware of how long this process could take and how ill it made you feel. It had taken him weeks to come off a variety of medications and he did not stop vomiting and feeling incredibly dizzy throughout this time. I had not considered the impact that this may have on someone, and it made it clear as to one of the reasons people do not complete their detox or time in rehabilitation.

I spoke to another service user who has nearly finished his rehabilitation and is currently living in “resettlement”. This involves moving to accommodation with others that have gone through the rehabilitation process so that you can support each other, whilst still accessing support from professionals. He found this extremely helpful and felt that he was able to take a mentoring role to those just starting their recovery process. He was aware of his own limits, and knew that he should set small goals for the future and take small steps in order to make his recovery successful. As a future doctor this may be something that I can take into account when treating those with addiction.



Day three

After spending the night on the river, we went back to sea to practice sailing and then sailed up the Helford River. We went for a walk along the cliff top in the afternoon, and despite many complaining about having to walk, this was many peoples highlight when we spent time reflecting on the best bit and worst bit of the day in the evening. This happened every evening. When asked why they thought the voyage was good for their recovery there were a few themes: learning to enjoy yourself without alcohol and drugs, learning new skills and feeling a sense of achievement. This made me think about the importance of inspiring and encouraging people to show them that they can have a brighter future. This then provides motivation to go through the process of recovery.



Day four

After a morning swim, we sailed to Gorran Haven and went for another walk. These were great opportunities to build relationships and have conversations with people about their recovery. Relationship was also a central theme to many of their stories.

Lack of, or unsupportive relationships with parents, partners or families were often the trigger for people starting to take drugs or drink alcohol. Enabling relationships to be built and reflected upon is a part of the recovery process that many had found helpful. The ability to laugh and have fun on the voyage had shown people the joy that could be felt from this.



Day five

We sailed to Looe in the morning and went to the beach. This will be a day that I will remember forever. One member of the group spoke about how he had spent the majority of his life in prison. He found re-integration into society difficult after this as he was not given any support. He said he felt that the voyage had changed his life as he had built up skills and learnt how to have fun in life. Whilst on the beach he built a model of the prison he had been in. He had not been to the beach since he was a child and I felt as if I was watching a child build a sandcastle and it was amazing to see the joy he was getting from this. When he had finished he kicked the model

down to symbolise the start of his new life. This was incredibly powerful and moving to watch.



Day six

The final day. We had spent the previous night in Cawsands. It had been an incredibly clear evening and we had sat outside looking at the stars, reflecting on the week. I had learnt a lot about addiction and recovery. Firstly that there is no “one size fits all”. Each person needs to be treated as an individual in order for recovery to be successful. Reintegrating people into society and providing them with skills, such as those gained through sailing, increases the success of recovery and gives people hope and motivation for a successful future.

How will this experience change my future practice?

I have learnt about how I can be a more approachable and supportive doctor to those suffering from addiction. It is important for me to spend time building relationships in order to deliver successful treatment. This may require booking longer appointments with a patient so I will consider this in my future practice. Building successful relationships will allow me to provide individualised care, to see what support someone may need at that particular time. Without the trust of the patient, management of addiction cannot be achieved successfully.

Providing structure through the recovery process is also something that the service users said they found helpful. This can be done through creating a structured support network, building a management plan with the patient and reviewing this on a regular basis.

The voyage has increased my confidence and made me feel more relaxed in my practice, especially when working with patients suffering from addiction. I thoroughly enjoyed my time on board and my interest in psychiatry and addiction has grown from this.

Conclusion

Addiction and recovery are not simple subjects and I am grateful for the experience I have had in undertaking the voyage. I have learnt a great deal about the complexities of managing addiction and supporting recovery through conventional and creative methods. The importance of treating everyone as an individual is key and providing skills and hope for the future can increase the success of recovery from drug and alcohol addiction. I have also developed my self-confidence through undertaking this project which has been translated in my medical practice and personal life.



Creative piece:

I created a "sail" out of fabric and printed some of the photographs from the trip onto this. I hope that this documents the voyage to others. I want it to show the different things that happened on the journey so that it shows the fun we had whilst working as a team. The photos display us all working together which shows that the barrier between "doctor" and "patient" has been broken down to form an equal relationship between us. I then wrote some of the quotes from the service users onto the fabric to give an insight into the process of addiction and recovery.



References

1. Johnson M. *Wasted*. London: Sphere, 2008.
2. Drug Wise. What types of treatment are there?
<http://www.drugwise.org.uk/what-types-of-treatment-are-there/> (accessed 7 March 2016).
3. Phoenix Futures. Phoenix Recovery. <http://www.phoenix-futures.org.uk/phoenix-recovery> (accessed 3 March 2016).