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CLIENTS' PERCEPTION OF A SOCIAL MODEL RECOVERY FACILITY

Summary

The purpose of this study is to examine the perceptions of clients in a Social Model Recovery Home for Alcoholic Women. The attitudes of women in early stages of recovery (three months or less), are compared to their care givers and the founders of the facility. Part one examines their perceptions of Alcoholism per se. Secondly, their perceptions of the facility are explored and compared to the founders and to the staff of the facility. Reasons for discrepancies are explored and discussed.

In 1961, the World Health Organization decreed that Alcoholism (or some form of it) is a disease process. Within a decade, every major American Health Body had "pronounced alcoholism as a disease..." (Gitlow, 1973). This medical definition of the problem was accompanied by a variety of "therapeutic environments" within which the alcoholic could be treated. One stream of treatment modality, while predating the acceptance of the Medical model, has not only continued to exist, but has increased in numbers. Social Model Recovery Homes accept that alcoholism is a disease but expands the concept into the social/psychological arena by the inclusion of a number of salient factors.

1. The individual, due to his/her disease, used alcohol as his/her coping mechanism.
2. Without learning (or relearning) adequate coping skills sobriety was unattainable.
3. This learning is best accomplished through peer contact with other recovering individuals.
4. While this process is life-long, it can best be introduced in a supportive home-like environment within the community.

In spite of the relatively long history of Social Model Facilities, little research has occurred on either the methods or success of this therapy. This research, as part of a larger study, is an attempt to investigate the environment of a social model recovery home. This report will deal only with the resident's perceptions of alcoholism and their perceptions of the facility in which they are undergoing treatment.

One study of British Alcoholism treatment hostels suggest that an important variable is the degree to which the care-givers and the recipients share understanding on the fundamental nature of alcoholism (Tillman, 1980). Residents and staff perceptions were scored as moral, psychological, medical or social on a scale developed by Shaw et al (1978). As this study lacked a longitudinal perspective, it was not possible to consider one major factor. Was the facility chosen due to the shared perception or did the convergence occur as a result of either education or peer pressure? To gain insight into convergence, the test was administered to residents in the recovery home on three occasions. In addition, Staff completed the survey on a single occasion.

Findings

Few of the subjects exhibited a unitary perception of alcoholism. That is, their responses appeared to be equally distributed across the 4 categories. Further, this distribution tended to continue throughout the programme. No significant differences occurred between residents and staff. Several notable exceptions were found that appeared to indicate the importance of pre-admission experiences. The failure to find common perceptions led to a search for other shared perceptions that could contribute to either the decision to enter into a social Model facility or to the treatment outcome. It was decided to explore the perceptions of the basis of social-modal recovery, the 'home-like' setting. Appropriate techniques were devised for each of 3 groups. a) Founders and Directors-content analysis of literature, reports and speeches. b) Staff and Volunteers - sorting task (Okay, 1979), interviews and observation c) Residents - interviews, observation, survey and sorting task.

Results

No shared perceptions occur across the 3 categories. While a high degree of unanimity is found with Founders and Directors, it is not shared with the staff. The residents have a high rate of concurrence, but it is in conflict with the Directors and Staff. They tend to view the facility as an institution. The rationale for this perception can be explained through application of Goffman's definition of Institutions (1962). Staff did not share perceptions of the environment either with the other groups or with each other. The individual's perceptions appeared to be a function of their role and duties inside the facility.

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A COMBINED TACTILE/ELECTRONIC GUIDANCE SYSTEM FOR VISUALLY IMPAIRED PERSONS IN INDOOR AND OUTDOOR SPACES

Summary:

In order to guide visually impaired persons safely through difficult spaces, highly schematized, second-generation tactile maps have been developed which depict in relief fashion the major route configurations in a building or outdoor area. The raised images of a path and the symbols for major items of interest along it (e.g., public phones, restrooms, intersections, elevators, and stairs) can be felt with the fingertips of the person studying the map. This type of map is useful for familiarization with an area that is new to a traveler by helping to create a mental image of where things are and how they are spatial-