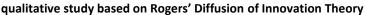
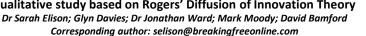


Adoption and implementation of computer-assisted therapy using Breaking Free Online within a substance misuse organisation, Crime Reduction Initiatives: A







INTRODUCTION: Even when clinical effectiveness is proven, the diffusion of novel interventions throughout healthcare organisations can be perceived as disruptive. The NHS has recently made the diffusion of innovative approaches to healthcare a priority. One such approach is Breaking Free Online (BFO), a form of computer-assisted therapy (CAT) for drug and alcohol dependency. Aims: This study sought to explore staff and service user experiences of the adoption and implementation of BFO used as CAT within CRI, a social care and health charity working with people affected by drugs, alcohol, crime and other issues.

METHOD: Design: Semi-structured interviews were conducted. Setting: Interviews were conducted at a number of CRI services. Participants: These were 18 service managers, practitioners, peer mentors and service users at CRI. Measurements: Data were thematically analysed and themes conceptualised using some of the main components of Roger's Diffusion of Innovation theory (Rogers, 1995, 2002, 2004), which is depicted below.









CHARACTERISTICS OF USERS "I know some people who are not computer literate so you almost have to take a back step and almost, like, make them computer literate....

FINDINGS: A number of perceived barriers to adoption of BFO throughout CRI were identified within the social system, including a lack of IT resources and skills, and the initial challenge of finding the most effective method of implementing the programme with service users. However, there were numerous perceived benefits of adoption of BFO throughout CRI, including broadening access to effective interventions to support recovery from substance dependence, and promoting digital inclusion. Along with the solutions that were found to the identified barriers to implementation of BFO, intentions around longer-term continuation of adoption of the programme were reported, with this process being supported through changes to both the social system and the individuals operating within it. Some of the findings are illustrated in the figure below with quotes from interviews mapped onto relevant components of Rogers' Diffusion of Innovation theory (Rogers, 1995, 2002, 2004).

KNOWLEDGE OF INNOVATION we're very recovery focused here, like five ways to wellbeing, recovery capital. that's the ethos of the services that we deliver. So definitely, 'cos Breakina Free removing the [focus on] substances..."

CHARACTERISTICS OF SOCIAL SYSTEM

"I think one of the other issues is that some people don't have computer access at home. So we've now set up computers and we're looking at setting up a structured session round BFO."

PERSUASION AND DECISION TO ADOPT

"...the first couple of times I spoke to clients about it I wasn't so convincing, but then after I used it myself I could explain the benefits of it, and explain the progress I made and what I was trying to achieve. But mine wasn't with drugs

PERCEPTIONS OF INNOVATION "I was saying to the staff today, it's an absolutely fantastic package, in terms of CAT, and just moving so much forward so that service users can access treatment at home...It's just taken every bit of technology and used it to support someone in their recovery."

ADOPTION CONTINUED ADOPTION

it was actually our Recovery Champions "I like the idea of the POD working and that were put in the lead of carrying it the peer mentors actually using the [BFO] on and because they've been programme themselves and then acting through treatment themselves, they were as facilitators. It has a knock on effect really, really passionate about it. doesn't it if you start with you advocates and then its spreads.

REJECTION

DISCONTINUANCE

LATER ADOPTION

> CONTINUED REJECTION

CONCLUSIONS: The introduction of innovations such as BFO within large organisations like CRI can potentially be perceived as being disruptive, even when individuals within the organisation recognise its benefits. For successful and sustained adoption and implementation of such innovations, some changes in the social system throughout which the innovation is being diffused are required, both on an organisational and individual level. The learning points from this study of the successful adoption of new digital technology within a large organisation may be relevant not only to the substance misuse sector, but also more widely to criminal justice, health and social care organisations.

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