

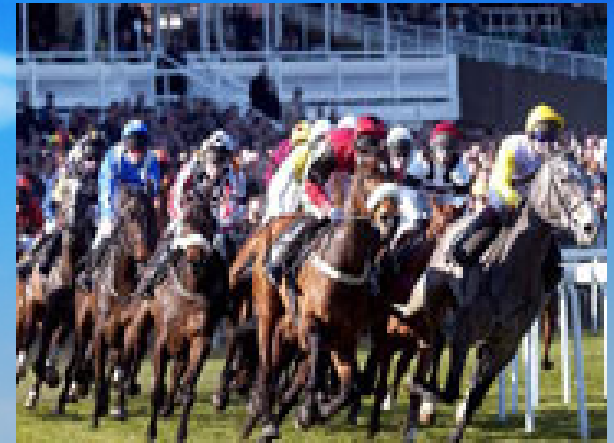


User involvement as part of recovery

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Where are we?





Sefton



Introduction

- **My role within DAT Team**
- **2005 established Sefton Service User Forum**
- **My experience**

The last five years

- **More treatment, better treatment, fairer treatment**
- **Waiting times went from over 4 years to less than 4 days**
- **Doubled the numbers in treatment**
- **Improved quality of treatment**

Today

- **Large proportion of our treatment population have been in treatment for very long periods and appear ‘stuck’**
- **Traditionally, abstinence pathways lead out of borough, therefore no visible recovery community in Sefton**
- **However, we do have a very vibrant, dynamic service user forum who are engaged in all aspects of DAT work**

Risks/Rewards of using SUF

Risks

- Recovery not initially on their radar**
- Fear of being pushed before they're ready**
- Fear of failure**

Rewards

- People have real ownership of the treatment system**
- Greater control over pace at which they move through the system**
- More likely to be sustained and sustainable for these reasons**
- Defined their own meaning of recovery**

Problems we face

- **Very large, static treatment populations**
- **Drug related health problems**
- **Some still have ongoing issues with problem drug use**
- **Threatened by ideas around abstinence**

What else do we have?

- **Independence Initiative**
- **Intuitive Recovery**
- **SHARP**
- **Spider**
- **In-patient detox**
- **Residential rehabilitation**

Not just the service users!

- **Bulk of the treatment system made up of a large main service provider doing the prescribing**
- **Culture of methadone maintenance**
- **Rigorous commissioning**

How do we change?

- **Service users at the centre of everything that we do**
- **Focus on recovery**
- **Workshop to consult with service users**

Our definition of recovery

- **Recovery is a process rather than an end state**
- **Abstinence is probably the best outcome, but may not be attainable for everybody**
- **People on maintenance treatment should still be engaged in the process of recovery**

Designing for change

- **No baseline knowledge**
- **Previous needs assessments had relied on quantitative data**
- **Decided to do a more qualitative needs assessment**
- **Had to embed recovery into our needs assessment**

User led needs assessment

- Previous needs assessments conducted by local monitoring unit. Little qualitative data
- Hired a local service user to design and manage the needs assessment in collaboration with Service User Forum members
- SUF members were trained and conducted interviews with peers, resulting in information we might not otherwise have got – some of which might make uncomfortable reading
- Empowering service users as they come to understand the relationship between research, policy and systems change and how they can impact on that

Findings of needs assessment: Obstacles to recovery

- **Still people outside the treatment system**
- **Many service users with extremely complex needs**
- **Severe and protracted habit**
- **People who do recover tend to either leave the area or become invisible**

Experience of treatment

- **Support for methadone by people doing well in treatment**
- **Some not in treatment because they have an issue with methadone**
- **Some wanted outpatient detox but feel they have been put on MMT and forgotten about**

Current situation

- **Just six of our sample currently employed (12%)**
- **81% said they had significant barriers to employment. These were:**
 - **Current drug problem**
 - **Lengthy criminal record**
 - **Mental health issues**
 - **Physical health problems – (14%)**
 - **Combination of the above**

Obstacles to recovery

- **Treatment population falls into two major clusters**
- **People who are new to treatment have a very positive attitude towards outcomes**
- **People in treatment long term may simply be offering a realistic assessment based upon their past experience**

Case study: Ste

- Long term methadone user
- Significant long term health problems
- Major relationship issues
- Initially cynical, but eventually won over
- Currently relapsed back to cynicism, probably due to depression related to health problems?

How we respond as a DAT

- **Mainstreaming treatment**
- **A single point of assessment outside the main treatment provider**
- **Treatment mentors**
- **Ongoing monitoring of the scheme and its outcomes, by SUF as well as the DAT**
- **Support for a local advocacy service**

How we respond as a forum

- **By building an effective forum, we're building recovery in Sefton**
- **Not limited to those who are drug free/abstinent, but to anyone who uses, has used or may use drug treatment**
- **Forum operates on multiple levels**

Case study: Hilary

- **Below the radar for a long period**
- **Use related to major trauma**
- **Abusive relationship – but managed to fund and sustain habit through work**
- **Lost everything, rebuilding life**
- **Importance of forum in changing perceptions of self**
- **Recovery and reintegration**

Work of the core group

- **SUF are often consulted or used as a focus group by researchers, services, drug companies, people making films, etc**
- **SUF is also represented on many decision-making panels, locally and further a field**
- **Commitment to the forum provides access to a range of volunteering opportunities**

How does the forum build recovery?

- As SU's are involved in consultations over policy, commissioning, etc, they get a sense of what the world of work is like
- Confidence and self-esteem begin to grow
- Process happens collectively rather than individually, so forum members support each other
- People begin to form a vision of a better life, and one that is genuinely attainable
- Members of the wider forum see the progress of the core group and aspire to join the core group
- Members of the core group either make progress while on subutex/MMT, or they begin to move towards abstinence
- High degree of commitment/investment necessary by the DAT

Problems/obstacles

- **Capacity**
- **Some people do move on as soon as a job offer comes along**
- **Need to keep new members joining, without threatening the supportive aspects of the currently successful programme**



Thank you

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Sefton Service User Forum