

'There's too much talk on drugs, not enough on alcohol.'

Delegate

'We believe alcohol service users have the right to choose the type of service they want.'

Don Shenker (Alcohol Concern)

'As a society we've decided that alcohol treatment isn't as important as drug treatment. People with alcohol problems aren't seen as as big a threat as people with drug problems. I'm not

telling you how it should be, I'm telling you how it is.'

Paul Hayes (NTA)

'We use our energy to get alcohol seen as another drug. Drugs are drugs are drugs.'

Si Parry (Morph user group, Southampton)

'Service users who have successfully recovered or are recovering are a huge resource, particularly related to alcohol abuse treatment.'

Delegate

'Service user groups should encompass all drugs, including alcohol.'

David Hirst (Kent County Councillor)

'We're not answering the needs of alcoholics. There's no real clarity about service users' needs – we need common grounding.'

Delegate

'Service users are the key to the drink and drug problem, so surely money should be invested in their training, rather than just treatment.'

Delegate

'The next conference should be segregated – alcohol upstairs and drugs downstairs.'

Delegate

'Perceptions have become polarised because of abstaining alcoholic users, and continuing (but controlled by treatment) drug users. Their needs are fundamentally different.'

Delegate

'We need to stop paying lip service and help in funding projects for under-served groups.'

Delegate

'Independence and ownership' key to involvement

Service user independence and ownership of the methods of involvement are central to genuine involvement, says Alcohol Concern's director of policy and services, Don Shenker.

He told delegates that programmes needed to be designed, evaluated and run by service users, and there should be proper support and supervision for them to do that.

'Service users and commissioners need to sit down together and plan services,' he said, adding that it was 'a shame' that the Alcohol Strategy said so little about service user involvement.

Shenker chose the conference to launch Alcohol Concern's User-led commissioning toolkit, designed to demonstrate the most effective ways of involving

service users at commissioning level. 'Genuine involvement needs the full commitment of commissioners,' he said. 'PCTs and DATs are required by the Health and Social Care Act to involve service users, so there is no excuse.' It also made good sense for commissioners, as it led to better information and quality of services, but it was essential that the involvement be led by service users.

To be done properly, however, it also needed a thorough planning process which required time and money, he warned.

'One size does not fit all. It needs time, patience and dedication from commissioners and service



users alike, and this commitment should be rewarded financially for service users. It is the commissioners' responsibility to start the process – in terms of resources, funding and posts – and it also requires a genuine commitment to listen.'

User-led commissioning toolkit available at £15 by contacting info@alcoholconcern.org.uk. Free of charge guidance is available by contacting the same address.

Getting heard, getting started

Many delegates commented that support for alcohol users is woefully inadequate in their area. Kevan Martin started NERAF with nothing but determination to make sure alcohol users are heard in the North East.

Coming home after intensive treatment for a 20-year alcohol addiction, Kevan Martin needed local support. He got involved with his local drug user forum and realised there were many more people in his situation, looking for help with their problem drinking. Becoming vice chair of the forum, his agenda was

frustrated by being told by the NTA that alcohol was not part of the forum's remit – despite the area experiencing the fewest treatment services and the longest waiting times in the country. Incensed but undeterred, he started up a self-help group in his home town of Whitley Bay.

Realising he would need support to take his group further, Martin approached a community service agency called VODA, who helped him to set up NERAF – the North East Regional Alcohol Forum. Its two-pronged strategy would help people locally, linking them with alcohol services and rehabs; and influence strategy and services further afield through a national campaign.

Since those early days, NERAF now works with providers and the PCT. Furthermore, they are

providing service users with choice of support, alongside 12-step and AA services and have embedded service user involvement as a natural part of the treatment landscape.

'Service providers like us, because it's another avenue for them,' said Martin, 16 months on from starting NERAF. 'User involvement has been accepted like a breath of fresh air up here, because it's making practical differences.' Now two years old, the group is a force to be reckoned with, though Martin is realistic about how much further there is to go. 'Will we get service user directives on alcohol?' he mused, while a panelist at the conference. 'I don't know – we're struggling to even get treatment. But outcomes should be based on service users, and not on commissioners.'