

# ISSUES OF SUBSTANCE 2009

**The National Opiate Treatment Association of Canada**

***Involving patients in their treatment service***

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In many developed countries, there are publicly funded advocacy/support organisations that assist patients receiving treatment to

- learn more about their condition
- be aware of the range of treatment and services that could help them
- understand the scientific evidence validating their treatment
- be represented as stakeholders on all bodies that affect them

**One example is The Alliance  
- A UK-based NGO**



- Incorporated with charitable status in 1999
- The board is a collaboration of patients and professionals in the field
- Clear aims that focus on treatment issues
- Close relationship with National Treatment Agency and RCGP
- Tight financial governance gave confidence to grant-making bodies
- Currently runs a UK Helpline and Advocacy Service across England
- Paid Staff Team of 8

## However, here in Canada

In their 2006 report on Mental Health, the Standing Senate Committee on Social Affairs, Science, and Technology (the Kirby Committee) commented:

“ .. the addiction field lacks powerful voices, a vacuum that has left only policy makers and health providers to speak for anonymous clients. However good their advocacy, there is no substitute for people who are, or have “been there””

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- WHY is this the case – where are the voices?
- WHAT benefits could come from developing such voices in Canada
- WHAT is happening about this issue in Canada

## **WHY are there no voices?**

- Pervasive stigma around people who are in treatment (this cuts both ways)
- Fear that increased involvement leads to the “inmates taking over the asylum”
- Fear that patient input will amount to “just wanting drugs”
- Doubts that addiction patients could work collaboratively and constructively
- Increasingly politicised debate on drug policy and practice especially around Harm Reduction

## **WHAT benefits could such voices bring?**

- Active patients participating in their healthcare have better treatment outcomes than patients whose are passive recipients of care
- Increasing knowledge and understanding of treatment options and evidence-based health care
- Improving service standards by increasing their accountability to their patients
- Interesting and innovative contributions from people who have "been there"

**META D'AME** is a provincial Canadian project that has been a leading player in the formation of NOTAC

- Started in 1995 as a drop in centre in downtown Montreal
- First Grant was given on December 13th 1999
- Incorporation and Charity Status was granted in March 2000
- During 2006-7 there were 3800 appearances at centre from 498 different people
- Residential program for people who are opiate dependent, active or not, in treatment or not.
- Since 2006 a bilingual magazine has been produced 3 times a year

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national opiate treatment association of canada

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association nationale de traitement d'opiacié de canada

So, using the experiences of Meta D'Ame and The Alliance,  
a group of us have founded

## **NOTAC - ANTOC**

The National Opiate Treatment Association of Canada (NOTAC)  
will use a collaborative model that has been successful  
in Canada and the UK.

## OUR MODEL FOR SUCCESS

- Fully accountable incorporated company, registered as a charity in October 2009.
- A Board of Directors reflecting partnership between patients, former patients, and people who provide care or determine policy and practice.
- Clear aims and objectives that are not overtly controversial and reflect that supporting and expanding addiction treatment is our overall objective.
- A membership model that allows for regional and national activities.
- Respect for all evidence-based interventions.
- Close working with other stakeholders – Government, Healthcare, Carers, Colleges of Health.
- Showing respect for the many ways in which people reach recovery.