

Alcohol Users' Forum meeting notes Thursday 12th December 2002

Welcome, Introductions and Apologies

Apologies were received from one of the people who attended last time and a new member was welcomed. Introductions were made.

Maggy re-described the service planning structure within which this Forum operates, by reference to the wall charts that were displayed, last time. Julie restated the Forum's only groundrule – that people arrive in a fit state to be able to conduct themselves responsibly in the meeting.

Notes of Last Meeting and Matters Arising

Those present at the last meeting agreed that the notes were a fair record.

- 1) Mapping Exercise of local drug/alcohol services, produced by the Partnership Development Team. As promised at the last meeting, Maggy distributed copies to those present, inviting people to take extra ones, if they wished, to pass on to others. Members felt this was an excellent document which would empower potential service users by putting information directly into their hands.
- 2) Alcohol Carers' Forum. Publicity for this is now ready to go out after Xmas, for an initial meeting in late Jan/early Feb. Members welcomed this and expect this Forum to become very popular, as they are only too well aware of the damage which their problems with alcohol has caused to those around them. They also felt that carers' views are more likely to change things, as they're viewed as more "respectable".
- 3) Increasing the membership of the Forum. Members were concerned at the disappointing attendance, so far and are aware that we are not yet reaching street drinkers, the secret "women behind the curtains" drinkers, etc. Those present decided to do all they could to try to increase attendance by word of mouth, stressing the Forum's potential to actually make a difference to the way services are delivered at the moment.

One member who had been to a national users' meeting in London said this experience is not uncommon – drinkers and drug users are some of the most demoralised, excluded and discriminated-against people in the country and it's difficult to persuade them of the value of speaking out.

The way forward seems to be to go for key, achievable goals, instead of trying to change the world. When he gets the minutes of the national meeting, he will circulate them to Forum members.

Response from Service Planners

Maggy reported back on 3 important meetings where the notes from the Forum's 1st meeting had been discussed:- the Alcohol Reference Group (of City's Drug Action Team) and the Joint Commissioning Groups for both the City and the County.

Members were heartened to hear that their viewpoints and observations had been received with great interest and taken seriously. They were particularly pleased that their suggestion for a "One Stop Shop" information service had been accepted as worthy of investigation and a small group had been asked to come up with a costed proposal as to how this service might be provided and what it would look like.

Although it was his first meeting, the Forum's new member offered to be on this group to help design the proposal. His offer was accepted by all present.

People thought that this is exactly the kind of thing which will encourage more people to attend the Forum – real proof that users' views are providing commissioners with powerful information, which they are then acting upon. It was agreed that there has never been a better time for service users to get involved, with the NTA (National Treatment Agency) placing such an emphasis on this and withholding funding from DATs (Drug Action Teams) if they don't comply.

Service Standards

The above led on to a general discussion about the inconsistencies and contradictions within and between services and the apparent lack of any external monitoring, to common standards. Again, this had come up in the national meeting so is not a problem that's confined to Nottingham.

GPs have very variable practices and knowledge levels. Specialist services have rigid regimes based, apparently, on personal ideology rather than evidence-based practice and they often ridicule other (usually voluntary) services, regardless of whether or not they have actually helped people.

Fashions change in treatment models; in particular, abstinence is no longer being offered to people, or seems to be mentioned less and less. The current focus on "unit counting" and "control" is misleading and simply invalidates the experiences of people seeking help from the services. It also fails to take into account individual variation and the damaging effects, over time, of the substance itself (i.e. alcohol) and the resultant gradual erosion of a person's ability to exercise control.

Ideally, people would like to see something like a Patients' Charter for this field, setting out exactly what you are entitled to expect from specialist services. This could be audited e.g. by checking with patients which services they were told about on their initial consultation appointment. What matters, surely, is what works – shouldn't you have to follow people up, at set intervals, to see how they're doing? All services are good at something and all have their place in helping people at different points in their "career". So the aim of this would be to play to services' strengths.

Julie explained about the Q.U.A.D.S system which goes some way towards this and someone else drew comparisons with the ISOs used in industry. However, self-reported data is always questionable and people would like to see something like an OFSTED for alcohol services – maybe even league tables, like schools and hospitals already have.

This Forum could be used to involve service users in the monitoring by, for example, distributing and collecting questionnaires to and from others, about their experiences in different services.

National Alcohol Harm Reduction Strategy

One or two people had already sent their own replies to the consultation document but the group felt they would also like to send a collective response.

Much of the ensuing discussion was around the Government's irresponsible attitude to some of the more lethal kinds of alcoholic drink now available (i.e. the super strength lagers and ciders) and those deliberately aimed at young people (alcopops etc.) It was felt that, if a company like Smith Klein Beecham produced something with as widely reported adverse side effects as those seen when people have been on the strong lagers and ciders for a few years, there would be questions in the House of Commons, Panorama Specials on TV etc. etc.

Maybe the Forum ought to lobby the BBC for attention to be paid to this issue, like other campaigns they have conducted – service users are licence payers, too! Parallels were also drawn with the USA where people have started (successfully) suing tobacco companies for the damage done to their own health through smoking. What if brewers and the like were made to face "product liability" in the same way?

The way these products are advertised and marketed is abusing vulnerable people and those at greatest risk i.e. young people and those already dependent on alcohol. The super strength lagers and ciders aren't for social drinkers and this is common knowledge, yet they are ridiculously cheap, usually piled high near the door of most corner shops and supermarkets and sell in great quantities without advertising.

In their experience, Forum members felt that prolonged use of these strong, cheap lagers and ciders leads to damage which is over and above what you'd expect from the alcohol content alone and seems to be particular to that product i.e. mental, emotional, stomach and sight problems. This was thought to be worthy of further investigation but no-one seems to take it seriously.

There was some concern about terminology used in the document. "Alcoholic" is no longer politically correct, it seems, but terms such as "alcohol user" fail to recognise that alcohol is also using (or, rather, abusing) you!

One person quoted their GP as describing alcohol as "the most powerful psychotropic drug known to man" yet it is still freely available, everywhere, without prescription and for very little cost.

In summary, people thought that this basic fact, and the consequent harm done to people's lives, jobs and relationships, should be what is underpinning the National Strategy.

Maggy will send a response on behalf of the Forum by the deadline of 15th January.

Date of Next Meeting

Thursday 6 th February 2003 at 7pm at the Voluntary Action Centre, Mansfield Road.

Maggy will sort a list of dates for the coming year and send out a flyer with these notes, as advance notice of the meetings may also help more people to attend.