

New approach for drug and alcohol services proposed

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People who have sought help for drugs and alcohol should be actively involved when developing new services according to new research from the University of Aberdeen.

A team of public [health](#) experts from Aberdeen Center for Health Data Science recently published their findings on the importance of giving service-users "a voice" in the journal *PLoS Global Public Health*.

Working alongside partners in research organizations, services and non-profit and [advocacy groups](#) in South Africa, the team set out to establish new ways to improve engagement and dialogue in public services—specifically around drug and alcohol programs. The 8-year-long project will look at how best to engage participants and improve retainment in health improvement services.

Working with and for [rural communities](#), the first part of the project identified alcohol and drugs as a key priority in rural South Africa and highlighted the value of involving the people who will actually use health improvement services. This approach is one that project lead, Dr. Lucia D'Ambruso suggests would benefit [health systems](#) all over the world including the NHS.

Dr. D'Ambruso explains, "Whilst this project is based on work with rural communities in South Africa, alcohol and drugs serious present public health problems to our own communities and Health Service in Scotland. The lessons that we have learned from our community-led approach in South Africa are also very relevant here at home."

Dr. D'Ambruso and her team led an initiative that created spaces for people and health systems to join together, produce research evidence, act on this evidence, and therefore learn to address common health concerns. This is contrary to approaches that may not always include the lived experience of people they are trying to help.

Dr. D'Ambruso adds, "We took a participatory approach where we shared power throughout the [research process](#): the health issues under investigation were not imposed by outsiders, but were instead directed

by participants.

"We then took 'community voice' a step further—it is perfectly possible to raise community voice on local public health concerns—people are experts in their own lives after all. What is critical, and often missing, is connecting community voice to the authorities to support the establishment of virtuous cycles of 'community voice' and 'state response.'

"Marginalized community voices seldom feature in public services, however, in this project, it was possible, even in a setting of deep distrust between people and the authorities, to create spaces and processes connecting stakeholders to build dialogue, evidence, action, and learning for cooperative action on health.

"The process needed time, space and a sensitive, inclusive, informed approach shifting power and control towards those most affected and, adapting to changing circumstances and needs. The authorities embraced the process and there has been formal recognition and uptake in other settings in South Africa.

"Our experience shows that regular safe spaces can develop and align community voice with state capacity to respond—a mutual empowerment—that contributes to responses based in shared rights and responsibilities for health equity."

Dr. D'Ambruoso is also in discussions with planners and [policy makers](#) within the NHS with a view to rolling out new-participatory approaches as part of strategic plans and priorities on substance use, community empowerment and learning health systems in NHS Grampian.

John Mooney, Consultant in Public Health with NHS Grampian remarked, "Local drug and alcohol services in NHS Grampian have

recently become very pro-active in exploring the most effective means of incorporating genuine lived experience into all aspects of service development and delivery.

"The work of Dr. D'Ambruoso and colleagues with very marginalized service user groups in South Africa, is therefore likely to be of great significance as we look towards fully engaging our lived experience community across our whole multi-agency network of drug and alcohol service provision."

More information: Lucia D'Ambruoso et al, 'Voice needs teeth to have bite!' Expanding community-led multisectoral action-learning to address alcohol and drug abuse in rural South Africa, *PLOS Global Public Health* (2022). [DOI: 10.1371/journal.pgph.0000323](https://doi.org/10.1371/journal.pgph.0000323)

Provided by University of Aberdeen

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