

Experiences of methadone service users explored in human rights–based study

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Findings of a collaborative study between the Schools of Nursing and Midwifery at Trinity and University College Cork, and a former Ph.D. student from Maynooth University indicate that there is a significant gap

between human rights, policy and best practice and how these are operationalized within the structures and practices of Irish opiate substitute prescribing services.

The study is published in the *International Journal of Drug Policy*.

There are an estimated 20,000 people who are dependent on opiates in Ireland with just over half of that number in treatment. Ireland has amongst the highest rates of drug-related deaths in Europe at over 3.5 times the European average and most of these deaths involve opiates.

While substitute prescribing is directly related to improved [health outcomes](#) (such as reduced mortality) previous research in Ireland has called into question levels of service user involvement in OST services, governance and organization of services. Service users who already come from marginalized communities, then suffer further "institutionalized" stigma due to their experiences of how services are delivered.

The research aimed to understand if or how human rights are operationalized by opiate prescribing services from the perspective of 40 service users in the context of how they have been successful, or not, in negotiating their right to health.

The findings indicate that there is a significant gap between human rights, policy and best practice and how these are operationalized within the structures and practices of Irish opiate substitute prescribing services. The treatment of service users, based on human rights principles such as equality, respect, autonomy, empowerment and [personal choice](#) remains aspirational and is unlikely to be fulfilled without addressing more systemic challenges such as funding, training of staff, service culture, governance and independent oversight of opiate prescribing services. The interviews were conducted by a Ph.D. student

at Maynooth University who was a former user of opiate prescribing services.

Key findings:

- There is a significant gap between human rights, policy and best and how these are operationalized within the structures and practices of Irish opiate prescribing services. Implementation of current policy and best practice recommendations remain largely aspirational.
- Health care practitioners amplify a sense of stigma and shame for people who are dependent on opiates through disrespectful interpersonal approaches and by disregarding best practice.
- Service users' experience engagement with opiate prescribing services as a fear of authority, loss of personal autonomy and in feeling coerced- in a way that impedes their recovery, including accessing planned detox, rehabilitation or gaining employment.
- In many instances, current policy, resources, guidelines and related practices are not facilitating the delivery of services which are of an appropriate standard.

Dr. Peter Kelly, Assistant Professor in Mental Health Nursing, School of Nursing and Midwifery, Trinity College, said, "We know that there are examples of good [practice](#) across the country and practices are slowly changing for the better across many prescribing services in Ireland. However, service user perspectives presented in recent studies, including this one, indicate that sub-standard practices are still much too commonplace. Many service users are being denied opportunities to re-enter society and recover by the treatment system itself.

"Failures to use existing resources well, provide access to detox and aftercare services, implement a range of expert recommendations and follow existing policies and guidelines are compounded by a lack of

independent oversight.

"The consequence of this 'systems failure' is that people who want or need to recover all too often end up feeling more marginalized because of how they experience services. This has to change, not just from a [human rights](#) perspective, but from a value-for-money perspective."

More information: Richard Healy et al, 'As for dignity and respect.... me bollix': A human rights-based exploration of service user narratives in Irish methadone maintenance treatment, *International Journal of Drug Policy* (2022). [DOI: 10.1016/j.drugpo.2022.103901](https://doi.org/10.1016/j.drugpo.2022.103901)

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