

# Rights and Responsibilities

for people who receive opioid substitution prescriptions (scripts)  
and the pharmacists and pharmacy staff that dispense them



A Voice of the Voiceless production

## Our pharmacy experience

By people who receive opioid substitution prescriptions

In this booklet we highlight the good and bad experiences people who receive opioid substitution prescriptions have with pharmacists – however, we hope that in the future this work will make bad experiences much less likely.

## Expectations

for service users:

- You have the right to be spoken to and treated with **respect**.
- You have the right to **judgement-free treatment**.
- You have the right to **discuss and review your script with your drug service staff**. This includes frequency of collections and any issues with your pharmacy.
- You have the right to be treated like anyone else visiting the pharmacy.
- You have the right to **privacy and confidentiality**. You may not wish to use the private consultation room, but it should always be your **CHOICE**.



## What pharmacists want service users to know

- Understand that buprenorphine and methadone are **controlled medications**, which means that pharmacists have to work within the law and government guidelines. Not doing so is a criminal offence.
- Controlled medications like methadone and buprenorphine come with additional paperwork and procedures, so can take some time to prepare. Your pharmacist may be very busy, and you will sometimes **need to wait**.
- Understand that pharmacists and pharmacy staff are **human** and might just be having a bad day.
- **Don't judge** your pharmacist/ pharmacy staff based on previous experiences in your current or previous pharmacy. It can take a little time to build a good relationship with each other.
- Wherever possible, positively influence others by demonstrating a **respectful attitude**.

## What service users want pharmacy staff to know

- Never underestimate the importance of remembering people's faces, using people's names and asking how they are today. Remember that you might be the person who we have the most interaction with on a daily/weekly basis and you have the power to have a positive or negative influence on our lives and **sense of self-worth**.
- Remember that you are very important to your OST customers – you probably know them better than most other professionals and see them more frequently
- Don't assume that we have complete flexibility with collection times – **we do work, have childcare and other commitments**. The start and end of the day may be the only time that we can collect medications.
- Always offer people **'the power of choice'** where possible. Having autonomy over our day to day lives is very important to us.
- Please remember that we may have been receiving our medications for many years and are **experts in our own bodies**. If we tell you something doesn't feel right or we need help, you should signpost us to where to go for support.
- Understand the considerable impact that **issues with methadone/ buprenorphine scripts** have on our lives and well-being. It is likely to cause a large amount of stress, particularly before weekends/bank holidays, because we are dependent on these medications. **Being sent away without a script could risk our lives**.
- Understand that we are **human** and might just be having a bad day.

## My pharmacy experience

### Anna's story

I often wonder if they know how much they mean to us, how much they can influence our lives; save them even.

**I did not know how badly I had been treated until I was treated well.**

Another new pharmacist, another 'chat' wanted in the 'room'. I almost fell off my seat when she said.

*"Hi my name is Claire, how would you like me to address you?"*



## Anna's story

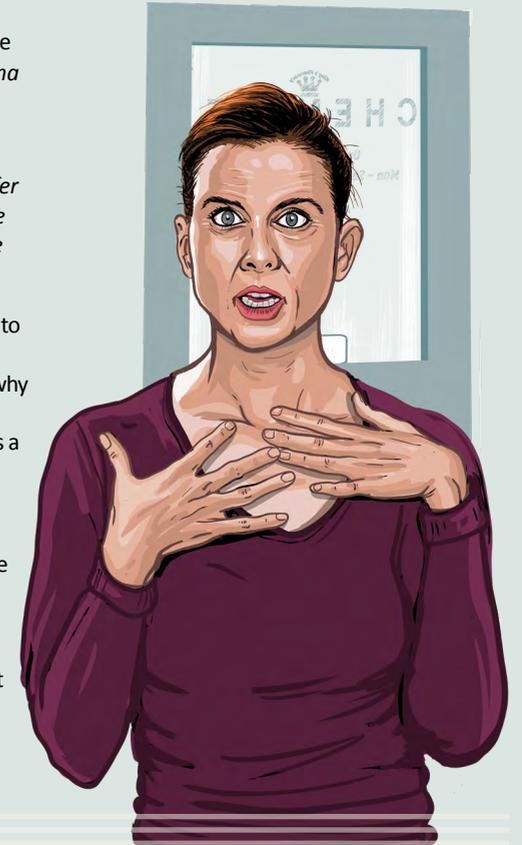
Wait a minute; was she joking? She was telling me her name, smiling and asking me to tell her what I would like. *"Erm just Anna thank you"*.

*"So I just thought Anna that we could have a quick chat about how you prefer to get your medication. Is there a time you like to come regularly and is there anything I should know to help?"*

I stood up, I could not breathe, I said I had to go outside a minute. The feeling I had was that strong, I wanted to cry. I don't know why that happened. It had been so long since someone talked to me like that, saw me as a human being and not as scum.

Pharmacists forget sometimes - we are people who have come to get help. We are people trying to get better.

It took me 5 minutes to get a grip on myself. I thought she'd be mad. She wasn't and from that moment on I would have gone to war for her.



## Anna's story

We are loyal to those who don't hate us. We keep other users in check, we won't allow your shop to be touched.

I used to drop my daughter off at school each day and pick up my meds at the same time. Before her it was always the same thing; sneers and shame filled remarks and bad looks from the pharmacy staff. Short, brutal, cold and you could tell he saw me as disgusting. That sets you up for the day.

But OMG - it changed me and my world her coming - she'd smile.

*"Hi Anna how's your daughter?"*

It makes me emotional thinking of it; how much that set me up feeling positive for the day. How can we recover if we are just made to feel shameful and nasty and disgusting. She'd made me feel part of society, she made me feel worthy, she made me feel like I could get better.

I started having really painful bowel issues, my GP refused to look into it but after a period my daughter and my pharmacist began nagging me to go and insist on getting referred for a check up. I did not want to because who wants to go to anything where you are treated badly?

Every time I saw her she would not let it go - every time! If my daughter was with me, they both supported each other until finally I gave in. It led to me being diagnosed with a rare form of cancer - it was aggressive and stage 3.

My pharmacist didn't just give me back the belief I could have a life - she was key to saving it.

**It only takes one person to help us recover - be the one!**

## Anna's story



## My pharmacy experience

### Simon's story

I was living in London in 2001. In June I had gone to the park with a friend and our children. I felt my chest becoming more painful, I assumed I was getting a cold. At the time I was on a daily methadone regime at a local chemist, I had to drink it on the premises. I progressively got more ill over the next 24 hours; I could barely drink by the morning.

When I went to the pharmacy that day, the pharmacist saw I couldn't drink the methadone and really impressed on me that I must see a GP at once. He allowed me to take my methadone so I could sip at my pace, as my throat seemed to be closing. I was coughing constantly. I went to the GP who gave me large antibiotics that I would never have been able to swallow, then went home.

Later that evening I couldn't drink a drop of water. I could barely move so I gave in to pressure and got a cab to hospital.

Again, a doctor tried to send me home with the same antibiotics, but a nurse insisted I stay as I needed intravenous fluid.

The next morning on the ward round the group of doctors, students etc heard me cough, came straight to my bed. After hearing me cough I was gently told I'd be more comfortable in ICU. I later discovered the doctors thought I'd live 4 hours. I was in ICU for 6 weeks then on a ward for another 6 weeks. If my chemist hadn't been so concerned, kind and insistent, I would not have sought treatment thinking I could deal with it.

**I have had positive and negative experiences with chemists, it really makes a difference to how I feel as a person.**

## Simon's story



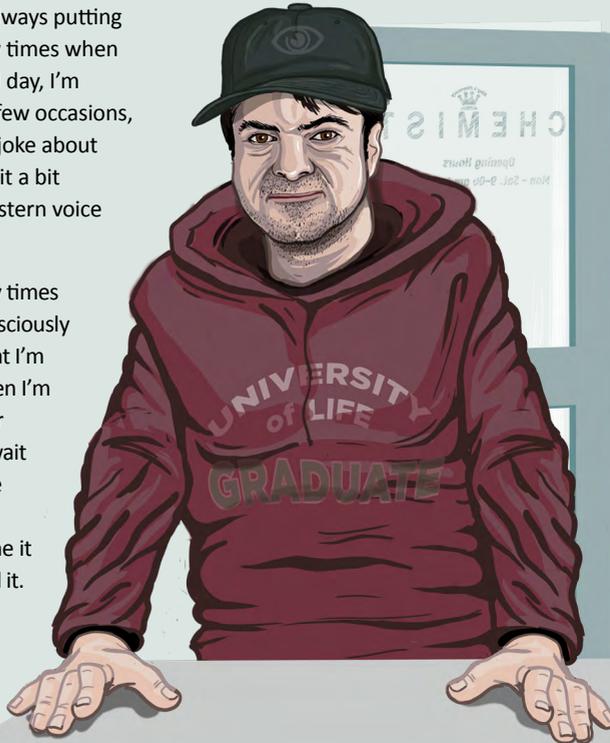
## My pharmacy experience

### Alfie's story

I have always been very polite and respectful of pharmacy staff. My experience is because I am always putting my happy head on, but a few times when I'm having a particularly hard day, I'm quiet and say little. But on a few occasions, the staff have been having a joke about whatever and they may take it a bit far and I have had to use my stern voice which is taken as shouting.

I have lost count of how many times I have been assertive and consciously speak in a low voice to say that I'm not having a good day, but then I'm told to stop shouting. Another pharmacy used to make me wait until the shop is empty before giving me my medication, I couldn't believe it the first time it happened to me and I ignored it.

**Then I am left feeling like a junkie and I have left without my medication.**



## My pharmacy experience

### Katrina's story

I've accessed chemists for nearly 20 years for opioid substitute. I've had a lot of good and bad experiences. Good, as in I might not be here now writing this. Bad, as in being told loudly in a busy chemist that I was banned as my then boyfriend had shoplifted there. Because of that I was also going to be put on a rapid reduction of my 90mls methadone script. At the time I was homeless, my script had been the one positive in my life.

**I was humiliated, confused, angry, felt powerless and mostly scared of being ill from losing my script, which made no sense to me.**



## My pharmacy experience

### Nancy's story

I worked as a medicine dispenser in a pharmacy, on and off, for nearly five years, in two different pharmacies. Throughout that time, I had daily contact with patients who were intravenous drug users and those on OST. I'm working class, and grew up on a council estate, so I knew some of my patients already. I felt as if I was coming from a good place to build meaningful, positive connections with them.

The attitudes I gleaned from a few of my colleagues, particularly at my first pharmacy, were that they were looking down at these people. I couldn't comprehend it. These people, who were actively seeking help? These people, who had suffered so much trauma and adversity already in their lives? These people, who were physically ill? I could not understand the blatant disrespect and contempt shown towards OST patients from my co-workers.

I truly thought that they deserved the same, if not more respect than the average patient. They were actively seeking and engaging in help, they wanted to better themselves, to better their lives. For me, I could only see that as admirable.

Since leaving the pharmacy profession in 2022, I have kept in contact with a number of colleagues. Unfortunately, this problem is not a new one, and will not go away by itself. It only takes one person, one comment, one smile, to facilitate change. Why would you actively choose to be unkind to a fellow human being? We must be the change we wish to see.

**It only takes a second out of your day, to change the course of another's. Be kind, always.**

## Nancy's story



# Voice of the Voiceless

## About us

We are a collective of people who use(d) drugs and receive methadone or buprenorphine; Bristol City Council; Bristol Drugs Project; Developing Health and Independence; Harm Reduction Mothers2Mothers; and academics from the University of Bristol.

We are committed to tackling the stigma that exists in relation to using drugs and receiving methadone and buprenorphine treatment. Through our work, we hope to put the power back into the hands of the oppressed and give the voiceless a voice.



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