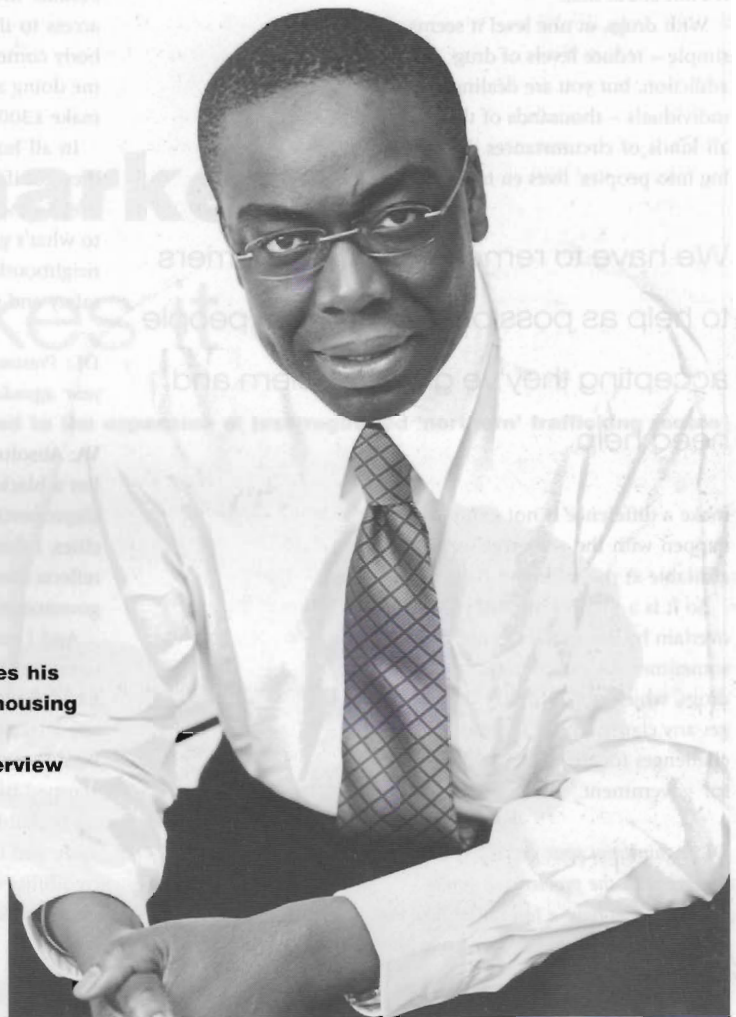


the druglink interview

Victor Adebowale



'Self doubt and ambition' is how Victor Adebowale describes his career path through voluntary sector and local authority housing management, the Alcohol Recovery Project, Director of Centrepoint and now Chief Executive of Turning Point. Interview by Harry Shapiro.

DL: From six years with Centrepoint, do you think the drug treatment field has anything to learn from the world of homelessness?

VA: Because of target setting, professionals had to really think about what they were doing.

The idea that outreach workers would go out on the streets and there would be some vague outcome as to the result of their interaction with homeless people was at an end. They became focussed on getting homeless people off the streets – because there was a target and the government was paying for that target. And it raised the profile, so there was a public debate about what do we do about homelessness. I suppose a lot could be learnt about how that debate was managed now that we are in another debate about drugs.

DL: So you favour target setting?

VA: Targets don't solve anything in themselves, but they do present people with the idea that there might be a solution as opposed to something that we tolerate. Also anybody can come up with a target. That's not particularly difficult.

Getting everyone to agree that it's

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the right target and that it's achievable is another thing. Targets can be a quick answer to complex problems and set you up to fail.

It's alright for the government to set targets, but it's the people on the ground who have to deliver them. So unless there is a genuine debate about why you set targets in the first place, what they are going to be and what resources are available to reach them, it seems to me you have an exercise in politics rather than practice.

This could be quite dangerous in the drugs field where you are talking about individuals with very complex problems, where there is no one solution.

Homelessness field is a lot simpler – get rough sleepers off the streets. That's the bottom line. It's not about getting them off drugs, not about

reducing access to highly addictive substances, which come into this country in a myriad different means. It's not about that.

With drugs, at one level it seems simple – reduce levels of drug addiction, but you are dealing with individuals – thousands of them in all kinds of circumstances. Intervening into peoples' lives en masse to

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make a difference is not going to happen with the resources we have available at the moment.

So it is a highly complex problem overlain by the moral debate and sometimes the moral panic about drugs, which makes it very difficult to get any clarity. These are major challenges for the drugs field – and for government.

DL: Again from your experience of dealing with the problems of young people, do you have a feel yet for how the drug treatment provision shapes up in meeting young people's needs?

VA: Not very well really, but it's all about access and I've been wondering whether it is possible to make treatment as fashionable as the drugs are. We need to understand how we can access their world to provide appropriate safety nets and treatments.

DL: But what about the stigma and negativity around drugs that prevents people coming forward?

VA: That is a key issue. We have to remove as many barriers to help as possible that prevent people accepting they've got a problem and need help. But the issue with young people's drug use goes wider still.

We have to focus on all the levels that drugs play in young peoples' lives – education, mental health, criminal justice. Look at the boredom for young people on the worst housing estates.

You've got intelligent young people watching television with all this stuff in front of them that they can't have because they haven't got a job or access to the network. Then somebody comes along and says 'work for me doing a bit of dealing, you can make £300 a day'.

In all honesty what choice have they got if they want to access the life? So the drugs world has to relate to what's going on – regeneration, neighbourhood renewal, community safety and so on.

DL: Presumably equality looms large on your agenda?

VA: Absolutely and not least because I'm a black guy. Given who is affected disproportionately by drugs in inner cities, I think it is important the field reflects those issues throughout its governance and policy-making.

And I suspect like much of the voluntary sector, race and equality hasn't been tackled and that will affect treatment and outcomes. No doubt some people will be a bit alarmed by that remark, but I think it's probably true. It's not going to go away and I think it affects the credibility of everything you are trying to do.

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DL: 'Delivery' is every bit a government mantra as 'targets'. How should the field respond to that?

VA: It should respond positively. It's too easy to get embedded into the process and not thinking about the outcome for the client.

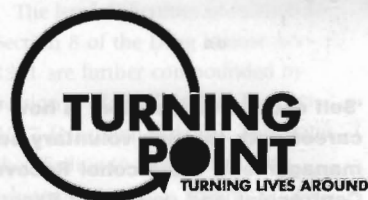
The last thing you want is somebody defining their life by their addiction. 'Hello, my name is Martin

and I'm a heroin addict'. The outcome should be 'I'm a graphic designer' or whatever, with their addiction managed or resolved so they can move on.

It's not rocket science to say that, but we need to be designing what the outcomes are. And there are ways of doing that which involve and empower the client to decide what is the most appropriate outcome for them. We need to be clear and rigorous about that.

As a client of a service, it's not unreasonable to expect an outcome.

Having said that, the very nature of the work does not guarantee success in the standard model – 'the drug-free life forever' sort of thing. But outcomes are critical and evidence-base investment will be *de rigueur*. What works – and why?



DL: You're looking back on three years in charge of Turning Point. What do you hope to have achieved by then?

VA: I am very humble at the thought of being the Chief Executive of Turning Point. In voluntary sector terms, it's a very big organisation, more branches than some supermarkets and you have to respect the work that's been done before you start making judgements.

I have to find out a lot more about what Turning Point does, how it does it, why it does it, where it does it, and to whom it does it before I start making pronouncements.

People who know me will know I am interested in whole organisations, how they fit together, how we add value to people's lives, how we get them to see themselves as more than just their problem.

And we need to work in partnership with other organisations to achieve some joint learning because at the end of the day, clients don't give a monkey's which organisation they go to as long as they are being treated with respect, they are empowered to look at their problems with clarity and that the outcomes mean something to them. ■