What matters in opioid dependence treatment? Rethinking quality, access and choice.

Suzanne Nielsen[1]

[1]*Monash Addiction Research Centre, Monash University*

Opioid agonist treatment (OAT) remains one of the most effective interventions for reducing opioid-related harm, including mortality, and improving health and social outcomes for people experiencing opioid dependence. Yet, despite a strong evidence base, many treatment systems continue to be shaped by historical practices rather than contemporary evidence.

This presentation will explore what high-quality opioid dependence treatment could look like in 2026 and beyond. It will consider how definitions of “success” in OAT have often been narrowly framed, and will examine broader dimensions of quality care including autonomy, physical and mental health and consumer preferences. Recent research on consumer and clinician priorities will be used to examine how current systems do or do not align with what people value in treatment. The presentation will also highlight novel models of care that may better enable equity in access, and the need for expanded access to additional evidence-based medication options.

As Australia responds to continuing opioid-related harms, the challenge is no longer whether opioid agonist treatments are effective, but whether systems are equipped to deliver care that is genuinely accessible and person centred. For treatment to be “good enough” care must move beyond access alone to encompass quality and choice.