Richard Lane/Robert Holden Patient Advocacy Award

Richard Lane was a long-term heroin user who, upon release from prison in 1967, was instrumental in establishing one of the Nation’s first methadone treatment programs. In 1974, he became the Executive Director of ManAlive (Baltimore) and remained in that position until his passing in 1994. Later Richard served as Vice President of the American Methadone Treatment Association (now AATOD) and as Vice Chairman of the Governor’s Council on Alcohol and Drug Abuse in Maryland. Among the innovations he promoted at ManAlive were on-site alcoholism treatment, protocols for poly-drug abuse, services for patients with acquired immune deficiency syndrome, improved pain management for methadone patients, and fewer restrictions for socially rehabilitated patients on methadone. When hearing about the Office Based Opioid Treatment (OBOT) started by Drs. Nyswander, Dole and Novick at Beth Israel Medical Center in New York he facilitated one at ManAlive. However Richard did not use the OBOT program himself leaving the few available slots to patients that needed it. Richard was a passionate advocate for methadone treatment and, by disclosing his own treatment experiences, provided inspiration to patients and colleagues alike.

Robert Holden was also a recovering heroin user, who later became the Director of PIDARC, an outpatient methadone treatment program in the District of Columbia. He succeeded Richard Lane as the Vice President of the American Association for the Treatment of Opioid Dependence.

This award was established in 1995 and recognizes extraordinary achievements in patient advocacy.

The following persons have received this award:

1995 Richard Lane
2001 Joycelyn Woods
2007 Anthony Scro
2009 Walter Ginter
2010 Lisa Mojer Torres
The following Criteria should be applied in making your selection:

- Only one (1) nominee can be submitted to the Conference Awards Committee. There may be a number of nominees, who will be fielded by NAMA Recovery in the medication assisted treatment MAT (i.e. methadone and/or buprenorphine) patient advocacy movement, however, NAMA Recovery will be responsible for submitting only one (1) “consensus” nominee to receive this honor.

- The nominee must have been involved in the field of methadone and/or buprenorphine advocacy for a period of five (5) years.

- The nominee must have been actively engaged in methadone and/or buprenorphine advocacy for a period of five (5) years.

- The nominee must have made meaningful and consistent contributions, which have had a significant impact on opioid treatment within a state or region of the United States.

- NAMA Recovery will be responsible for completing the nomination form and retaining letters of support describing the nominee’s achievements, which are required before any final nomination can be submitted to the Awards Committee.