

Building QuiHN's capacity for consumer engagement and participation

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Breakout Room 1: 15/06, 2.00-2.30

SPEAKER: Our second presentation for this session is building QuiVAA and QuiNH. I'd like to welcome Julie, Jennifer and Niki to the stage. Thank you.

SPEAKER: Hi everyone. First of all, we would like to acknowledge the traditional custodians of the land on which we meet today and of the many lands upon which we work and play. We also repay our respect to elders past, present and emerging. Do I need to do something? Expert experience and codesign. Three of us are going to talk today. We haven't practiced it together so try and be patient with us. Niki, would you like to - that's the one that you press we are all here representing QuiNH and QuiVAA. I'm talk about QuiVAA first. The Queensland Injectors Voice for Advocacy and Action, I have been involved with QuiVAA for five or six years, I'm currently present of the organisation. So QuiVAA is Queensland's peer based drug user organisation so basically what that means is we are run by and for people who use drugs. So we're owned and operated by people who identify as people who use substances, what do we do? We do a fair bit of advocacy around things like drug law reform, and drug policy, we do this sort of stuff, representation and ensuring the voice of people who use drugs across Queensland is heard in a whole variety of forums. Sitting on lots of committees, things like that but ultimately we work towards the health and human rights of people who use drugs across Queensland. We work very closely with QuiNH, the Queensland Injectors Health Network and we're based in the same office in Bowen Hill, to QuiNH I guess is the service delivery organisation so QuiNH provides a whole range of health services to people who use drugs. For example, needle and syringe program, counselling, psycho educational groups, outreach, case management, we have a medical clinic, that kind of stuff and we have sites across Queensland. And QuiNH has sites across Queensland

so Cairns, Townsville, Sunshine Coast, Gold Coast, Capalaba and us in Brisbane, we are here today to talk about engaging people who use drugs. I think on top of all the usual important factors thatst that we consider when we engage consumers of health services there's a whole other layer or specific considerations to take into account when working with people who use drugs. One of the main factors is the stigma surrounding substance use particularly Ellisits substance use and particularly injecting illicit substances, people who inject drugs are some of the most stigmatised people, and stigma is one of the most - research shows it's one of the most significant barriers for people who use drugs in accessing health service, that's where people who use drugs experience the most stigma and discrimination in health services that are supposed to be there to support them. Drug use is criminalised and I think that's the main reason, we don't view drug use as a health issue or a human rights issue, we deal with it by criminalising it and so engaging people who use drugs, that's a huge risk in the first instance when wanting to look at engaging someone who has experience with drug use, you're asking them to identify as someone who breaks the law essentially and there are huge implications for that long-term, affecting employment and family and a whole range of opportunities. There's lack of understanding from workers and the sector in general around how to engage people who use drugs, often it's just put in the too hard basket or people are too hard to engage or they don't want to and I think there's all the usual things like an us and them attitude, drug and alcohol professionals as experts, and all that I guess comes from stigma surrounding who and what people who use drugs are. Engagement isn't really embedded in the drug and alcohol sector. We still have a long way to go. There's a real lack of funding opportunities, there's very limited peer opportunities and consumer roles for people who use substances across the drug and alcohol sector and beyond unfortunately. F the language that we use to talk about people who use substances is a major issue, a lot of language that is currently used is often mental health sector based language and it often doesn't fit for the drug and alcohol sector. There's still a lot of places that use really stigmatising language such as drug abuse, abuser, addict, viewing drug use as a disease.