

**Breaking down the barriers: AOD Harm Reduction Peer Workforce Development and Lessons learned in creating supportive policies, programs and services led by people with lived-living experience of illicit drug use.**

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**Aim:** Lived- living experience of illicit drug use comes with significant stigma, discrimination, and criminalisation, uniquely impacting on the lives and employment of peer workers with this experience. Australia's network of lived-living experience drug user organisations (DUOs) will reflect on networking, partnerships and engagement with funders, other consumer-led organisations, and stakeholders, where priorities, resourcing and understanding of the issues can be vastly different from their own experience of managing and working in the sector. The discussions will aim to increase understanding of the barriers and enablers involved in developing the peer workforce of people who use illicit drugs, identify biases and the impact of stigma, and encourage discussion in how to best support people with this experience to lead policies, programs and services.

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**Detailed Description of Topics to be Discussed:**

Australia has seen a recent focus on the importance of involving peers with lived-living experience of drug use in the development and running of harm reduction and alcohol and other drug policies, programs and services. At national, state and territory levels, a range of initiatives are being developed and implemented, aimed at employing peer workers, supporting organisational readiness, and providing guidance on peer employment and programming.

With more than thirty years of experience advocating for, managing and working in peer programs Australia's peer-led drug user organisations (DUOs) are creating and informing the

guidance, frameworks, strategies, programs and services being created around the country. DUOs utilise skills learned in developing partnerships, often with people and services with little or no experience and understanding about illicit drug use, peer work and harm reduction. In addition, there continues to be limiting and sometimes counterproductive attitudes about the employment of people who have past, recent and particularly current experience of using drugs illicitly. This impacts in many ways including limited opportunities for leadership roles outside of peer organisations themselves.

Representatives of DUOs who work to develop peer workforce policies, programs and services have their own experience as peer workers and peers with lived-living experience. They hear expressions of stigma and discrimination while maintaining objectivity, advocating for their communities, challenging negative beliefs, and sometimes providing education to people tasked with supporting peer initiatives. The work can be personally, emotionally difficult. Resourcing for what is needed also continues to be limited. However, the important work being achieved is significant. A national framework for peer workers with lived-living experience of illicit drug use and the development of that national peer workforce, presented by AIVL, will support the work presented by the other panellists, work that is occurring through state and territory policies, strategic frameworks, capacity building training and peer programs around Australia.

### **Discussion Section:**

Panellists will reflect on their experience developing peer projects. Each panellist is involved in a different aspect of supporting the implementation of the peer workforce, including:

- Providing capacity development for peer workers in harm reduction and AOD services.
- Supporting peer workers to provide harm reduction services including overdose response, safer injecting and needle syringe program advice.
- Supporting peer workers to move beyond the frontline and into leadership and other roles at non-peer organisations.
- Developing nationally relevant guidance for the peer workers who use drugs illicitly employed in DUOs, AOD services, and other health and social services.
- There are many people with lived-living experience working in harm reduction already- how do identified peer worker roles differ and how can these roles support one another.
- Developing organisational readiness for any organisation where people who use illicit drugs are employed to work with their communities.
- Incorporating formal training into Alcohol and Other Drug (AOD) qualifications.
- Developing state-wide leadership, policy and partnership between mental health consumers, family and carers, alcohol and other drug consumers, harm reduction services and government policy makers and funders.

The audience engagement process will:

- Pose questions to the audience during presentations and using platforms, including questions about topics that are known to raise differences of opinion e.g.: Ask the audience to identify their experience working in or with the peer/lived-living experience workforce. And use an online platform (e.g. Slido) to allow for audience questions (as well as traditional physical questions and the conference app)
- Pose survey questions relating to the topic and run poll/s with audience to provoke discussion with panel e.g.: Ask the audience to self-identify their lived-living experience in a confidential way; Use the results of the surveys to inform discussion during the session.

- Encourage discussion by pulling out audience response and ask for discussion from audience or panel members, challenge assumptions and beliefs about the peer workforce.

The panel participants will use the interactive nature of the session to encourage awareness raising about the employment of people with lived-living experience of using illicit drugs. Personal experience, open identification as a peer, and the long organisational knowledge of DUOs can be used to provide an immediate counter-narrative and demonstration of open, non-judgemental discussion about topics where a range of views can be expressed.