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“When You're Sitting There And People Walk In, And They Just, Oh What Are You Doing There?... I Feel A Little Bit Degraded”

Consumer Experiences Of Opioid Replacement Therapy In Regional Victoria

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Acknowledgments

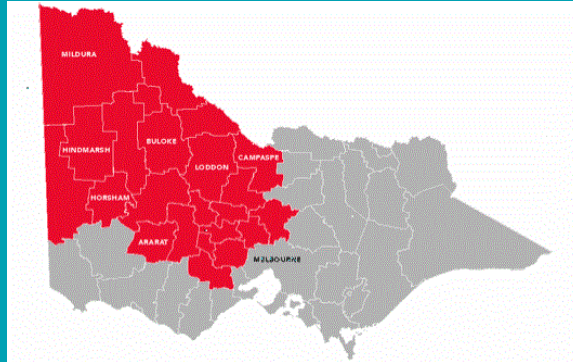
- Funding
- Research Team
- Reference Group
- Participants

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Role of the Pharmacotherapy Networks



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Aims of the Project

Generate knowledge about regional consumers' lived experiences of participating in a rural OTR program.

Develop best practice guidelines for a more consumer-centred model of care

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Methodological Approach

Interpretative phenomenology supports the study of everyday experiences of people who are interconnected with the world around them.

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Data Collection

- Ethics Approval
- Recruitment of 16 Participants - 5 regional centres in Grampians and Loddon Mallee regions
- Short Demographic Questionnaire
- Semi Structured Interviews, 45 minutes each held in public spaces (4 by telephone)

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Participants

Number: 16 Age range: 30-55

Female: 4 Male: 12

Education: varied Employment: 4 in FTE

Background: 1/3 disclosed hx of childhood abuse

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Themes

- Participants' perception of the research
- Participants' treatment
- Participants & Pharmacies
- Lived experience of the program
- Impact of the program
- Systemic barriers
- Potential for change



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Reasons for participating in the ORT program

- Co morbidities (brain seizures, chronic dystrophy, pain)
- Heroin use from very early age
- Challenging upbringing (alcoholic fathers, abuse)
- Passing through the prison system
- Easy availability of heroin through social networks
- Trauma, grief and loss
- Addition to morphine and other pain relief drugs

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Participants' perception of the research

- Voice being heard
- Expression of being cared about
- Listening to their 'truth(s)'
- "Being an addict"

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Experiences of Treatment Faculty of Health

- Positive experience
- Reduction in dosage
- Leading a 'normal life'
- Impact of drug interactions and co-morbidities
- Getting a better life
- Stability
- Feeling normal/legal
- Job
- Suitability of drug for individual
- Prescriber & GP separate for most participants

Experiences at Pharmacies Faculty of Health

- Engagement and relationships with pharmacists
- Stigma
- Kindness in the presence of other's negative attitudes – non-judgemental
- Organised & efficient
- Pharmacists reflect opinions
- Waiting times
- Public knowledge/awareness

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Lived experience of the program

- Feeling stable
- Cost of take-aways
- Stigma
- Turned my life around
- ORT service is good
- Charged for single doses when picking up multiples
- Take-aways reduce travel costs
- Being kept waiting
- Having to attending same time everyday
- People watching me

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Systemic barriers

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- Access to prescribers and travel time
- Structured social support
- Limits on social wellbeing
- Difficult to find local prescriber
- Cost of travel to prescriber
- Multiple doctors
- Social security: non holistic & rule based
- Feelings of shame (waiting and being 'on view')
- Restrictions due to take-away limits
- Limiting travel
- Avoiding past associates

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Consumers' suggestions for change

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- Privacy to reduce stigma
- Reduce costs
- Private/separate area for dispensing
- Access to more take-aways
- Lower costs of doses
- Regulate dosing costs to ensure equity between dispensers

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Consumers' suggestions for change

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- Education programs for consumers
- Education for GPs
- Counseling
- Relapse prevention
- Help to get off ORT
- Better support for best practice options
- Provision of psycho-social support
- Financial and skills assistance to manage on limited income

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Consumers' suggestions for change

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- Increasing the number of take-away doses
- Improving access to prescribers & dispensers
- Flexible pharmacy hours
- Cost/time of travel to dispenser especially for rural people
- Increase providers
- Provide holistic care
- Psycho-social support/referral to counseling
- Increase access hours to avoid contact with past associates, friends, neighbours, family & work colleagues

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Where to from here?

1. Finalise analysis including feedback from the reference group
2. Complete the report
3. Share outcomes and creative ways to improve practice
4. Advocacy on bigger issues
5. Suggestions for further research

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