

## **Dismantling structural and systemic barriers to employment faced by the lived and living experience workforce in harm reduction**

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### **Background:**

Harm Reduction Peer Workers (HRPWs) who have lived and living experience of drug use and overdose regularly face systemic and structural barriers when seeking employment in mainstream health services.

Due to criminalisation, HRPWs are in a unique situation where their engagement in an illegal behaviour is both a positive, inherent requirement of the job while also being viewed as risk to be managed or avoided at all costs.

Workforce prejudice against employing HRPWs manifests through organisational overreliance on criminal history checks, Working with Children's Checks, drivers licence requirements, mandatory minimum qualifications and deeply entrenched stigma and discrimination against people who use drugs by healthcare providers. These barriers significantly reduce the successful implementation of the harm reduction peer workforce at scale.

### **Description of Model of Care/Intervention:**

Organisations looking to employ HRPWs must interrogate their overreliance on these barriers. Fuse Initiatives, a program of Harm Reduction Victoria, offers discipline-specific organisational readiness training and support to assist organisations to successfully implement peer-friendly, non-discriminatory recruiting practices.

### **Effectiveness/Acceptability/Implementation:**

Eliminating workforce prejudice is necessary to ensure that HRPWs are not discriminated against in recruitment. Whilst change can be challenging, peer-led support is available from Fuse Initiatives to ensure that workplace recruitment practices are inclusive of people with lived/living experience.

### **Conclusion and Next Steps:**

*Eliminating the systemic and structural barriers to employment is necessary to ensure that HRPWs are not discriminated against in recruitment. Whilst change can be challenging, peer-led support is available from Fuse Initiatives to ensure that workplace recruitment practices are inclusive of people with lived/living experience.*

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### **Implications for Practice or Policy:**

*Changing recruitment practices and key selection criteria is essential to providing non-discriminatory pathways to employment for people with lived/living experience of drug use. The benefits that health services and service users experience, greatly outweigh the challenges that accompany change.*

**Disclosure of Interest Statement:**

None to declare