

The wealth of knowledge from community: experiential strength-based perspectives on developing culturally safe, inclusive and holistic blood-borne virus harm reduction services for Aboriginal and Torres Strait Islander people

Authors:

Emily Pegler¹, Amanda Kvassay², Nik Alexander², Gail Garvey¹, Lisa Fitzgerald¹, Daniel Morris³, Diane Rowling⁴, Geoff Davey G², Andrew Smirnov¹.

1 The University of Queensland, School of Public Health, 2 Queensland Injectors Health Network, 3 Youth Link, 4 Metro North Public Health Unit.

Background: Pervasive health inequities in blood-borne virus (including hepatitis C) exposure and outcomes, exacerbated by deficit-focused healthcare approaches, highlight an urgent need to improve health services for Aboriginal and Torres Strait Islander people who inject drugs. This study explored strength-based perspectives on service delivery, with a view to create culturally safe, flexible and inclusive harm reduction service environments.

Methods: Fieldwork included semi-structured research yarns (N=14), conducted in 2021 and 2022 with Aboriginal and Torres Strait Islander participants ≥18 years of age who had injected drugs within the past 12 months, recruited at needle and syringe programs at QulHN (Meanjin/Brisbane and Gurambilbarra/Townsville) and Youth Link (Gimuy/Cairns). Interview yarns (N=13) were also conducted with a range of local service providers. Yarns were conducted by an Aboriginal research coordinator and non-Indigenous research assistant. Data were analysed reflectively and thematically and using deductive and inductive processes.

Results: Aboriginal and Torres Strait Islander participants and service providers spoke about enablers of service accessibility, including friendly staff, Aboriginal and Torres Strait Islander staff, social yarns, and offering clients food and '*a cup of tea*'. Community and family were a source of strength and resilience, and some felt a desire to help others obtain healthcare support, including hepatitis C testing. Racism and stigma in healthcare settings were reported and not all services felt safe to access. Service providers recognised the complex challenges faced by their clients and agreed that improving long term health and wellbeing required a holistic response, addressing determinants such as racism, financial burdens, homelessness, and incarceration.

Conclusion: Knowledge and perspectives from all levels of the community are essential for creating culturally safe and inclusive harm reduction services that are effective in reducing exposure to blood-borne viruses and improving health outcomes for Aboriginal and Torres Strait Islander people who inject drugs.

Disclosure of Interest Statement: This project was a collaboration between the University of Queensland (UQ), Queensland Aboriginal and Islander Health Council, Queensland Injectors Health Network, and Youth Link, and was funded by the Queensland Sexual Health Research Fund.