

**A STRATEGIC APPROACH
TO SERVICE USER PARTICIPATION
(SUP) IN THE TASK FORCE PROCESS**

**FINGLAS/CABRA LOCAL
DRUG & ALCOHOL TASK FORCE**

**BLANCHARDSTOWN LOCAL
DRUG & ALCOHOL TASK FORCE**

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Service user Participation in the Task Force Process

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1.0 INTRODUCTION

This research project has been commissioned by the Finglas/Cabra and Blanchardstown Local Drug and Alcohol Task Forces (DATF's) with the objective of formulating a strategy for **Service User Participation in the Task Force Process**.

DATFs were established in 1997 prior to and informing the first National Drugs Strategy (2001-2008). While initially the DATF's targeted specific communities of concern, all areas of the country are now serviced by a DATF of which there are 14 Local and 10 Regional (RDATFs). Task Forces have sought to address **"the need for improved coordination in service provision and to utilize the knowledge and experience of local communities in designing and delivering those services."** DATFs comprise representatives from a range of relevant state and non-state agencies, including the HSE, the Garda, the Probation and Welfare Service, Education and Training Boards, Local Authorities, the Youth Service, elected public representatives and volunteer community representatives. The community development approach applied by DATF's reflect the reality that service users do not just live in communities but are members of those communities who often have to manage entrenched stigma and prejudice.

Cabra/Finglas and Blanchardstown LDATF's have already accumulated significant experience of supporting community participation and now wish to build on that experience by institutionalising an inclusive and systematised SUP strategy which is based on consultations conducted with service providers, users and other stakeholders and which are reflected in this report. The proposed SUP strategy as detailed in section 8.0 of this report has a capacity to deliver an easily accessible structure based on principles of human rights, community development and inclusion.

The DATF process facilitates statutory agencies and local communities in collectively assessing and responding to the wide range of drug related issues within their catchment area. Rather than directly delivering services, DATF's work together with statutory and voluntary community-based agencies to deliver relevant services ranging from "recovery" through to "harm reduction" initiatives.

1.1 Defining a service user.

For the purposes of this report a "Service User" is considered a person availing of the services of one or more of the DATF supported initiatives. They may be drug and/or alcohol users, former users, recovered users, and those still in recovery or healing as well as members of the families and the wider community who are impacted directly or indirectly by drug and alcohol issues.

1.2 What is a Service User Participation Strategy & Why is it important?

A systemised SUP strategy is a mechanism through which those who use the services provided by specific agencies can contribute to the development of the quality, effectiveness and efficiency of the services supported by the DATF. It is a mechanism that engages new and already existing service users and should be accessible to all service users regardless of where they are in terms of their recovery. Some service users are living chaotic lifestyles while others have moved to more stable lifestyles with the support of the services they are availing of.

A significant number of service users and providers interviewed as part the development of the strategy proposed in this report, placed a significant emphasis on the importance of an effective complaint's procedure. It is therefore important to clarify that a SUP strategy is not a complaints procedure but rather an opportunity to continuously monitor and improve the overall service user experience and tap into the unique perspective offered by the service user. The SUP strategy will have the capacity to register and take action on complaints but more importantly will provide space to contribute to the development of services without always focussing on negative experiences of the users. There is also a strong sense among service users and providers that a systematic SUP strategy while not a complaints procedure, can help address and prevent problems arising by ensuring that services are designed to meet the social and economic needs of the service user as well as their therapeutic or

clinical needs.

An effective SUP strategy will integrate the input of service users into the planning and delivery of the overall service and should not be viewed as an additional consideration or appendage to the main business of the task force. SUP will impact on the day to day operation and of the DATF and its importance will be emphasised in the organisational culture of the DATF.

DATFs wishing to introduce a SUP system into their operations must be prepared to invest additional resources in the establishment of new structures, approaches and systems where required. It has been suggested by some service users interviewed that attempts to achieve meaningful service user participation by DATFs have appeared as tokenistic and poorly resourced and supported with little real buy in and commitment. An effective SUP mechanism will have a simple clear structure which will have a built-in flexibility to allow it to engage new or existing service users and service users who position themselves differently on the "Recovery - Harm Reduction" spectrum. An effective SUP strategy engages the service user not only as a client but also without judgement, as a partner in the planning and delivery of services they use or have used.

"The service user should be central to their own and to the design and delivery of health and personal social services. This will result in more appropriate services of a higher quality with increased service user compliance and satisfaction" iii.

1.3 Theory of change

While service users and providers interviewed were overwhelmingly in favour of developing more simple and accessible SUP strategies at DATF level, some service users and including former service user representatives retained a level of cynicism based on their own experience. They expressed the view that DATFs had not devoted the required resources to ensure that the SUP systems operated in a way that supported their full participation.

In order to achieve the type of engaged relationship with the service user community that an effective SUP strategy requires, it will be necessary to review existing DATF systems, structures and operations to identify any obstructions to implementing a SUP strategy. The introduction of an effective SUP strategy will demand to a level of organisational change in order to ensure that the operations and values of the organisation are conducive to user participation at all levels.

Changes required at the level of DATFs will include:

- Employment of additional staff.
- Capacity building for service users and service users and representatives.
- Training for members of DATFs together with service users to ensure a clear understanding of the importance of service user participation and to identify the internal changes required to accommodate enhanced SUP systems.
- Ensuring that the physical interface between the DATF and its service delivery organisations and the service user community is welcoming and supportive to members of the service user community who wish to participate in the DATF process.
- Review of communications systems to ensure that they are accessible to the service user community.
- Develop mechanisms specifically aimed at providing feedback to service users in relation to how their participation has contributed to change.

Developing a common agreed Theory of Change (TOC) among all members of the DATF represents a useful starting point in terms of introducing an effective SUP strategy. An agreed TOC allows DATF members to consider the change required at operational and attitudinal levels and their role in managing the change required by the SUP strategy.

A TOC explains the desired change, actions that help achieve that change and the connection between the action and the change.

Some of the rationale for the institutional change required in terms of participation is alluded to by Coelho, V.S. P., Cornwall, A., 2007 p. 3:

"Yet for all the institutional innovation of recent years, there remains a gap between the legal and technical apparatus that has been created to institutionalize participation and the reality of the effective exclusion of poorer and more marginalized citizens." An agreed TOC can help the DATF bridge the gap between legal and technical as well as mainstream and marginalised.

An example of a TOC statement suitable to a SUP strategy:

"Services provided by DATFs will maintain a high level of relevance and effectiveness through the creation of a non-complex SUP structure which values service users and supports their ongoing representation and expression of their experiences"

1.4 Rationale underpinning the development of SUP Strategies for DATFs.

SUP is a mechanism which has been increasingly recognised by Health Services in Ireland and internationally as an integral and valuable element of healthcare provision. In the context of DATFs' specifically, the validity is underscored by a number of other broad perspectives that also inform the strategy proposed in this report:

- **Community Development.**

Community development approaches can be considered as a means of prevention of drug and alcohol misuse as well as a process through which the service users might maintain healthier relationships with the other communities to which they belong.

"The development of marginalised communities does not occur accidentally. Any review of an area experiencing severe drug-related problems will expose a consistent and concerted neglect of duties and responsibilities on the part of the State. This negligence continues as long as the community in question is not given a voice and not listened to."

Community development recognises that there is an existing set of relationships that can be reworked and transformed to enable the community itself to evolve and envision what its ideal state would be. Wider community engagement and supported participation by local community stakeholders should continue to be viewed as a priority for DATF and the interaction between community representatives and service users should aim to make local communities more resilient to the negative impacts of Drug and Alcohol misuse.

- **Restorative Practice, community resilience and wellbeing.**

Community safety is a priority for the task force in its role as an intermediary and platform between HSE Services, Voluntary Organizations, Service Users, Probation officers, An Garda Síochána, and Local Communities impacted by drug-related crime. Community tensions and disorders resulting from drug and alcohol misuse can have devastating effects on the social and economic wellbeing of local communities. Restorative practice complements a community development approach and in essence means addressing contentious or divisive issues while protecting and even strengthening the relationships between the main stakeholders in the community.

Given the ability of DATF to engage a full range of state agencies together with voluntary and community stakeholders and service users, they are ideally positioned to incorporate restorative practices into their SUP strategy.

- **Human Rights**

Effective SUP by its very existence recognises addiction as a healthcare issue rather than a criminal justice issue. Service users experiencing addiction often report feeling exempted by this Universal Declaration of Human Rights made by the United Nations in 1948.

"All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood." (Article 1 of the Universal Declaration of Human Rights, 1948)

These violations have been documented through: "denial of harm-reduction services, discriminatory access to antiretroviral therapy, abusive law enforcement services, and coercion in

the guise of treatment for drug dependence vi." The biggest violations and most prevalent issues around the world were listed by the International Network of People who use drugs as:

- Violations of Bodily Integrity and Arbitrary Arrest
- Racially Discriminatory Drug policies that criminalize minorities
- Imprisonment and Forced Labour
- Torture and Execution
- Lack of Healthcare and Service Provision
- Lack of Pain Management Medication
- Lack of Antiretroviral Coverage
- Interference with Families of People who Use Drugs vii

"People who use drugs have their human rights violated systematically and endemically, and these human rights violations have grave impacts on wellbeing and health 111."

Non-judgementalism is a central element of a human rights approach to developing an effective SUP strategy. Furthermore, in order to ensure that those who subscribe to a "harm reduction" model of dealing with drug misuse feel valued in their participation, DATFs should challenge the stigma around addiction. A SUP strategy should work to underpin and protect the rights and uniqueness of the individual service user. A working SUP strategy is respectful of the human rights of the person experiencing addiction and acknowledges their essential role in their own recovery as well as their potential to contribute to the recovery of others.

- **Inclusion of all Services Users.**

Ensuring inclusive participation in a strategic approach to SUP needs to acknowledge that service users are unique individuals, all are at different stages of addiction/recovery, they have different types of addictions and they avail of different services supported by DATFs. In addition, a SUP strategy within DATFs must reach out to and embrace service users who occupy different positions on the nexus between the "recovery" and "harm reduction" approaches.

The changing ethnic makeup of Irish society presents another challenge to an inclusive SUP and to DATFs wishing to implement an inclusive SUP strategy. Cultural and ethnic norms will determine to some degree the operational culture of the DATF in order to ensure that service users feel welcome, valued, safe and supported in their participation.

An inclusive SUP strategy at the level of DATF is partly dependent on the levels of diversity experienced and served by the local service provider. This underscores the importance of service provider taking ownership of the SUP strategy and of their role in supporting it from the bottom up. The SUP strategy proposed in this report is based on a chain of communication and representation among and between service users and starting at the interface with service providers. This allows the SUP strategy to be reflective of the diversity of service users within the programmes and catchments served by the service providers.

- **Lessons from Current & Local Service User Engagement Practices.**

A number of common SUP mechanisms are referenced in this report. In order to ensure inclusivity and among a diverse service user community within the DATF catchment areas, no single SUP mechanism has sufficient reach and therefore a multifaceted SUP strategy is required.

There are a number of lessons to be learned from existing or previous attempts at SUP strategies:

- Additional resources need to be committed for the costs of integrating a SUP mechanism to the approach of the organisation.
- Peer-to-Peer relationships appear to be an important element of SUP approaches and addresses issues of trust.
- A comprehensive SUP strategy will be multidimensional and use different approaches to collect and analyse information to allow it to impact on services.
- Given the nature and diversity of members of the community being served, space should be left for individuals as well as groups to participate in the overall strategy.

- Capacity building should be an integral part of the SUP strategy.
- Expectations must be realistic, and parameters of responsibility should be clear for those service users engaged in the strategy.
- Successful SUP structures should not be overly complex.

2.0 CONTEXT

DATFs work in a changing context in terms of mainstream attitudes, economics and legislation as well as trends within the population who experience the effects of drug misuse at personal and community levels. DATFs were originally created to deal with increasingly high levels of opiate users generally and also targeted many specific communities throughout Ireland. The DATFs now provide services which acknowledge all types and consequences of drug misuse.

"While communities experiencing large-scale social and economic deprivation and marginalisation continue to be disproportionately affected by drugs issues, the impact of the drug problem has extended across the country into other cities, towns and rural areas over the course of the last two decades. The nature of problem drug use has also changed; a wide range of drugs are now being used, including legal drugs, illegal drugs and alcohol. The illicit trade in prescribed medications, such as benzodiazepines and z- drugs, has created a serious threat to public health, particularly among the population of people who are homeless and use substance" 6.

Blanchardstown DATF.

Blanchardstown is a large outer suburb located around 10Km from Dublin City Centre and falls under the jurisdiction of Fingal County Council. It has been in development since the 1960s when it was a small village on the periphery of Dublin. Like many outlying suburbs with large public housing developments the population comprises many families that have been rehoused from the inner city of Dublin as a result of housing pressures in disadvantaged communities. Blanchardstown however also includes some more affluent communities of private housing.

With an estimated population of around 110,000, Blanchardstown comprises the communities of Blakestown, Coolmine, Corduff, Delwood, Mulhuddart, Roselawn and Tyrrelstown. The geographical catchment area of Blanchardstown DATF is contiguous with that of Cabra/Finglas.

Services supported by BLDATF.

BLDATF offer a range of Treatment and Rehabilitation and Family Programmes through a range of community-based agencies including:

- Mulhuddart/Corduff Community Drug Team,
- D15 Cat
- Genesis Family Psychotherapy Service,
- Coolmine TC,
- Blanchardstown Youth Services (Foroige)
- Blakestown Mountview Youth Initiative,
- The Tolka River Project.
- Safer Blanchardstown Community Safety Forum.

Cabra / Finglas LDATF:

Finglas and Cabra are two adjacent communities in north-west Dublin with a combined population of around 55,518,000 people (CSO, 2016). Cabra is located in the inner suburbs of north Dublin and connects with Finglas to its north and west. Both Cabra and Finglas fall under the jurisdiction of Dublin City Council. The Finglas/Cabra LDATF envisions a community where all are working together with belief and confidence to resolve drug issues in a positive manner.

Services develop by Finglas Cabra LDATF.

Some of the important community-based services and organisations that have been supported to develop over the years with the support of Finglas/Cabra LDATF include:

- Sankalpa
- Local Outreach Family Therapies
- Voyages Programme (Finglas Centre).
- Finglas Addiction Support Team. (FAST)
- Aftercare Support in Finglas and Cabra.
- Cabra Community Policing Forum.
- Finglas Community Policing Forum.
- Family Therapy Project.
- Finglas Cabra Drug Prevention and Education Programme

3.0 Methodology

A team of two independent researchers (one male and one female) from Changing Perspectives Consulting led this research project. They conducted 62 interviews with service providers, service users, academics and other related stakeholders primarily across Dublin city, with particular focus on Blanchardstown and Finglas/Cabra. Generally, service providers shared their professional experiences and opinions while service users interviewed shared elements of their lived experience of service user participation.

As part of the National Drugs Strategy DATF's are encouraged to introduce and strengthen their Service User Participation mechanisms. The specific task of this research was to **"bring forward an effective strategy for service user participation that could be implemented by Blanchardstown and Finglas/Cabra DATF's."**

Qualitative data was harvested through semi-structured interviews that were mainly held in an informal conversation setting. A list of all relevant services providers and individuals were provided by the local DATF's as sources for the gathering of this qualitative data. (See appendix III) Typically, service provider interviews took place in their workplace while service user interviews tended to take place in less formal settings such as cafes or venues chosen by the service user. In two cases service users were provided with €20 vouchers as an acknowledgement of their participation, the service users did not request this incentive, but the service provider felt it to be appropriate.

The researchers developed a set of questions in order to extract as much learning as possible about what a meaningful user participation strategy might look like:

- Their experience of service user participation if any?
- What SUP means for them?
- How important is SUP and why?
- What would should a meaningful service user participation scheme achieve?
- How would they design a service user participation strategy?
- Is it necessary to target specific ethnic, or subgroups in your area? How would do you do that?
- What Values do you uphold in your organization, or value as a service user from your service provider.?

In addition to seeking perspectives on the importance of developing new SUP strategies and structures, the interviews also asked questions about the strengths and weaknesses of specific SUP mechanisms, only some of which they had direct experience of, and which included:

- Service User Forum
- Involvement in Appraisals
- Service User Representation
- Participant charters
- Information dissemination
- Creative Consultations

- Stand Alone Events
- Informal Conversations

All of the information collected was cross-referenced and streamlined into this report then supported by qualitative research through the informal interviews. Careful focus was given to include a diverse range of service users, and providers. The information provided does not reflect the opinion of the researchers but is a report taken as a neutral third party. We based our findings in research from relevant institutional, clinical and academic sources to provide evidence-based research to support our findings.

Service users are at the heart of The Loft's agenda for shaping and improving the delivery of its services. It will work to ensure that Service Users are empowered and supported in (relevant) areas. This policy statement draws on the key principles of involvement and developed in partnership with service users and strategy of the project. The Loft is committed to ensuring service user involvement is meaningful and effective and where possible offer any resources available to support the participation of services users throughout the project.

4.0 MECHANISM'S FOR SERVICE USER PARTICIPATION.

Service User Participation mechanisms are not a new concept, yet the overall institutional implementation has been slow among health service institutions in Ireland and satisfaction levels among Service Users and Providers and DATF's themselves appear to fluctuate. Examples and studies of SUP mechanisms are useful to assist the development of a framework for SUP for Blanchardstown and Finglas/Cabra LDATF's.

Growing out of Health Care's mental health practice, addiction services around the world have noted the importance of implementing a SUP's since the early 2000'_s information was gathered on the experience and opinions of SUP mechanisms from current and former service users and service user co-ordinators/representatives and service providers with SUPs. They were invited to share their opinions on the strengths and weaknesses of various mechanisms.

Through feedback from service providers it became clear that the foundations are already in place for the implementation of SUP strategies in both Blanchardstown and Finglas/Cabra. All service provider's already implement their own, all be they different and disconnected mechanisms for SUP. While this allows individual service providers to benefit from the participation of their service users, they lack an overarching structure which collects, collates and synthesises the service user experience to inform the policy and programmes of the DATF from where they receive their financial support. From the level of HSE down there appears to have been an absence of an overall co-ordination mechanism. DATF SUP systems need to have a capacity to transfer information to different levels in the healthcare system.

Most service providers are applying different types of feedback mechanisms to inform the development of their services, yet only a very small minority felt very satisfied with their own SUP system. Some services particularly in the statutory sector and in particular clinics had no SUP strategy in place but would be supportive of the concept and would welcome the creation of a strategy for their service users to give some type of feedback. The service providers most satisfied with their SUP strategies were both following Recovery Models at Ashleigh's House and at Coolmine. They strongly suggested that their SUP systems provided opportunities for service users to increase their self-esteem and confidence. This suggests that as well as informing service planning and delivery that properly supported SUP can also play a role in the recovery of the service user.

In each of our interviews with service users and providers we went through a larger generalized list of mechanisms to create indicators on what was most effective. In this section we have elaborated upon the mechanisms most favoured by those interviewed and considered to be the most relevant to a SUP strategy.

Given the often-chaotic nature of the lives of service users and the fact that they are all individuals there is a need to keep effective SUP mechanisms simple, flexible and transparent without trivialising their value. While all mechanisms commented upon by those interviewed have a relevance to a SUP strategy, to apply all of them within one strategy would most likely lead to difficulty in communication and would potentially overcomplicate the mechanism for the service user. At the same time no one mechanism can in itself ensure an inclusive and effective SUP strategy.

SUP Mechanisms preferred by those interviewed are outlined in the next section of the report.

4.1 SERVICE USER FORUMS

The purpose of a Service User Forum: "is to give time and space to service users to voice their opinions on services in general, or the specific service they are attending. Facilitated by staff and service users. This is a facilitated discussion group made up of service users of a particular service or local area. xii" Typically a group of individuals representing a cross section of service users within a specific community meet regularly to reflect on and consider how services can be improved. Rather than focus completely on critiquing existing services, this can form part of a wider agenda which could also involve questions around what service has been helpful and why, community safety, or how best service users might reach out to others in the community who have issues with Drug or Alcohol misuse. Service user forums were strongly favoured from all stakeholders interviewed.

- Help break down stigmas for the wider community and connect all actors involved in drug and addiction services to what is happening on the ground. They can be key ground area for education and learning.
- They help communicate everything that is happening in a particular area throughout different sectors.
- They are good when they have established trust and relationships within the community.
- They can make service users feel safe, well heard, and represented.
- They can work when they have a clear mandate, with defined roles objectives, and genuine participation with built service user capacity.
- Can be good to evaluate service provision and provides an opportunity to review the program, staff etc. Real changes and Services are reflective of the Service Users needs and best interests.
- Sentiments of victimization by services are reduced.
- Service User is left with a feeling of strengthened capacity who can then become a support and advocate for other service users as they already know how to navigate the pathway.
- They should include a spectrum of service users that represent service user diversity in both the variety of substances used, as well as time spent in recovery.
- Should be organized on regular basis and be consistent e.g. quarterly, monthly etc.
- Staff should have the appropriate training to help manage the discourse.
- They need to avoid being tokenistic.

4.2 INFORMAL CONVERSATIONS

In services where strong relationships exist between user and provider and trust issues have been dealt with, providers favoured informal conversations where they would take the time to personally meet people one on one. For informal conversations to work well, the contact between service user and service provider requires less formality than many clinical services may find it possible to accommodate. Service users in Recovery Model settings felt that they were more than satisfied comfortable with this process for feedback.

Informal feedback arrangements - opinions

- There is less possibility for the service user to feel intimidated, judged or undervalued than in a group setting.
- For many service users who would not feel comfortable participating in a group setting this informal conversation conduit maybe the only way to have their voice heard and should not be underestimated.
- For Informal conversations to take place and be part of an overall SUP strategy more opportunities for informal contact between service user and service provider maybe required.
- An open-door policy where service users are actively welcomed into the DATF's and their service delivery partners would help create the organisational culture that enables Informal conversations.

- While the conversations between the service user and the service provider are informal, the information contained in them should be recognised for its importance and be recorded and fed into the DATF.
- How to change the operation of the service provider or DATF to better facilitate inclusive and open, informal conversations should be agreed with all programme and administrative staff.
- Staff may require training to enhance their skills to facilitate these conversations and recognise their importance.

4.3 PARTICIPANT CHARTERS

This is an engagement strategy created with staff and service users to help define the behaviour that is accepted by staff and participants within the framework of SUP. A participant charter provides some rules and guidelines for all stakeholders in the SUP strategy and requires all of them to agree to abide by them for a successful SUP to operate. A Participant Charter will reflect the values that it is built on including equality, inclusivity, transparency and non-judgementalism.

Participant charters - opinions

- The development of a Participant Charter should be done collaboratively and involve both service providers and service users working together.
- In order for the charter to be democratic and sustainable, it will need to be reflected in the operations of the DATF as they use it to explain their commitment to SUP.
- If developed early in the implementation phase of the SUP strategy the charter can be used to explain and promote the implementation of the SUP strategy.
- Shared Decision Making is an approach to collaboration between clients and providers which should underpin the SUP strategy. This should be relative to the services provided and adapted to what makes sense for the agency.
- xiv "Shared decision-making is an alternative to the wounding practice of medical paternalism, because it honours and values the voices of people with diagnoses. xv"

4.4 SERVICE USER REPRESENTATION

Service user representation on DATF's when accompanied and complemented by other SUP mechanisms provides a broad, inclusive and democratic base upon which to build a SUP strategy. However, its democratic and inclusive nature can only be achieved if all service providers are committed to the SUP strategy and their ownership of it and engagement with it.

In the context of Cabra/Finglas and Blanchardstown DATFs a Service User Representative approach will involve all service providers facilitating their service users to collectively nominate representatives to the DATF SUP structure (see section 8.2)). The DATF service user catchment audience is a very diverse group of individuals and in order to be inclusive there is a requirement that the DATF's consider "inclusion" to be a proactive rather than responsive term. Inclusion requires more than an opening of doors and rather needs to monitor and ensure that service users feel equally welcome to go through the doors.

The service user representation mechanism when adopted as the primary element of a SUP strategy provides the DATF with the reach to facilitate the participation of men and women, different ethnicities, service users from different services and who position themselves on different places on the recovery - do no harm spectrum. Being inclusive underscores the representation of the wider service user community.

Service User Representation - opinions

- For an inclusive Service User Representation mechanism to be useful to an overall SUP strategy, it is important to ensure that all service users, regardless of the service used from all services have equal opportunity to participate, represent or be represented in it.
- To be fully inclusive there is also a need to have a balance between past users and current users.
- The majority of service users interviewed felt a greater level of trust towards peers than towards even the most understanding service provider. They feel easier about speaking openly to others who have had similar life experiences to themselves and therefore are comfortable to be represented by peers.
- A former or present service user has proven to be a valuable asset to some service providers when

engaged as a service user co-ordinator and given responsibility for maintaining service user representative systems and forums.

- Service users in all service delivery agencies will need explanation and capacity building (potentially as part of developing a participation charter) to allow them to understand the nature and structure of the representative system.
- A clear role description for the service user representative should be developed and should itemise expectations and functions as well as clarifying the nature of support and capacity building available to them from other DATF members and personnel.
- Need for all other stakeholders and members of DATF to be sensitised to the SUP strategy and be prepared to offer support to the participation of the service user representative.
- Participation should not be incentivised or rewarded but expenses should be met and training needs catered for.
- Members of the service user community is not without its own prejudices against minority groups such as Travellers, new Irish etc. A Service User Co-Ordinator in the Task Force should position themselves to ensure that such internal prejudices do not become obstacles to representatives of other marginalized groups.
- A gender sensitive approach is required within any service user representative mechanism to redress the gender imbalance in relation any SUP strategy. Women have different experiences of services than men and often feel discriminated against because they are more likely to have parental and familial responsibilities. This makes timing and financial issues potentially obstructive of their participation in service user representative mechanisms.
- The stigma for women in addiction is reportedly a harsher and more engrained stigma and the implementation of a SUP strategy should acknowledge that reality as e.g. most women do not want to bring their children to clinics, or meetings.
- Women in addiction are also often in abusive relationships and also have to deal with additional trauma.

Service users should be protected from administrative and co-ordination functions associated with Service User Representative mechanisms in order to safeguard their primary role of participating or offering their input to the development and delivery of services. Service User Co-ordinators within the DATF can fulfil the required administrative and other supports required by a service user representative mechanism.

4.5 INFORMATION ON SERVICES & RESOURCES

Service User Participation is about collecting information from service users in relation to their lived experience of services. In order however, to ensure that the information collected is relevant and of good quality, there should be a two-way information flow which also ensures that service users receive up to date and accurate information on services, plans and all related issues.

Many service providers and the DATFs themselves already offer information to service users as part of the overall service provided to the user although this information usually relates to choices they can make in relation to their own recovery. In order to participate fully and effectively in a SUP strategy however, different information relating to the broader development of services within the DATF jurisdiction should be available and accessible to all service users. Again, the role of Service User Co-ordinator is an important conduit for this two-way information flow.

Information about services – opinions

- Not all service users feel well informed about the type and range of services on offer although have they have some familiarity with the service they are using.
- Service users have different intellectual capacities and information needs to be presented in accessible formats that will require negotiation with the service users.
- Every person interviewed expressed the belief that there was a need to increase access to information on services for service users.
- Having safe places for access to internet, phones and a computer could be helpful resource to engage some Service Users.
- In addition to providing service users with information that enhances their potential to play a meaningful role in a SUP strategy, it appears that Service providers have little communication or awareness of other service providers working in congruent or aligning fields. This can leave the service user with only a partial understanding of what is in reality a much larger range of services.

- A variety of media should be used to convey information and should give better results in terms of reaching the most service users. Not everyone has access to information technology (email) and therefore print, text message, face to face meetings should all form part of the SUP communication systems.
- *Person Centred Care* is a less rigid structure that allows for individualised care plans that can make the client feel more empowered and engaged. xvi It avoids the downfalls of a one size fits all service for people in service care.
- "The American Medical Association outlines the characteristics, which are essential to best clinical practices and includes person- centred care. Care planning with clients provides an opportunity for applying person- centred care, whereby the client names his/her goal(s) xvii"

4.6 EVENTS

Events as referred to in this section are usually once of in nature and do not need to be connected to lengthy processes. This is a way to engage some service users who want to remain outside any more formalised engagement with SUP. Events can be and are already organised by DATFs, their service providers, service users or local communities, take different formats and be planned for a variety of reasons not directly related to service user participation but which will have service users in attendance. Events can complement many of the other SUP mechanisms and depending on their nature can:

- Provide space for informal conversations.
- Strengthen the leadership role of service user representatives to DATFs.
- Enable information sharing.
- Strengthen Service User Forums.
- Help grow a community of support for service users.
- Enhance information sharing between service providers.
- Provide opportunities to destigmatise the service user community.
- Provide meeting points for members of the service user community and representatives from the local community.

Events such as awards ceremonies, end of programme celebrations, launches of reports and plans all create opportunities for collection of feedback from service users. These events can be relatively inexpensive, and many are already organised and may only require the guest list to be opened up to include more service users.

Events – opinions

- Many events are already organised by DATF's and their service provider partners which can be used within an overall SUP strategy if opened up to the wider service user community.
- Events can be a good mechanism for engaging are a good way to engage the community as a whole: Service users, service providers and non-service users as well.
- To fully exploit events in terms of potential to offer service user insights into the development and delivery of DATF services, staff need to be aware that the event is being used as a SUP information gathering exercise.
- Event debriefs should not only consider how successful the event was in terms of its primary purpose (Launch, Awards Ceremony etc....) but information gathered from service users should also be recorded to feed into the DATF.
- Poorly planned events can actually drive off service users, and participants from engagement in services
- Events suggested in interviews included events that maybe specifically organised by DATFs and or their service providers:
- *Open social or holistic nights* that are open to the whole community can bridge relations between Service Users and Non-Service Users including members of the wider community. Such events might include free therapies, massages, food etc. for the whole community rather than only service users and providers.
- *"Listening Lunches. xv ii i"* These are a good way to gather feedback in an informal way as well as to gather news. Free meals along with Tea + Coffee, are a good way to build relationships and community feeling among service users. It helps provide a safe and secure environment

where service users feel equal, respected and heard if counsellors and service providers interact amongst these services.

- Trips and visits represent another way to build trusting relationships between Service Users, the community and DATF staff. The common experience of a new place, even meeting service users from another SUP can help consolidate service user forums.

4.7 COMMUNITY MEETINGS

As is the case in all communities, the wider community served by DATFs comprise community associations of different types and sizes and collectively they make that community function. There are many resident/tenant groups, church organisations, social/sporting clubs and specific interest groups and some will have been impacted by drug misuse. While others might not have been directly impacted, levels of stigmatisation will vary on an individual and group basis. In any case these organisations will likely have concerns around community safety.

Community Meetings - opinions

- Wider community meetings provide an opportunity for service user representatives to meet others from outside the user community s/he represents. This interface provides a two-way conduit for information exchange between the service user community and the geographical community to which they belong.
- Wider community meetings can serve as opportunities for problem solving or early identification of problems.
- Actually, worked to reduce violence; as the resolution or de-escalation of issues before they went back into the community and could result in violence.

A Solas graduate recalls receiving support to return to adult education.

"Being told you can do it goes a long way to people who are only beginning to build some self-belief."

5.0 STRATEGIC CONSIDERATIONS.

From the interviews conducted together with technical and academic reports and papers reviewed, a number of recurring issues emerged as themes that should be considered when framing and implementing a SUP strategy. This section gives detail to these them as strategic considerations that have informed the development of the proposed SUP strategy detailed in section 6.0.

5.1. THE ROLE OF STIGMATISM IN SERVICES

The stigmatisation of service users repeatedly emerged as the single most important obstacle to service user participation. *The Canadian government defines stigmatism around substance abuse:* "as the negative attitudes and actions directed toward a group of people due to their circumstances in life, including judging, labelling, stereotyping and exclusion. xx" Stigmatising service users with substance abuse problems is problematic not only because it provides personal barriers for service users however, it can create barriers for service users when accessing Healthcare or Social Services. The 2014 Irish Solas Report argued that the main barriers felt by service users were: "Existing Attitudes, lack of information, and organizational problems (Page 39)." xxi drug users and clients feel shame, fear and disempowerment as a result of stigma that is underlying in services. Service Users interviewed who were accessing substance use services all expressed that they often felt they cannot be open about their complaints, feelings, relapses, wishes, and goals. Services should be working to serve clients, so they facilitate the open expression of these in a positive manner and not the other way around. Reducing stigma across service providers helps to uphold the human rights and dignities of all service users. It also helps open the door to greater inclusion of service user's perspective and feedback that is uniquely valuable in creating a more effective and empathetic approach to substance use. Xxii

"People who use substances can also internalize stigma from society, leading to isolation, a decreased sense of self-worth, and potentially risky substance use patterns, such as hidings one's use from family and friends, or using alone. Further, some people may face stigma for multiple reasons (e.g., substance use, poverty, gender, racism, etc.), which can compound the impact on their lives. xxm

Dr Jane Buxton from the Canadian BC Centre for Disease Control argues that the interconnected personal, clinical and institutional stigmatisation has a direct impact on the health of the patient with a substance abuse problem. Stigmatisation increases isolation from both family, friends and access to health services. xxiv

"Some Users do not experience Stigma until they enter into services (Interview with former Service User)."

While effective SUP strategies can lead to a reduction of stigma towards service users particularly within DATF catchment areas, the removal of stigmatisation as a barrier to their participation in the first place presents another challenge. It cannot be assumed that simply because an agency provides or supports services aimed at improving the wellbeing of those experiencing addiction that they are free of prejudice and stigmatisation against those that they serve.



(Solas, Model 2014)

Knowing and accepting these phases and working with Service Users should be a tactic to help move them through every phase. To help Service Providers be open to the spectrum of drug users. We need to consider all aspects of our society where Stigmatization of service users is affected. If Service providers truly mean to treat services users, we need to look at the politicians, policy makers and in this case, we have the opportunity to shift the culture of LOATF's to a more compassionate model to help begin to address the question of how we can shift our views of this vulnerable group. xxv

5.1.1 REDUCE STIGMA THROUGH LANGUAGE

Service users wishing to play an effective role within a SUP will require capacity building and support. In addition, however, existing members of the task force and its staff also need to be reminded that their attitudes and behaviour can assist or obstruct the service user in their participation. Often it is the language we use and how we use it that reflects our feelings and biases towards other groups.

"Reframing the language around drug use is essential in changing the perceptions of healthcare workers and the public, as it shifts the focus of drug addiction from being a moral, social or criminal issue to a health issue, which deserves treatment xxvi"

The BC Centre for Disease Control made these guidelines from their research for stakeholders to improve their language when working with Service Users with addiction:

1. People-first language. This means referring to a person before describing his or her behaviour or condition. This is important because it acknowledges that a person's condition, illness or behaviour is not that person's defining characteristic. "*Person with a cocaine-use disorder*" instead of "*cocaine user*" or "*addict*."

2. Use language that reflects the medical nature of substance use disorders. There are a multitude of factors contributing to drug addiction, ranging from personal factors to social, environmental and political ones. Avoid terms that reinforce a belief that addiction is a failure of morals or personality, rather than a medical issue. "*Addictive disease*" and "*substance use disorder*" instead of "*abuser*" or "*junkie*."

3. Use language that promotes recovery. This means healthcare professionals should use language that conveys optimism and supports recovery and respects the person's autonomy. "*Opted not to*" and "*not in agreement with the treatment plan*" instead of "*unmotivated*" or "*non-compliant*."

4. Avoid Slang and idioms. Slang and idioms have negative connotations and a significant level of stigma attached to them. While slang and idioms are rarely used in professional literature, they are also important to avoid when speaking to other colleagues or healthcare professionals. "Positive" or "negative" when referring to drug tests, instead of "dirty" or "clean". xxvii

5.2 Removing the Barriers to Service-User Participation

SUP strategies 's should continue to be driven by the fact that the DATF can work to propel change towards healthier behaviour and can work to empower individuals with addiction who may be suffering social detriments to health that can lead to "problematic substance abuse?" xxv

This will necessitate DATFs in addressing the barriers to SUP. The barriers to user involvement found by Fisher and Neale (2008) fall into five broad categories:

- (1) the perceived characteristics, needs and expectations of drug users;
- (2) the attitudes of professionals;
- (3) the dynamics of treatment encounters;
- (4) treatment programme design; and

(5) structural factors affecting service provision xxix_

These categories are predominantly "grounded in user-provider power differentials and stigma relating to drug dependency" (Van Hout & McElrath, 2012) other authors have similar themes of it not being the users place to take part and that they do not have the interest or skills to participate (Bryant et al., 2008). - (Lit review of Client Participation, Page 2)

How can we expect people to better their lives, and take charge of their recovery if they do not have sufficient housing to support their recovery?

"As Laudet (2011:44) acknowledges, "the addiction field has come late to the chronic disease perspective, and the concept of quality of life (QOL) in addiction is relatively underdeveloped" (Keane, McAleenan, & Barry, P.37,2014)

5.3 Complementarity with the National Drug Strategy 2017- 2025.

The SUP strategy is in alignment with the *National Drug Strategy: Reducing Harm, Supporting Recovery: A health-led response to drug and alcohol use in Ireland 2017- 2025* xxxi which has as its vision:

"A healthier and safer Ireland, where public health and safety is protected, and the harms caused to individuals, families and communities by substance misuse are reduced and every person affected by substance use is empowered to improve their health and wellbeing and quality of life".

The SUP strategy outlined in this document focuses primarily on meeting strategic goal 4 of the national plan while contributing less directly to the other four:

1. Promote and protect health and well being
2. Minimise the harms caused by the use and misuse of substances and promote rehabilitation and recovery
3. Address the harms of drug markets and reduce access to drugs for harmful use.
4. Support participation of individuals, families and communities.
5. Develop sound and comprehensive evidence-informed policies and actions."

5.4 COMPATIBILITY WITH EXISTING DATF ACTMITY

"Building Community Resilience" the 2018-2021 Strategic plan of Finglas Cabra DATF has a specific strategic objective relating to developing an effective SUP mechanism: *"Support the establishment of service user involvement structures that will channel the perspective of service users into local services and policy development."* The proposed plan for the development of a clear structure for SUP as outlined in the following section (6.0) establishes a systematic but flexible structure to ensure that the Finglas Cabra LDATF can achieve its specific objective in relation to SUP.

Blanchardstown LDATF compile an annual report based on research conducted through their **DATMS (Drug and Alcohol Monitoring System)**, in which views of service users and providers are sought on a range of drug related issue. The process of accessing and collecting data as part of the annual research can be aided through the implementation of the plan detailed in the following section (6.0).

5.5 DATF Handbook

In the design of a SUP strategy it is important to note that the Local and Regional Task Forces Handbook has highlighted that when developing plans careful attention should be paid to:

- The development of new specific services to cater for the diverse needs of drug misusers (e.g. creche facilitates for single parents, residential drug treatment and rehabilitation centres where parents can bring their children with them etc. yxxiii
- The establishment of mediation fora with a view to resolving local issues around supply in a balanced and equitable fashion. xxxiv

5.6 Internal Communication, Collaboration and Cross Pollination

The theme for the first annual National Drugs Forum in Ireland in November, 2018 was: *"Working better together by developing communities of practice^{xx xv}"* The event aimed: to strengthen the capacity of existing communities of practice and to provide examples for collaborative working across the statutory, community, and voluntary sectors xxxvi"

DATF's work by providing support to local service providers within their geographical catchment area. Since they are not a direct service provider, DATF's require a strategy for SUP to be based on collecting information and input from other organisations supported by them and where possible, directly from the service user community.

DATFs are the main communications mechanism that facilitates the cross-pollination of services between all their member bodies and services users. DATFs uniquely engage all stakeholders with an interest in the issue of drug and alcohol misuse within a specific catchment area. The DATFs can enable horizontal communication between service providers in order to co-operate on the successful implementation of the SUP strategy as well as vertical communication which relates to more administrative accountability.

5.7 Mediation F o r a

DATFs are ideally positioned to play a restorative role in community disputes and conflicts related to drug misuse and related issues. Already DATFs comprise all of the stakeholders that find themselves impacted by such disputes and a more strategic approach to SUP should further strengthen the DATF to engage in this community strengthening and mediation work.

Part of the participation on service users should include an element of restorative practice coordinated by the service user coordinator. This can involve service users participating together in forums where local community stakeholders express and seek support on resolving drug and alcohol related issues that are negatively impacting on them. Therefore, DATF SUP strategy, also becomes a restorative vehicle of response to provide essential help to the National Drug Strategy objectives of reducing harm and supporting recovery.

DATFs can conduct a conflict analysis of their catchment areas to assess where they can practice more restorative, community building practices in an effort to underpin the values of equity and partnership for more resilient communities from problem drug use xxxvii. Where conflicts are intractable and appear to be beyond resolution, the DATF can help to manage the conflict to avoid escalation into more violent manifestations.

Conflict management training should be available generally across the service user community



in order to provide sensitization to the range of restorative approaches to problems and differences. Specific and advanced mediation training will provide service user representatives and coordinators with new skills which will help them identify opportunities for strengthening the community.

"The National Association of Drug Court Professionals indicates success among the drug court programs, by stressing that it has been statistically observed that drug courts reduce drug use and crime, are much more cost-effective than other criminal justice methods, enhance compliance and cooperation and restore family bonds xxxviii"

"Bridging these inequalities through mediation, training or coaching offers the promise of enhancing the possibilities of deliberation. But there are also risks. (Coelho, V. S. P., Cornwall, A., 2007, p. 13)."

5.8 BUY IN - OWNERSHIP

Regardless of the strategic goals set for the DATFs, in order for them to be achieved it is crucial to have "buy in" that is genuine. Any SUP needs to be supported by management, in a top down approach where those that have power for decision making and change clearly understand the importance of SUP in decision making processes. In addition to developing an agreed collective TOC and charter on participation which will allow collective commitment to the strategy to grow, this can also be achieved through education and training which will help to:

- De-stigmatize services
- Engrain changes in services
- Foster stronger more trusting relationships

5.9 VALUES AND PRINCIPLES

Shared values and principles that reflect service user and service providers intentions need to provide a foundation upon which to build any strategy. Greater Manchester West's Mental Health NHS Foundation Trust found when creating their Service User Engagement Strategy that:

"A key initiative, that brought service users and staff together to shape and improve services, was the development of the Trust's values. In 2012, service users led this project - co-facilitating working groups with staff and service users to create a set of values and behaviours that are a collective commitment to the guiding principles of our organisation and your rights as a GMW patient" xxxix.

The strategy is informed and driven by a set of principles to which all DATF members and stakeholders must agree and which reflect the DATF commitment to:

- Service users having a real say in the services offered and the way they are provided.
- Supporting and enabling service users in their participation with dignity and respect.
- Acknowledge that service users have a significant and genuine interest and role to play in ensuring that services offered are of highest quality and greatest relevance.
- Developing an organisational culture conducive to SUP and based upon a set of principles and values including:
 - Non-judgmental of service user.
 - Open - to change personal, institutional and community change.
 - Inclusive - of all.
 - Equality – of opportunity and how people are treated.
 - Empowering to the individual and the community.
 - Restorative - place high value on relationship building.

5.10 PEER TO PEER RELATIONSHIPS

In the 2014 report, "Best practices in Peer Support" produced as part of the Ontario Drug Treatment Funding Programme and referring to the earlier work (2006) of Davidson, Chinman, Sells and Rowe the following simple definition of peer support is offered:

"Peer support is based on the belief that people who have faced, endured and overcome adversity can offer useful support, encouragement, hope and perhaps mentorship to others facing similar situations 1."

The overwhelming majority of service users and service providers interviewed in both DATF catchment areas agreed that developing trust in individuals and institutions can be difficult for service users. A successful SUP strategy will require a high level of trust among service users and between them and service providers and the DATFs.

Peer to peer relationships tend to find a higher level of trust more easily, based on common life experiences often leading to a relationship with natural empathy.

The Community as Method (CAM) influences the programmes of many of the therapeutic service providers specifically working in the area of drug and alcohol misuse. CAM as practiced in Coolmine TC maintains that:

"Recovery occurs through interactions with peers and through self-help and mutual self-help learning processes." CAM also places a strong emphasis on clear and simple communications systems to allow "open communication and personal disclosure".

Supporting different forms of Peer to Peer services should always be considered and highly valued within DATF's. The development and promotion of peer/mentor initiatives should be well supported and utilized by DATF's ¹ i.

5.11 GENDERED APPROACH.

"Our life, Our voice, Our say", a report prepared by Community Action Network (CAN) in 2018 estimates that women comprise 25% of opiate treatment service users. This figure may be affected by a number of other issues according to the CAN research, including:

- Some women are not accessing services for fear of coming to the attention of social services and losing control of their family's wellbeing.
- The costs of accessing services is often expensive for women who may incur childminding expenses which can obstruct greater participation.
- Women service users and providers interviewed agreed that stigma for women service users in recovery was considerably different and greater than experienced by men.
- Women's experience of addiction and treatment is more often than not very different from men and their entry into addiction is quite often a result of their personal relationship to men.
- As a consequence of their relationship to drug and alcohol misuse many women also find themselves in chaotic and abusive personal relationships and are likely to avail of family related supports.

An inclusive SUP strategy will involve a gendered approach where particular obstacles to women's participation are addressed.

"In a context where women have scant opportunity to learn the skills needed to engage effectively in the participatory sphere, and where social sanctions work to ostracize those who do assert themselves, there are potent barriers to inclusion (Cornwall, 2002) (Coelho, V. S. P., Cornwall, A., 2007, p. 13)."

Human rights.

The way in which a group is stigmatized and discriminated against in society is directly connected to how well those people's human rights are being respected and protected. Universally, human rights uphold the equality of individuals to have access to the same services, and treatment as anyone else. However, as research has shown, those experiencing drug and alcohol related problems are systematically discriminated against. They have lesser access to house, healthcare and employment x iii_ A DATF SUP strategy should recognize the dignity of every human and should take into consideration what duty they have to help support their service users given that they represent some of the most marginalized populations in the world xliii

"The World Health Organization found that illicit drug addiction ranked as the most stigmatized health condition globally...A study comparing attitudes of health care providers toward people with diverse medical and mental health conditions found that the most severe judgements and the highest rate of rejection were for people with substance use issues.⁹ Another study found that compared to people with mental health issues, people who use alcohol/other drugs were viewed as more dangerous liv."

5.12 CAPACITY BUILDING

Service providers involved as stakeholders in the DATF's process bring huge experience and expertise to address the impact of drug and alcohol misuse on the individual, the family and the wider community. It should not however be assumed that they share a consensus around the importance or implementation of a SUP strategy while it is clear that they provide a frontline interface with the community of service user. The service providers will require the support of the DATFs to ensure that they have the ownership of the structure and any additional capacity needed to play a full role in the implementation of the SUP strategy.

The need for SUP capacity building among members of DATF's is not any reflection on their experience and competency in relation to their core work it is only a reflection of the need for innovation, commitment and ability to adapt to meet with lived experience, modern practice and service user needs.

"Our policies are only as good as the actions that enforce them. Any service user agreement needs to recognize that we can say we want to increase service user involvement however it is up to the service providers to provide the space for these democratized tools to do their part). We need to look at the conditions our civil society provides for true non-tokenistic participation".(Coelho, V. S. P., Cornwall, A., 2007

6.0 FORMULATION OF A SUP STRATEGY

The service user participation strategy suggested in the following sections is based on the interviews that have been conducted with a cross section of stakeholders but primarily service users, service providers, related agencies and academics. It is informed by the lived experience of service users and the programmatic experience of service providers. There is a very strong consensus among local and national stakeholders that service user participation in the planning and delivery of addiction services has many implications but despite challenges, the potential benefits of an effective strategy for the service user and the service provider are substantial if well designed, implemented and resourced. Much of the strategy is based on interviews with stakeholders and they have all acknowledged the value of SUP to the work of DATFs.

The importance of the SUP strategy having the commitment of all of the stakeholders involved in the DATF cannot be overstated. A strong sense of ownership will be important to enable all task force members to play an active role in ensuring the successful implementation and operation of the strategy. The SUP strategy while reflective of the experiences and views of many service providers as well as users, will require some revision by all members of the DATF to ensure a strong consensus of support.

The implementation of a SUP is the collective acknowledgement of the positive potential to impact on life quality of service users.

6.1 Vision statement for an effective Service User Participation Strategy in the Finglas/Cabra and Blanchardstown DATF's

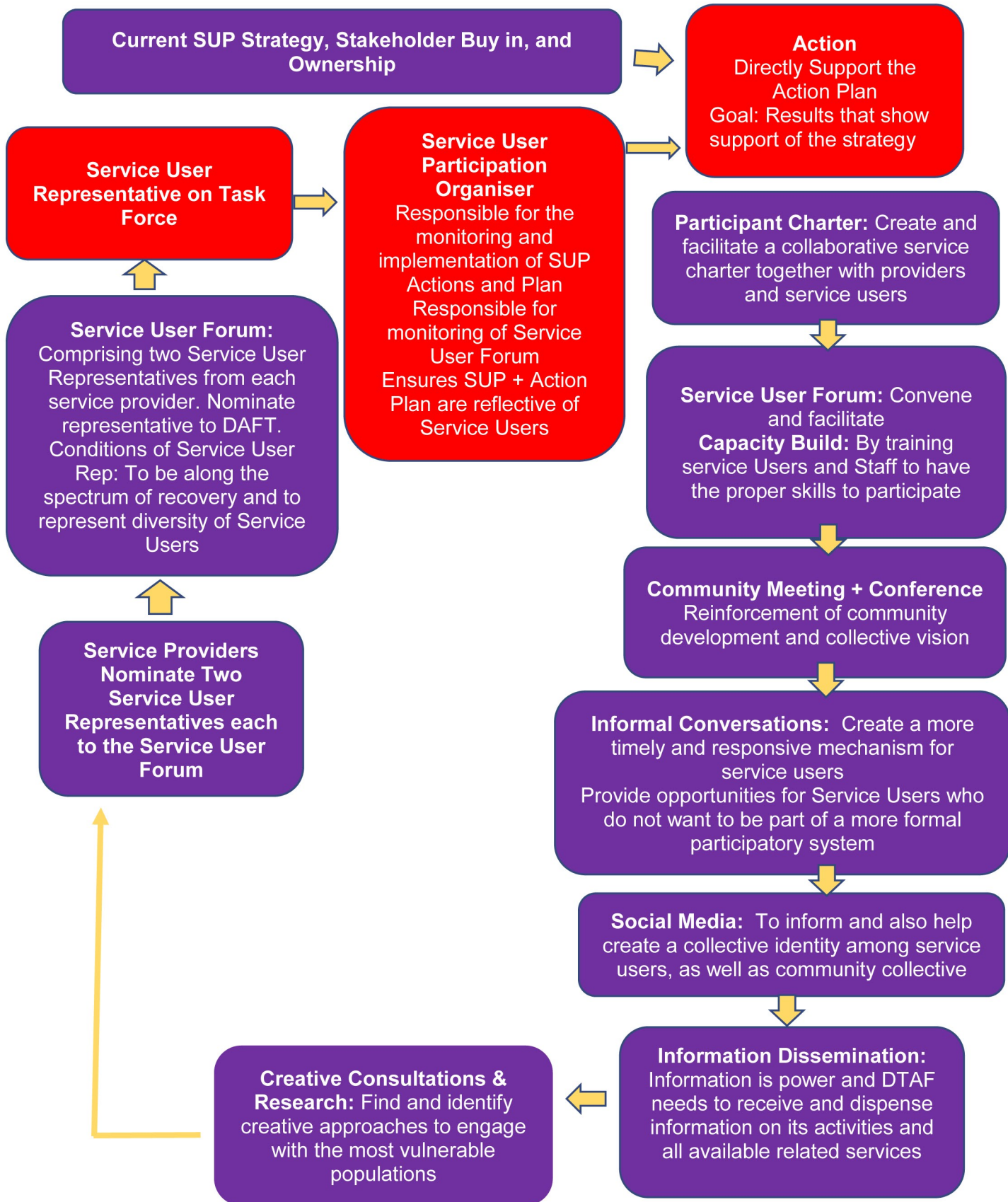
"An inclusive participatory system that empowers and harnesses the social and cultural capital of service users to contribute to the enhancement of the services offered by the Cabra/Finglas and Blanchardstown DATF process and to the betterment of the communities served by them".

6.2 Strategic Objectives and Specific Goals.

STRATEGIC PILLAR	STRATEGIC OBJECTIVE	SPECIFIC GOALS
Structural change	To ensure that the work of LOATF benefits from the experience and opinions of the Service User Community at all stages of its process of planning and delivery of services.	Approval/amendment of SUP strategy by DATF.
		A Part-time Service User Participation Organiser (ideally drawn from the service user community) is recruited by each task force to drive the implementation of the strategy.
		A Theory of Change is agreed by members of the DATF.
		Service providers agree collectively to commit to engage actively with the system of SUP representation by promoting and facilitating service user nominees in their participation in a DATF Service User Forum.
		Two service user representatives are nominated and facilitated by each service provider to participate in the DATF Service User Forum.
		Staff and service users within the DATF catchment area collectively review operational culture and values of DATF to ensure complementarity with SUP strategy.
		Service User Forum nominates representative to DATF.
Capacity building and training.	To ensure that the service user community is supported, empowered and enabled to fully participate in planning and delivery of DATF services.	Open door training in communication, conflict resolution, participation and representation are available to all service users in the DATF catchment area.
		Service users actively informed, encouraged and facilitated by service providers to engage with the participatory mechanisms developed by the DATF SUP strategy.

<p>Community Cohesion and Resilience.</p>		<p>Compensation for any financial costs of participation incurred by the service user should be met.</p>
	<p>To promote and facilitate greater community cohesion through the inclusion of service users and non-service users to strengthen community relationships and resilience.</p>	<p>Awareness campaign to help improve education, community safety, and de-stigmatize service users.</p>
		<p>Language use and awareness of staff to help change the stigma and stereotypes services users face both in and outside of services.</p>
		<p>Service User Representative to be supported to attend community safety forum meetings and other such forums where they can interact with the wider community on behalf of the DATF.</p>
		<p>Training offered to wider community in conflict management techniques.</p>
		<p>Expand DATF services to open the to not only services users but be able to reach beyond service.</p>

6.30 Operational Structure of Service User Participation Strategy



APPENDICES

APPENDIX 1

DRAFT Essential Elements Job Specification – Service User Participation Organiser.

General.

The SUP Organiser is a part-time paid position shared equally in terms of cost and time between the Blanchardstown and Cabra/Finglas DATF's.

The SUP Organiser will have overall responsibility for the implementation and ongoing maintenance of the SUP strategy.

They will report to the manager of the DATF.

Preference will be given to service users or former service users.

Specific.

- Regular visit service providers for informal conversations with service users with support of service providers.
- Ensuring representative system for SUP strategy functions fairly and inclusively.
- Convening and establishing Terms of Reference for Service User Forum.
- Attends meetings of DATF as a resource to inform them of opportunities and challenges for the SUP strategy.
- Provide support to the service user representative to the DATF.

APPENDIX 2

DRAFT Essential Elements Role description – Service User Representative to DATF.

General.

A Service User Representative (SUR) is nominated to the Blanchardstown and Cabra/Finglas DATF's by their respective Service User Forums (SUF)

They are full members of the DATF enjoying the same rights and with the same responsibilities as all other members.

Specific.

- Attend meetings of the service user forum to ensure that they are represented at DATF level.
- Attend meetings of the DATF and participate in policy development as well as programme implementation and development.

Appendix III

Interviews conducted.

A total of 75 representatives from service providers and users were interviewed comprising:

- 30 Service Users.
- 45 Service providers and DATFs and academics.

It was not possible to organise interviews with 5 of the stakeholders targeted at the outset of the research.

Service Provider Finglas Cabra	Staff Interviewed	Service User's
Finglas Centre	Yes	
LOFT	Yes	7 Service Users of LOFT Family Support Group (Female)
Sankalpa	Yes	
Wellmount Clinic	Yes	
Ashleigh's House	Yes	6 Female Service Users
Tolco Clinic	Yes x 2	
Broader Addiction Services	Yes	
UISCE	Yes	1 Service User (Female)
DLR DATF	Yes	
Finglas Cabra DATF	Yes x 3	1 Former service user representative on (MALE)
HSE Rehabilitation Services	Yes	
HSE Ballymun	Yes	
Coolmine TC	Yes x 3	6 Service Users (interviewed)
North Inner-City Clinic	Yes X 2	
C/FDATF	Yes X 2	2 Former voluntary Service User Representative and Service Users (1 male and 1 Female)
Finglas Addiction Support Team (FAST)	Yes	
Community Action Network	Yes	
Focus Group from Voyages Programme at Finglas Centre	Yes	
Outreach Worker HSE	Yes	
Academia	Yes	
HSE Addiction Services	Yes	
Rialto Community Drug Team	Yes	3 Service Users (2 Female, 1 Male)
Inchicore Community Drug Team	Yes	
CKU Service for Polish community	Yes - Phone	
Finglas Family Support Volunteer	Yes	
Probation Service	Yes X 6 (team meeting).	
Family Support Network	Yes	
Saol Project	Yes	
Tolka River Project	Yes	2 service users and
Mulhuddart Corduff Community Drugs Team	Yes	2 individual meetings
Blanchardstown Drug Task Force	Yes	
Ballymun DATF	Yes	
Tallaght Local Drug and Alcohol Task Force	yes	
Recovery Academy	Yes	

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NOTES

NOTES

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CHANGING PERSPECTIVES

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