



## Summary Report: Consumer consultations on respiratory health

### Respiratory Health and Wellbeing Project

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#### VAADA Vision

*A Victorian community in which the harms associated with drug use are reduced and general health and wellbeing is promoted.*

#### VAADA Objectives

*To provide leadership, representation, advocacy and information to the alcohol and other drug and related sectors.*

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## Background and Context

The Victorian Alcohol and Drug Association (VAADA) is the peak body representing funded Alcohol and Other Drugs (AOD) services in Victoria. In July 2023, VAADA was successful in receiving a COVID-19 Community Grant from the Department of Health. AOD service users and people who use drugs (PWUD) are a vulnerable population with often complex health needs and higher risk factors for negative health outcomes from COVID-19. The community grant project seeks to improve "health-seeking" behaviour by providing targeted information and resources through trusted channels like clinicians, community workers, and peer workers.

To understand the specific needs of AOD service users and PWUD regarding COVID-19 and other respiratory illnesses, VAADA conducted a literary review, delivered a series of webinars and workshops for AOD workers, conducted surveys and coordinated two consumer consultations.

This report summarises the key themes arising from the two consumer consultations conducted in May 2024, one facilitated by [SHARC](#) and the other by [Harm Reduction Victoria](#). The consultations aimed to understand PWUD experiences and perceptions of respiratory health, barriers to accessing healthcare, and preferred messaging for outreach and communications.

### Consumer consultations: Key Themes

#### Stigma and Discrimination

Stigma and discrimination were raised as key barriers hindering access to healthcare. Participants expressed a strong fear of judgment from healthcare professionals. The following quotes illustrate the reluctance to disclose drug use to health professionals:

*"No way I would have told my doctor [about my drug use]"*

*"They might put me in a box"*

However, the fear of experiencing judgement and stigma creates a double bind, as participants acknowledged the need for honesty about drug use to receive appropriate healthcare.

*"People need to understand that it is okay to go and get help about this [respiratory health concerns]. But also, that the doctor should listen to them and not judge them."*

#### Confidentiality

Confidentiality was discussed as a significant barrier to help-seeking behaviour. Participants expressed anxieties surrounding how their personal information is handled. This included concerns around the monitoring of prescribing practices and "safe-script" programs as well as information sharing and storage.

*"I used to see a doctor, but she knows my family and the community. It's close-knit. What if she told them? I just don't want her knowing everything."*

Participants emphasised the importance of clear communication from healthcare providers. By transparently explaining information storage and protection protocols, healthcare professionals can build trust with PWUD and encourage them to seek help.

### Creating Welcoming and Inclusive Spaces

Healthcare environments that feel safe and approachable for PWUD is important. Having in-house peer support workers can provide a sense of understanding and shared experience. Similarly, non-judgmental doctors who avoid stigmatising language or attitudes can make a significant difference in a service users experience.

### Accessibility and Affordability

Participants raised the importance of removing financial and logistical barriers to healthcare. Easy access to bulk-billed doctors with short wait times was a priority.

*"Having a bulk-billing doctor you can just see straight away is what you need, but they're impossible to find. If I have to wait weeks for an appointment, I might just forget about it altogether."*

Similarly, readily available and free services, like flu shots offered in local pharmacies with friendly staff, were seen as valuable.

*"If I see a 'free flu shot' sign at my local pharmacy, I'd be more likely to go in – especially if they were friendly."*

Telehealth was also seen as a potential solution for those hesitant to see a doctor in person, acting as a stepping stone for people who use drugs that are hesitant about seeking care.

*"Telehealth could be a good first step, especially if I'm worried about what a doctor might say. I could get some initial advice and then decide if I need to see someone in person."*

### Messaging

Consumer consultations included discussion around preference for health messaging and communications for respiratory health resources. Participants emphasised the importance of health promotion messaging that challenges common misconceptions and myths and encourages preventative respiratory care. Specifically highlighted was the need to dispel the harmful myths that individuals who use drugs are destined for poor health or that use represents the only risk to future health and longevity. By shifting the narrative away from these misconceptions, health promotion efforts can empower individuals to take control of their respiratory health and make informed decisions about their wellbeing.

They expressed concern about the long-term consequences of neglecting respiratory health, including conditions such as emphysema, and the need to convey this information in a clear and impactful manner.

*"For many people, it's not drug use that may cause death, it can be respiratory illness. Emphysema can creep up on you."*

Participants advocated for a shift from fear-based approaches to those that foster hope and resilience.

*"We need empowering messages that go beyond scare tactics."*

They suggested incorporating real-life stories from individuals who have successfully managed their respiratory health, particularly those shared by peers.

*"Hope, not just cope"*

Such narratives can serve as tools for bridging connections within the community, inspiring hope, and encouraging health-seeking behaviours.

### Additional Considerations

The report acknowledges that some PWUD face additional barriers, such as language or cultural differences, or experiences of discrimination due to their identity (e.g., Aboriginal or Torres Strait Islander, LGBTIQ+, or disability). These factors require tailored support and outreach strategies.

By addressing these concerns and creating a more welcoming healthcare environment, this project aims to improve respiratory health awareness and empower PWUD to prioritize their well-being.

### Conclusion

In conclusion, participants called for services that were accessible –ready when they were ready –, non-judgemental or stigmatising. Participants agreed that people who use drugs have a lot going on in their lives, so stigma, long wait-lists, and judgement from healthcare providers were powerful barriers. By addressing stigma, promoting confidentiality, and utilising credible sources of information that include the voices of peers, we can encourage help-seeking behaviours and improve respiratory health outcomes for people who use drugs.