## TURNING OUTWARD: USING COMMUNITY CONVERSATIONS WITH PEOPLE WHO INJECT DRUGS IN SOUTHERN SYDNEY TO UNDERSTAND THE FACTORS INFLUENCING THEIR HEALTH AND WELLBEING.

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**Background/Approach:** The Viral Hepatitis and Harm Reduction Team recently conducted five in-depth conversations with 39 people who inject drugs (PWID) in southern Sydney. The conversations provide a safe space for the community to talk about their aspirations, concerns and how they want to move forward.

Analysis/Argument: Conversations were conducted using the Harwood Institute© approach of "turning outwards", which is a fundamental mindset shift to authentically understand and engage communities, particularly crucial when working with marginalised communities such as PWID. It is rooted in five core ideas: community ownership; strategies that fit community; sustainable enabling environment; a focus on impact and belief; and narratives.

**Outcome/Results:** Participants want a safe, clean and non-judgemental community. Barriers to achieving this are harassment by police and discrimination by health workers and a lack of access to safe, acceptable and appropriate services for PWID. These directly impact an individual's capacity to access hepatitis C (HCV) treatments. Participants had a clear sense of actions needed including education for police, health workers and PWID; and paid consumer roles. Services and agencies trusted to support these actions were identified.

At a feedback session participants overwhelmingly agreed they had been heard accurately and endorsed actions for moving the community forward. Since the conversations:

- A consumer advisory group was established,
- Models for paid peer-programs are being explored with clinical services and the injecting community to improve healthcare access and reduce stigma,
- A HCV and stigma and discrimination training has been delivered to 80 health workers in priority settings.

**Conclusions/Applications:** Community conversations are a successful way of engaging PWID, building trust, understanding community and guiding actions. Participants expressed high-levels of satisfaction with the process and were grateful for the opportunity to be heard. Conversations with health care workers and police are planned to engage them in actions to improve the health outcomes for PWID. The authors have no competing interest to declare.