

**PRESENTATION TO NSP WORKERS MEETING
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**By Annie Madden
Executive Officer
Australian Injecting & Illicit Drug Users League (AIVL)**

“THE PLACE OF EDUCATION IN NSP – BEING REALISTIC ABOUT GOALS”

Good morning.

I would like to begin by recognizing the traditional owners of the land this workshop is being held on and to thank the organisers for inviting me to speak at this important workshop.

When I began to think about what I was going to say today I thought that it would be helpful to reflect a little on the NSP Workers Meeting itself, the type of meeting it is and the role that it plays in the lives of people who work in the sector.

In doing that reflecting, I realised that while the NSW NSP Workers Meeting might not be considered to be as grand as some of the bigger conferences in the area, it is without a doubt one of the most important events in the calendar for many of us who live, breathe and eat NSP and issues relating to injecting drug use.

It is a very practical, hands-on type of meeting that, for some, is one of their only chances to really discuss the issues that affect their daily working lives, to learn new things and to gain some of that all important reinforcement on why we all continue to work in this area.

This is important stuff when you work in an area that seems to be under almost relentless attack from both the community and the in particular the media and when you are expected to quite literally work health ‘miracles’, such as reversing in a very short time an out of control viral epidemic that took decades to develop, with little more than a few million needles & syringes and a truck load of good intentions.

“Yes” the NSW NSP Workers Meeting is an extremely important meeting and I feel very privileged to be invited to provide one of the opening speeches here this morning. In fact, it turns out that this meeting has been very significant on a professional level for me as well.

I realised when writing this paper that I actually began my illustrious or is it notorious career (I always get those two mixed up) at least in part at this meeting by giving one of my early public presentations on behalf of NUAA at the 1996 NSP for “exchange” Workers Meeting as it was known then.

Interestingly my focus then as it remains today was on the needs of consumers or clients in relation to the services offered by Needle & Syringe Programs – I’m not sure whether

that says more about my inability to move on and let go or the programs continuing issues in this area, but let's not dwell on that too much...

Moving on to the present, today I have been invited back to the NSP Workers Meeting to talk about the "Role of Education in NSPs" and about the importance of being realistic about our goals in this regard. As I began, NSP workers in some ways have a difficult job and mostly do not work in the kind of supportive and nurturing environment that makes for really great service delivery to clients. But having said that, it is not all bad and difficult.

There are lots of great opportunities for NSPs and the people who work in them to make good practice service delivery, in this case, specifically in relation to education services, a realistic goal for every NSP.

To look a little closer at how this can be achieved in the context of all the "difficult and sensitive" stuff that NSP workers have to contend with I want to take a few steps back before looking forward and begin by looking at education more broadly. The reason I want to take this approach to looking at what's possible in terms of NSP education services is because I don't think that we can really know what will or won't work in the context of NSP before we are clear on what is and isn't education, what some of the core principles of adult education are and how they relate to what we do.

So what is currently the role of education in NSPs?

I am not here to criticise the work of a group of people who work in a complex area of service delivery. God knows I have benefited a great deal on a personal level from the existence of NSPs and the work of NSP workers. I was a user before NSPs so I know too well how bad things can be without them. But I do want to ask people to open themselves to some constructive feedback on the way that education is currently practiced in the majority of NSPs not only in NSW but Australia-wide.

It is my belief that the vast majority of NSPs do not practice 'education'. I don't say this to be controversial or intentionally provocative. I say this because it is true. The majority of NSPs currently act primarily as distribution points for injecting equipment not necessarily as access points for effective education on health issues for people who inject illicit drugs.

This is not an easy thing to say to a room full of NSP workers who understandably take pride in what they do and how hard they work. But it is only if we are willing to look honestly at what we do, can we improve it. The fact is that too often, what passes for education in the context of NSPs is frequently little more than targeted information provision, and while providing people with well-targeted information is certainly part of the education process when it comes to NSP, limiting ourselves to providing targeted information is not enough.

At its most basic level education is about *learning* not just information and there has been a great deal of work done to develop principles and strategies for teaching adults in a way that is most likely to result not only in learning but also in action. These principles are called: "Principles of Adult Education or Adult Learning" and the table shown here

takes a look at these principles:

Principles of Adult Learning:

- Adults are autonomous and self-directed. They know what they want to learn and will go about it if given the right information and tools.
- Adults have accumulated a foundation of life experiences and knowledge. They need to connect learning to this knowledge and experience base.
- Adults are goal-oriented. They want to learn a specific subject as it has an outcome they want attached to achieving it.
- Adults are relevancy oriented. They must see a reason for learning something.
- Adults are practical; they want information that directly relates to their lives, learning for learning sake is often not on the agenda.

By acknowledging or combining the standard principles of Adult Learning with the unique context of NSPs, we can create our own form of NSP-based education. The issues of illegality, discrimination and marginalisation, however, make doing education with drug users very different from educating most other groups in the community. For this reason, we need to look at what is really possible in the context of NSP-based education...

The place of education in NSP – being realistic about our goals:

Without doubt the best educators in any context are the ones who really take the time to gain an understanding of how people learn and then combine that with an excellent 'content' knowledge of the issue or issues they are educating people about. In the context of NSP this means not just relying on your good knowledge of health issues for people who inject drugs or whatever pamphlets you happen to have lying around to 'get you by' when a client asks you for some information but actually taking the time to figure out the best way to not only impart information to your clients but encourage them to learn and take action.

And I am not talking about something that is out of the reach of ordinary NSP workers. I am not necessarily talking about expensive training or university courses. The internet and online discussion forums have changed the world. Self-directed learning is now not only achievable but I believe a responsibility of every NSP worker. As well as self-directed learning, all of you have attending this meeting also has the opportunity to look at the whole issue of improving education in the context of NSPs while you are here. Later this morning, Rob Wilkins and Gary Gahan are running session that as I understand it, will take the issues I have raised this morning and look at them in a very practical and useful way. As workers you need to take these opportunities.

While there are some notable exceptions to this, by and large when clients ask a question or are seeking information in the context of service delivery, they are usually not doing this to hear the sound of their own voice. They are asking about something because they... and this is where we can go back to our principles for adult learning:

1. **Want to learn about a specific subject because it has an outcome they want attached to it;**
2. **Are goal-oriented in their learning and have a reason for wanting to know about something;**
3. **Are practical and want information that directly relates to their lives;**
4. **Are self-directed and know what they want to learn and will go about it if given the right information and tools; and**
5. **Will check what they are told against their foundation of life experiences and knowledge and decide whether it has relevance for them.**

So, as you can see NSP-based education is motivated by the same sorts of principles and drivers that influence other adult learning it is just that whether there is a successful learning outcome or not depends on the way that you respond to your clients in this context.

NSPs are often characterised as places that are not conducive to education or adult learning experiences but I think, in reality, nothing could be further from the truth. It all depends on whether you are open to the opportunities for learning and action that present themselves everyday in numerous different ways. Sure people accessing the NSP you work in will sometimes be in a hurry and not interested in filling in the usual stats you need to collect let alone 'engaging in a learning moment' but if you:

1. **Know how to read the signs;**
2. **Know how to build genuine rapport and trust;**
3. **Know how to turn a question into an opportunity to learn something new; and**
4. **Know how to equip people for action.**

then you will be well on your way to engaging your clients in meaningful educational exchanges whenever the opportunities arises.

1. Know how to read the signs:

Of course not everyone who walks into an NSP needs or even wants education. I believe the problem is however, that people have become so used to thinking of NSPs as places that are not conducive to educational interventions and NSP clients as "people in a rush" not interested in education who just want to get their equipment and go, that we have unconsciously created environments that scream "take your equipment and go". Now this may sound a little harsh and probably is a bit of an exaggeration but I do believe the basic concept stands up to scrutiny.

Of course it will undoubtedly be the case that *some* people will *sometimes* be in a rush and will not be interested in education, but this is a far cry from *all people, always* being in a rush and not open to education. In short, it is easier to put all clients into the "too busy and in a rush" category than really taking the time to think about the strategies you might use to engage the client who isn't in a rush. Sometimes I wonder whether we just automatically assume that all clients are in a rush without even thinking about it. NSP workers must know how to read the signs and signals that their clients give when they come to their service. Are they in a rush today? Do they look OK? Have they asked any questions? Are they looking for information among the sea of brochures and resources? Can I help? Is this an opportunity for a chat?

There are many barriers that can get in the way of NSP workers engaging clients in education not the least of which is the illegality of injecting drug use. People will rightly be at least suspicious and at worst completely freaked out by a worker who "notices too much" or asks too many questions. But managing and negotiating such barriers is all part of the stock and trade of a good NSP worker. Creating the right balance of service delivery and interest in the issues affecting your clients is the first step in building a learning environment within the context of NSP.

2. Know how to build genuine rapport and trust:

Most NSP workers rightly pride themselves on the good rapport that they have with their clients, particularly regulars. What surprises me about these relationships is how little this rapport seems to be used to build an educational opportunity. Now, I need to say that I am not suggesting that this never happens, of course it does, but my focus this morning is on the majority of situations, not the relatively unusual circumstances where an NSP happens to have a good communicator and educator.

Now I am happy to be told I am wrong - I'm used to it in this field. But in putting this paper together I checked in with a half a dozen users in each state and territory about their recent experiences in local NSPs. And while there were a couple of good stories, the vast majority of people said two main things about NSPs and education:

1. That they couldn't remember the last time that they talked to an NSP worker about a health issue and that they usually just went in got their equipment and left; and
2. That NSPs aren't really interested in the sorts of issues that I would really need to talk about in relation to my injecting.

Now I need to state that these were not people who work in drug user organisations or have access to all the information they need. These were ordinary drug users who regularly access NSP services. I thought that both of these comments were very telling because they highlighted some really important things in relation to education:

1. That there is a lack of talking going on between NSP clients and NSP workers; and
2. That there seems to be a gap between what NSPs think is important or relevant education wise and what clients view as important in terms of education.

I know these users do not represent all users who access NSPs and if you like you can just dismiss what I am saying as unscientific and irrelevant but it won't change the fact that I was not at all surprised to hear these responses from users and that is because it matched both my own personal experience of NSP services and my impressions from working at the national level on these issues.

It suggests that NSP workers and NSP clients are not talking with each other anywhere near enough in a way that is likely to establish the kind of rapport and trust that will lead to quality educational exchanges and that even if NSP workers did make the effort to establish such rapport that most NSP clients won't really be interested because they know, or at least believe, that NSPs aren't interested in discussing the issues that are of most interest to them.

3. Know how to turn a question into an opportunity to learn something new:

One of the biggest barriers to genuine and meaningful education opportunities within NSPs is the fact that the ability to set the agenda has been taken out of the hands of NSP workers and NSP clients. If we return once more to our principles for adult education it is clear that relevancy and self-motivation are the cornerstones of adult learning.

When it comes to NSPs I believe that NSP workers have been virtually stripped of their ability to support clients in learning about and improving their health. The politics of illicit drug use and the ever-widening circle of "no go" issues means that most NSP workers simply cannot engage their clients on the issues that are really important and relevant to the client.

For example, one of the main issues that affects people who inject illicit drugs is that of venicure. If NSPs really wanted to engage drug users in meaningful education (and by that I mean learning that could lead to action) then every service would provide a well advertised and medically supported program to undertake vein searches for clients and to teach clients how to inject themselves properly. This is the sorts of practical education that drug users really want and struggle to find. Most don't find it in a life time of injecting and it results in horrible damage to veins and circulatory systems, lost limbs and sometimes even death. But still, politically it is a "no go" area.

Now many of you know me well and have heard me speak before or have worked with me and know that I completely understand the political realities in which we live and the compromises that need to be made so that NSPs can continue to exist in an often hostile environment. I know the political realities (all too well I'm afraid) but I also know the impact of every compromise that has been made over the past 15 years in relation to health services for people who inject illicit drugs. And I suppose I am beginning to ask "what price those compromises?" and at what point do we ask "how are we supposed to provide effective NSP services including targeted education if the entire basis for that education is constantly removed from us?"

If we say that NSP is about providing education to people who inject drugs, then we must provide NSP workers with the power to educate - not to provide certain information, under certain circumstances, in such a way that no-one even knows what they are talking about, but real education that is based on the issues that drug users see as relevant and useful. NSP workers must be empowered to answer questions, honestly and be provided with the capacity to turn those enquiries and questions into opportunities to learn something new and helpful.

4. Know how to equip people for action:

As I said earlier, for the majority of people the whole reason for bothering to learn something is so that they can use that knowledge somehow in their lives to take action. If you start to view all education as less about simply providing information and more about a process of learning for action you can really start to see why your clients often have very little interest in the many 'so called' education resources that fill the display racks in most services.

At the national level I see so much money being spent on so called "education projects" from one state or even other countries being 'repackaged' and then rolled out into other states/territories with very little regard for whether that particular resource has any real relevancy at the local level. Sometimes these resources aren't even repackaged but

simply reprinted and distributed. Just because a resource looks cool or was 'popular' in one context doesn't mean that it will have the same impact in another context. Frequently I have seen resources absolutely flop when they have been 'imported' from elsewhere or worse, drug users have found the resource either patronising, offensive or even confusing and potentially dangerous if the information is not tailored for the local context. NSPs with good reputations for their education resources can damage their standing and relationships with clients by dumping resources from outside - it is a strategy that rarely works and needs careful consideration before it is implemented. I would recommend that you steer away from this approach completely. Each NSP, each area, each group of users are different with unique issues and needs. This doesn't mean that you can't share approaches and strategies or even projects with each other if appropriate, but it does mean putting some real thought into what education is in the context of your NSP and your particular client group.

I believe that we have become way too focused on "resources" 'as' education rather than 'as part' of the education process. Resources and other printed/web-based materials should be used as 'tools' in the education process not relied upon as stand alone education strategies in their own right. At AIVL we produce lots of educational resources but we have never pretended that we are doing anything other than providing materials to support the education process. "Yes" we try to produce resources that will appeal to and engage drug users and we put a great deal of effort into the peer-based development process for every resource, but ultimately those resources will only find their way into the hands and heads of drug users if there is a supportive learning based education process behind them - involving talking, listening, engagement and understanding.

Some people will never read printed materials, some people will read some of the printed stuff and some people will read everything that they can get their hands on, on any given topic. But before they make the decision to read everything or nothing, the process of learning has already begun. The minute we start to call the production of resources alone "education" (with a full stop) then I believe we almost guarantee that "education" (real education - learning for action) will almost certainly not happen.

Conclusion:

So, now that we have gone through what education is and isn't, how adults learn and how this all relates to what you do as NSP workers, I want to finish off by returning to the central theme of the paper which is -so what education is really possible in the context of NSPs?

As I mentioned earlier there are many things that we can let get in the way of providing effective education within NSPs including the political context in which we live and work, the restrictions on what NSP workers are "allowed" to talk about, the lack of staffing and resources for most NSPs that mean that some workers find it hard to dedicate real time to client needs and then there is just the pressures and immediate concerns that make it hard for clients to focus on much more than survival...

All of these things are very real barriers but that doesn't mean that there aren't ways of addressing such barriers. When it comes to NSPs I believe there is one certain way to address many if not all of these barriers to effective education and at the same time support clients to learn about issues that have relevance for them and to act on what they learn and that is, peer education.

Now for those of you who know me well I am sure that you were wondering when I was going to get around to talking about peer education - you didn't really think that I would leave it out did you? anyway, in all seriousness one of the most valuable roles that NSPs can play in relation to education is to support and empower clients to identify, define and meet their own learning objectives through peer education initiatives.

For years now we have been caught in what I believe are futile arguments and discussions about peer education such as "who is a peer?", "who can do peer education and who can't", etc. So let's settle it once and for all - the only people who can do peer education are peers, but for the rest of us there is still plenty of important work to be done...

Facilitating peer education and community action is important work that can transform a client from a passive recipient of information into a person who defines the learning objectives and can act on the knowledge and skills acquired. There is a world of difference between an education resource that is produced by an NSP 'for' clients and an education resource produced 'by and for' peers. An education resource produced for clients is usually based on the perceived needs of the clients group, the resource is produced by the NSP workers, it may be focus tested with clients but is ultimately produced within the context of government policy - there are some things that can be said and some things that can't be said no matter how important that information might be for the clients. With an education resource produced 'by and for' peers on the other hand, the 'process' of developing the resource frequently results in as much learning as the 'outcome' or the resource itself. A peer-based resource does not have to be developed according to government policy, they may have regard for government policy but generally they have more flexibility to address issues in the most effective and appropriate way for the audience.

The example I have used is an education resource but the principles and issues involved are the same whether we are talking about a information session, workshop, magazine or whatever. By comparing the relative learning outcomes of education resources produced by NSPs and education resources produced by peers I am not trying to say that one is good and one is bad. What I am trying to highlight is that the two approaches to education have very different outcomes. It is imperative that NSP workers engage in both forms of education, not one of the other.

Of course your ability to facilitate peer education will depend on the type of NSP you work for. Government-run NSPs will have more restrictions than NGO-based NSPs. NSPs that are co-located with other services will have less flexibility than stand alone facilities, etc. You need to honestly assess your environment to see what capacity your service has to engage clients in education initiatives. Unless you have the capacity to provide clients with an open, accessible space where they can talk, meet and create then don't say that you 'do' or support peer education. Be honest about this. Simply calling something peer education does not make it so and ultimately I think that it potentially diminishes the value of real peer education. Peer education must be owned and controlled by your clients not you as a worker. If you cannot provide an environment that supports client control and ownership over the education process and outcomes then you can't. You would be better off focusing your energy onto other forms of education that are possible in your particular environment.

The first step in improving education in NSPs is to create an environment that is as supportive for learning and if possible for action. There are lots of great practical things that NSPs can be doing to improve the quality of the educational experience for their clients. Just because you are not in an environment that supports peer education does not mean that you should give up on working constructively with your clients to encourage learning and action. There are lots of joint education activities you could undertake with clients that are not peer education but are still effective and engaging such as inviting some client reps on to your next resource development committee, ask some clients to work with you to organise an education workshop or a discussion group, ask your clients what issues they would like to know more about, have a suggestion sheet where people can write their ideas for guest speakers or sessions, have a regular open afternoon with activities that can provide a space for people to talk about issues and ideas, have an issue of the month and work with a few clients to research the issue and put together a fact sheet, ask clients to submit stories and graphics for a newsletter, run short video/DVD loops on key injector health issues in the NSP while people are waiting, etc.

Of course the list could go on and on. What might work in one context may not work or even be possible in another. There is no one size fits all when it comes to education in NSPs but here are some core principles that apply across the board and they are really simple and obvious:

- 1. Talk to your clients more:** I'm not saying this to be patronising and I know it sounds like stating the obvious but many people go in and out of NSPs everyday without anyone really talking to them - and I don't mean asking people what they want and how old they are. I mean really talking to them to establish rapport and trust that down the track might open the door to a learning opportunity. Those brief conversations that you have with clients about anything and nothing could mean that they ask you for some information down the track when they are ready. Quite frankly, if NSP workers don't start talking with clients more then we might as well replace NSPs with vending machines.
- 2. Make 'relevance' your new mantra:** If we go back to the adult learning principles that I began with, the single biggest theme is that adults learn when they see a reason for learning something and because it is 'relevant'. Don't assume that because you think it is important as a health worker that your clients will necessarily see that same issue as important. We have to be sophisticated in the way that we approach education and create relevance for people. We need to find ways to present the same issue differently for different people because not everyone learns in the same way. There is a good reason why user's stories have always been and remain to this day, a very popular form of education with IDU - they speak directly to people on many different levels and different ways.
- 3. Think about what you can be doing in the context of your NSP:** As I said earlier there is no "one size fits all approach" to education in the context of NSPs. You will have a sense of what is and isn't possible in the NSP that you work in but I suppose the most important thing is that you don't let your context limit what you can do in terms of education with clients. As much as I think that we really need to be educating people how to inject properly and assisting people to find working veins as harm reduction education within NSPs, I have been around long enough to know that government funded NSPs are not going to be given the

green light to do such things. But, as they say one door closes and another opens and there are many more issues that your clients will be interested in learning about – you just have to ask them and then act on it. This leads me to my last point which is...

- 4. Don't be afraid to try something new:** If you have tried to 'get people in the door' for education sessions and no-one has turned up don't let this put you off trying another approach. Think about your clients, how they live, what their lives are like and what they might be interested in and use this to develop new approaches to education. Test new ideas out with a couple of clients and if you get a good response then you know you might be on to something. If there is one thing that I know about injecting drug users is that they generally appreciate anyone who makes an effort on their behalf. It is such an unusual experience for them that they notice it immediately.

I hope people are not offended by the things I have said this morning. I know that most of it is not rocket science and it is probably stuff that many of you are already doing at your NSPs. But something happened to me just yesterday afternoon at AIVL that made me realise that there is still a lot of work to be done out there in NSPland.

I was talking to someone from who works in a busy NSP and this person was telling a story about how one of his coworkers has a great strategy for engaging clients in relation to education. He went on to say that what she does is with hold the equipment and refuses to hand over the pack until the client submits to a lecture on an issue of presumably her choosing.

Now I consider myself someone who has been pretty well hardened by years of poor treatment at the hands of so-called health workers but this I have to say shocked me. I have to say that I thought "Who does this person think they are?" An NSP is not a schoolyard; we are talking about people's health and lives.

Now I'm sure this is not common practice but I am equally sure that it is not an isolated case either. Other workers may not be participating in that exact behaviour of holding back injecting equipment as an education approach, but building any sort of barrier to your clients being able to freely talk to you about health issues amounts to the same thing in the end.

I suppose all I can really leave you with in relation to the theme of realistic education goals within NSPs, is to ask you to think about how you would like to be treated if you were accessing your service. And I would also ask you to think about how you learn and what makes for an effective learning environment for you. And then I would ask you to apply that same compassion, respect and thoughtfulness to your engagements with your clients. Thank you for listening to me.