

# FLIPSIDE

**The Association of Participating Service Users**



# Resilience

**No. 52 Winter 2022**

*Flipside* provides space for the voices of Victorians impacted by addiction. All contents featured here are produced by people who experience or have experienced addiction, either directly or through someone they care about.

*Flipside* is a publication of the Association of Participating Service Users - APSU, the Victorian consumer representative body for people who use alcohol and other drug treatment services.

*This publication is produced on the land of the Boon Wurrung people of the Kulin Nation. APSU acknowledges the Traditional Owners of country throughout Australia and recognises their continuing connection to land, waters and culture. We pay our respects to their Elders past, present and emerging.*

### **Flipside No.52 Winter 2022**

Design & Editing by Louise Goebel

**DISCLAIMER:**

*The views and opinions expressed within Flipside do not necessarily represent the views and opinions of APSU.*

If you have any original articles, poems or artwork that you would like to see in *Flipside* you may submit them to:

**apsu@sharc.org.au**

or APSU 140 Grange Road Carnegie VIC 3163

phone: (03) 9573 1776

<https://www.sharc.org.au/sharc-programs/apsu/>

ABN: 18052525948

# EDITORIAL

Thanks readers for hanging in with us over the last year! And especially thanks to the contributors who have been waiting to see their work in *Flipside* for over a year. It's fitting that RESILIENCE is the theme of this issue given the upheavals wrought by months of lockdowns that unravelled 'normal' life.

This issue of *Flipside* is dedicated to everyone whose experience of isolation predated the pandemic, who have lived with the vagaries of harm that stem from the impact of alcohol and other drugs in their lives - not just the self harm, but the harm of stigma and misunderstanding, of alienation, and the harm of service gaps.

In 2006, in the early days of APSU, Regina Brindle wrote the editorial for *Flipside* No. 13, called "Consumer Participation is Your Right". She wrote: "Consumer Participation as sharing decision making power is easier said than done. As consumers we are made to feel that our place is outside of management. How can we speak out when we feel unqualified, not good enough, that we don't even deserve to have a say? But aren't we the celebrated service user? Aren't we the folk for who these services exist? Given our importance, we must exercise our right and have a say." Lifelong member and manager of APSU at the time, Regina envisaged an integral role for AOD and mental health service users that put them and their expertise at the centre of decision-making.

Today APSU is a peak body representing the voices of AOD service users in Victoria. Those voices have a bigger share in decision-making power today, and the unique qualifications of those with lived and living experience are increasingly recognised as part of the essential diet of policy makers and those who design and deliver AOD and mental health services.

Regina died suddenly on the 6th December 2018. She was a great human being who remained committed to the right of consumer participation in her lifetime. Her efforts and resilience really are testimony to our ability to improve our lives, our environment and our services.

## INSIDE

### Articles Stories Poetry

Marg Quon, Why Be Resilient? p4

Brendan J, How Often Do You Cry? p6

Anon, Resilience p8

Tyson Hill, Things Don't Go Your Way p10

Tyson Hill, My Life p11

Russell Chilcott, A Moment in Time p12

Duane C, Resilience in Numbers p14

Marg Quon, Reducing the Storm to a Whisper p16

### APSU News & Updates

Megaphones p18

News p19

APSU Staff p20

We are seeking Expressions of Interest to join the APSU Advisory Committee p22

### Artwork

Bill Backhouse, postauctionsix p9

Bill Backhouse, livi8nginerquitwerlidd p9

Bill Backhouse, handloved p10-11

Megaphones, Bree Wilson, Dixon Banks & Jo

Freedman p18

Thanks to the street artists working in Melbourne whose work has been used in this edition of *Flipside*.

# Why Be Resilient?

**“For me, resilience is about being able to bounce back about being able to sustain that”**

In the world of drug and alcohol use, all community members need aspects of resilience to keep bouncing back. Whether it is about your own active use, or having a loved one who is using, whether it is in recovery or grieving the loss of a loved one.

We draw on being strong on the inside. We dig deep into that space with compassion for ourselves and those we love. From that space we are smart enough to know when or if we need help, and to ask for it. During those times we are brave, courageous, we set our boundaries around what we will put up with. We need to know this about ourselves so we can bounce back.

My ride through my son’s drug and alcohol use, and sadly his death from an overdose, has meant I have needed to be strong on the inside. I admit I haven’t always been that. I have learned to be that by utilising as many tools as possible.

For me, developing resilience has grown out of skills of problem solving. Confronted with rotten events in my life I have sat and brainstormed ‘How can I get through?’

I search for the best way to solve problems. This hasn’t worked every time, but it has given me a base to work from. When my son died, I needed a safe space to express my grief. I hounded Family Drug Help and SHARC to create a support group for families who had lost a loved one.

Attending the support group gave me the belief I could survive, that I was strong enough, that I needed to take one step at a time to begin healing and bounce back.

Marg Quon



**back to my original shape after a rotten event. Resilience is  
t shape as I go about living life day to day.”**



## How often do you cry?

It's not something that I'd say happens often, me crying, but what I consider worth tears and what distresses me aren't always what you might expect.

I might shed tears after a confected movie moment, I've cried watching cartoons. The deaths of my grandparents didn't make me cry, though I loved them and miss them still.

I shed many tears at my dogs death just two short years ago - it broke my heart and I miss him still - yet it's not him that moves me often.

What moves me and what results in tears aren't always as you'd expect and what does it matter? It's not a mark of significance that I see, though it's one I've learnt to create, like remembering how I reacted to my grandparents passing and how not crying made me worry if there's something wrong with me.

It isn't tears that measure how much you care or how significant a moment is, as I've been conditioned to see them as a weakness, even though there's often nobody to see them.

Instead I'm often deeply distressed at times, for reasons that remain elusive.

I'll feel distress thinking of nothing in particular. It's brief but intense, and all those feelings of it being out of my control and profoundly sad and unfair are so strong that I'll audibly gasp.

Yet nobody asks you questions about those times, as only tears are seemingly what matters, they make the difference; yet, they really don't occur as they should for me.

I'll try not to let it bother me, as much as I'll try not to get too distressed at those moments of despair that often come from nowhere.





I feel things deeply, but not always do I understand why I'm distraught. I do think it's often just a reflection of where I'm at, what I've not got or what I've lost or what's not come to be.

I don't see my life as innately sad, yet what I've had to experience at moments is profoundly distressing. I've improved at managing separation, which is what I experience most. It's not that there's nothing to cry about, it's more that there's no certainty about what and when I'll feel distressed, it remains unexpected.

I know that at times I'll feel discomfort and may even shed a tear, but it is not an arbiter of what's most important to me.

I'll always feel strongly about many things, but tears don't define that strength of feeling. They're more often just a sign of poor housekeeping and though distressing, it's not something I care about and feel that it's important. I've many reasons to cry, but not always do the two correlate and it doesn't even matter.

What matters is recognising the distress, and feeling I'm able to make any changes that alleviate those intense feelings.

I've many reasons to cry but not always does my body agree with my brain and that's okay, because I know that I feel things and care about important events.

The tears will do as they see fit, and I'll just worry about ensuring that I can find an identifiable reason for the often too frequent feelings of distress.

Brendan J



## **Resilience /rɪˈzɪljəns/**

**noun: resilience; noun: resiliency; plural noun: resiliencies**

- 1. the capacity to recover quickly from difficulties; toughness.**
- 2. the ability of a substance or object to spring back into shape; elasticity.**

I think many people who have struggled with addiction have developed a certain level of resilience. Whether we like it or not, it forms part of our coping mechanisms. Without it, goodness knows where we would be. I think I always had some level of resilience and today, reflecting on my ability to “bounce back,” it actually fills me with sorrow to think of the extreme levels of resilience I’ve had to demonstrate in order to get by in this world, which is often cruel and unfair to those of us who are the most vulnerable.

Part of the resilient nature is not to show this weaker side of ourselves, so many of us are considered to be “tough,” with some people even aspiring to appear that way. Adding to our tough exterior, like with tattoos or by wearing clothing that labels us in a certain way, we’re openly telling the world not to fuck with us. Just in a non-verbal way. None of us really want to get hurt anymore. Even when we feel like we’ve given up, there’s often a shred of hope inside keeping us going. Because deep down inside, we don’t want to have to bounce back yet again. We don’t want to recover from yet another hurt or loss.

That’s probably, or definitely, why some of us turned to drugs in the first place, as a way to cope while we appear to be resilient. We are only human after all. We all feel pain and hurt. We all mourn losses and grieve. Some of us have been dished out more than our fair share of these things, yet we are still here, living.

That’s what proves we are resilient, even if we don’t want to have to be that way. Hopefully the future won’t bring us more of the same things we had to learn to cope with, or “get over.” Hopefully the future will be filled with peace and love and comfort. No more need to be labelled as someone whose resilience gets them through. Because that won’t be the first thing we get complimented on - our resilience - as it has been for me. When we no longer need to appear as such resilient humans, maybe we’ll be on our way to recovery. Then maybe instead of just surviving we will find we’re actually, finally thriving.

Anon.





Bill Backhouse  
*postauctionsix* (top)  
*livi8nqinerquitwerlddd* (bottom)

## Things don't go your way

When you can't have your cake and eat it too,  
When everything goes wrong and you don't know what to do,  
When life's plan is interrupted by the man  
When all you want to do is kick and scream god damn,  
Count to ten and remember the bigger picture,  
You're only one soul in this world one creature,  
There's only so much you can control and a lot more you cannot,  
So be grateful for what you've got as what you've got is quite a lot,  
Be thankful that you're here spending your days as they come,  
Remember on this crazy ride to stop and have some fun,  
When nothing today,  
Is going your way,  
Remember today won't last,  
it will soon be the past,  
focus on tomorrow and make the most of it,  
focus on the future and never quit.

By Tyson Hill

*Handloved*, artwork by William Backhouse

## My Life

My life it started as normal as any other,  
With loving parents and an older brother,  
By the age of 3 I had most my teeth,  
And the age of four I had grown some more,  
As a young boy I was active and happy,  
With a big smile a strapping young Chappie,  
I grew into clothes and I grew out of shoes,  
A young teen with ambition what path would I  
choose,  
As I flew through my teens in my baggy blue jeans,  
I was destined for greatness or not, as it seems,  
As I was to be struck with an illness as I entered  
adulthood,  
A mental illness of the mind the result was not good,  
My confidence took a blow and the recovery was  
slow,  
My life may have changed but this is not for the  
worst,  
As I dive into my life and attack it head first,  
I will never forget the past but I will live for tomor-  
row,  
I will focus on the positive and not dwell in the sor-  
row.  
As tomorrow is a new day no one knows what it will  
hold,  
If its anything like today then it is pure gold.

By Tyson Hill

## A MOMENT IN TIME

with Russell Chilcott

“Thanks,” I said through the side window to the cabbie as he began reversing down my driveway. I was home. Hadn’t been home for over four months. Picking up my luggage I started the short walk to the back door already hearing the muffled barks of our three small dogs on the other side of it. I had just exited rehab which, unexpectedly, had been somewhat of a breeze for me after the initial shock.

My partner was at her job which we knew to be the case, otherwise the dogs would be at the back gate wagging at me. I let myself through, stepped around to the kitchen door and keyed it open. The dogs went ape! Mr Lucky, all black spaniel x pomeranian, father, was leaping up my legs. Sharna, pure white maltese terrorist, mother, was spinning round and round like a top. Pippa, all black ball of knots, baby, was up on her hinds hopping to and fro and all of them barking, squealing and yapping their own excitement. After the show was over they went to their beds lined against the far wall, still quivering and staring at me all big eyed.

I walked to the kitchen bench and gazed out the window into the big backyard. Nothing here has changed I thought. Everything looks exactly as if I was here yesterday. I can’t say what I thought might be different but it wasn’t this ... nothing. I just stood there at the sink gazing out as the mid-afternoon silence set in and a sameness that I’d not felt for seventeen weeks began to fill the room. How long I stood there I can’t say but I dared not move. If I did, I’d ‘saddle-up’ the dogs and walk us to the bottle shop because that’s what I do. My grip on the sinks edge got tighter. Everything began to freeze over. I finally summoned the strength to turn my head towards the dogs. They are all looking worriedly at me and Mr Lucky starts a slow nervous wag. I turn my head back to the window. My planned behaviour is under siege and profound dread overwhelms me as everything and nothing vie for my attention, short of a lobotomy that could quell the scream inside.

I need to move....and with much trepidation I slowly peel myself off the sink not knowing whether to laugh or cry. I eventually make a command decision and start for the hallway. As I pass the dogs, their heads in unison follow me like a sideshow-alley game.

“I’m having a shower, wait here!” and swinging into the bathroom I hear myself say “I wonder what I’m gonna do when the hot water runs out?”





Now! Who'd have thought a train wreck like that could amount to anything, let alone be here today. Which brings me to the second thing I want to talk about, remember "what got you here" "what here is". Well I recall standing in this building sometime ago. In fact, it was the 25th of February 2016. It was the Peer Effect Forum and I was presenting and banging on about how we as peer workers were still outside the circle of trust ... blahblahblah. Today I feel quite different about things and it's due to courageous folk like yourselves and the service providers that support us.

Peer work is personally taxing. It is as rewarding as it is wearying. I've known those to take on the vocation only to drop off. But today I see that while those who take a rest, get a job in another field or fade away, there are increasing numbers stepping up and readily picking up the load.

Service stakeholders and policy makers have, in the past, treated peer work as an anomaly, as a threat, a curio, even a fad. But now they themselves are seeing results or reports from clients, their family members, service staff and bottom-line costs, that this discipline has merit. We are in a gilded position today to help realise the acceptance and implementation of peer work into the mainstream.

Peer work comes with a real responsibility. Not just the obvious, but we would be amiss not to remember those who've gone before us and made our way. There are those in senior management and admin that have dedicated their careers to gaining a foothold in health services so they might give us a leg up. Such has in it the collective I'm proud and a fortunate member of - The Eastern Dual Diagnosis Consumer and Carer Group.

## Resilience in Numbers

Windana A.O.D workers  
True saints of St Kilda  
Angels to trouble-headed hipsters  
Spiritual guides disguised with wings.  
Souls of light bearing love  
Compassion flows throughout their blood  
Hearts possessed to heal a stranger  
These are the warriors who work at Windana.  
Most have battled their own personal demons  
And walked through the fire victorious in glory.  
Who are these souls sent from above?  
Why do they care if we use booze and drugs?  
They are the Windana workers  
A small band of soldiers  
Fighting a battle to give hope to the wounded  
With their presence comes resilience in numbers.  
All of us here grapple with addiction by the monkey's vice like grip.  
Locked in a delusional reality that most don't see  
We know it takes heart and bravery to walk through the doors of a Rehab alone  
And admit to another that we have a serious problem.  
Scared and anxious  
The vast unknown beyond the gates  
Havoc caressing your mind like an uninvited guest come to use.  
Gone is the past, left there back over your shoulder  
Where once we had wings as smooth as raven's claws before addiction set in.  
Now we have entered a brave new world  
Where before we could only dream about whilst passed out in a piss stench  
laneway alone.  
Some days in here we laugh like lunatics joyful on sobriety  
Other days we cry like babies wrapped in the arms of cotton wool infancy.  
The triggers will come and the cravings arise but what we learn here will keep us  
alive.  
It's the support of our peers that makes recovery easier  
Unity brings strength  
Resilience in Numbers

Duane Clarke



# Reducing the storm to a whisper



*Reducing the Storm to a Whisper* was chosen by the members of the Mt Evelyn Family and Friends Support Group, and supported by the Vista Program from the Shire of Yarra Ranges, as the title of our art exhibition and book of writing.

The project began to give a voice to family members who had a loved one whose life was impacted by the use of drugs. Our aim and hope was to reduce the storm we felt around us to a whisper by sharing our stories, and strengthening ourselves through mutual support and non-judgemental encouragement.

It was in the writing of Buddha I found this phrase: reducing the storm to a whisper

The support group achieved an amazing outcome. With the guidance of a very patient art teacher, Jeff Murphy, we learnt to paint, to express ourselves, and to laugh - a lot. Over time, our bonds grew stronger.

The support group was lent the wisdom and courage of Jenni Overend, a writer from the St/art project who guided us with our writing. The exhibition of our work was a huge success. We did reduce our storms to a whisper.

Sadly, many of the children - I call them children despite being adults - lost their battles. They became tired, overwhelmed or defeated.

Substance use takes many forms and tears at the heart of those using substances and those walking with them. As a group we grieved our losses together.

Overdose Awareness Day celebrates the lives of our loved ones we have lost over this journey. This day in August provides a voice to say my grief will no longer be silent. I bear no shame in how my son, daughter, child, friend, partner, parent died. The day allows grief and sadness, and love and laughter, and if we can cross the veils between earth and heaven, we can shout out we loved our loved ones.





SHARC, Family Drug & Gambling Help and APSU created a space for community members to “be”. This space has been protected by our reflection tree since 2012. The tree sheltered all who gathered, giving us a sacred space that joined our life with the life of the person we had lost.

A storm in Melbourne recently blew our reflection tree over, causing a sad situation with the tree needing to be assessed and removed.

What does this mean? Can we reflect in a way to open new discussions not only around our loss, but preventing future losses?

Our tree experienced trauma and the impact has been immense. The wisdom from the tree needs contemplation.

And we can reduce the storm to a whisper.

Marg Quon



# MEGAPHONES

In June 2021, APSU members were invited to get creative and submit an original artwork representing a megaphone that we could use for our promotional material. The megaphone is the symbol of APSU's core mission – to AMPLIFY the voices of people who have used and are impacted by alcohol and other drug services. Many thanks to all of those artistic and design-inclined people who sent in their work. Out of all the entries, three had great potential and were selected to appear on a forthcoming postcard and other promotional materials. Thanks to the three creators, Dixon Banks, Jo Freedman and Bree Wilson, whose megaphones are being reproduced here for the first time!

*Bree Wilson*



*Dixon Banks*

*Jo Freedman*



## APSU @ SHARC has a new CEO

Heather Pickard has stepped out of the role of CEO of SHARC after 15 years of steering the organisation with immense expertise, determination and heart. Clare Davies, the new CEO, will turn her lived experience and professional expertise to amplifying the voices and needs of service users and their families.

It's worth remembering that APSU morphed out of a small but ambitious SHARC project called "Involving Drug Users in Improving Drug Treatment Service Project". The aim of that project was to ensure that service users played an effective and culturally appropriate role in the alcohol and drug treatment service system. Thus APSU grew on the shoulders of those who believed that experts couldn't fix drug and alcohol related problems alone.

## Regina Brindle Foundation Grants

Two projects were awarded a Regina Brindle Foundation Grant (RBF) in 2022: first, for Multicultural Minds, a podcast founded and hosted by Emily Unity, which promotes the voices of people with lived experience of mental health issues (listen to the stories at [multiculturalminds.org](http://multiculturalminds.org)); and second, for the Maryborough & District Mental Health Carers Support Group to deliver Wellbeing and Wellness Workshops for carers of loved ones with mental illness living in the rural community.

In 2021 the RBF awarded a grant for a project called Homeless in Hotels, a radio series set to broadcast on 3CR Community Radio in July and August (go to [3cr.org.au](http://3cr.org.au) for more info). *Homeless in Hotels: health, services and peer voices in the COVID-19 pandemic* will be launched at a special event, alongside another peer-created production (See flyer pictured right).

Keep your eye out for the next round of grants from the Regina Brindle Foundation. Grants of up to \$5,000 are available for projects that promote the voices of people with lived experience of alcohol and other drug problems and mental health issues.

## Access to services report

APSU has published a new survey report about people's experiences accessing (or trying to access) alcohol and other drug treatment services in Victoria. The bad news is that there remains plenty to do in the provision of all types services, including support services for those on waiting lists. There remains a number of barriers to accessing services in a timely manner, with sufficient information, and free of stigma and discrimination. The good news is that people with lived experience of drug and alcohol treatment needs, and their families, have plenty of ideas about where and what kind of reform is needed. Many participants urged the expansion of peer support and in-community supports.

The full title of the survey report reads *Victorian Service Users' Experiences and Needs When Accessing AOD Treatment Services: Survey Report*. It can be viewed on the publications & resources page of the APSU website at <https://www.sharc.org.au/sharc-programs/apsu/publications-resources/>. Please send your thoughts, reflections and any feedback on the report to Louise at [lgoebel@sharc.org.au](mailto:lgoebel@sharc.org.au).



# APSU STAFF

## **Matthew Corbett - Manager, Lived Experience Workforce and Advocacy** [mcorbett@sharc.org.au](mailto:mcorbett@sharc.org.au)

After 5 years at SHARC, Matthew is a leader for both APSU & Peer Projects. His role brings the point of view of both services to reflect the continuum of lived and living experience, from engagement and collaboration with people using AOD services, to their work in professional roles.

Pivotal to Matthew's role in building the Lived & Living Experience Workforce in the AOD sector is working to have the voices of service users engaged and represented in the design and delivery of services. It calls for work that evolves the broader community's perspective of people who use AOD services. And fundamentally, it means actively listening to the voices of AOD service users and their families and loved ones.



## **Matt Riley - Project Lead / Reform Consultant and Department Liaison** [mriley@sharc.org.au](mailto:mriley@sharc.org.au)

Matt combines his lived experience and professional skills to advocate for the voices of AOD service users in reforms to Victoria's Alcohol and Other Drug & Mental Health Service System. Over 18 years, Matt worked on a range of projects in connection to AOD, mental health, gambling and dual diagnosis. In his role at APSU / SHARC Matt is embracing the wisdom of people's Lived / Living experiences for the vital contributions they make in shaping future directions of AOD service delivery. In particular, Matt is bringing the lived experience lens to the implementation of the recommendations of the Royal Commission into Victoria's Mental Health System.



## **Louise Goebel - Project Support Worker** [lgoebel@sharc.org.au](mailto:lgoebel@sharc.org.au)

Louise joined APSU in 2021 and is working in the AOD sector for the first time. Louise brings her lived experience qualifications and an eclectic range of professional skills from working as a researcher, writer, artworker, office worker, cleaner, gardener, library & archive assistant and in the hospitality sector. Putting together Flipside, member correspondence, report writing and general office duties are part of the contributions Louise makes to the work of APSU.



*and a special mention to ...*

**Amelia Berg - APSU Project Worker**  
aberg@sharc.org.au



Amelia Berg (right) with Dr Leanne Francia



Amelia and Mully

#### FUSE INITIATIVES – ‘Nothing About Us Without Us’

Fuse Initiatives (FI) is a partnership between APSU and Harm Reduction Victoria for support, training and leadership in the Harm Reduction Peer Workforce. FI’s core commitment is the meaningful involvement of people who use drugs. It aims to build a resilient Living Experience Workforce, and to help the sector better understand peer engagement as the key to quality services and optimal health and wellbeing outcomes for people who use drugs.

#### DECRIMINALISATION OF PUBLIC INTOXICATION

As a member of the “First Responders and Transport Working Group”, one of the working groups informing the forthcoming health-based response to public intoxication to replace the current police-based response, Amelia contributes the perspective of someone with lived and living experience. Police have long had the powers (especially under the Summary Offences Act 1966) to arrest and detain people who are intoxicated in public. These powers have been lethal for Aboriginal people. The Victorian Government has promised to roll out trial sobering-up centres in Melbourne, Shepparton and Castlemaine. It’s a real concern that reforms have stalled again, this time due to what the government calls Covid-related pressures on the health system.

Working as a peer researcher, Amelia’s co-presentation, with Dr Leanne Francia, at the 2022 Monash Addiction Research Centre Symposium, earned her “Best Early to Mid-Career Researcher Poster Award”. The award related to a poster called *Language Matters: the influence of language on treatment seeking for people experiencing AOD harms in hospital and primary care settings*, and a paper called “Transforming Practice: Meaningful collaborations with Lived Experience Peer Researchers in Alcohol and Other Drug Research”.

# We are seeking Expressions of Interest to

## **Do you want to contribute more to the important work APSU does to promote the voice of people who use alcohol and other drug services?**

APSU is seeking expressions of interest for the APSU Advisory Committee. The APSU Advisory Committee represents our members and contributes to the strategic and operational direction of APSU's work.

The Committee meets with the APSU team every two months, and plays an important role in informing APSU's consumer engagement activities.

Advisory Committee members are reimbursed for their time and expertise as APSU values the lived experience and insights consumers have to offer. Committee members have a wide range of experiences as services users and family members of people who use or have used AOD services.

## **If you are interested in joining the APSU Advisory Committee please contact Amelia at [aberg@sharc.org.au](mailto:aberg@sharc.org.au) to request a position description.**

**Please note - People from LGBTIQA+, CALD, Indigenous communities, or with disabilities, are encouraged to apply.**

### **PURPOSE OF THE APSU ADVISORY COMMITTEE**

The APSU Advisory Committee represents the interests of people who use, have used or are eligible to use alcohol and other drug services, personally or by family association and/or friendship in Victoria by

- Providing advice, guidance and knowledge to the APSU Team
- Participating in APSU activities as required
- Assisting the APSU Team to evaluate the effectiveness of the services
- Providing input to strategic planning
- Advocates for systemic change in the Victorian Drug Treatment Service system
- Takes an active part in engaging with the APSU Community

It also provides a forum that encourages members to:

- Identify and discuss current relevant issues
- Discuss new initiatives forums, ideas or activities
- Provide peer support
- Provide feedback on conferences, seminars and training
- Manage and share information
- Information / networking

# Join the APSU ADVISORY COMMITTEE

## APSU Advisory Committee Meeting Procedures

- APSU's Key Activities & Strategic Direction shall guide meetings
- Agenda items and discussion as determined by the purpose of the group
- Members are bound by confidentiality requirements and the SHARC Code of Conduct
- Meetings shall start and finish on time
- Apologies and agenda items to be directed to convenor

## APSU MISSION

Our mission is to ensure the voices, opinions and experience of consumers are heard, respected and integrated into service and policy development by:

- Training consumers to develop the skills they need to be involved in participation and other lived experience activities within the AOD sector
- Working with key stakeholders to increase consumer impact on relevant policy development and implementation at the local, state and national levels
- Building capacity within the AOD sector to support and promote consumer involvement in the design and delivery of services
- Advocating and creating opportunities for systemic change on behalf of AOD consumers to better meet their needs and improve their quality of life

## VALUES

APSU believes in the value of lived experience and giving consumers a voice. We believe that those who have lived experience should be heard and should be given opportunities to contribute to creating a better AOD system. This includes contributing to the development of our service. Underpinning this are the values of empowerment, inclusiveness and respect.

## APSU VISION

APSU's vision for the future is a supportive and inclusive democratic society where people impacted by drug dependency are treated with respect and dignity, free of stigma and discrimination, and where their needs, strengths and expertise inform and drive the Alcohol and Other Drug (AOD) service system, policy and research.

The Association of Participating Service Users (APSU) is the peak Victorian consumer body for people who use, have used, or are eligible to use alcohol and other drug (AOD) services, including family members and significant others impacted by AOD issues.

We believe that people who use AOD services have a wealth of knowledge and experience – their needs, strengths and expertise should drive the system.

Become an APSU member for free and receive:

- Flipside, our twice-yearly magazine by and for consumers
- Training to utilise your lived experience
- Opportunities for paid participation in research, policy- making and service design
- Invitations to forums and events
- Regular changes to contribute your voice to the debate as a paid podcast guest, magazine contributor and event speaker.
- Notice of relevant employment vacancies and policy developments.

Please join our community by scanning the QR code below or visiting [sharc.org.au/join-apsu](http://sharc.org.au/join-apsu).



[www.apsuonline.org.au](http://www.apsuonline.org.au)  
[apsu@sharc.org.au](mailto:apsu@sharc.org.au)  
Tel 03 9573 1776  
140 Grange Road Carnegie VIC 3163  
[www.facebook.com/APSUonline](https://www.facebook.com/APSUonline)