

Position Paper on Remuneration and Reimbursement of Consumers of Alcohol and Other Drug Services

Issued July 2013

Updated October 2017

Definitions and acronyms

AOD – Alcohol and Other Drug

Consumer – Any person who uses, has used or is eligible to use an AOD treatment service, as well as any person directly impacted by AOD treatment, and drug related laws and policies, including family members and significant others. Term “community member” can also be used.

About APSU

Association of Participating Service Users (APSU) is a Victorian consumer representative body of the Self Help Addiction Resource Centre (SHARC). APSU believes that people who use drug and alcohol services have a wealth of knowledge and experience, and that their needs should drive the service system.

APSU is a membership based non-government not-for-profit organisation. APSU members are AOD service users, family members or significant others, and service providers or AOD workers, as well as any person who supports APSU’s mission and values.

Consumer Participation

Human rights-based approach to health is at the heart of the World Health Organisation’s policies. Consumer participation is an essential element in the process of human rights-based approach to health:

“Participation and inclusion means that people are entitled to active, free and meaningful participation in decisions that directly affect them, such as the design, implementation and monitoring of health interventions. Participation increases ownership and helps ensure that policies and programmes are responsive to the needs of the people they are intended to benefit.” (WHO 2010)

Participation is also seen as a central factor in the concept of empowerment:

“Empowerment, in its most general sense, refers to the ability of people to gain understanding and control over personal, social, economic and political forces in order to take action to improve their life situations. In contrast to reactive approaches that derive from a treatment or illness mode, the concept of empowerment is positive and proactive.” (Israel et al. 1994)

AOD consumer remuneration background

Consumer participation is still underdeveloped in the Victorian AOD sector. However, while there are some good examples of embedded consumer participation, APSU has frequently encountered examples of improper remuneration of consumers, or total absence of remuneration or reimbursement. This is partially due to a lack of clarity around remuneration of consumers, and particularly to a lack of specific funding. However, such practice reinforces the sense of worthlessness and low esteem in consumers, and it reflects the attitude that drug users should be grateful for whatever they get.

Why consumers need to be remunerated and reimbursed

- When a person takes on the role of a participating consumer they have to invest their time and energy into the task, just like any other worker. Payment represents a statement of equality between an AOD consumer and any other person. It sends a message that the work done by consumers is valued and gives consumers a sense of worth.
- Consumer participation puts consumers in a vulnerable position. They need to reveal their drug addiction or the addiction of their family member / significant other, and expose themselves to a risk of stigma, still very much present in the society. Payment cannot remove such risk, but it stands as a gesture of appreciation.
- Consumers have to fit their participation tasks around the rest of their life and that often involves direct costs. Such costs range from travel to child care, depending on personal circumstances.

Position Statement

This position paper aims to assist AOD services and other organisations that engage AOD consumers in participation activities on casual basis. This paper does not cover engagement of consumer consultants or peer workers on contractual basis, as their remuneration is covered by national awards.

We recommend a budget be allocated to consumer remuneration in each AOD service. The budget needs to be decided based on the type and the amount of planned consumer participation activities, as per rates below.

Remuneration rates

The following rates are currently used by APSU to remunerate consumers for a range of participation activities. APSU suggests that, in absence of a specific organisational policy, the following rates be considered for consumer payments:

Activity	Rate
Printed publication of a story/article/poem (up to 1,000 words) or purposely made artwork	\$30 per piece
Printed publication of a not purposely made artwork	\$20 per piece
Meetings i.e. focus groups, advisory groups and committees, steering committees, board meetings, consultations, participation in interview panel, participation in research and other similar activities.	From \$25 per hour (where any time exceeding an hour is considered as an additional hour i.e. a 1.5 hours meeting would be paid as two hours)
Presentation to an audience at a conference, workshop, forum or a similar event – up to one hour.	\$100 - \$200 Any additional preparation time should be paid \$25 per hour.
Participation at a forum/conference panel	\$100 - \$150
Travel time when travelling outside of Melbourne	\$25 per hour

Reimbursement

Consumers need to be reimbursed for any out of pocket expenses associated with their participation activity. These usually include, but are not limited to the following:

- Travel expenses
- Parking
- Accommodation in case that consumer needs to spend one or more nights away from home
- Printing costs
- Childcare

Payment procedure

Consumers can be paid either by bank transfer or cash in hand. Payment modality can be decided between the organisation and the consumer. Amounts of \$75 or less do not require an invoice.

Payment with gift vouchers is not considered good practice, because it is mainly based on the assumption that AOD consumers will use money to buy drugs. Such attitude implies that AOD consumers should not have the same freedom of choice in spending their money as the rest of society, and it fundamentally indicates lack of trust in consumers, reinforcing stigma and inequality.

What participation activities should not be paid

Voluntary activities that are open to anyone and that do not require specific appointment do not require payment. Such activities include:

- Forums with an open invitation to public
- Open surveys
- Voluntary feedback i.e. suggestion boxes

For further information contact:

Association of Participating Service Users (APSU)

140 Grange Road, Carnegie 3163 VIC

T (03) 9573 1776

F (03) 9572 3498

e-mail: apsu@sharc.org.au

Bibliography and references

Brindle, R & Clarke, M 2010, *Straight from the source*, Association of Participating Service Users, available at <<http://www.apsuonline.org.au/publications-submissions-research/>>.

Davidson, P & Page, K 2012, "Research participation as work: comparing the perspectives of researchers and economically marginalized populations", *American Journal of Public Health*, Vol. 102, No. 7, pp. 1254-1259.

Health Issues Centre 2009, *Interim position statement: paying and reimbursing consumers, carers and community members to participate*, Health Issues Centre, available at <<http://www.healthissuescentre.org.au/documents/items/2008/06/211201-upload-00001.pdf>>.

Israel, B, Checkoway, B, Schulz, A & Zimmerman, M 1994, "Health education and community empowerment: conceptualizing and measuring perceptions of individual, organizational, and community control", *Health Education Quarterly*, Vol. 21(2), Summer 1994, pp. 149-170.

WHO 2010, *A human rights-based approach to health*, World Health Organisation - Department of Ethics, Equity, Trade and Human Rights, available at <http://www.ohchr.org/Documents/Issues/ESCR/Health/HRBA_HealthInformationSheet.pdf>.