

# UISCE Dublin, Ireland



## **"Our organization started as a result of a radical overhaul of the national drug strategy in 1997-98.**

This created the establishment of a 'Task Force' in areas most affected by drugs, and also in areas of relatively high social deprivation. The idea was to bring together representatives of the community (community leaders, often people centrally involved in anti-drugs street protests and borderline vigilantism, plus parents of drug users), including Statutory (Police, Government departments) and NGO sectors. We lobbied to have a seat for someone to represent drug users. Tommy Larkin was this person, and our organization grew from Tommy being given a budget to develop the role.

Currently we are two employees, a Coordinator (35 hours per week), and a Development Worker (20 hours per week). We have a management committee of four, which should really be larger. It used to include UISCE staff, but now just the coordinator, plus four others.

The kind of work we do is represent drug users on local forums with community groups and service providers. We have organised focus groups on particular issues to assist with external or our own research into for instance Hep C, crack use, Mephedrone use, and 'patient satisfaction'.

UISCE produces a newsletter 'Brass Munkie' with articles on current drug issues and health promotion as well as poetry and articles by drug users. We have spearheaded a network of similar groups in the Republic of Ireland, and have developed links with groups in Northern Ireland and internationally.



# Together with active local communities, family members and government



UISCE has received a lot of support from NGOs like Dublin AIDS Alliance and the local drugs task force. Our group is 100% financed by the Irish Health Service (HSE). We have received a lot of support from the HSE in their inviting us to participate in policy level committees, both nationally and locally. We have collaborated with community groups in the local area and with the FSN (Family Support Network- families, but in effect parents of drug users).

One of our successes was getting methadone treatment providers to stop reducing or suspending treatment as a means of social control, often unconnected to drug use at all. A key element in this lobbying was UISCE working in cooperation with community and family organizations. It was also our alliance with the Family Support Network that helped in identifying that these 'sanctions' affected not just the person in treatment, but also punished that person's family and community. Working towards a common goal helped address a lot of distrust that existed between our community and family members, many of whom were involved in what is still referred to as 'Anti-drug Activism' (i.e. street marchers and quasi-vigilantes). It was some time ago now and the situation has greatly improved in Dublin since those days."

## *“We’re people too”*

Views of drug users on health services

Report by Eirinn O’Keefe, Emily Rogers and Tom Redmond  
June 2006

The Mountjoy Street Family Practice    Union for Improved Services Communication & Education    The Participation and Practice of Rights Project

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