



FAMILY VIOLENCE AND MARAM

CHAIR: DEJAN JOTANOVIC, PROJECT OFFICER, FAMILY VIOLENCE REFORM

- 1. What We Heard: The Statewide Centre for Addiction and Mental Health Consultation Update
- 2. Achieving drug decriminalisation amidst change: lessons for Victoria from the ACT
- 3. Connecting state priorities to a national voice: Driving holistic responses through a national peak

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Jodie Allan, Thorne Harbour Health Vincent Silk, Thorne Harbour Health Max Castle, Thorne Harbour Health

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Supporting change: Thorne Harbour Health's LGBTIQ+ AOD intervention work with ClearSpace Family Violence program.

Max Castle (they/them) Program facilitator Clear Space Men's Behaviour Change Program Vincent Silk (he/him) Project Coordinator – Clear Space Men's Behaviour Change Program Jodie Allen (she/they), Dual Diagnosis Outreach Counsellor Lucy Burnett (she/her) AOD Program Coordinator





Wherever we are joining this training, we are on stolen land.

We are on Wurundjeri country and pay our respects to Wurundjeri Elders past and present.

We would also like to acknowledge and offer respect to any Aboriginal and

offer respect to any Aboriginal and Torres Strait Islander people joining us today and acknowledge ongoing impacts of colonisation.

Thorne Harbour Health AOD and Family Violence services



- Thorne Harbour Health Provides Victoria-wide Alcohol and Other Drug and Family Violence support for LGBTIQ+ people and people living with HIV and Hep C ages 18+.
- LGBTIQ+ affirmative treatment that comprehends the identities, lives, loves and relationships of queer community is key to addressing the particular drivers of both AOD use and use of violence in queer community.
- High volume of self-referrals from LGBTIQ+ community members, referrals from catchment based intake services across the state, and justice referrals for both FV and AOD teams.





ClearSpace

- 20 week Men's Behavior Change Program for gay, bisexual, trans and queer men who have used violence in relationships (past or current).
- Developed in response to the need for LGBTIQ+ specific Men's Behaviour Change Program.
- Runs online to facilitate access to participants living nationally.
- Funded as a pilot through No To Violence. This pilot enabled creativity, innovation and flexibility in service delivery for LGBTIQ+ community
- ClearSpace's goal was to model collaboration, non-coercive, respectful relationships and focused on creatively and relationally supporting and engaging people to move towards relationships without violence.

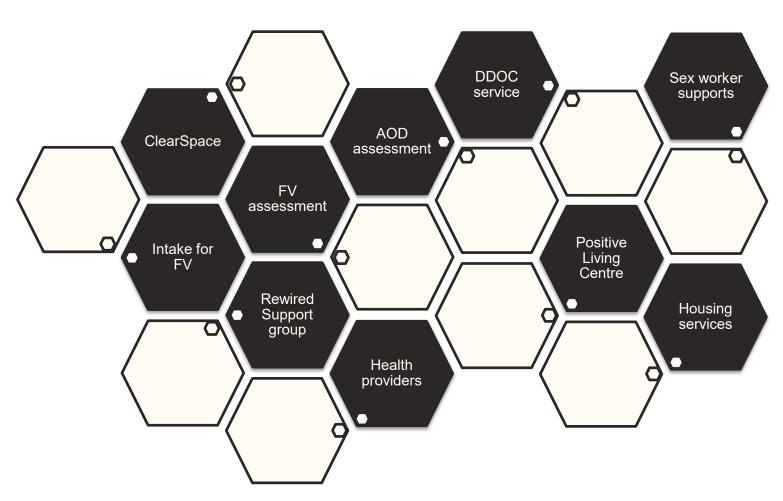


Dual Diagnosis Outreach Counselling (DDOC)

- Developed in response to the need for culturally sensitive counselling for LGBTQ+ people experiencing significant barriers to AOD treatment and services
- Therapeutic settings are negotiated and flexible
- Focus on LGBTIQ+ affirmative care, linkages with gender and identity affirming healthcare, AOD harm reduction, sexual health testing, and working to reduce acute mental health presentations.
- Referrals to other appropriate services -exploring a step-up step down model of care.
- Funded as part of the Rainbow Recovery suite of AOD programs at Thorne Harbour Health through the North Western Melbourne Primary Health Network.







Drivers of Violence and AOD use among LGBTIQ+ people

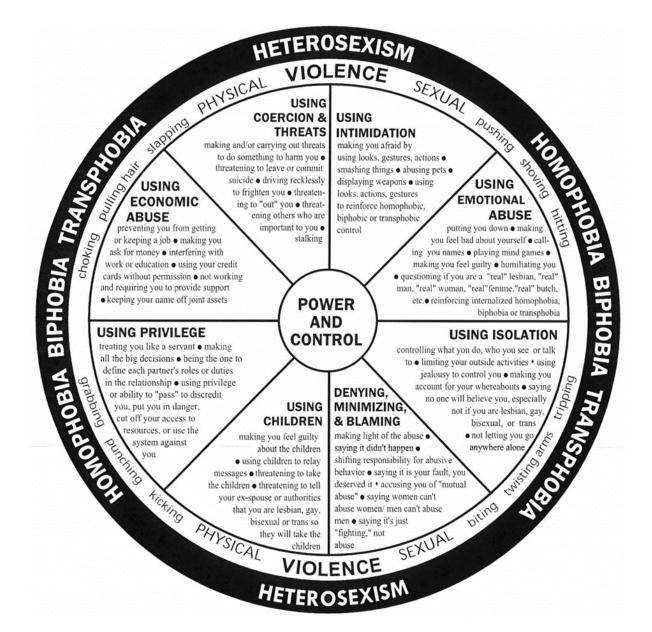


Driver of use of Violence:

- Attitudes and beliefs (patriarchy, queerphobia)
- Cultural understandings and assumptions and experiences of hierarchy, power, control and male domination
- Internalized cis and heteronormative messaging about gender roles
- Internalized homophobia, transphobia, biphobia, queerphobia
- Internalized misogyny

Drivers of AOD use:

- Minority stress
- Cultural norms
- Managing distressing emotions
- Pleasure/Sensation
- Particular cultural contexts (ie, gay bars, party scene, chemsex)





Collaborative Outcomes



- Deeper Understandings of how violence operates in relationships for people engaged with both AOD and ClearSpace services.
- FV workers supported more nuanced learning around how power and control operated in relationships in ways that impacted on substance use patterns.
- Reparative relationship modelling through therapeutic relationships
- Outreach based work enabled material needs of participants were met
- Increased social connection

Amplified Change Process



- Harm reduction as both immediate and gradual change
- Access to AOD and FV supports enabled clients to explore other support needs around physical, mental and sexual health and housing.
- Engaging both FV and AOD supports simultaneously addressed and mitigated risk across multiple domains simultaneously (safer sex practices in chemsex contexts, mental health strategies, reduced barriers to housing stability).
- Clients self identified recognising engagement in ClearSpace as a protective and therapeutic rather than punitive support.

What worked



- LGBTIQ+ affirmative service provided a safe environment for people to meaningfully discuss what was happening in their relationships in a context where relationships and identities were understood and respected.
- Collaboration All workers were able to share responsibility for AOD and FV risk
- A shared understanding across AOD and FV teams of LGBTIQ+ drivers of violence and pathways to change
- Longer-term service enabled deeper understandings of power in relationships while safe and consistent relationships were modelled in service provision
- Assertive outreach supported clients to do the difficult work of addressing
- DDOC gained deeper understanding of LGBTIQ+ FV nuances further embedded into AOD practice.
- ClearSpace work made more accessible for participants by AOD support

What could improve service outcomes for LGBTIQ+ people with concurrent AOD and FV use?



- LGBTIQ+ practice embedded in mainstream services
- Longer term, relational interventions for people using violence which locate accountability within culturally specific conversations
- More nuanced assessment of use of violence in queer relationships and by queer people
- More research into LGBTIQ+ people who use violence to better understand underlying drivers.
- Deeper embedding of AOD support in family violence services



All referrals via our Intake team: 9865 6700

Clients can self-refer
Our intake and assessment staff can provide a culturally appropriate intake / assessment if not already provided by the referring MH/AOD services

Secondary consults
Please call the intake number above specifying whether you require AOD / FV / general consult

Eligibility criteria:
16+
Victorian based
LGBTIQ+ identifying or HIV+



Resources

- Pride in Prevention:
 https://www.latrobe.edu.au/__data/assets/pdf_file/0003/1141833/Pride-in-Prevention-Evidence-Guide.pdf
- Private Lives III: https://www.latrobe.edu.au/__data/assets/pdf_file/0009/1185885/Private-Lives-3.pdf
- The Creative Interventions Toolkit: https://www.creative-interventions.org/toolkit/
- The North West Melbourne Primary Health Network Network: https://www.nwnetwork.org/

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