



## Can I ask...?

An alcohol and drug clinician's guide to  
addressing family and domestic violence

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# Can I ask...?

## An alcohol and other drug clinician's guide to addressing family and domestic violence

### CHILD AWARE APPROACHES CONFERENCE

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- ❖ Collaboration between National Centre for Education and Training on Addictions (NCETA) & Odyssey House Victoria
- ❖ Developed with funding from (FaHCSIA) under Child Aware Approaches
- ❖ Advisory Group / Other Contributors
  - Virginia Geddes (Domestic Violence Resource Centre, Victoria)
  - Brad Pearce (VAADA)
  - Alison Macdonald (DV Vic)
  - Prof Cathy Humphreys & Menka Tsantefski (University of Melbourne)
  - Gayle Correnti & Shannon Keebaugh (Berry Street Victoria)
  - Rodney Vlasis (No To Violence and Men's Referral Service)
  - The Australian Domestic and Family Violence Clearing House
  - Eric Allan (Odyssey House Victoria).



- ❖ A new resource – designed for the AOD sector
- ❖ Explores the relationship between Alcohol and Other Drugs (AOD) and Family and Domestic Violence (FDV)
- ❖ Identifies how the AOD sector can better support its clients, address family violence, and minimise harm to children





- ❖ Need for a comprehensive approach to addressing family and domestic violence (FDV) across the broader welfare system
- ❖ Reflected in National Policies and by some in the AOD sector
- ❖ Evidence suggests many AOD clients have a history of intimate partner violence & child abuse
- ❖ Impact of FDV and AOD on children well documented
- ❖ Current practice suggests FDV is rarely addressed in the AOD sector



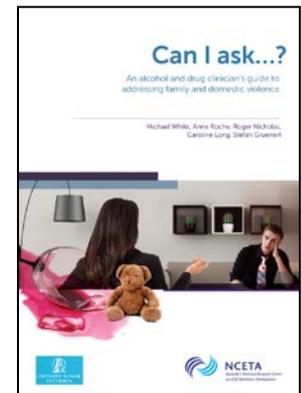


- ❖ The AOD sector has been well aware of the association between FDV and AOD
- ❖ Staff & organisations not confident to address FDV – both those who **experience** and those who **use** violence
- ❖ Growing awareness that FDV:
  - ❖ is a major cause of preventable harm to women and children
  - ❖ may impede treatment progress with AOD issues
- ❖ Addressing FDV is also part of broader goal for AOD services to be more child and family sensitive, and to contribute to the wellbeing of clients' children





- ❖ Literature Review – published separately by NCETA – “Breaking the Silence”
- ❖ This Resource -
  - ❖ initial reference document
  - ❖ for use in training and development
  - ❖ assists **Workers** and **Organisations** to consider how to address practice, policy and procedures in relation to FDV





- ❖ **Part A** - brief introduction to the relationship between AOD and FDV. More detail in the literature review
  - ❖ Breaking the Silence (Nicholas, White, Roche, Gruenert, & Lee, 2012)
- ❖ **Part B** – practical information to support AOD workers to ask about and respond to FDV
- ❖ **Part C** - policy and organisational responses.



- ❖ **Part D** - further information, context and key issues for specific client groups
- ❖ **Appendices**
  - ❖ safety checklist
  - ❖ tools
  - ❖ draft referral form
  - ❖ template for mapping local FDV services
  - ❖ links to further information and resources
- ❖ **CD-ROM** – active hyperlinks, literature review, other related resources



- ❖ Literature Review
- ❖ Key Informants / Steering Group
- ❖ Focus groups with
  - ❖ people who have experienced and used family and domestic violence (Men and Women – clients of Odyssey House Victoria)
  - ❖ AOD staff
- ❖ Feedback on drafts sought from:
  - ❖ AOD staff
  - ❖ FDV staff
  - ❖ Peak bodies and researchers



- ❖ Keeping it brief
- ❖ Sensitively outlining various manifestations of FDV and how AOD staff might respond
- ❖ Client choice
- ❖ The relationship between AOD and FDV:
  - ❖ causality issues not universally accepted
  - ❖ practice frameworks, 'world views'



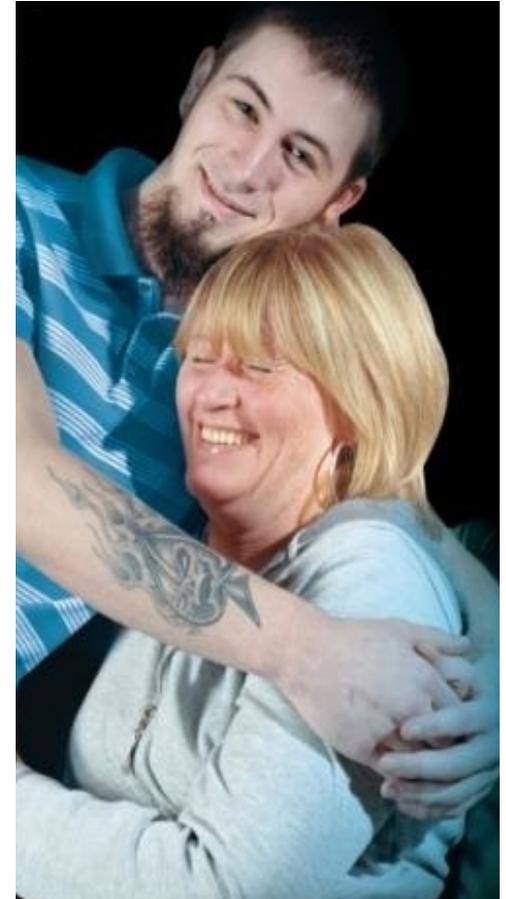


- ❖ Implementing screening for all female clients
  - ❖ Research suggests 40-80% of female AOD clients have experienced intimate partner violence
- ❖ Screening all male clients?
  - ❖ 65% of AOD clients are men. Uncertain proportion who have used or experienced violence
  - ❖ Opportunity for intervention to identify and addressing violence used by men in their relationships
  - ❖ What expertise is required to avoid collusion, jeopardising safety?
- ❖ Asking about children?



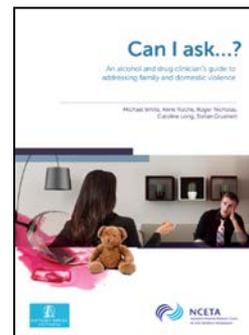


- ❖ Meeting with each program to determine appropriate level of response and training needs
- ❖ Overview of the resource at a staff retreat
- ❖ Identifying more skilled staff
- ❖ Reviewing our policies and assessments
- ❖ Training opportunities in-house & external





- ❖ FDV responsible for more ill-health and premature death in Victorian women under 45 years than any other preventable risk factor
- ❖ Addressing FDV and impact on children contributes to further preventable AOD and mental health issues.
- ❖ Culture change required across service system
- ❖ “Can I Ask?” is a good starting point for AOD services
  - ❖ evidence, resources and an organisational big picture approach
  - ❖ well received to date
  - ❖ planned dissemination utilising AOD peaks, conferences, mail outs





**Thanks**