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Improving responses to trauma and alcohol and other drug-related problems: Results from a national stakeholder consultation

Australian Research Centre in Sex, Health and Society,

La Trobe University

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Acknowledgement of Country

I acknowledge Traditional Owners, the Ngunnawal people and their ongoing ownership of, and connection to lands, waters and culture. I pay my respect to elders past and present.

I acknowledge that sovereignty of these lands was never ceded.



This presentation

Part 1

- Brief overview of trauma-informed approaches/principles in AOD settings

Part 2

- Findings from recent stakeholder consultation on trauma and alcohol and other drug (AOD)-related problems in Australia
- Conclusions and future research

Trauma-informed care

Core principles:

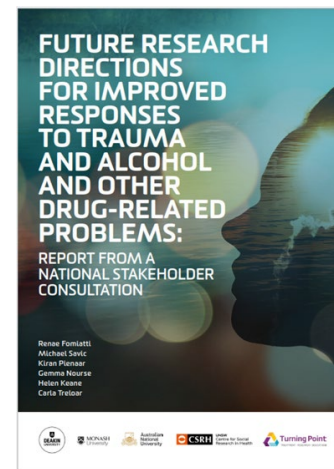
1. Safety
2. Trustworthiness
3. Collaboration
4. Empowerment and
5. Choice (Harris and Fallot, 2006)
6. Cultural safety, and the inclusion of peer support (Brown, 2021).

Trauma-informed approaches recognise:

- Trauma and addiction are co-occurring disorders
- Traumatisation can be related to service usage, including both the physical design as well as asking a person to repeat their traumatic experiences

National stakeholder consultation

- Consultation undertaken in 2023 explored
 - Key issues for research on trauma and AOD use
 - Gaps in knowledge about trauma and AOD-related problems
 - Compatibility of research on trauma and policy and practice in Australia
 - Opportunities to improve trauma-informed AOD treatment
- Semi-structured interviews were conducted with 15 key stakeholders
 - Researchers (n = 4)
 - Policymakers (n = 4)
 - Service providers (n = 6)
 - Peer and user group representatives (n = 2)



Conflating AOD consumption and mental health

‘We want women to get off all this stuff, but they have this trauma history [...] Even though we still practise from this harm minimisation perspective, I just think we’re asking a lot of people who perhaps use [...] AODs] to help manage [and] regulate their emotions, their trauma [...] but we kind of leave them raw with nothing [when we ask them to abstain]’. (S09, Service provision)

‘Not every client does say or think they’re self-medicating, they’re like, ‘No, my drug use has nothing to do with my trauma’ [...] in which case going down some of our intervention routes that are highly based on that assumption [won’t] quite fit for that person’ (S15, Research)

Structural and systemic concerns

‘So there’s all sorts of challenges with women being able to report [... ‘experiences of violence or threats’], and the net result not being that they’re referred to a Child Protection Agency. Their substance use is harder to address because they’re worried about losing custody of the baby they’re about to have. That’s a real tension.’ (S04, Research)

‘I think there’s always a juggle, particularly if you’re working with forensic clients [... because] of goals set by external stakeholders, like the courts. Working with trauma and recognising that this sort of ‘stage of change’ [...] in a mandated [setting], may not correspond to the moment that people are receiving treatment or there may not be enough stability in people’s lives to actually address the underlying trauma.’

‘For a state funded service, we’re looking at six to twelve sessions of counselling or up to 15 hours of case management, with some capacity to re-episode people, but with waitlists what they are and funding what it is, [delivering trauma-informed care] is a real challenge.’ (S14, Service provision)

Conclusions

- Numerous structural impediments to trauma-informed care in AOD settings
- The diverse needs and experiences of people who consume drugs, to ensure interventions meaningfully attend to experiences of trauma, for example among LGBTIQ+, First nations and women require further understanding
- What constitutes high quality trauma-informed approaches and brief interventions in the range of AOD settings?
- How can and *do* trauma-informed approaches address stigma?
- What are the training and education needs for AOD workers?

Understanding the role of trauma in alcohol and other drug-related problems to improve policy and services

1. How the relationship between trauma and AOD-related problems are currently understood and addressed in Australian policy and professional resources (mapping national/state strategies, policies and guidelines)
2. Consumers' diverse experiences of trauma and AOD-related problems, with a focus on how gender, sexuality, social relationships and professional supports shape this relationship (Interviews with 60 consumers)
3. The support needs and preferences of consumers for responding to trauma and AOD-related problems (Interviews with 60 consumers)
4. The experiences of relevant health professionals, including their views on innovative social policy and trauma-informed AOD care (Interviews 20 health professionals)
5. Differences between consumers' experiences of and preferences for AOD support and care, and health professional perspectives

Acknowledgements

Understanding the role of trauma in alcohol and other drug-related problems

Project Lead

- Dr Renae Fomiatti: Australian Research Centre in Sex, Health and Society (ARCSHS), La Trobe University, Victoria

Chief investigators

- Dr Kiran Pienaar: Deakin University
- Dr Michael Savic: Turning Point, Monash University
- Professor Carla Treloar: Centre for Social Research in Health, UNSW
- Professor Helen Keane: Australian National University

Research staff

- Dr Gemma Nourse, ARCSHS
- Ms Emily Lenton, ARCSHS

More information

<https://www.latrobe.edu.au/arcsHS/work/understanding-trauma-in-aod-related-problems>

Expert Advisory Panel

- Chris Gough: CEO, Canberra Alliance for Harm Minimisation and Advocacy
- Craig Holloway: Manager, Victorian Aboriginal Health Service (VAHS)
- Jess Doumany: Research lead, AIVL
- Suzie Hudson: Clinical Advisor, Centre for Alcohol and Other Drugs, NSW Ministry of Health
- Nicole Sadler: CEO, Phoenix Australia, Centre for Posttraumatic Mental Health
- Chris Christoforou: CEO, Victorian Alcohol and Drug Foundation (VAADA)
- Jo Driscoll: Manager, AOD System Planning, Victorian Department of Health
- Jack Freestone: Senior Researcher, UNSW
- Jami Jones: Program Lead, Rainbow Health Australia
- Adrian Dunlop: Area Director, MHDAO, NSW Health

Participants (Consultation)

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Ethics

Approval from La Trobe Human
Research Ethics (HEC24222)

Recruiting now



Have you ever used alcohol or other drugs in relation to trauma symptoms or a difficult experience?

If so, we would like to talk to you for a study

What does it involve?

The study is open to anyone aged 18 and over who lives in Vic, NSW or the ACT. Participation involves a confidential audio-recorded interview of about 60 minutes. The interviews will be conducted online, in person or on the telephone at a time convenient to you.

You will be reimbursed with a \$60 gift card for your time.

Follow this link to register your interest or
 email: g.nourse@latrobe.edu.au





Thank you

Website: latrobe.edu.au/arcshts

Twitter: @LTU_Sex_Health