

# Primary Care Pathways to Safety: Recognising and Responding to Family Violence in LGBTIQ+ Populations

12 June 2025



- HealthPathways
- Melbourne
- Medical
  - Assault or Abuse
  - Family Violence
  - Disclosure of Family Violence
  - Family Violence Referral and Community Support
  - Crisis services
  - Secondary consultation service
  - After hours services
  - Victim-survivor support services
  - Intervention and support for people who use violence
  - Prevention and dispute resolution services
  - Legal and financial services
  - People Who Use Family Violence
  - Physical Assault and Injury Recording
  - Allocate Injury Type
  - Strangulation (Choking)
  - Sexual Assault or Abuse
  - Adult Recent Sexual Assault
  - Previously Undisclosed Sexual Assault
  - Sexual Assault Counselling and Support



## Melbourne HEALTHPATHWAYS

### Latest News

- 3 March
  - Health.vic
  - Health alerts and advisories
- 4 March
  - Japanese encephalitis (JE) in Victoria
 

A second confirmed case of Japanese JE has been identified in a resident of northern Victoria. Clinicians should test for JE virus in patients with compatible illness and notify the Department of Health immediately of suspected cases. [Read more...](#)
- 27 February
  - Local outbreak of measles in Victoria
 

An outbreak of measles has been identified in Victoria, after two new cases were reported who likely acquired their infection in Melbourne. These cases have had no history of overseas travel or known contact with other cases of measles. [Read more...](#)
- 24 February
  - Parental mask size restrictions are now in effect

### Pathway Updates

- Updated – 11 March
  - Febrile Seizures in Children
- Updated – 10 March
  - Immunisation - Adults
- Updated – 10 March
  - Myocarditis and Pericarditis After COVID-19 Vaccines
- Updated – 10 March
  - Mpox
- Updated – 4 March
  - Herpes Zoster Ophthalmicus
- [VIEW MORE UPDATES...](#)

- ABOUT HEALTHPATHWAYS
- BETTER HEALTH
- RACGP
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- MBS ONLINE
- NPS MEDICINEWISE
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- NHSD

Click 'Send Feedback' to add comments and questions about this pathway.

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### About HealthPathways

# Family Violence in LGBTIQ+ Populations

family violence

Home / ... / Family Violence / Disclosure of Family Violence

**Disclosure of Family Violence**

This pathway is about family violence affecting people of all genders inclusive of the LGBTIQ+ community, parents, and siblings. See also:

- Child or Family Information Sharing Scheme
- People Who Use Family Violence
- Sexual Assault or Abuse

Red flags

- Victim-survivor is concerned for their immediate safety and afraid to go home
- Suspected child abuse or neglect

**Background**

About family violence

**Assessment**

Practice point

**Take care discussing family violence**

Do not discuss, or ask about, family violence in the presence of a possible person who uses violence, other family members, or children who can understand the conversation. Do not use family members or friends as an interpreter if one is required, and consider if a specific gender is appropriate for the patient.

- Be aware the family violence and abuse is not just physical. It includes:
  - Coercion and controlling behaviours e.g.,:
    - Close monitoring and control
    - Intimidation and harassment
  - Emotional abuse including:
    - gaslighting (questioning the victim's feelings, recollections, and instincts)
    - erosion of a person's self-esteem through criticism or sabotage
  - Systematic isolation from social supports
  - Explicit or implied threats of violence towards the person or dependents
  - Neglect

## Disclosure of Family Violence

### Management

- If victim-survivor or children are in immediate danger, call 000 for police support and 1800-015-188 for [safe steps](#) family violence and support service.
- If suspected child abuse or neglect, report to [Victorian Child Protection Service](#).
- Create a trustworthy and safe environment for the victim-survivor, and practice [trauma-informed care](#). Use the [LIVES framework](#) in supporting victim-survivor disclosing experience of family violence.
- Discuss safety and a [safety plan](#) each consultation, according to risk:
  - High risk of immediate violence
  - Less risk of immediate violence
  - If technology abuse is occurring, online safety planning can help victim-survivors to stay connected through technology while reducing the risks associated with technology abuse.
  - If the person who uses violence does not have access to the person's smartphone, account details or messages, these apps may be of assistance:
    - 1800RESPECT – [Daisy App](#)
    - [Ask Izzy](#) – Free on Telstra mobile network
 Consider reporting image abuse to the eSafety Commissioner.
- Consider the needs of diverse communities or groups that experience domestic violence:
  - Parents and siblings
  - Elder abuse
  - LGBTIQ+ people

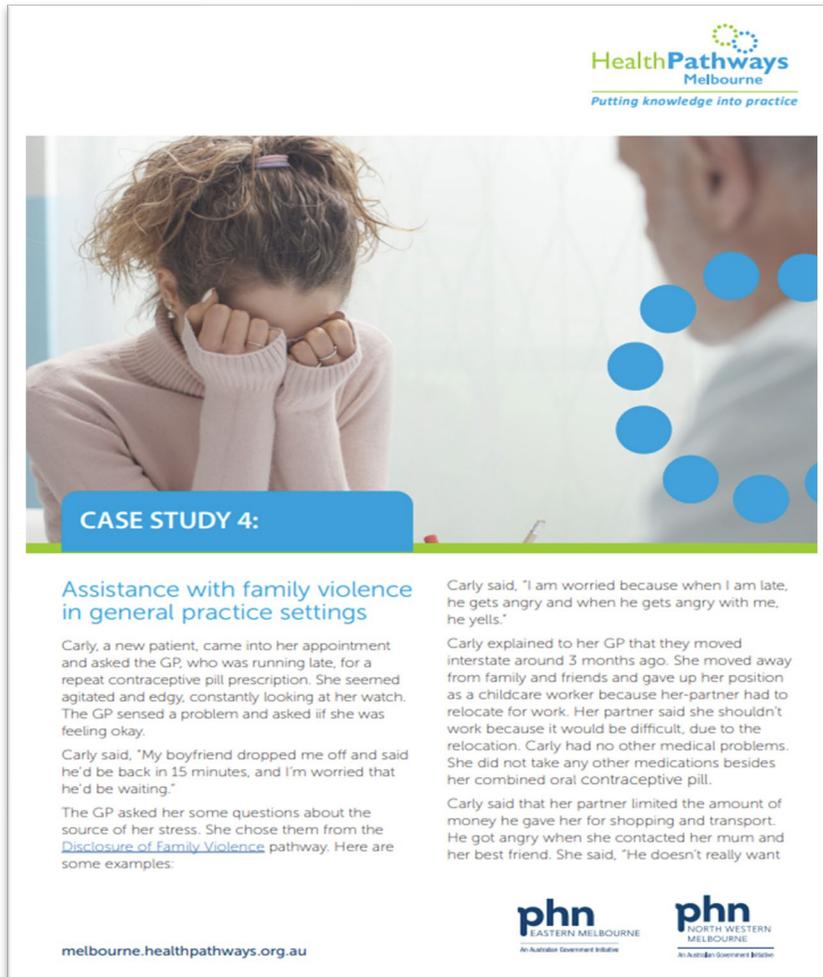
#### LGBTIQ+ people

- Abuse can be unique:
  - Threats to "out" a person's sexuality, HIV status etc.
  - Pressure to conform to gender and to sex, withholding medications (hormones, antiretrovirals), isolation
- Challenges to accessing care:
  - Abuse is trivialised e.g., woman can't abuse women, men can defend themselves
  - Fear of discrimination from police and healthcare providers
  - Shame and stigma about both LGBTIQ+ status and abuse
- Offer specialised services:
  - [Say It Out Loud](#) – relationships and domestic violence for LGBTI communities
  - [Thorne Harbour](#) – LGBTIQ+ relationship and family violence counselling
  - [Rainbow Door](#) (intake point for LGBTIQ+ Family Violence services)
  - Relationships Australia Victoria 1300-364-277
  - LGBTI Gay and Lesbian Liaison Police Officers (03) 9247-6944
  - [Queerspace](#)
  - [Transgender Victoria](#)
  - [Undercurrent Victoria](#) – resources around referrals to support anti-violence and respectful relationships

- Aboriginal and Torres Strait Islander people

# HealthPathways Case Study- Family Violence

Access the case study- [Family violence in general practice settings](#)



**HealthPathways Melbourne**  
Putting knowledge into practice

**CASE STUDY 4:**  
**Assistance with family violence in general practice settings**

Carly, a new patient, came into her appointment and asked the GP, who was running late, for a repeat contraceptive pill prescription. She seemed agitated and edgy, constantly looking at her watch. The GP sensed a problem and asked if she was feeling okay.

Carly said, "My boyfriend dropped me off and said he'd be back in 15 minutes, and I'm worried that he'd be waiting."

The GP asked her some questions about the source of her stress. She chose them from the [Disclosure of Family Violence](#) pathway. Here are some examples.

Carly said, "I am worried because when I am late, he gets angry and when he gets angry with me, he yells."

Carly explained to her GP that they moved interstate around 3 months ago. She moved away from family and friends and gave up her position as a childcare worker because her-partner had to relocate for work. Her partner said she shouldn't work because it would be difficult, due to the relocation. Carly had no other medical problems. She did not take any other medications besides her combined oral contraceptive pill.

Carly said that her partner limited the amount of money he gave her for shopping and transport. He got angry when she contacted her mum and her best friend. She said, "He doesn't really want

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# HealthPathways – Relevant and Related Pathways

## Relevant Pathways

[Family Violence](#)

[Physical Assault and Injury Recording](#)

[Sexual Assault or Abuse](#)

[Child Abuse and Neglect](#)

[Disclosure of Family Violence](#)

[Elder Abuse and Neglect](#)

[People Who Use Family Violence](#)

[Reporting to Child Protection](#)

[Sexual Abuse of a Child or Young Person](#)

[Adult Recent Sexual Assault](#)

[Previously Undisclosed Sexual Assault](#)

[CPD Hours for HealthPathways Use](#)

## Referral Pathways

[Family Violence Referral and Community Support](#)

[Assault or Abuse clinical pathways](#)

[Adult Mental Health Service Referrals](#)

[Child and Youth Mental Health Referrals](#)

[Sexual Assault Counselling and Support](#)

[Housing Support](#)

## Related Pathways

[Carer Support - Mental Health](#)

[Child or Family Information Sharing Scheme](#)

[E-Mental Health Services](#)

[GP Mental Health Treatment Plan](#)

[Housing Support](#)

[Legal and Ethical](#)

[LGBTIQA+ Mental Health](#)

[Mental Health Community Support Services](#)

- Melbourne
- Medical
- Mental Health
- Older Adults' Health
- Medicines Information and Resources
- Public Health
- Specific Populations
- Surgical
- Women's Health
- Our Health System
- Carer Resources and Support Services
- Community Health Services
- CPD Hours for HealthPathways Use
- MyMedicare
- Department of Veterans' Affairs
- Digital Health
- Forms and Resources
- Hospitals - Public
- MBS Items

## CPD Hours for HealthPathways Use

### About Continuing Professional Development (CPD)

The aim of the continuing professional development (CPD) requirements of the [Medical Board of Australia](#) is to support quality, lifelong learning for doctors that is relevant, effective, and evidence-based.

The 3 core elements of CPD are:

1. [CPD homes](#) – for quality assurance
2. [Professional development plans](#) – for purpose
3. [Different types of CPD](#) – for value

### Using HealthPathways for CPD

HealthPathways is a source of contemporary and practical clinical information, localised to the geographical region of the medical practitioner. Application of knowledge contained within pathways to the individual patient provides an opportunity for reflection upon current understanding of the patient's clinical condition, and how it may be improved. This reflective learning can be self-reported as a CPD activity.

- Clinicians with an [individual HealthPathways account](#) can access a [CPD Reporting](#) tool to help log their HealthPathways CPD activity.
- Clinicians without an individual HealthPathways account can still self-report time spent in HealthPathways as a reflective activity. To help reporting, reflective learning templates have been developed for both colleges:
  - [ACRRM](#)
  - [RACGP](#)

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#### ABOUT THIS PAGE

- Page information
- Topic ID: 1348642

#### CPD REPORTING

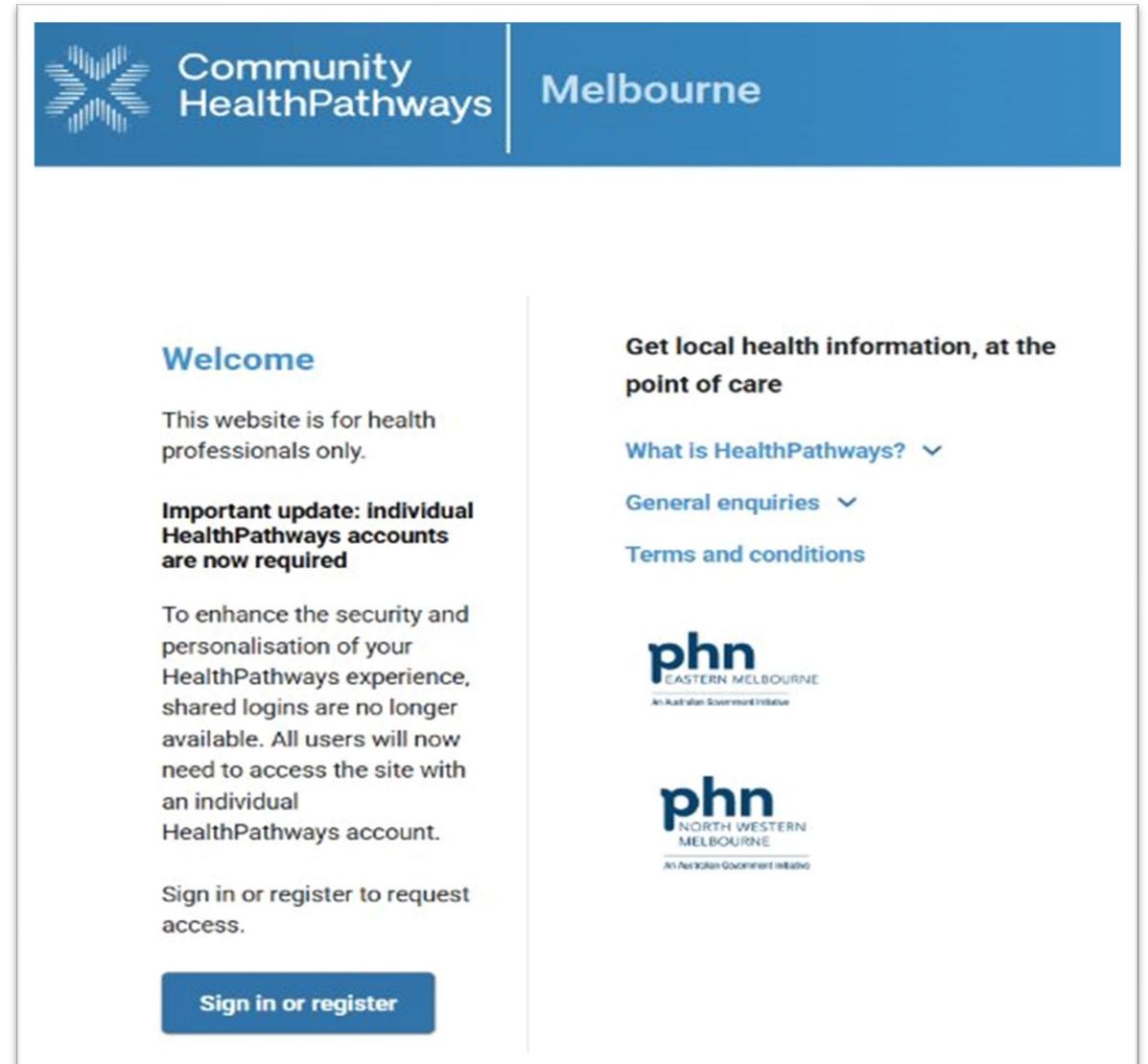
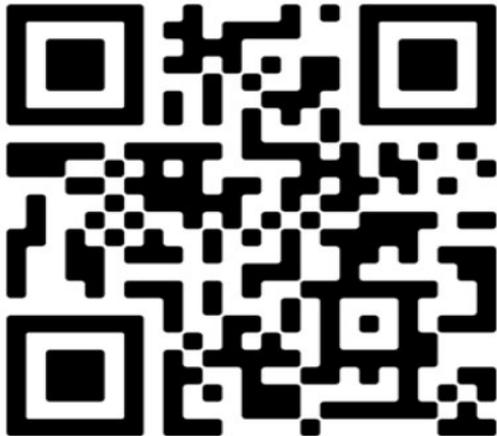
- Add learning notes
- [Create a CPD report](#)



# Accessing HealthPathways

Please click on the **Sign in or register** button to create your individual account or scan the QR code below.

If you have any questions, please email the team [info@healthpathwaysmelbourne.org.au](mailto:info@healthpathwaysmelbourne.org.au)



The screenshot shows the top navigation bar with the HealthPathways logo and 'Melbourne'. The main content area is split into two columns. The left column has a 'Welcome' section with a message for health professionals, an 'Important update' about individual accounts, and a 'Sign in or register' button. The right column has a 'Get local health information' section with links for 'What is HealthPathways?', 'General enquiries', and 'Terms and conditions'. At the bottom of the right column are logos for 'phn EASTERN MELBOURNE' and 'phn NORTH WESTERN MELBOURNE'.

Community HealthPathways | Melbourne

## Welcome

This website is for health professionals only.

**Important update: individual HealthPathways accounts are now required**

To enhance the security and personalisation of your HealthPathways experience, shared logins are no longer available. All users will now need to access the site with an individual HealthPathways account.

Sign in or register to request access.

[Sign in or register](#)

## Get local health information, at the point of care

[What is HealthPathways?](#) ▾

[General enquiries](#) ▾

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**THANK YOU!**

A 3D rendered white figure, resembling a stylized person or character, stands between the words 'THANK' and 'YOU!' in large, bold, blue, sans-serif capital letters. The figure has its arms slightly outstretched and is positioned as if it is presenting or supporting the text. The entire scene is set against a plain white background.