# 

# A PEER BASED, HARM REDUCTION SERVICE AT MUSIC FESTIVALS TO AVOID ESCALATING INCIDENTS

# **HISTORY**

DanceWize is a specialised alcohol and other drug (AOD) outreach service and it is a unique program in Australia, which started as a Victorian grassroots initiative to promote harm reduction messages within the dance music community in 1995. DanceWize has been a program of Harm Reduction Victoria since 1999 and 'HRVic' is a Victorian Department of Health and Human Services (DHHS)funded health promotion charity. DanceWize NSW began in 2017 and is administered by HRVic's sister-org: NUAA. In 2016 HRVic's DanceWize won the Minister of Health's award for Outstanding Achievement by Volunteers Supporting Diversity.



HRVic Chief Executive Officer

FUNDING: Event Organisers, cost recovery



**PROGRAM MODEL** 

DanceWize Key Peer Educators and carers (KPEs) deliver services, that is, 'welfare', 'peer support', 'peer education', 'harm reduction', 'wellbeing', 'community-based' services at music events and festivals. KPEs host a 'chill out space', which is usually next to the on-site health provider. Ambulance Victoria authorise an event's health emergency management plan (HEMP), as per the state health emergency response plan (SHERP), and DanceWize is a stakeholder in the plan and part of the emergency management team (EMT). DanceWize services include:

## **CARE INTERVENTIONS**

Inside the chill space intoxicated or otherwise distressed patrons can receive care and support. People who come into DanceWize care are usually triaged by the health provider and medical intervention is not necessary or DanceWize can offer a step-down service for patrons after they have received first aid or clinical services. DanceWize keeps anonymous records on people who come into our care as 'Care Interventions' to ensure we maintain a reasonable duty of care and have a record of all care outcomes. This recording system and related policies and procedures have been approved by the Victorian DHHS

## **ROVING CROWD CARE**

DanceWize **rovers** provide crowd care among event entertainment areas and use two-way radios to engage and refer patrons to on-

### **BRIEF INTERVENTIONS**

Outside the chill space patrons are offered health promotion and harm reduction educational resources and health supplies, including sexual health, ear plugs, sanitary items, and electrolytes & water. The dissemination of such resources and engagement between KPEs and patrons is referred to as a 'Brief Intervention'.

**TRAINING & CONSULTS** 

Training and consultation for event

organisers and other event-related

stakeholders.

## PEER BASED

The DanceWize program model utilises peer-based harm reduction education to provide resources and referrals about safer partying, safer drug use, and related health and welfare issues at music events and festivals. We do not promote drug use, nor do we condemn it, we accept it occurs and that drugrelated harm is better reduced when a non-discriminatory healthfocused approach is prioritised over punishment. (Note. ~8 million Australians have used an illicit drug in their lifetime and ~20% of young people aged 20-29 have used MDMA/'ecstasy', Australian Household Survey & Ecstasy and Related Drugs Reporting System 'EDRS').

DanceWize utilises a peer-based approach to reach communities of people who use drugs directly in a setting where they are contemplating/ intending use—these are people who are unlikely to have ever had contact with health services in relation to their drug use, who don't have a SUD or current concern regarding their use, and contact with DanceWize can bridge the 'therapeutic gap' between the community and formalised healthcare settings.

**OUR DATA** 

Inside the **chill space** we anonymously maintain records on all people who come into our care. These 'care intervention' records ensure we maintain a reasonable duty of care and have a record

Peer-based health promotion emerged as an effective strategy for communicating health messages to key affected populations the 1980s health rights movement. 'Nothing About Us Without Us!' is a rally cry from that movement, as HIV positive activists demanded a more patientcentred approach to health. (See the Denver Principles 1983).

The efficacy of this peer education program model is evidence-based Harm Reduction Victoria is a partner organization in La Trobe University's Australian Research Centre in Sex, Health & Society (ARCSHS) W3 Project that studies what works and why with regard to peer-based programs. (See: http://www.w3project.org.au/; Brown, G., Reeders, D., Cogle, A., Madden, A., Kim, J., and O'Donnell, D. 2018. A Systems thinking approach to understanding and demonstrating the role of peer-led programs and leadership in the response to HIV and Hepatitis C: Findings form the W3 Project. Frontiers in Public Health, 6 (2018) 231; and the W3 Project framework was referenced in John Rule, Jeanne Ellard, 'DanceWize NSW Evaluation Report', NDARC on behalf of NUAA, Oct 2018).

The efficacy peer-based approaches is due to factors such as the preexisting rapport between peer networks and the unique insight available due to lived-experience. This is especially valuable when a key population is marginalised and therefore hard-to-reach, like people who use drugs 'PWUD' who experience stigmatisation (Note. WHO recognises substance use disorder 'SUD', as the most heavily stigmatised health condition. It is important to note though that only a small percentage of PWUD experience SUD).

DancWize is a member of Harm Reduction Australia's 'Pill Testing Australia' service and DanceWize KPEs volunteered for the pill testing trials at a music festival in Canberra in 2018 & 2019, delivering tailored Brief Interventions to their peers.

In addition to being peers from the festival scene, DanceWize team members undergo a range of specialised AOD training, other community and social service related training, as well as First Aid (HLTFA003).A sizable percentage of the team are health professionals too, and the program generally attracts peers that have health, community service, or social justice leanings.

site services managed by an event's communication control centre.





#### CARE INTERVENTION REFERRAL PATHWAYS



#### of the health outcomes.

Information captured in the care intervention records includes gender, approximate. age, time in/out, referral pathway eg. referred to DanceWize by security, outcome eg. collected from event by guardian, the presenting issue eg. intoxication, and any additional comments *eg. if there are any anecdotal trends*.

DanceWize keeps anonymous data records on people who visit the DanceWize front of house and do not come into DanceWize's care too:
general visit (eg. someone who simply gets a lollypop and asks 'what's this set up'?)

• the dissemination of health and welfare educational resources and supplies (this is recognised within the alcohol and other drug 'AOD' sector as a 'Brief Interventions').

Such data can provide insight regarding high risk drug trends or other observed behaviours that may need to be risk managed in real time by the event's EMT.

This recording system and related policies and procedures have been approved by the Victorian DHHS and informs the DanceWize program's funded-service agreement reports on its key performance indicators.

DanceWize can also provide the event promoter with a post-event report noting relevant drug trends, a breakdown of our presentations, insight regarding our inter-agency collaboration, and this can inform future planning.

#### MAIN PRESENTATIONS FOR DanceWize© CHILL SPACE at EVENTS 20017-2018

