

Forget Me Knot Day
MHCC Parliamentary Briefing 22.11.11
Trauma Informed Care and Practice (TICP): a national agenda

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MHCC congratulate ASCA on their sterling efforts to raise awareness and bring to centre stage the issue of childhood trauma - and the devastating impacts of a history of trauma on the mental health and wellbeing of adult survivors. Thankyou Cathy for asking us to join you on Forget Me Knot Day.

I am on the Advisory Panel of ASCA and I'm also here representing the Mental Health Coordinating Council, known as MHCC - the peak body representing community managed mental health organisations (CMOs) in NSW. Our membership consists of over 250 organisations. We are also part of the Community Mental Health Alliance, the alliance of 8 state peaks representing over 800 MH CMOs nationally. We promote recovery and social inclusion for people experiencing mental illness, and participate extensively in mental health policy and sector development.

As Cathy has already mentioned, ASCA and MHCC have collaborated for several years to bring the issue of trauma the attention that it deserves - right up there with community awareness of depression and anxiety.

MHCC's work in the trauma field began in 2006 with the Reframing Responses project in which we examined the international evidence surrounding the long term impacts of interpersonal trauma on mental health and conducted a study into access and equity for women survivors of childhood abuse with complex needs in NSW.

ASCA closely collaborated in this research project which looked at the capacity of the public and community sectors to provide services; identify gaps and models of care, inequalities and barriers to access and make recommendations to government regarding service delivery models. Government responses both state-based and nationally were disappointing.

The project clearly demonstrated a desperate need for access to appropriate services for vulnerable consumers, many of whom are at great risk as a consequence of mental illness and co-morbid problems. In 2010 we launched stage two of the RR project - an Information Resource Guide and Workbook for Community Managed Organisations to try and bridge a gap in access to services.

At the same time ASCA & MHCC designed a 2 day workshop targeted at the community mental health and human services workforce which we regularly co-facilitate through MHCC's Learning and Development Unit. We have now run 7 workshops, with 2 further scheduled for next year. Interest in and evaluation of this workshop is evidence of the importance, value and relevance of such training.

As Cathy has indicated, the needs of trauma survivors have not been prioritised in terms of policy, planning or service responses. Given the fact that the majority of survivors accessing services have complex needs we need to see service responses which operate within a Trauma Informed framework, capable of responding to complex need. This requires widespread education and training incorporating new research into practice as well as the adoption of a trauma informed organisational culture and approach to care.

A trauma informed approach moves away from prioritising the search for psychiatric diagnoses to recognising the person's life experience within a holistic framework. Despite considerable international and Australian research evidence linking trauma to a wide diversity of mental health presentations, there is a lack of policy focus in Australia as to how this knowledge can be incorporated into service delivery.

One reason for this is a mental health system based on a 'diagnose and treat' approach to mental health care that fails to acknowledge the possible underlying causes of the presenting problems. Current services tend to categorise all trauma in terms of PTSD which leads to short term responses, usually medication only which is generally ineffectual for those with complex needs demanding sustained and longer-term responses.

Responses often focus on symptoms and extreme behaviours rather than the real issue of what happened to affect the person so profoundly. This makes little sense given that recognition and integration of experienced trauma is fundamental to the recovery process. This particularly applies to individuals diagnosed with borderline personality disorder for whom the research clearly shows most to have histories of childhood trauma.

The underpinning philosophy of a trauma informed approach is a paradigm shift in service delivery culture which understands the particular vulnerabilities and 'triggers' that trauma survivors experience and minimises re-victimisation. It must also be supported by trauma specific services, providing interventions designed to address traumatic consequences in the individual and facilitate recovery.

Whilst program delivery is occurring in small service pockets, we need a broad based systemic change across multiple service systems - an integrated recovery approach with survivors' individual needs at its centre.

To move this agenda forward MHCC, ASCA and its collaborating partners held an inaugural forum in 2010 to discuss a national strategy for promoting Trauma Informed Care (TIC) across all human service systems attended by Senator Claire Moore and her colleague on the Senate Community Affairs Committee, Senator Helen Kroger as well as eminent experts in the trauma field such as Prof Beverly Raphael who is here today, Prof Louise Newman and Prof Warwick Middleton and other important NSW stakeholders such as President of the NSW MHRT, the Hon Greg James, QC.

Subsequently MHCC collaborated with ASCA and its partners on a number of initiatives including a ground-breaking national conference focused solely on Trauma Informed Care & Practice.

There is a broad-based interest in TIC. Our network of interested stakeholders comprises some 200 people and organisations nationally. Our recently formed Advisory Working Group exemplifies national cross-sectorial representation from the community, public and private sectors. We share common goals for best practice outcomes in service delivery, care and service coordination; and support integration of TICP principles into workplace culture, workforce development and the service system.

We strongly advocate that funding for trauma specific services will dramatically reduce the burden of cost to individuals, families, and the community. This applies to the utilisation of mental health, allied health services and psychosocial supports as survivors characteristically engage with multiple services, repeatedly over their lifetime.

The perpetuation of non-trauma informed service provision and absence of trauma specific services is often re-victimising and detrimental; leading to additional costs in terms of crises and hospitalisations.

So what are we asking of you here today? We are looking to NSW parliamentarians to help us champion this initiative to create an environment that is more supportive, comprehensively integrated, empowering and therapeutic for people with mental illness, many of who are survivors of childhood trauma.

We also ask you to support us developing this agenda at a national level, particularly in terms of workforce capacity building. One way might be through COAG by advocating a policy shift across all services that the states provide funding for, via the national partnership agreement. The moment is timely with funds awaiting allocation, and NSW in a strong position to drive a change in process to ensure that its mental health agenda is trauma informed as well as recovery orientated.

Please consider ways of integrating a trauma informed approach in services in NSW, not just in mental health but across all human services. We are asking you to champion the needs of the population whose complex needs have been either ignored or inappropriately met and support the provision of trauma specific services informed by evidence based research.

ASCA's work is both trauma informed and delivers trauma specific programs. It is important that we actively support the work of this unique and essential service so that it can continue to lead the way in best practice responsiveness to survivors of childhood trauma.

ASCA is also MHCC's primary partner in driving the national agenda forward. Both are crucial initiatives in ensuring the improved mental health outcomes in NSW and demanding of your attention and support.

Thank you.