



Private Mental Health
Consumer Carer Network (Australia)
engage, empower, enable choice in private mental health

Education Centre

Against

Violence

TRAUMA INFORMED CARE FORUM Outcomes Paper SYDNEY 27 SEPTEMBER 2010

1) BACKGROUND

On 27 September 2010 an important event took place in Sydney. An inaugural forum was held to discuss a national strategy/agenda for promoting **Trauma Informed Care** across the community and mental health service systems.

The forum was convened by the Mental Health Coordinating Council of NSW (MHCC), Private Mental Health Consumer Carer Network Australia (PMHCCN), Adults Surviving Child Abuse (ASCA) and the Education Centre Against Violence (ECAV).

Attendees were selected from a short list drawn from organisational and personal networks, and approaches were made to known specialists working in a diversity of trauma related mental health settings.

A total of 37 individuals from several Australian States participated in the all-day forum. Despite considerable interest in the forum the number of invitees for the first meeting was restricted to ensure an outcome-driven session. The group included consumers and carers, Federal politicians, the President, NSW Mental Health Review Tribunal, senior clinicians and academics with expertise in mental health, disability and trauma. It also included senior executives from a range of community managed peak bodies and service providers experienced in working with the psychological impacts of trauma

Jenna Bateman, CEO of the Mental Health Coordinating Council, opened the Forum setting the scene for discussion. Presentations were provided by Janet Meagher, Divisional Manager – Inclusion, Psychiatric Rehabilitation Association; Assoc. Professor Warwick Middleton, Associate Professor School of Public Health La Trobe University; Professor Louise Newman, Professor of Developmental Psychiatry and Director of the Monash University Centre for Developmental Psychiatry and Psychology and Dr. Cathy Kezelman, CEO/ Executive Director - Adults Surviving Child Abuse (ASCA). Closing comments were provided by Professor Beverly Raphael, Professor of Population Mental Health & Disaster Response & Resilience Research Group, School of Medicine UWS.

The forum was facilitated by independent workshop facilitator, Edwina Deakin of EJD Consulting and Associates, who summarised the outcomes and options from the Forum plenary and discussions which followed.

Note: Included at Attachment 1 is a copy of the forum program. Included at Attachment 2 is a list of attendees, as well invitees who sent apologies. A number of those who sent apologies expressed interest in future involvement with the process.

FORUM OBJECTIVES

The committee was initially motivated to clarify thinking around approaches to Trauma Informed Care in Australia, and review this against existing international evidence. The aim of the forum was to inform and progress our thinking, as well as to draw together interested stakeholders and identify possible champions.

The committee has observed that conversations around Trauma Informed Care are occurring in small service pockets, but that this does not amount to a broad based systemic change.

The committee initiated the process by authoring a short literature review outlining some international research evidence and presented their rationale for initiating the forum.

OUTCOMES AND OPTIONS

2) ACTIONS AND OPTIONS ARISING

Following the morning presentations, the afternoon forum focused on identifying next steps and joint actions for the delivery of better health outcomes for Australians experiencing mental health difficulties as a consequence of trauma.

(a) Terminology

The need to agree on terminology was highlighted. Some participants felt the term 'Trauma Informed Care' did not adequately reflect the call for a new and inclusive approach appropriate to the Australian context.

It was suggested that *Trauma Informed Care and Practice* better communicates the need to acknowledge trauma as a possible underlying factor for a diversity of mental health and human services presentations.

Alternative terms discussed included:

- Practice of Trauma Informed Care
 - Trauma Informed Practice
 - Trauma Informed Care and Practice
 - Trauma Informed Support and Care
-
- The Forum identified that the scope of the agenda needed to be clarified with reference to the degree and chronicity of the trauma experienced. The potential exclusion of trauma impacts as a consequence of environmental trauma e.g. disaster and accidents was discussed.
 - It was generally agreed that where trauma-informed programs and services had been implemented internationally that a cultural shift in the way systems and services were delivered had occurred; transforming mental health and allied human service organisations supporting people with histories of violence, trauma and childhood abuse.
 - The necessity to identify a term encapsulating the need to develop a new approach across service systems that embeds ***Trauma Informed Care and Practice (TICP)*** in its philosophy, policy development and implementation, capacity building and service delivery was highlighted.

(This last term has been adopted in the drafting of the actions following).

b) Possible Actions

Four actions were discussed at the forum:

1) Establish an informal Trauma Informed Care and Practice Network

The network will comprise individuals with lived experience of trauma; professionals, academics; service delivery organisations and policy makers with an interest in TICP, keen to link and hear about future developments; discussion and educational opportunities.

As a first step this will involve:

- ➔ Establishing the network using the contact details of those attending the forum
- ➔ Inviting others to contact the forum secretariat at the MHCC (Corinne Henderson, corinne@mhcc.org.au) to have their details added to network database for future information sharing
- ➔ Promoting the network to other interested parties (including several key professionals in the field who were unable to attend the conference but expressed a strong interest in being involved)
- ➔ Circulating the Trauma Informed Care and Practice principles drawn from earlier research and forum discussions
- ➔ Establish a national TICP reference group to coordinate efforts and implement actions over the coming six months.

Responsibility: MHCC/ Forum Secretariat

2) Develop and circulate a summary brief on the need for a new approach to Trauma Informed Care and Practice

A brief outlining the key issues and themes which need to be articulated to establish the need for a National Agenda is to be developed. This will lead to the development of a Paper early in 2011 to promote the concept of and need for a national agenda to the community, politicians and policy makers (*Action 4 below*).

Responsibility: MHCC/ Forum Secretariat

3) Host a Conference showcasing Trauma Informed Care and Practice

The MHCC Conference scheduled for May 2011 will include presentations and workshops from international and Australian consumers, practitioners and service providers with knowledge and expertise in TICP and recovery orientated practice. It will include education about re-victimisation and vicarious traumatisation in service settings.

The aim of the conference would be to increase awareness and knowledge about TICP, to help drive a shift in organisational culture through the integration of TICP into the delivery of services.

The event will enable networking across sectors; improving care co-ordination and referral pathways.

The concept for the conference will need to be supported by NSW Health MHDAO in terms of funding, and additional support will be sought from Commonwealth Ministers..

The Conference would be widely marketed to include delegates from a diversity of sectors

- Mental health – private, public and NGO practitioners and services
- Primary health care (including drug & alcohol services) GPs; mental health clinicians
- Justice (including police, justice health, corrective services, legal services)
- Education (including school counsellors)
- EAP providers
- Disability services
- Refugee support services
- Child protection and counselling services
- Sexual assault and other counselling and information support services
- Indigenous and other culturally, linguistically and ethnically diverse organisations.

Responsibility: MHCC (ECAV, ASCA, & PMHCCN and Conference Committee to be established)

4) Development of a National Agenda for Trauma Informed Care and Practice in Australia

➔ Investigate support for the resourcing of a well- researched position and advocacy paper to establish guiding principles for integration of TICP across service systems, agencies and organisations (*Appendix 1*).

Responsibility: MHCC with ECAV, ASCA, & PMHCCN and newly formed reference group

c) Issues Particularly Noted

Some issues and actions raised at the Forum were not fully explored given the time restraints. These included:

- That trauma may underlie a range of presentations (which are not currently recognised) requiring trauma informed responses.

- That responding to complex presentations in particular needs to involve all of the human service, health, education and justice systems and not be limited to the mental health system.
- That all actions are culturally inclusive and respectful of the values and belief systems of the diverse cultural and population groups present in the Australian context, highlighting the needs of Aboriginal and Torres Strait Islander peoples, members of culturally and linguistically diverse communities, and people with physical and developmental disability.

It was noted that some groups may be uncomfortable with a National Trauma Informed Care and Practice Agenda which did not reflect these differences in policy and practice.

- To be effective in both the short and long terms, advocates for a TICP approach across service systems need to:
 - a) Gather and present strong case-based evidence on the known 'burden of cost' of not pursuing a Trauma Informed Care and Practice approach. These arguments are to be presented to encourage financial decision makers including State and Commonwealth Government Treasury Departments to undertake cost/benefit analysis to establish the economic rationale for supporting the Agenda.

Responsibility: discussion involvement possibilities with economic analysts e.g. KPMG

- b) Undertake community awareness and education campaigns, using key media figures, to broaden the support base for change. Champions to promote the agenda in the community need to be found.
- Meaningful responses to consumers need to be person-centred and include a TICP approach that is focussed on more than clinical interventions and treatment. This must be informed by the philosophy of recovery orientated practice which fully involves consumers and carers in decision making processes.
 - A reluctance to acknowledge the extent to which trauma impacts the lives of people revolving through a myriad of service delivery doors was clearly identified. As is an inherent resistance to accepting the scale and seriousness of the problem within community and health services. This implies a need to initiate an extensive cross-sector awareness and education campaign. The development of TICP must always acknowledge a survivor's inherent resilience and capacity to recover, as well as their need for hope and empowerment.

**Outline for
NATIONAL AGENDA FOR TRAUMA CARE & PRACTICE
A position & advocacy paper**

Description: A paper establishing the guiding principles for integration of TICP across service systems, agencies and organisations.

It will feature an executive summary describing the key issues, and establish the argument for change.

Methodology: It is proposed that the paper be drafted by MHCC with input from forum sponsoring agencies (ASCA, PMHCCN and ECAV) and a reference group.

Further input will be sought from key stakeholders before endorsement from a broad coalition of organisations and individuals.

Outline: The paper will promote the need for a broad-based cultural shift in service delivery philosophy designed to engage the community, politicians, policy makers and service providers..

It is likely to include sections such as:

1. Context – definition of trauma within the context of the agenda
2. Background – scale of problem, cost to individuals, community
3. Definition of Trauma Informed Care and Practice including summary of existing international research evidence and findings
4. Overview of existing Trauma Informed Care and Practice internationally and in Australia including examples of evidence-based practice / case studies
5. Core components of introducing Trauma Informed Care and Practice in Australia (including systems requiring change)
6. Identify key stakeholders, influencers and targets needed to drive change
7. Next steps and agreed actions

Proposed November 2010

Timeframe:

- Establish TICP Network
- Establish Reference Group
- Drafting commences - using the background paper to the forum as a starting point
- Investigate financial support for MHCC Conference TICP

End Jan 2011

- Draft paper circulated and finalised with Reference Group
- Paper circulated for comment & in principle endorsement more broadly across TICP Network and the community
- Based on success of securing funding for a Conference – proceed with development program

Feb 2011-

- Final paper circulated for endorsement
- March 2011 - Advocacy paper launched & actions commence

Budget:

- TBC
- Estimate in kind support from sponsor organisations
- Support business and financial consultants
- Commonwealth / State Government funding

ATTACHMENT 1



27 September 2010

Trauma Informed Care - A National Strategy?

Morning Session 10am – 12.30pm

Introduction

Jenna Bateman

CEO Mental Health Coordinating Council

Presenter: Janet Meagher AM

TRAUMA-INFORMED CARE: A RECOVERY ORIENTATED APPROACH A CULTURAL SHIFT IN MENTAL HEALTH SERVICE DELIVERY

Divisional Manager: Inclusion, Psychiatric Rehabilitation Australia

Advisor to: Australian Federation of Disability Organisations, Consumer Activity Network and the Mental Health Association. Member of the Australian Suicide Prevention Advisory Council; the National People with Disabilities and Carer Advisory Council and is on the consultative committee of National Judicial College of Australia.

Presenter: Prof Warwick Middleton

TRAUMA, A VERY KEY COMPONENT OF THE MENTAL HEALTH SYSTEM - ESTABLISHING THE ARGUMENT

Adjunct Professor, School of Public Health, La Trobe University, and, Associate Professor in Psychiatry, University of Queensland and is member of the International Advisory Board of the Australian and New Zealand Journal of Psychiatry.

Presenter: Prof Louise Newman

THE ADVANTAGES: AN EVIDENCE BASED APPROACH TO THE PREVENTION OF INTEGENERATIONAL TRAUMA - TRAUMA AND DEVELOPMENT

Professor of Developmental Psychiatry and Director of the Monash University Centre for Developmental Psychiatry & Psychology; Chair of the Detention Expert Health Advisory Group; previous Chair of Perinatal and Infant Psychiatry at the University of Newcastle and the previous Director of the New South Wales Institute of Psychiatry.

Presenter: Dr Cathy Kezelman

ACCESSING CARE FOR TRAUMA RECOVERY IN AUSTRALIA – A CONSUMER AND ORGANISATIONAL FOCUS

A medical practitioner; Chair of Adults Surviving Child Abuse (ASCA) a national organisation dedicated to advancing the needs Australian adults abused as children. Ambassador National Families Week (2010); Board member, Mental Health Coordinating Council (NSW)

LUNCH 12.30 – 1.30pm Afternoon Session 1.30pm – 4.30pm
Facilitated Consultation by Edwina Deakin

Closing Remarks
Professor Beverley Raphael

Cocktails 4.30 pm

ATTACHMENT 2

FORUM PARTICIPANTS

NS- TIC Forum Participants

PRESENTERS

Ms Janet Meagher

Divisional Manager - Inclusion
Psychiatric Rehabilitation Association

Assoc. Professor Warwick Middleton MB BS, FRANZCP, MD

Associate Professor
School of Public Health La Trobe University

Professor Louise Newman

Professor of Developmental Psychiatry and
Director of the Monash University Centre for Developmental Psychiatry and Psychology

Dr Cathy Kezelman

CEO/ Exec Director - Adults Surviving Child Abuse (ASCA)

Closing Comments

Professor Beverly Raphael

Professor of Population Mental Health & Disaster Response & Resilience Research Group
School of Medicine

Edwina Deakin - Facilitator

Principal, EJD Consulting and Associates

Committee Members - Hosts

Jenna Bateman

CEO, Mental Health Coordinating Council (**MHCC**)

Corinne Henderson

Senior Policy Officer, Mental Health Coordinating Council (**MHCC**)

Chris McCabe

Mental Health/Sexual Assault Statewide Educator
Education Centre Against Violence (**ECAV**)

Janne McMahon
Independent Chair - Private Mental Health Consumer Carer Network Australia (**PMHCCN**)

Dr Cathy Kezelman
CEO/Executive Director- Adults Surviving Child Abuse (**ASCA**)

Forum PARTICIPANTS

Ciara Donaghy
NADA, Project Officer Family & Carers

Dr Jill Benson
Director, Health in Human Diversity Unit, Discipline of General Practice, University of Adelaide

Karen Burns
Director, UnitingCare Mental Health

Jane Davidson
Senior Psychologist, Northern Sydney Sexual Assault Service

Dr Leanne Dowse
Disability Scholar. Lecturer, School of Social Science and International Studies
Program Coordinator, Bachelor of Social Science Degree

Janet Ford, RN (Mental Health)
Manager Evaluation Research and Service Development
The Richmond Fellowship NSW (RFNSW)

Christine Gee
Chief Executive Officer, Toowong Private Hospital

Associate Professor Roger Gurr
Director, Mental Health
Conjoint Associate Professor of Psychiatry University of Western Sydney, Sydney West Area Health Service

Naomi Halpern
Co-founder - The Delphi Centre Victoria

Susan Henry
Co-founder - The Delphi Centre Victoria

The Hon Greg James, QC
President, NSW Mental Health Review Tribunal

Senator Helen Kroger
Liberal Party of Australia, Senator for Victoria

Natasha Langovski
Clinical Director/ Consultant Psychologist
Remind Mental Health Training & Education
Schizophrenia Fellowship of NSW Inc

Ione Lewis
President , PACFA, Psychotherapist and Counsellor Federation Australia. Victoria
Ass Professor University of Canberra

Dr Katherine Mills
Senior Lecturer / NHMRC Research Fellow
National Drug and Alcohol Research Centre University of NSW

Senator Claire Moore
Australian Labour Party, Senator for Queensland

Liz Mullinar
Mayumarri Trust, Heal for Life

Karen Oakley
Executive Officer, NSW Consumer Advisory Group – Mental Health Inc

Maxine Rosenfield
President, Counsellor & Psychotherapist Assoc (CAPA)

Ingrid Vet
Program Manager Northern Kids Care -On Track Community Programs

Nikki Wells
Founder, Survivors of Clergy Abuse Australia (SCAA)
Community Engagement Manager Bravehearts NSW

Kim Werner
Deputy Chair, Private Mental Health Consumer Carer Network (Australia)

MHCC Staff

Ian Bond – IT Officer.
Stephanie Maraz – Policy Officer
Tina Smith – Senior Poly Officer Workforce Development
Rod West – Communications Officer

ASCA Staff member

Kylie Rawsthorne. Admin

APOLOGIES

Jorge Aroche
Executive Director
The NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS)

Heidi Becker
Program Manager NADA

Dr Richard Benjamin
Psychiatrist, Clarence and Eastern District Community Mental Health Service

Maria Bisgoni
Deputy President, Mental Health Review Tribunal

Dr Kaalii Cargill
President, SCAPE (Society of Counselling and Psychotherapy Educators)
PACFA Research Committee

Alison Churchill
CEO, Community Restorative Centre (CRC)

Mardi Diles
Team Leader "Speak Out", South Sydney Youth Services, Dual Diagnosis Team

The Hon Kevin Humphries MP
NSW Nationals. State Member for Barwon, Shadow Minister for Aboriginal Affairs, Shadow Minister for Healthy Lifestyles, Shadow Minister for Western NSW.

Marlene Lauw
Aboriginal/ Family Health Statewide Educator, Education Centre Against Violence

Harry Lovelock
Senior Manager Strategic Policy and Liaison, Australian Psychological Society

Emeritus Professor Russell Meares
Westmead Millenium Institute

Dianna Quinn
Executive Director, MDAA

Janne Roberts
Principal Official Officer NSW

Sebastian Rosenberg
Senior Lecturer, Brain and Mind Research Institute, Sydney Medical School and
Director, ConNetica Consulting Pty Ltd

Liz Ruck
Mental Health Council of Australia

Julie Hourigan Ruse
Public Interest Advocacy Service (PIAC). Homeless Persons Legal Aid

Dr Chris Ryan
Consultation-Liaison Psychiatrist, Senior Clinical Lecturer Westmead Hospital,
University of Sydney, Centre for Values Ethics and the Law in Medicine

Michael Salter
ASCA Director. Research Associate of the Centre for Gender-Related Violence Studies, UNSW

Senator Rachel Siewert
Australian Greens. Senator for Western Australia

Alan Woodward
General Manager - Social Policy, Innovation, Research & Evaluation Lifeline Australia

Dr Maria Tomasic
President, The Royal Australian and New Zealand College of Psychiatrists