



Investing in Trauma-Informed Service Models

Trauma-informed practice is a strengths-based person-centred model of care that reduces re-traumatisation and promotes healing, autonomy and increased personal power. It is the recommended best practice approach when supporting people affected by domestic, family and sexual violence and highlighted by Queensland's Domestic and family violence services – Practice principles, standards and guidance as being *“critical for appropriately responding to the unique and often complex nature of trauma as a result of coercion and control tactics.”*¹

Trauma informed models align with HSQF and practice standard requirements yet funding and output restraints, rising costs and increased service demand mean that organisations are not currently resourced for trauma-informed service models. Funding models often focus on quantity of service, rather than quality.

Violence against women is estimated to cost Australia \$21.7 per year, and without effective intervention this is estimated to grow to \$323.4 billion by 2044-45.² Investing in trauma informed models of care that provide options for high-quality longer-term recovery support will help lower re-victimisation rates, increase effectiveness of service delivery and reduce the long-term burden on the service system.

South Australia's Trauma Responsive System Framework³ uses the guiding principles of:

1. trustworthiness
2. safety
3. peer and community support
4. collaboration
5. empowerment and self-determination
6. know yourself and learn

Each of these principles require an investment of time and prioritises high quality service, healing relationships, and a focus on long term recovery and improved staff wellbeing.

The benefits of investing trauma informed practice include:

- Increased emotional, physical and cultural safety.
- Increased emotional literacy and emotional regulation skills
- Increased understanding of gender-based violence
- Increased understanding of trauma and its impacts
- A focus on recovery goals and enhanced collaborative support to meet those goals
- Reduced long term reliance on the service and government systems
- Reduced revictimization
- Improved parenting support
- Emphasis on building strength and resilience of survivors.
- Increased safety, confidence and empowerment.

¹ The State of Queensland (Department of Child Safety, Youth and Women), Domestic and family violence services – Practice principles, standards and guidance 2020, p 6.

² PricewaterhouseCoopers Australia, A high price to pay, 2015. <https://www.pwc.com.au/pdf/a-high-price-to-pay.pdf>

³ Government of South Australia, Trauma Responsive System Framework, 2022. <https://dhs.sa.gov.au/?a=128803>

In the current funding climate, many organisations are under resourced to meet service demand, reducing capacity to provide trauma informed care models and often diverting resources away from recovery models to meet urgent crisis response.

The gendered violence service sector is committed to proving trauma informed care models. We have a skilled workforce, with strong knowledge of trauma informed practice. We see the benefits that trauma informed practice provides when supporting victim/survivors with healing, safety, empowerment and self-determination. We also see the benefit that trauma informed environments bring to staff working in fields with high levels of vicarious trauma. Trauma informed organisational models reduce staff burnout, provide opportunity for reflective practice and professional development alongside improving the health and wellbeing of staff.

Resourcing organisations to deliver trauma informed models requires a funding model that includes:

- Staff training to promote trauma literacy for all staff in the organization.
- Continuity of care models where possible
- Embedding participant choice where possible (type of service, practitioner delivering service, delivery mode or place of service)
- Services are tailored to meet specific needs of participants including personal values, preferences, cultural needs and specific risk and protective factors.⁴
- Recognition that a healing journey is not linear, and flexible service access that is not time bound may be required.
- Engaging victim/survivors in evaluating and improving service provision.
- Organisations recognize, mitigate and prevent the adverse occupational health and safety impacts vicarious trauma can have on staff.
- Organisations are resourced (financially and in relation to time/output pressures) to provide staff with meaningful opportunities for reflective practice, individual and group supervision.

South Australia's Trauma Responsive System Framework states

*"Taking a system's approach to building trauma capacity' means that all those involved in the system work together to get better at responding to trauma, wherever it presents. In working together, we all commit to practical actions that will allow us to walk together on this journey with respect, honesty, and kindness. In doing this we also commit to building a system that does not retraumatise, or further traumatise, the children and families who it was created to support."*⁵

The women's health, refuge, sexual and domestic violence sectors recommend the Queensland Government invest in resourcing trauma informed care models as a way to increase the effectiveness of the service sector, which will in turn provide the government with long term financial savings.

[Ending Violence Against Women Queensland](#)

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⁴ The State of Queensland (Department of Child Safety, Youth and Women), Domestic and family violence services – Practice principles, standards and guidance 2020, p 26.

⁵ Government of South Australia, Trauma Responsive System Framework, 2022. <https://dhs.sa.gov.au/?a=128803>