Department of Human Services

# Trauma ResponsiveSystem Framework

A whole-of-system approach to building the capacity of the Child and Family Support System

The Trauma Responsive System Framework was developed in partnership with Connected Self Wellbeing Services, and Dana Shen,
DS Consultancy, with and for the Department of Human Services and the broader Child and Family Support System.

The term 'Aboriginal peoples' is used throughout this document to refer to all Aboriginal and Torres Strait Islander peoples.

For further information about the reform of the Child and Family Support System, view an online copy of the [Roadmap for reforming the Child and Family Support System](https://dhs.sa.gov.au/services/cfss/resources/reports-and-publications/roadmap-for-reforming-the-cfss-practitioner-version).

## Acknowledgements

We wish to acknowledge the families and members of the Early Intervention Research Directorate (EIRD) Lived Experience Network for their participation in the development of this framework, as well as the many Aboriginal peoples and those people from culturally and linguistically diverse communities of South Australia who shared their stories and experiences.

We wish to acknowledge artist Elizabeth Close, for her beautiful depiction of the framework.

We wish to acknowledge Emerging Minds for creating a dedicated learning pathway and Organisational Change Tool to support the use of the framework for practitioners and leaders in their journey to strengthen trauma responsiveness.

## Recommended citation

Government of South Australia, Department of Human Services, 2021, *Trauma Responsive System Framework: A whole of system approach to building the capacity of the Child and Family Support System.*

## Further information

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## Acknowledgment of Country

We acknowledge this land. The Dreaming is still living. From the past, in the present, into the future, forever.

We acknowledge and respect Aboriginal peoples as the state’s first peoples and nations and recognise them as traditional owners and occupants of land and waters in South Australia.

Further, we acknowledge that the spiritual, social, cultural and economic practices of Aboriginal peoples come from their traditional lands and waters, that they maintain their cultural, and heritage beliefs, languages and laws which are of ongoing importance, and that they have made and continue to make a unique and irreplaceable contribution to the state.

We acknowledge that Aboriginal peoples have endured past injustice and dispossession of their traditional lands and waters.

## Preamble

Taking a systems approach to building trauma responsive capacity.

The Department of Human Services (DHS) engaged Connected Self, together with Dana Shen Consulting, to help develop capacity for a trauma responsive Child and Family Support System (CFSS). This is one of the priorities identified through the extensive co-design undertaken in 2019 to guide the reform of the existing system.

Foundational to this process is the development of a Trauma Responsive System Framework, informed through the synthesis of relevant information from the co-design process and scan of relevant Australian and international literature.

Following the initial draft of the framework, a series of consultation workshops were facilitated with a range of stakeholders across the state, which involved:

* working with people with lived experience, including providing training to the EIRD Lived Experience Network, and hearing their feedback
* dedicated consultation meetings with Aboriginal and non-Aboriginal families and adults with lived experience of the family support and child protection systems
* dedicated workshops with Aboriginal leaders and practitioners
* dedicated workshops with Aboriginal-led community groups
* dedicated workshop for practitioners and leaders from the culturally and linguistically diverse (CALD) community
* workshops for practitioners and leaders in the family support and related sectors across South Australia
* facilitation of the inaugural State-wide Practice Forum dedicated to sharing feedback from those with lived experience, Aboriginal families, and those from a CALD background on the draft framework.

DHS are thankful to everyone people who committed their time and energy to these consultation sessions.

## What does ‘taking a system’s approach to building trauma responsive capacity’ mean?

To answer this question, we first need to be clear on what we mean by a ‘system’. For the sake of this process ‘system’ refers to all of those who are a part of the CFSS in South Australia.

At the heart of this system are children, their families, and communities. We also have:

* those who are working directly with children and families, including social workers, volunteers and other support staff with lived experiences, youth workers and allied health professionals
* those who support practitioners and volunteers, who represent organisations and who are funded by DHS as part of the CFSS
* those who lead and provide support and administer DHS funding under the CFSS (referred to as the ‘Funder’).[[1]](#endnote-1)

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 re-traumatise, or further traumatise, the children and families who it was created to support.

## What will this take?

Building a trauma responsive and healing system will not be easy. We know it will be challenging and hard, but we are keen to make it happen. Daily, we can see the many ways in which our service system, policies and procedures can reinforce hurt instead of offering interactions and places for healing. This is not intentional; however, it is time to be intentional about creating a system that supports healing and avoids re-traumatisation.

To achieve this, we will need to make several commitments as individuals and organisations.

* We need to deeply listen to the children and families that are most affected by this system and often have the least control and power in the system. To do this effectively we will need to understand our power and privilege in this system and to find ways to support self-determination where possible.
* We will need to commit to truth telling, including being explicit about the impacts of colonisation and the subsequent policies that have traumatised Aboriginal peoples.
* We will need to understand ourselves: what are the assumptions we operate with? Why we are here? What do we bring? Including our own hurts.
* We will also need to acknowledge the impact of historical policies that were harmful and have contributed to intergenerational trauma. This includes policies and practices of colonisation that have had a profound impact on Aboriginal people’s connection to country, culture, and one another.

It also includes policies that discriminated against women, those from our LGBTQIA+ communities, from culturally diverse communities and those who are differently abled.

We know there will be struggle with this. Our intent is to bring all levels of the system we work within together, to build our collective capacity in order to meet this challenge.

## Aboriginal voices

In this system and through the development of this framework we recognise the voices of Aboriginal peoples and the status of these voices. This means that we commit to listening carefully to these voices with the intent to use this understanding to shape a system that will work for Aboriginal people.

We do this because there are many Aboriginal families impacted by this service system and need the services that it provides, but these are not the only reasons.

We also see the strengths, hopes and dreams of Aboriginal peoples and know if we support this vision, it will contribute to building a trauma responsive and healing system for everyone.

## The voices of those from culturally and linguistically diverse (CALD) communities

We also privilege the voices of those within the CALD community in South Australia.

Trauma in the CALD community is diverse and unique to the lived experiences and migratory journeys of individuals and families and may include intergenerational trauma. Trauma is often associated with pre-migration experiences, including human rights abuse.

Post migration, these experiences of trauma are often made worse by other challenges, including settlement challenges, racial and religious discrimination as well as the multiple losses experienced, loss of country, culture, family and sometimes all that you knew and loved.

## The voices of those with lived experience

Children and families are at the centre of this service system. We exist to walk alongside and support children and families in their goals and needs.

Their voices must be privileged in the design and implementation of a trauma responsive and healing system.

Children, families and the communities that support them, know best the service environments, practice and systems that hurt or heal and what needs to change to best help them.

## The broader agenda

This work is informed by growing awareness in Australia and internationally, about the importance of responding more effectively to those with lived experience of trauma.

We recognise the need to move away from practices which can unintentionally shame and humiliate clients, often resulting in re-traumatisation, to practices that value the experiences of the people they are intended to serve.[[2]](#footnote-1) Taking a systems approach to building trauma responsive capacity, builds on this work by focussing on what happened to children and families who are seeking support and not what is wrong with them.

The framework is an important part of the [Roadmap for reforming the Child](https://dhs.sa.gov.au/services/cfss/resources/reports-and-publications/roadmap-for-reforming-the-cfss-practitioner-version)  [and Family Support System](https://dhs.sa.gov.au/services/cfss/resources/reports-and-publications/roadmap-for-reforming-the-cfss-practitioner-version), providing guidance for ‘Our Healing Approach’. The Roadmap provides information on other reform initiatives designed to embed trauma responsiveness to create a healing system, including:

* the Common Elements of good practice initiative
* clinical and cultural governance frameworks
* establishment of Communities of Practice in the Child and Family Support System
* cross-sector collaboration between agencies to promote integrated trauma responsive practices
* initiatives to deliver systems which build the capacity of organisations and practitioners to implement trauma responsive practice, in partnership with Emerging Minds and Connected Self.

DHS is committed to working with sector partners, tertiary institutions and cross sector agencies, both locally and internationally, to contribute more broadly to the creation of trauma responsive communities which provide the conditions for healing for those with lived experiences of trauma.

## Principles

This framework has been built on a set of co-designed principles.

These principles guide the thinking and actions required to build a trauma-responsive system.

### Trustworthiness

Trustworthiness, honesty and ‘being real’ contribute to feelings of safety and predictability, which are important elements of building trauma responsive relationships.

At each level of the system, information should be shared in a way that helps everyone understand the operations and decision-making processes of the system, in a way that supports safety and respects people’s privacy.

It is also about being prepared to have the difficult conversations, with empathy and authenticity.

### Safety

Safety is the foundation of a trauma responsive system for children and families, practitioners, and service leaders. Whilst it can have different meanings for people in different contexts, it includes the emotional, physical, spiritual, and cultural safety of all.

Creating safe places and relationships takes time, but it is this time that supports healing.

### Peer and community support

Our peers and our communities are vital to our sense of belonging, health, hopes, recovery, and healing.

Whether these are informal or formal supports, where we live or where we work, being truly understood and listened to is the essence of a trauma responsive system.

### Collaboration

We know we cannot do this alone. We will need to collaborate and use our collective resources, skills and understanding – together with the strengths and wisdom of children, families, and communities – to provide support for their healing and recovery.

Responding effectively to trauma requires all those within the Child and Family Support System, and other specialist service providers, to walk together, side-by-side and learn from one another as members of the same system.

### Empowerment and self-determination

Organisations and practitioners are responsible for creating a space where children and families have power and agency,[[3]](#footnote-2) knowing that they will be heard and responded to with sensitivity, respect, and compassion. In a trauma responsive system, children and families are recognised as experts in their own lives and supported to have an active voice in their unique healing journeys. Practitioners authentically walk alongside children and families through recognition of strengths, culture, community, and family dynamics.

### Know yourself and learn

Our system needs practitioners, leaders and organisations who are committed to knowing themselves, what they bring to their work and the impacts of their biases and assumptions on the children and families they work with. This includes understanding our own experiences of trauma which needs to be an ongoing process of critical reflection and action. To do this in a trauma responsive way, this needs to be partnered with kindness, compassion, warmth and the celebration of the diversity and strengths of children and families, ourselves, and our organisations.

## The Model [[4]](#footnote-3)

The following graphic uses a wheel to provide an overview of how the six principles are integrated through each level of the CFSS. It illustrates that all six ‘segments’, or principles, are required at each level to ensure the integrity[[5]](#endnote-2) of the CFSS, during the implementation of a trauma responsive system. The integrity of the ‘wheel’ is compromised when one or more segment(s) is not represented, and the impact is felt at each level of the system.



[*Read a text description of this model*](#_Appendix_1_–)*.*

Throughout the consultation process, many Aboriginal people spoke about the importance of how Aboriginal people are required to work and walk in two worlds across these levels and this needed to be reflected in the model.

Aboriginal people also emphasised the importance of community as central to any model and service response. This informed the creation of a model that allows for greater movement and permeability between all system levels.

## An Aboriginal view of the Model





### Artist’s notes

This graphic is informed by the understanding that delineated models of thinking are less relevant to Aboriginal families and communities. This graphic speaks to the interconnectedness within each level, and the manner in which clients and families weave in and around the principles and framework like water trickling through a rocky creek bed.

Aboriginal visual artist Elizabeth Close designed this model. Elizabeth is a Pitjantjatjara, Yankunytjatjara woman from the APY Lands in Central Australia.

[*Read a text description of this model*](#_Appendix_2_—)*.*

## Key attributes and indicators of a TraumaResponsive System

This section is designed to provide a description of attributes for each of the trauma responsive principles, and to stimulate thinking about how the attributes might be applied at different levels of the system (child and family, practitioner, organisation and funder levels).

The attributes are informed by the available evidence and the consultation workshops summarised earlier. Examples of indicators for each attribute is provided for each system level.

These attributes form the basis of the CFSS Organisational Change Tool (Emerging Minds Focus). This is an online tool to assist organisations to continually develop their capacity to be trauma responsive.

Components of the tool include an organisational self-assessment in relation to the Trauma Responsive System Framework, and the development of an action plan, with links to useful resources to assist in this journey. Learning resources to support staff at all levels of organisations and in all parts of the system to build their trauma responsive capacity, are available through the [Child Protection and Intensive Family Support](https://d2p3kdr0nr4o3z.cloudfront.net/content/uploads/2021/05/21152932/Pathway-summary-child-protection-and-intensive-family-support-May-2021.pdf)  [Learning Pathway](https://d2p3kdr0nr4o3z.cloudfront.net/content/uploads/2021/05/21152932/Pathway-summary-child-protection-and-intensive-family-support-May-2021.pdf) on the Emerging Minds website. Also available on this website are toolkits to support best practice when working in partnership with families, the [Working with Aboriginal and Torres Strait Islander families](https://emergingminds.com.au/resources/toolkits/working-with-aboriginal-and-torres-strait-islander-families-and-children/)  [and children toolkit](https://emergingminds.com.au/resources/toolkits/working-with-aboriginal-and-torres-strait-islander-families-and-children/) and the and the [Child and family partnership toolkit.](https://emergingminds.com.au/resources/toolkits/child-and-family-partnerships-toolkit/)

## Child and family level

| 1. Trustworthiness attributes | Indicators |
| --- | --- |
| 1. Children and their families trust that their practitioners will be clear and honest in conversations relating to decision-making processes.
 | Children and their families feel their practitioners are clear and honest with them about decision-making processes |
| 1. Children and their families are supported to have difficult conversations with empathy and authenticity.
 | Children and their families report that they are supported, with empathy and authenticity, to have difficult conversations. |

| 2. Safety attributes | Indicators |
| --- | --- |
| 1. Children and their families feel safe in the relationship they have with their allocated worker.
 | Children and their families report feeling safe in the relationship they have with their allocated worker. |
| 1. Services are experienced by families as safe in all ways including culturally, emotionally, physically, and spiritually.[[6]](#endnote-3)
 | Children and their families report feeling a sense of safety across multiple levels and as identified by them. |
| 1. Aboriginal children and families will feel they belong and are welcomed into a service.
 | Aboriginal children and families report a sense of welcome and belonging in a service and return to the service. |

| 3. Peer and community support attributes | Indicators |
| --- | --- |
| 1. Families can access peer and community support with assistance from practitioners.
 | Families can access peer and community support with assistance from practitioners as evidenced by case management documentation. This can be formal or informal support. |
| 1. Families and community members who make up the support network are provided adequate support and guidance where needed.
 | Families and community members who make up the support networkare provided adequate support and guidance where needed as evidenced by case management documentation. |

| 4. Collaboration attributes | Indicators |
| --- | --- |
| 1. Children and their families have opportunities to share their experience and walk alongside the practitioner throughout their healing journey.
 | Children and their families reportthat practitioners walk alongside them and feel heard in their healing journey. |
| 1. Children, families, and members of their community are provided opportunities to share information on their experiences of trauma.
 | Children, families, and members of their community report that they are provided opportunities to share information on their experiences of trauma. |
| 1. Children and families are provided the information and resources to identify supports they require with workers walking alongside them and assisting them to access these supports.
 | Children and families report being provided the information and resources to identify and access supports they require. |

| 5. Empowerment and self-determination attributes | Indicators |
| --- | --- |
| 1. Children and families feel heard with sensitivity, respect, and compassion.
 | Children and families report feeling heard with sensitivity, respect, and compassion. |
| 1. Children and families have the space and power to actively identify and work towards their goals in their healing journeys in a way that is unique to their circumstances.
 | Children and families report having the space and power to take responsibility for their healing with support from practitioners. |
| 1. Children and families feel that their wisdom and resilience is respected and valued.
 | Children and families report that their wisdom and resilience is respected and valued. |

| 6. Know yourself and learn attributes | Indicators |
| --- | --- |
| 1. Children and families are supported in the context of their unique backgrounds, with considerations made to their gender, culture, religion, sexuality, ability, and understanding.
 | Children and families report that their backgrounds are explored, respected, celebrated, and reflected on in their work with practitioners. |
| 1. Children and families feel that their unique circumstances and values are acknowledged and respected.
 | Children and families report that their unique circumstances and values are acknowledged and respected. |

## Practitioner level

| 1. Trustworthiness attributes
 | Indicators |
| --- | --- |
| 1. Practitioners prioritise development of relationships with children and families characterised by consistency, honesty, and reliability in their work.
 | Children and families report practitioners are reliable and use a warm, honest, empathetic approach in their interactions. |
| 1. Practitioners participate in honest and reflective practice/practice supervision to refine their trauma responsive skills and practice wisdom.
 | Supervisors report that practitioners actively participatein reflective practice/practice supervision and discussions. |

| 1. Safety attributes
 | Indicators |
| --- | --- |
| 1. Practitioners understand what they bring to build safe relationships including emotions, values, and how to sit with discomfort.
 | Practitioners report that they understand what they bring to interactions with families and how to build on their strengthsand work with their challenges to create safety. |
| 1. Practitioners work in safe ways (culturally, emotionally, physically, and spiritually) that includes a holistic approach that meets the needs of families they work with.
 | Practitioners demonstrate an understanding of the many dimensions of safe practice and creating safe spaces for children and families, evidenced by case management documentation. |

| 1. Peer and community support attributes
 | Indicators |
| --- | --- |
| 1. Practitioners work with families to connect them to peer and community support networks.
 | Case notes/supervision recordsindicate that families have been supported to access peer and community support networks formalor informal (where relevant). |
| 1. Practitioners participate in peer support sessions with colleagues within their organisation and broader practice community.
 | All practitioners report that they access peer support with colleagues within their organisation and broader practice community. |

| 1. Collaboration attributes
 | Indicators |
| --- | --- |
| 1. Practitioners participate in ongoing learning opportunities[[7]](#endnote-4) to support authentic partnerships with children and families in their healing journeys.
 | Practitioners report participation in ongoing learning relevant to workingin partnership with children and families. |
| 1. Practitioners connect with the communities of families to understand their experiences of trauma and how to act as allies in supporting capacity building within communities.
 | Practitioners report having connections with communities of families to understand their experiences of trauma and support capacity buildingas allies to cultural communities. |
| 1. Practitioners collaborate effectively with service partners.
 | Practitioners report effective collaborative relationships are in place with service partners. |

| 1. Empowerment and self-determination attributes
 | Indicators |
| --- | --- |
| 1. Practitioners create a space where children and families can raise their voices and can be heard with sensitivity, respect, and compassion.
 | Children and families report having an active voice and feeling heard in their healing journey. |
| 1. Practitioners are skilled in asking appropriate questions that enable children and families to draw on their own wisdom and resilience in their healing process.
 | Practitioners report confidence in asking appropriate questions to discern the most appropriate response to each individual’s trauma experience,including supporting children and families to draw on their own wisdom and resilience in the healing process. |

| 1. Know yourself and learn attributes
 | Indicators |
| --- | --- |
| 1. Practitioners understand their roles as allies in supporting the healing and recovery of Aboriginal children, families, and communities.
 | Practitioners report they are well supported to understand their roleas allies and how this forms partof trauma responsive practice. |
| 1. Practitioners participate in ongoing reflective practice to deepen their awareness of how their own values, bias, assumptions, and beliefs can impact on acknowledging the strengths and diversity of the families they work with.
 | Practitioners report they have access to, and participate in, reflective practice sessions that deepen their awareness of their own values, bias, assumptions, and beliefs. |
| 1. Practitioners participate in learning to deepen their understanding of the impact of trauma in varying contexts, such as intergenerational, historical, and collective trauma experiences (including those experienced by CALD communities).
 | Practitioners report they have participated in learning to deepen their understanding of trauma across multiple contexts. |
| 1. Practitioners are self-aware and reflective regarding their own lived experiences of trauma and how this may influence their practice when engaging with children and families, other practitioners, the community, and the system.
 | Practitioners articulate/demonstrate self-awareness and reflective capacity regarding their own lived experiences of trauma (where relevant) and the impact this may have on their work with familiesand colleagues. Practitioners initiate and/or seek out regular support and supervision to mitigate these impacts. |

## Organisation level

| 1. Trustworthiness attributes
 | Indicators |
| --- | --- |
| 1. Organisations share information in a way that helps everyone understand the operations and decision-making processes, in a way that supports safety and respects people’s privacy.
 | Practitioners report that decision- making in organisations is transparent. |
| 1. Organisations recruit personnel with relevant skills and similar in demographic to the population they are serving.
 | Workforce development plans are inplace to achieve a diverse workforce profile reflective of the communities served. |
| 1. Organisations have an identified ‘trauma responsive champion’ at a senior level of leadership.
 | An identified ‘trauma responsive champion’ at a senior level of leadership exists within organisations. |
| 1. Organisations have trauma responsive principles embedded in policy and associated guidelines.
 | Organisations embed trauma responsive principles in policy and associated guidelines and make these accessible to children and families. |

| 1. Safety attributes
 | Indicators |
| --- | --- |
| 1. The environmental design of the service context promotes safety for children, families and staff.
 | Children, families and staff report that the service is provided in an environment that feels safe to them. |
| 1. Organisations foster a culture of safety for children, families and staff.
 | Children, families and staff report that their interactions support safety at all levels of organisations. |
| 1. Organisations foster a culture of safety for all staff that acknowledges the complexity of the work for practitioners and other personnel.
 | Practitioners and other staff report feeling safe to honestly reflect on their work and raise any safety concerns. |
| 1. Organisations proactively support the wellbeing of practitioners and other staff.
 | Practitioners and other staff report feeling that their wellbeing is supported by their organisation. |
| 1. Organisations provide trauma responsive learning and supervision for practitioners to support their development of reflective practice and protect against vicarious trauma.[[8]](#endnote-5)
 | Organisational policies and resources arein place to ensure regular learning and development in trauma responsiveness and the effects of vicarious trauma. |
| 1. Organisations are proactive in providing wellbeing support for practitioners, as well as responding in a timely way when practitioners require support for their wellbeing.
 | Practitioners report that their organisation is proactive in providing wellbeing support as well as responding in a timely manner when required. |
| 1. Organisations provide practitioners and other staff guidance for delivering culturally safe services.
 | Evidence of guidance for practitioners and other staff to support cultural safety through local cultural communities. |

| 1. Peer and community support attributes
 | Indicators |
| --- | --- |
| 1. Organisations provide practitioners the resources, structures, and processes to connect families to peer and community support networks.
 | Practitioners report the capacity to connect families to peer and community support. |
| 1. Organisations and leaders support practitioners to connect with their peers in the sector for support.
 | Practitioners report that they have access to peer support sessions with colleagues within the sector and thereis evidence of structures in place to support these connections. |

| 1. Collaboration attributes
 | Indicators |
| --- | --- |
| 1. Organisations collaborate with service partners toward shared outcomes.
 | Existence of partnering agreements with service partners with shared outcomes. |
| 1. Organisations provide practice guidance to support effective collaboration with families and their communities.
 | Evidence of practice guidance andlearning opportunities for all practitioners to support their abilityto collaborate with families and their communities. |

| 1. Empowerment and self-determination attributes
 | Indicators |
| --- | --- |
| 1. Organisations provide practitioners with learning opportunities in deep listening[[9]](#endnote-6) and responding to child and family voices in a culturally safe way.
 | Evidence of workforce participation in learning opportunities to support cultural safety, deep listening and responding to child and family needs. |
| 1. Organisations provide learning opportunities for practitioners to enhance their skills in asking appropriate questions to understand how to empower children and families on their unique healing journeys.
 | Records of learning opportunities provided on communication skills that support the empowerment of children and families. |
| 1. Organisations support practitioners to prioritise the safety of the child while privileging the voice of families.
 | Policies and processes are in placeto ensure the safety of children is paramount while privileging the voice of their families. |
| 1. Organisations facilitate opportunities for those with lived experiences to contribute to systems and service design and implementation.
 | Evidence of structural and organisational supports for families with lived experiences to enable their active voice in systems, service design and implementation. |
| 1. Organisations are committed to the Aboriginal co-design principles and System Design Criteria in all service development.
 | Policies and practice guidance arein place to ensure Aboriginal people participate in all stages of service development, and that the organisation works to support Aboriginal people’s right to self- determination; including clarity about the role of non-Aboriginal allies. |
| 1. Organisations support practitioners to walk alongside children and families in a way that acknowledges their strengths, culture, community and family dynamics.
 | Practitioners report that they are supported by their organisation to walk alongside children and families in a way that acknowledges their strengths, culture, community and family dynamics. |

| 1. Know yourself and learn attributes
 | Indicators |
| --- | --- |
| 1. Organisations provide practitioners the conditions that enable them to safely reflect on their understandings of gender, culture, religion, sexuality, and ability in order to validate the unique circumstances and beliefs of the children and families they are working with.
 | Evidence of reflective learning opportunities regarding gender, culture, religion and sexuality are being embedded, in supervision policies and workforce development. |
| 1. Organisations provide learning opportunities specific to the impacts of trauma, and intergenerational trauma, for culturally and linguistically diverse families and communities, including newly arrived refugees.
 | Evidence that learning opportunitiesare provided on the impacts of trauma including intergenerational trauma and understanding trauma experiences of diverse cultures. |
| 1. Organisations understand that lived experience of trauma can impact practitioners as well as children and families. Organisational processes promote safety, practitioner’s wellbeing and self-awareness through supervision and reflective practice.
 | Practitioners report that their organisation encourages and supports self-awareness, personal and professional wellbeing and they know how to access additional support services when needed. |

## Funder level

| 1. Trustworthiness attributes
 | Indicators |
| --- | --- |
| 1. Funder makes resources available to organisations for trauma responsive learning opportunities for all staff and trauma responsive supervision for practitioners.
 | Evidence of funder resourcing for learning opportunities and collaboration with organisationsto ensure trauma responsive supervision is available for practitioners. |
| 1. Funder shares information to help everyone understand the operations and decision-making processes of the system, in a way that supports safety and respects people’s privacy.
 | Organisations report transparency in the way that decisions are made at the systems level to promote safety while respecting people’s privacy. |
| 1. Funder identifies a ‘trauma responsive champion’ at a senior level of the funding agency to support the ongoing implementation of a sector wide trauma responsive approach.
 | Evidence of an identified ‘trauma responsive champion’ at a senior level of the funding agency. |
| 1. Funder supports an active network of trauma responsive champions across the sector.
 | Existence of an active network of trauma responsive champions across the sector. |

| 1. Safety attributes
 | Indicators |
| --- | --- |
| 1. Funder ensures safety for children, families, practitioners, and other staff is a key measure of performance.
 | Organisations report that there are mechanisms in place for measuring safety for children, families, practitioners, and other staff. |
| 1. Funder ensures adequate resources are provided to promote holistic and safe practices for children, families, and staff.
 | Organisations report capacity to promote holistic, safe practices for children, families, and staff. |
| 1. Funder provides adequate capacity for organisations to support practitioner wellbeing.
 | Organisations report capacity to support practitioner wellbeing. |
| 1. Funder ensures resources are available to provide guidance and support to practitioners to connect to communities of families they are working with in a culturally safe way.
 | Organisations report that resources are available to provide guidance and support to practitioners to connect to communities of families they are working with in a culturally safe way. |

| 1. Peer and community support attributes
 | Indicators |
| --- | --- |
| 1. Resources are available to enable the coordination of peer and community support approaches for practitioners to link families with when required.
 | Evidence of the funder providing organisations with resources to support practitioners to access peer and community support for families, with specific considerations given to Aboriginal and CALD communities. |
| 1. Funder provides periodic practice forums for practitioners to provide formal and informal peer support.
 | Evidence of the funder providing periodic practice forums for practitioners. |

| 1. Collaboration attributes
 | Indicators |
| --- | --- |
| 1. Funder and organisations work in collaboration to identify areas of trauma responsive capacity building that are priorities for investment and development.
 | Existence of trauma responsivecapacity building plans for the sector that have been developed in collaboration with key stakeholders, including those with lived experience and local Aboriginal community representatives. |
| 1. Funder monitors collaboration with families, other practitioners, and relevant services.
 | Evidence that demonstratesfunded services collaborate with families, other practitioners and relevant services. |

| 1. Empowerment and self-determination attributes
 | Indicators |
| --- | --- |
| 1. Funder facilitates opportunities for those with lived experiences to contribute to systems and service design and implementation.
 | Evidence the funder has supported regular opportunities for families with lived experience to contribute to systems and service design and implementation. |
| 1. Funder is committed to the Aboriginal co-design principles and criteria in all service and system development.
 | Policies and practice guidance are in place to ensure Aboriginal people participate in all stages of service development, with clarity and guidance for how non-Aboriginal allies participate in the process. This includes evidence of the sector recognising Aboriginal cultural strengths, supporting Aboriginal people’s right to self-determination and acknowledging the truth of our shared histories. |
| 1. Funder ensures resources are available for learning opportunities for practitioners in deep listening to children and families’ trauma experiences.
 | Evidence of resources available for learning opportunities of practitionersin deep listening to children andfamilies’ trauma experiences. |

| 1. Know yourself and learn attributes
 | Indicators |
| --- | --- |
| 1. Funder provides opportunities for practitioners and organisational leaders to come together to explore and reflect on approaches in responding to families’ unique and diverse needs without judgement.
 | The funder convenes periodic practice forums for practitioners and organisational leaders in the sector to come together and explore approaches that support self- reflection and promote personal and professional growthin responding to children and families’ unique needs. |
| 1. Funder provides opportunities for practitioners and organisational leaders in the sector to come together to explore approaches to responding to intergenerational trauma.
 | The funder convenes periodic practice forums for practitioners andorganisational leaders in the sector to come together and explore approaches that support self- reflection and promote personal and professional growth in responding to intergenerational trauma. |
| 1. Funder provides opportunities for practitioners and organisational leaders in the sector to come together to acknowledge and celebrate cultural healing practices and cultural resilience.
 | The funder convenes periodic practice forums for practitioners and organisational leaders in the sector to come together to acknowledge and celebrate cultural healing practices and cultural resilience. |

## Appendices

### Appendix 1 – ‘The Model’ text description

The model is depicted as a series of concentric circles.

The centre of the model is the child.

Surrounding the child is the family, community, practitioner and funder.

The outer ring of the circle is made up of six principles:

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

[Return to ‘The Model’](#_The_Model).

### Appendix 2 — ‘An Aboriginal view of the Model’ text description

The model is depicted as a circle containing many pebble-like shapes. The pebbles are multi-coloured, reflecting the interconnectedness of the elements in the model.

The child, family and community are represented in shades of green. Practitioner is represented by blue. Organisation is represented by orange. Funder is represented by red.

The centre of the model is the child, in dark, emerald green.

Surrounding the child is the family, community and practitioner. These are shown in mingling shades of lighter green and blue.

Surrounding them all are the organisation and the funder, shown in mingling shades of orange and red.

Outside the circle are the six principles:

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

[Return to ‘An Aboriginal view of the Model’](#_An_Aboriginal_view).

## Glossary / End Notes

1. **Funder** in this context is the government department designated to administer funding as part of the Child and Family Support System in South Australia. [↑](#endnote-ref-1)
2. Mental Health Coordinating Council (MHCC) 2013, Trauma-Informed Care and Practice: Towards a cultural shift in policy reform across mental health and human services in Australia, A National Strategic Direction, Position Paper and Recommendations of the National Trauma-Informed Care and Practice Advisory Working Group, Authors: Bateman,
J & Henderson, C (MHCC) Kezelman, C (Adults Surviving Child Abuse, ASCA) [↑](#footnote-ref-1)
3. The term ‘agency’ in the context of this framework, refers to a family’s feeling of control over actions and consequences. [↑](#footnote-ref-2)
4. For the purpose of this framework ‘practitioners’ denotes those in direct practice roles, ‘all staff’ denotes everyone in an organisation, ‘supervisor’ denotes those providing direct practice supervision to practitioners and ‘frontline staff’ references all those who come into contact with clients. The term ‘children’ includes all dependants for a family. A Glossary of Terms is included at the end of this document to clarify some of the other terms used in this document. [↑](#footnote-ref-3)
5. **Integrity** in this context is about ‘wholeness’ – needing all parts in order for the system to operate in a trauma responsive way. The principles represent the ‘spokes’ of a wheel – this provides the wheel the integrity it requires to be resilient to obstacles it might encounter. For example, if one of the spokes are broken or missing the wheel will not have the strength required to ride over ‘bumps on the road’. [↑](#endnote-ref-2)
6. **Culturally Safe** in this context is being provided with a safe, nurturing and positive environment where children and families are comfortable with being themselves, expressing their culture and their spiritual and belief systems (adapted from the SNAICC ‘Supporting Carer’s information at [supportingcarers.snaicc.org.au](http://www.supportingcarers.snaicc.org.au/connecting-to-culture/cultural-safety/).)

From a practitioner and service perspective it is understood as a genuine respect and authentic interest in learning about families or children’s culture by listening actively and ensuring service providers are supported in learning about transcultural trauma. [↑](#endnote-ref-3)
7. **Learning Opportunities** in this context encompasses a broad range of activities including, but not limited to, critical reflection, personal and professional development, engagement in workshops/communities of practice, mentoring, online learning opportunities and research. [↑](#endnote-ref-4)
8. **Vicarious Trauma** in this context is experiencing the impacts of trauma by watching or hearing about a traumatic event or experience. [↑](#endnote-ref-5)
9. **Deep Listening** in this context is taking the time to listen to the experiences of children and families without making judgement and with the clear intent to deepen understanding of the experiences of children and families as opposed to ‘listening to respond’ or thinking about how to ‘fix’ or ‘solve’ the assumed problem.

**More information**

To supplement the framework, more detailed information about the new Child and Family Support System is available on the Department of Human Services website: [www.dhs.sa.gov.au/cfss](http://www.dhs.sa.gov.au/cfss). [↑](#endnote-ref-6)