



Trauma informed care within Primary Health Care

Why this research is needed: Historical and present day experiences of unresolved trauma underlie some of the most complex health and social issues within Aboriginal communities. Trauma informed services look at all aspects of service operations through a 'trauma lens': their primary mission is underpinned by knowledge of trauma and the impact it has on the lives of clients receiving services. Recent evidence has demonstrated that integrating trauma informed systems and services improves health and social and emotional wellbeing outcomes within communities and promotes confidence in responding to trauma-related issues amongst health service staff. Since 2014, Aboriginal Medical Services Alliance Northern Territory (AMSANT) has been delivering training and information sessions on culturally responsive trauma informed care (CRTIC) to services working in our communities. In addition, it has recently commenced developing processes to support services to integrate CRTIC approaches across systems and policies in their organizations.

What this research will do: This feasibility study will evaluate the viability and effectiveness of AMSANT's model for CRTIC training and implementation within an Aboriginal primary health care (PHC) service. We propose that CRTIC is the suggested model of best practice in supporting clients, staff and organisations from the impacts of trauma, especially for health and social services serving Aboriginal communities. However what is needed is further study of best practice in implementing CRTIC within all levels of an organisation. In this feasibility study, we will observe if, how and why staff have integrated CRTIC into routine clinical practice, service delivery and management practices. We will also be identifying organisational-level enablers and barriers of CRTIC practice. By using appropriate participatory methodologies, this project allows for contextual, dynamic and relevant evidence building of CRTIC in Aboriginal Community Controlled Health Services (ACCHS), driven by those participants who are actively implementing the process. The benefits for staff and clients are manifest, and are particularly well suited to the ACCHS environment, given the complexities of intergenerational trauma within the communities served, and the role of ACCHS in supporting their clients through their own culturally safe ways of healing.

How this research will be used: Findings from this project will inform the development of a good practice model for integrating CRTIC within Aboriginal PHC services in central Australia. The project will identify champions within the organization to continue advocacy for, and development of, CRTIC processes, and findings will be disseminated as agreed by all partners in the research to promote the model more broadly.

Project details

Lead partner: Aboriginal Medical Services Alliance Northern Territory

Collaborating partner: Central Australian Aboriginal Congress

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