The Women's Cottage National Redress Support Service

DO NO HARM A Duty of Care

A Work Practice Discussion and Reflection Resource

December 2021

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Background: This resource describes the work practice journey to date of the Redress Support Team at The Women's Cottage in Richmond NSW. A journey that has been informed from learning from the women we work with and reflecting on our own work practice and thinking. Identifying what we are learning from the women we work with and exploring our own practice and assumptions is helping to inform what we observe to be the components of effective practice that need to be applied in Redress work and in our individual practice. This is an ongoing journey with more to learn and apply in seeking positive outcomes for the women we support.

Other service providers will likely have more to add to this conversation. We invite the use of this resource to spark those conversations and reflection on practice, to learn from our client's experiences and to strengthen the collective knowledge and skill of practitioners and key stakeholders involved in National Redress Scheme service delivery with the intention of increasing positive outcomes for clients / community.

We recognise the value of the skills and contributions and skills of all experienced Redress support workers. We invite and look forward to further conversation and practice development partnerships. If your service would like to add to this conversation, and offer your learning to our team and other services, please contact:

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Acknowledgements: The work practice reflection that led to the development of this resource has come from the dedication and commitment of Redress Team at The Women's Cottage. Thanks are extended to the Redress Team, Angie Gleeson, Sarah Dillane, Kelly Haines and Women's Cottage Manager, Maria Losurdo.

This work has been greatly assisted through insights and discussions with our external clinical supervisors, Merle Conyer and Mary Jo McVeigh.

Acknowledgement and deep thanks are also extended to the women we work with every day, who teach us much about courage and determination as they seek justice and healing.

Permission to Use: Permission to use this information is offered to all services providing Redress Support to clients in their own services. We request you acknowledge the source of any information formally quoted or replicated.

The Women's Cottage National Redress Support Service

Hawkesbury Women's & Kids Services Collective Inc (The Women's Cottage ©) has been funded by the Department of Social Services to provide services to women impacted by sexual assault and institutional sexual abuse since 2016. Initially supporting any women who may be negatively impacted by The Royal Commission into Institutional Responses to Child Sexual Abuse, and then as a designated National Redress Support Service since the scheme's inception in 2018.

Foundational Learning

Many of the women we work with deal with a complex range of issues and challenges which can be barriers to engaging in the National Redress Scheme (NRS), that in turn pose complex work practice issues. These may include:

- High levels of past and present trauma and post-traumatic stress.
 For some clients even starting to think about what happened can be so distressing it can result in involuntary flashbacks, vomiting, tears and/or overwhelm.
- For Aboriginal and Torres Strait Islander women, high rates of institutional sexual assault as children and complex issues related to inter-generational trauma cause further distress. Over 40% of our clients identify as Aboriginal / TSI and speak of many additional issues of loss of culture and family, as well as being usure where they fit in the world. Past and present racism also causes significant additional trauma and a lack of trust of systems and people, making disclosure even more difficult. And in many cases never spoken about before.
- Additional multi-faceted comorbidity in women's lives: physical ill health, substance use, impacted mental health, physical and intellectual disability.
 Almost all of our clients to this point have also dealt with complex emotional or physical health issues that effect their daily lives, confidence, self-esteem. For many this has also impacted their access to education and impacted literacy and understanding of the world around them.
- Historical professional misunderstanding / mistreatment of perceived physical and mental health symptoms arising from the impacts of trauma). Many clients have a long history of being 'diagnosed' with mental health conditions, intellectual / cognitive deficiencies that were actually symptoms and experiences from the impacts of trauma. Such misdiagnosis has often led to trauma, shame, blame and distress on top of past traumatic experiences.
- Ongoing life crises that impact everyday choices and functioning such as poverty, domestic violence, homelessness, literacy issues and social disengagement.
 These issues often require the more immediate focus of support work before a woman is in a place to safely undertake / progress her Redress NRS application.

Past experiences of trauma can significantly impact on adult relationships and sense of selfworth. Multiple issues can arise that increase the potential for domestic violence and other forms of unsafe experiences and inequity. It is important to make sure that women are not facing pressure or coercion from others in relation to their NRS application or that the application is not increasing any existing safety issues and concerns.

Cultural Recognition and Safety

Aboriginal / Torres Strait Islander women have been significantly impacted by histories of Institutional sexual assault as children. This is often entwined with the complex web of related issues of inter-generational trauma, chronic loss, inequity, and racism from the past and present impacts of colonisation. This makes ensuring cultural safety consideration and practice a critical aspect of all work practice. What cultural identity, safety, respect can look different for each client, and needs to be a foundation created through mutual conversation based on the personal meaning and experience of the client. And can go hand in hand with clients rediscovering and reclaiming what has been taken away alongside their Redress application journey.

The Potential for Further Harm

The potential and actual impacts arising from the process of exploring and/or applying to the National Redress Scheme (NRS) by its nature requires applicants to revisit painful experiences and memories with no known outcome. It can involve telling family members or friends for the first time. It can be impacted by the expectations of others. It can involve revisiting past unsuccessful attempts to seek help or not being supported in the way they should. It can bring up shame of not speaking up before or not being believed. NRS applications also ask people to grapple with someone else deciding how much their past experiences are 'worth' in terms of application outcomes and monetary payments. All these issues, and many more faced by applicants, can be a catalyst / cause for further psychological harm or distress. This must be recognised and carefully managed in the support process.

Over time, we have been increasingly confronted with the challenge of how to best work with women in ways that do not cause them further harm or distress. The concept of 'Do No Harm' as a Duty of Care arose from individual and team reflection on these challenges.

In our work we have found the unique nature of The National Redress Scheme NRS application process, coupled with the complex presenting needs of the women we support, has required more specific and deeper levels of thinking on what does *'best practice'** and 'duty of care' really mean in this new and evolving context. It has also heightened our awareness to pay close attention to ensure that all work practice is supportive of and aimed at the need to 'do no further harm'.

* Definition and meaning of 'Best Practice' are vexed issues. By whose standards and in what context is 'best' defined? For the sake of this discussion, this is an internal meaning for our team. It describes our intensions and aspirations to offer those we work with, with the best possible support, and the best possible outcomes from that support. It describes our desire to have clearly defined and applied work practices that are consciously applied. That we stay aware of the purpose of our work through ongoing reflection. **'Best Practice'** in this internal context also relates to ongoing professional development, supervision, and team discourse. And it relates to our desire to genuinely engage with and respect the women we work with. To be opened to learning from them to improve our work practice knowledge and skills. And to recognising the privilege it is to do this work.

Trauma Informed Care

A sound understanding of *Trauma-informed care** when working for vulnerable clients is a vital guide this work.

* The Australian Institute of Family Studies describes Trauma-informed care as a framework for human service delivery that is based on knowledge and understanding of how trauma affects people's lives and their service needs (Harris & Fallot, 2001). Which requires consideration of a person's environment beyond the immediate service being provided and of how their symptoms and presentations may be seen as adaptations to trauma rather than as pathologies (Herman, 1992). At the broadest level, traumainformed care means that services have an awareness and sensitivity to the way in which clients' presentation and service needs can be understood in the context of their trauma history (Knight, 2015). Kezelman and Stavropoulos (2012) noted that trauma-informed health and welfare settings and systems contrast dramatically with traditional settings and systems as they require different ways of operating, and without this understanding, risk re-traumatising service users. Trauma-informed approaches to care could be described as a strengths-based framework that is responsive to the effects of trauma (Bateman et al., 2013). And while the theory may vary, essentially have the same underlying philosophies in that that trauma-informed care means services are trauma aware, safe, strengths-based, and integrated. At the very minimum, trauma-informed services aim to do no further harm through re-traumatising individuals by acknowledging that usual operations may be an inadvertent trigger for exacerbating trauma symptoms.

The USA Substance Abuse and Mental Health Services Administration (SAMHSA 2014) approach to trauma-informed care makes four key assumptions that must be present as a basis of implementation for trauma-informed care, with a further six related key principles.

Key Assumptions of a trauma-informed approach

- **Realisation** at all levels of an organisation or system about trauma and its impacts on individuals, families, and communities.
- *Recognition* of the signs of trauma.
- **Response** program, organisation or system responds by applying the principles of a traumainformed approach.
- **Resist** re-traumatisation of clients as well as staff.

Principles of a trauma-informed approach:

- *Safety* Staff and the people they serve feel physically and psychologically safe.
- *Trustworthiness and transparency* Organisational operations and decisions are transparent and trust is built.
- *Peer support* Peers is the terminology SAMHSA use for individuals with lived experience of trauma or their caregivers. Peers are also known as "trauma survivors".
- *Collaboration and mutuality* This principle is about levelling power differentials between staff and clients and organisational staff to ensure a collaborative approach to healing.
- *Empowerment, voice, and choice* This principle emphasises the strengths-based nature of trauma-informed care. The organisation and ideally the whole service delivery system fosters recovery and healing.
- *Cultural, historical and gender issues* A trauma-informed approach incorporates processes that move past cultural stereotypes and biases, incorporates policies, protocols and processes that are responsive to the cultural needs of clients.

Feminist Understanding and Work Practice

However, as Feminist service provider other important considerations also influence our chosen work practices and principles. From a Feminist perspective we are keenly aware of the importance of recognising structural inequalities that impact on a woman's life experience. And further to this the critical importance of recognising colonial impacts on Aboriginal / Torres Strait Islander people and the past and present impacts of racism, disadvantage, and trans-generational trauma (and the links of this to the over representation of Aboriginal people impacted by Institutional sexual (and other forms of abuse.)

A Feminist lens also requires us to pay close attention to the dynamics of power that played out in the experience of abuse, in ongoing everyday life and in the relationship between client and worker. It is our responsibility to recognise that our positional power, our personal life experience power, and indeed our white privilege is not something that can be ignored in our work. Our work practice must include an understanding and transparency of how and where power exists and to mitigate this as activity and consciously as possible. This understanding needs to be applied to all aspects of our practice. From the way we talk and the words we use, through to the actions we take with or on behalf of those we work with. This awareness asks us to be determined to work in collaboration with women, to be led by them, and to reach clear agreements on the boundaries of the support to be offered. It also involves setting up a shared process to review and adjust practice to meet the identified needs and goals of each client we work with. And it requires joint discussion

and decision making with women on informed choice, on the right to say no, and on how informed choice and psychological safety concerns will be managed in the support relationship.

The Ongoing Work Practice Context and Conversation

This resource aims to give more shape to the (theoretic and ethical) contexts of direct service provision for Redress Support work at The Women's Cottage. It is also part of the process for us as a team to identify and explore what (our) *'best practice'* should and could look like, as individual practitioners and as a team. Our starting point is recognising that trauma informed practice requires safety – that worker and the people we serve feel physically and psychologically "safe enough" at all times. As well as being committed to broadly applied transparency, congruence, choice, and space to give your voice and be heard, from the macro to the micro, in the work we do.

"Safe enough": "We contest the binary of "safe or unsafe" when we co-create relationships of *enough-safety* with our clients. (Bird, 2000, 2004). [we] work to create *some-safety, enough-safety,* or a *safe-r* conversation and relationship. All conversations across difference are risky because power is always at play. Doing harm by replicating oppression is always a potential risk. (Reynolds, 2009)" Reynolds 2014

Ongoing practitioner reflection and awareness is critical to this process. To keep trauma informed practice and Feminist understanding at the centre of our work, and to go deeper in our thinking, we regularly discuss what we believe to be the ethical underpinnings of the work that we aim to stay mindful of. To explore what is driving what we do and how we do it.

As a team we have identified a range of important considerations that we endeavor to draw on to inform and guide our practice.

- Applying Trauma Informed theory and staying up to date on new research and learning.
- Recognition and transparency of the influences of power.
- Recognition of the past (and present) impacts of colonisation and trans-generational trauma for Aboriginal / Torres Strait Islander peoples.
- Supporting informed choice and participation. Taking active steps to ensure women are well informed of the process they are entering. What to expect along the way and their right and options for going at their own pace, making their own decisions, and pausing as needed.
- Conscious reflective practice. Spending time as a team to talk about how things are going. To share and explore new learning. And to hold ourselves and each other accountable to our practice intentions and aspirations.

- Ongoing curiosity and learning. Staying open to new or unexpected outcomes, positive and negative. And taking this as an opportunity to learn and grow professionally.
- Modelling respectful relationships and offering opportunities for women to increase a felt sense of safety as a foundation to the work. We know we do not have control of the outcome of a woman's NRS application, but we can aim to offer a support experience that is positive and offers the possibility for healing along the way.
- Clear frameworks for doing no further harm and clear processes for supporting informed consent and informed choice.
- Having processes in place to attend to and support physical and emotional distress, mental health vulnerabilities and overall client well-being.
- Adopting response-based practice by being conscious of using language that does not conceal or minimise abuse (or power), but rather exposes violence as violence, clearly attributes offenders' responsibility, elucidates, and honours client's resistance, and works against the blaming or pathologizing of 'victims'. Further to this using language as a tool and doorway for a woman to explore her experience on her own terms, to re-author her own narrative, and to relocate power back with the survivor.
- Supporting clients to have an increased awareness and skill to recognise and moderate the impacts of trauma in the moment, with support and on their own.
- Supporting awareness of the behind-the-scenes systems and processes at play impacting NRS applications and managing expectations. For example: the time frames and different processes involved; how decisions are made and who makes them; options for providing extra information if needed; how the NRS communicates with applicants and options for support with this.
- Focus on seeing the systems at play as distinctly separate to a client's personal truth and selfworth. A system that is ultimately separate to the client's right for recognition and separate to the complete accountability of those who have done harm.

What does 'redress' mean to us and how does that impact our work practice?

A significant reflection for the team has been realising that at times it can feel like there is a mismatch between the formal systems and processes in completing a NRS application (and the National Redress Scheme itself) and a more personal felt sense of 'redress' (for workers & clients).

This has opened up the desire to strengthen our work practice by being committed to keeping a personal meaning of 'redress' as a guide and a touch stone in our relationship with clients. Thinking

of 'redress' not just as future (possible) outcome of a NRS application, but as something we can offer every time we interact with clients. Definitions of redress that have personal resonance for the team include: To put right (a wrong); restoration, remedy, atonement. To remedy or set right that which is unfair / unjust; satisfaction sought or gained for a wrong suffered.

Knowing as well that this intention / approach cannot change or compensate for the harm or damage that has been caused, but as a way of demonstrating to women how they deserve to be treated, what they have always deserved. By holding this goal in the forefront of our work practice: in every conversation, phone call, act of advocacy, when holding space for difficult emotions and when validating a client's experience (as a child and now); we aspire to offer small moments of redress and of justice to the extent that is possible. To offer women the potential for small windows of healing along the way during their NRS application process to the extent that is possible. This happens in partnership with the women we work with. In exploring together what 'safety' means and might look like for each woman as the basis to explore what might help to expand and restore a women's current felt sense of safety. And how that could be supported as part of the application process, as well as in life more generally. From small things like texting before calling to give a woman a sense of readiness and choice, through to increasing a women's understanding of her current 'window of tolerance' for certain situations and exploring options for practicing how to expand this and strengthen self-awareness and self-regulation skills. Exploring together what would be meaningful for women to feel as sense of justice in her life now and that may be supported.

In our view, this is a vital foundational component of our role as a Redress Support Service. From the moment someone makes an initial enquiry through the application completion, waiting for and after an offer / outcome and when moving on after the NRS process has completed.

* Bringing a personal sense of redress into our work, is, in a way, is bringing a sense of justice into our work. Of working with women to better understand what meaning redress and justice has for them. Of offering the space to be treated with dignity and respect. A space of being heard and believed. A process and relationship based on justice within the recognition that the systems and institutions where the abuse occurred were not just. And indeed, that the current systems and institutions, including those that influence the outcomes of National Redress Scheme applications may not be just and may not provide an outcome that fully addresses or acknowledges the truth of a woman's experience or the pain and harm that has been caused. Bringing justice into our work offers an experience of what it is like to be treated as a whole and valued person. Offering a space for some healing outside the outcomes of the NRS application. A place where.... "Your identity is not equivalent to your biography. There is a place in you

where you have never been wounded, where there's a seamlessness in you, and where there is a confidence and tranquillity." John O'Donohue

Giving Shape to the Redress Journey

An early recognition by the team was that for a woman to have informed choice on the NRS journey she must first have some sense of the shape of the landscape she is entering. To this end the team has developed a broad overview of what has been learnt so far from both worker and client experience. This '5 Stages in the Redress Journey' tool is now used at the outset of client engagement and when preparing for and moving to next steps and stages. The overall aim of this resource is to give women a clearer view of what they might expect and space to make choices on if, when and how to proceed. The tool is used to identify where challenges may come up and to plan for additional support when needed. Overall, to offers women the information needed to set their own pace and make their own decisions and choices.

This resource has also been used to form the basis of a series of group programs that can offer information and support to small groups relevant to different stages of the application process.

The Redress Journey Stages Resource[©] developed by The Women's Cottage to support Redress clients provides the following information:

1] Window Shopping: What is Redress? Is it for me? Do I want to move forward now or later?

- At this stage we answer your questions about Redress (NRS) and explore if you are eligible to apply.
- We support you to decide if you want to apply and talk about what that journey may look like. At this stage we only need basic information.
- You do not need to provide in-depth information about what happened to you until later in the process when it comes time to do your application.
- This is also a good time to explore personal support networks and options and your choices about who to share this with.

2] Gathering Information: What information/professional advice do I need? How will this happen?

- When you have decided to go ahead, we talk with you a little more about what happened to you and what information might be needed to move forward.
- You may already know details like dates and places, and if not, we can support you to get hold of things like medical records, school records, foster care records etc.
- This is the time we connect you with free specialist legal advice to find out more about your legal rights and options.
- We also explore with you what other formal or informal support you may need around you during this time and help make that happen.

3] Writing Your Application: What does an application look like? What questions do I have to answer? What support will I have to do this?

• Applications can be written by hand or on a computer. We can do the writing/typing with you or for you.

- This is when we spend the most time with you to complete application.
- It is when the most detailed information is needed about what happened to you and how this has impacted your life.
- This happens at your pace, in your time and in your own way. You can start and stop as much as you need to.
- You can come to our office. We can come to you. Or we can talk via phone /online meetings. Or a combination of any of these.
- We know it can be hard to revisit these experiences and we are ready to offer you support and/or find you any extra support you might need.

4] Waiting for a Response: What do I need to think about while waiting for a response? How can

I be emotionally ready and supported while I wait?

- Once your application is submitted, we offer you support for your emotional and practical needs and hopes around the application.
- It can be a good time to think more about your hopes and dreams moving forward and what support and planning might be helpful.
- We stay in close contact with you during this time, if you want that, to support you with any issues the 'waiting' brings up.

5] Getting the Response & Moving Forward: What do I do when I get an answer to my application?

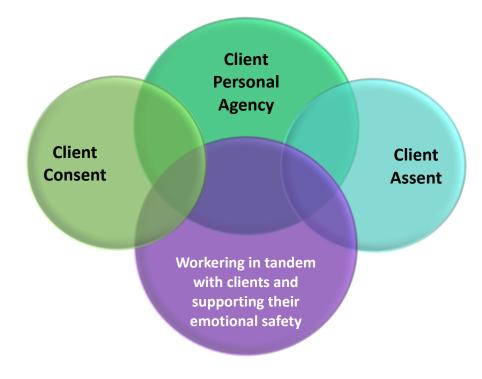
What are my options and choices now? Can I still get support while working all this out?

- Now we support you manage your offer and related emotions / practical needs.
- This can include supporting you with transition to long term counselling.
- It can also include things like setting up bank accounts to receive funds offered; updating your Will; and finding ongoing financial advice and support.
- It is also the time to explore what you may want to get from a direct personal response (DPR) if you want that to happen.
- It is a good time to reflect on and acknowledge your strengths and resilience and celebrate your journey to this point.
- It is also the time we say goodbye to you as a client and help you with this transition.

Duty of Care: Bringing it All Together

Providing women with information on the shape and the landscape of the application process alone is not enough to fully support their emotional safety and well-being. Supporting someone through the making a NRS application can be complex process. For workers it can often involve what feels like a tension between helping a client progress on a journey that is also causing them varying degrees of psychological and emotional distress. What is our duty of care in this process? What guides and signposts can help to direct best practice and genuine transparent working relationships? The Women's Cottage National Redress Support Service has identified several critical aspects that inform best outcomes, comprising four key considerations:

(this appears on my screen with no central overlap of 4 circles, but appears from my printer with a central overlap – which is what it is meant to be about I think? "the central part where they all overlap is where we aim to practice" – it needs an explanation or caption I think)



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Shared Understanding and Agreement:

All work needs to be based on clearly defined and articulated agreements of what the client wants and what assistance they are seeking from you as a service provider. It is important these conversations begin at the outset of the working relationship. It is also important that clear contracting / agreement is reached and that their 'consent' for moving forward is based on that agreement.

Because of the nature of applying to the NRS and the potential vulnerabilities that emerge during that process, it is the responsibility of the support worker to continually check in throughout the journey (sometimes throughout a single session) to ensure the client's possible changing needs and feelings are considered and their informed ongoing willingness and consent is still in place, referred to here as 'assent'.

It is also critical that the support worker understands and maintains their duty of care to support the emotional health and safety of clients. In the Redress space this involves the worker maintaining conscious awareness of when clients emotional state allows them to maintain their personal agency to give ongoing informed consent / assent to continue to work on emotionally challenging content, and/or when the direction of work practice needs to be re-focused on emotional support. Initial and ongoing conversations should cover how difficult times might be dealt with. What type of support the client might want at these times and what is the agreed plan of action if the worker is concerned about the client's psychological / emotional distress and safety.

The role of the support worker is to always stay in tandem with where the client is at in their capacity to maintain their own agency and drive decision making. And to recognise if / when a client could be moving into more vulnerable territory when their agency, and therefore their capacity for informed consent could be wavering.

Defining and Recognising Agency, Informed Consent and Assent

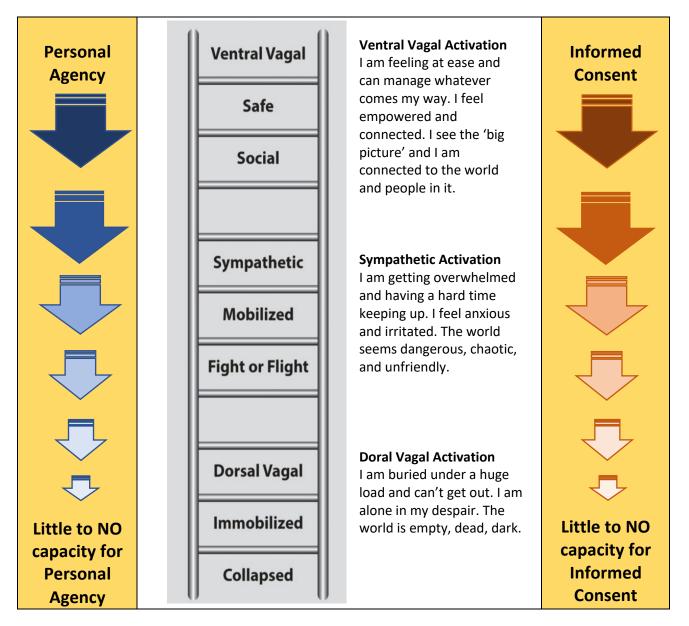
Drawing on the work of Deb Dana on applying the polyvagal theory can be a helpful guide for this. By using Deb Dana's practical tool, that visualises the responses of the autonomic nervous system as a ladder, this offers a framework to also draw correlations between personal agency and the capacity to give informed consent with the level of nervous system activation a client may be experiencing. This can also be used as a visual tool to guide conversations and working agreements with clients. The following diagram illustrates how we as a team connect consent and assent with nervous system activation.

Using this adapted diagram (*Linking Polyvagal Theory with Agency, Informed Consent and Assent*) as a guide, it is the role and duty of care as a worker supporting someone through their NRS application process, to recognise where a client might be at any one time and adjust their practice to best meet their needs and to support both their choices and their emotional safety.

While a client is exercising their personal agency and has the capacity to make informed decisions, the worker's role is to be fully guided by the client. To continue into vulnerable territory with the client, even if strong or distressing emotions are present. In fact, walking with someone through this process can offer clients a supportive space to put into practice the self-regulation techniques they have learnt. Moving through this type of self and other care process can provide an experience of repair and healing.

However, if a client's emotional vulnerability or distress increases, at this point that the support worker has a duty of care to recognise this and shift their own focus from supporting the 'doing' the application, to taking a more proactive mental health support role. To provide the support needed for the client to regain safety (based on the agreements of what support will be offered at these times already in place with that client).

Linking Polyvagal Theory with Agency, Informed Consent and Assent



In this second adapted diagram (*Duty of Care- To Do No Further Harm*) we have outlined how the role of the support worker needs to be adapted to stay in tandem with what is happening for the client. This requires the worker's focused awareness on nuanced responses, as different people will have experiences and may have varying degrees of capacity to discuss / understand what is happening for them and/or what their needs are at these times.

Duty of Care- To Do No Further Harm

When a client's nervous system is settled, the worker's role is to be guided by the client's direction on what they want to work on and how. If a client moves into a more agitated state, the role of the worker is to discuss observations, concerns, and options with client. Paying close attention to the client's increasing distress and if / when that may require a shift in focus and a more directive approach to support
state, the role of the worker is to discuss observations, concerns, and options with client. Paying close attention to the client's increasing distress and if / when that may require a shift in focus and a
that may require a shift in focus and a
client's well-being. If a client is triggered and in distress, the worker's role is to take a more directive
mental health first aid approach. To stop direct work on the application or other business if needed and to switch focus to client regulation support and safety.
The main task of the worker at this point
is to be aware of and to take steps to mitigate the distress or harm that could be experienced by clients from falling

A worker's 'Duty of Care' is to prioritise the emotional safety of the client and to minimise any further distress / decline in their emotional vulnerability. This includes ensuring the client is emotionally safe when it comes time to leave, and that a post session support / self-care plan is clear. Any experience when a worker takes direct actions under their duty of care in support of a client's emotional wellbeing can be discussed with the client in a later session, to explore if the support they received was useful and/or if other things could be put in place if needed on a future occasion. Working agreements can be adjusted to reflect this new learning / client informed decision making.

Not a Clear Science:

Being attuned to client's emotional experience, expanding awareness and self-regulation capacity, and drawing on Somatic Therapies which work with resourcing, titration and pendulation of emotional experience, are all important skills that need to be applied when working with clients impacted by trauma. It also requires a reflection and awareness on our own perceptions of agitation, fear, and harm. And the subtle and not so subtle ways these perceptions may impact on our work with clients.

Psychotherapy for Your Body: The Role of Somatic Psychology Today:

- **Resourcing** helps a person experiencing the effects of trauma to create resources for feeling safe and secure while working to resolve the trauma. These might include memories of good times or loved ones or thinking about a valued object or activity. One goal of therapy is to help people discover and build a supply of resources for support.
- Titration exposes a person to small amounts of trauma-related distress at a time in order to build up tolerance and avoid becoming overwhelmed by traumatic memories. In therapy, people pay close attention to the sensations they experience when revisiting a traumatic event and gradually become less affected by them.
- Pendulation, also called "looping," involves switching between resourcing and titration, allowing a person to move between a state of arousal triggered by a traumatic event and a state of calm. This helps the body to regain homeostasis, (a state in which the body's systems are regulated and working in balance).

It needs to be recognised that healing can sometimes be found for clients, in going into 'hard places' to a safe degree and moving through this as part of their personal journey with good support can be very helpful. It also needs to be recognised that our own concepts as workers of 'harm' or 'too much' or 'too far' may not be the same for our clients. The work practice challenge is that while we do not want to take away important opportunities for healing or repair. We also do not want clients to be further traumatised by their NRS application process or in our work with them.

Finding this balance needs to be done in partnership with clients. Initial discussions and contracting with a client need to explore what types of situations may arise when working on their application. When it might feel scary or overwhelming. When emotional distress might make it hard to keep going or cause confusion. It is important to have open discussions and agreements in place that explain the worker's duty of care for client safety. These discussions and agreements

need to explore what the client may want and need from you at these times and how you will work things out together if the client wants to push on when you may feel concerned for them.

Instances when these times were negotiated (successfully or less successfully) are also valuable opportunities to talk about with the client when they feel ready to do so. To explore what worked well, what could be done differently next time to better support the client. And adjust agreements as needed.

For some clients, ultimate justice and healing may only come with what feels like a 'good enough' NRS outcome. For others even a 'successful' Redress NRS outcome, may not speak to the pain and injustice caused by the abuse they experienced.

However, as Redress Support Workers, we can aim to offer clients opportunities to experience an increased sense of safety and choice. We can be led by clients and hear what is most important to them. And we can offer respectful, transparent, and healing focused support that is purposely focused on doing no further harm.

Written by: Maria Losurdo

Based on the work and contributions of the Redress Team (Angie Gleeson, Sarah Dillane, Kelly Haines, and Maria Losurdo) © The Women's Cottage December 2021

he Women's Cottage National Redress Support Service	ie National Redress journey look like - and what support can we offer?
The Women's C	What do the stages of the National I

	We support yc You can speed up o	ou at your own pace and w	We support you at your own pace and we are guided by your own choices. You can speed up or slow down whenever you want without losing access to support.	oices. National Redress Scheme For people who have experienced institutional child sexual abuse
Window Shopping	Gathering Information	Writing Your Application	Waiting for Response	Getting Answer and Journey Forward
Whatis Redress?ls it for me? Do I want to move forward now or later?	What information and professional advice do I need for my application? How will this happen?	What does an application look like? What questions do I have to answer? What support will I have to do this?	What do I need to think about while waiting for a response? How can I be emotionally ready and supported while I wait?	What do I do when I get an answer to my application? What are my options and choices now? Can I still get support while working all this out?
At this stage we answer your questions about Redress and explore if you are eligible to apply. We support you to decide if you want to apply and talk about what that iourney may look like	When you have decided to go ahead, we talk with you a little more about what happened to you and what information might be needed to move forward. You may already know details like dates and places, and if not, we	Applications can be written by hand or on a computer. We can do the writing/typing with you or for you. This is when we spend the most time with you to get the application completed. It is when the most detailed information is needed about what hannened to you and how this has	Once your application is submitted, we offer you support for your emotional and practical needs and hopes around the application. It can be a good time to think more about your hopes and dreams moving forward and what support and planning might be	Now we support you to manage your offer and related emotions or practical issues or needs. This can include supporting you with transition to long term counselling and taking part in direct personal response processes. It can also include things like setting up bank accounts to receive funds offered; updating your Will; and finding nuncing financial advice and sumort

Appendix 1: Stages on The Journey (Resource Developed by The Women's Cottage)

It is also the time to explore what you may want to get from a personal direct response if you want

We stay in close contact with you during this time, if you want that, to support you

impacted your life. This happens at your pace, in your time and in your own

care

records, foster

things school

At this stage we only need

basic information. You do

not need to provide indepth information about

records etc.

like medical records,

way. You can start and stop as much as

you need to.

come to you. Or we can talk via phone

You can come to our office. We can

you with free specialist advice to

what happened to you

find out more about your legal

rights and options.

when it comes time to do

your application.

until later in the process

This is also the time we connect

/online meetings. Or a combination of

any of these.

We also explore with you what

This is also a good time to

We know it can be hard to revisit these

experiences and we are ready to offer you support and/or find you any extra

other formal or informal support you may need around you during

this time and help make that

happen.

your choices about who to

share this with.

networks and options and

explore personal support

support you might need.

with any issues the 'waiting' brings up.

that to happen

It is a good time to reflect on and acknowledge your strengths and resilience and celebrate your

journey to this point.

It is also the time we say goodbye to you as an ongoing client and you help with this transition.

We will also check in with you about how you are going, if you are satisfied with the support we offer and how we might do better if needed.

If you have any questions or concerns at any time along the way, we are here to listen and support you.

Do No Harm – A Duty of Care	- (The Women's Cott	age Redress Support Serv	/ice) Dec 2021	Page 20
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References and Further Reading

A beginner's guide to polyvagal theory Deb Dana 2018, from The Polyvagal Theory in Therapy: Engaging the Rhythm of Regulation. https://med.uottawa.ca/family/sites/med.uottawa.ca.family/files/polyvagal_primer_dana.pdf

Language and Violence: Analysis of Four Discursive Operations Linda Coates & Allan Wade https://www.responsebasedpractice.com/wp-content/uploads/2020/04/Language-and-Violence.pdf

Power Threat Meaning Framework British Psychological Society 2018– Appendix 1 PTMF Guided Discussion - Appendix 1 (Older Adults).pdf (bps.org.uk)

Psychotherapy for Your Body: The Role of Somatic Psychology Today, June 5, 2017 Chris Walling, PsyD, SEP, https://www.goodtherapy.org/blog/psychotherapy-for-your-bodyrole-of-somatic-psychology-today

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach Substance Abuse and Mental Health Services Administration 2014 https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf

Structuring Safety in Therapeutic Work Alongside Indigenous Survivors of Residential Schools STRUCTURING SAFETY IN THERAPEUTIC WORK ALONGSIDE INDIGENOUS SURVIVORS OF RESIDENTIAL Richardson/Kianewesquao, Cathy, PhD;Reynolds, Vicki, PhD *The Canadian Journal of Native Studies;* 2014; 34, 2; CBCA Complete pg. 147

Trauma-informed care in child/family welfare services - Liz Wall, Daryl Higgins, Cathryn Hunter CFCA Paper No. 37 – February 2016

<u>Trauma-informed care in child/family welfare services | Child Family Community Australia</u> (aifs.gov.au)