

## Knowledge translation

Phoenix Australia has a strong commitment to applied training that leads to effective and sustainable improvements in the day-to-day practice of clinicians as they support people's emotional recovery after an experience of trauma. Within the rigour of a research framework, the following studies attempt to address real-world problems by helping to translate research findings into treatment approaches that are acceptable and accessible for clinicians, and that result in improved client outcomes.

## Training initiatives

### **NICS/Sexual Assault Fellowship**

Despite strong evidence for their effectiveness, best practice interventions for PTSD are often not used by clinicians. Phoenix Australia was sponsored by the National Institute of Clinical Studies (NICS) to conduct a training and practice implementation program with the aim of increasing the use of trauma-focused interventions amongst clinicians working in Centres Against Sexual Assault (CASA) and the VVCS. The objective of the program was to improve health care by getting the best available evidence from health and medical research into everyday practice. We identified a range of practitioner, client, and organisational barriers to adopting best practice. In collaboration with VVCS and CASA, these barriers were examined with the aim of developing a package to aid organisations in implementing best practice assessment and treatment approaches with minimal additional assistance.

### **DVA-funded Mental Health Practitioners Training Initiative**

This initiative aimed to increase the competency of secondary care providers delivering community-based treatment for veterans. We designed and delivered training in using a case formulation approach, which provides a framework for providers to think more systematically about clients with comorbid presentations. The learning collaborative model of training was selected, as research demonstrates that programs which require active participation and ongoing learning activities are more likely to result in lasting practice change. Evaluation of the program involved the collection of both qualitative and quantitative data from a range of sources, including the participants themselves, the trainers, and relevant stakeholders.

## Community initiatives

### **Trauma and Homelessness Initiative**

The Trauma and Homelessness Initiative was a collaboration between four different agencies that provide services to people experiencing homelessness (Sacred Heart Mission, VincentCare, Mind and Inner South Community Health), the Helen Macpherson Smith Trust and Phoenix Australia. The first four stages of the initiative were investigations into the relationship between trauma and homelessness: (1) conducting a literature review; (2) conducting focus groups with staff with the diverse group of agencies working with people who experience homelessness; (3) qualitative research with people who have experienced homelessness; (4) a quantitative cross-sectional study with over 200 people who experienced homelessness to investigate trauma and mental health issues. In the fifth and final stage we used the information from these investigations to develop an innovative trauma-informed service framework and trauma-informed worker guidebook.

### Literature reviews

Phoenix Australia conducts a number of different types of literature reviews for organisations and agencies. These reviews allow us to combine our expertise in the trauma field with our expertise in conducting literature reviews. Rapid reviews are conducted within a short time frame with the aim of addressing specific questions. Annual reviews are conducted to provide a review of important literature published in the preceding 12 months. Systematic reviews are conducted to comprehensively address specific questions. Each type of literature review acts to translate evidence so it can be used by organisations, agencies or the broader community.

### **Approaches for children exposed to trauma through abuse/neglect**

Many of the children involved with child and family service organisations have been exposed to trauma, including child abuse and neglect, and there are multiple approaches used to improve the outcomes for these children. The Department of Families, Housing, Community Services, and Indigenous Affairs (FaHCSIA) funded a literature review to identify and assess the evidence for approaches aimed at preventing and treating the outcomes children can experience after being exposed to trauma through abuse and neglect. Despite the literature review revealing 96 approaches to be evaluated, only one was assessed as well-supported (trauma-focussed CBT), with a further nine rated as supported. Although the evidence supported some approaches, there are several areas which need further research and evaluation to find the best ways to support children exposed to trauma through abuse and neglect.

### **Evidence Compass**

The Evidence Compass was developed by Phoenix Australia in response to DVA's commitment to expand client provider information in evidence-based research. We developed a rapid evidence assessment methodology and protocol and trialed it on four

research questions relevant to DVA's priorities. We investigated and assessed the evidence for: (1) the effective psychological interventions for depression; (2) emerging interventions in the treatment of PTSD; (3) strategies for reducing stigma associated with mental health disorders; and (4) the prevalence rates of substance use disorders in contemporary Australian veterans.

### **Gender differences in trauma-focussed interventions**

While trauma-focussed interventions are considered best practice for the treatment of PTSD, there is speculation that males and females may respond differently to treatment. A systematic literature review and meta-analysis funded by DVA was conducted to investigate potential gender differences in outcomes following trauma-focussed psychological interventions for PTSD. We found that trauma-focussed interventions were effective treatments for males and females with PTSD, and that there was some evidence that gender modified the effect of interventions.

### **Interventions to protect firefighters and emergency responders**

Firefighters and other emergency responders regularly face stressful and life-threatening situations through their line of work. The Victorian Department of Sustainability and Environment (DSE) commissioned a literature review to assess the best practice early intervention programs to protect firefighters and other emergency responders from posttraumatic stress and other psychological injuries. The literature review found that while posttraumatic stress was an inherent part of a firefighter's job, most individuals will be resilient and recover, with social support being one of the best predictors of recovery from trauma. Organisational factors can impact mental health outcomes. The prevalence rate of PTSD ranges from 8-37 per cent of firefighters.

### **Gender and barriers to help-seeking**

Males and females can approach mental health problems differently, and DVA recognises that their clients may have unique needs according to their gender. We conducted a literature review to investigate gender differences in the prevalence of mental health disorders, treatment access and preferences, and barriers to care, with particular reference to military and veteran populations. Overall, women and men are more similar than different in their experience of mental health problems. While women are generally more likely to seek help, stigma remains a significant barrier to care for both genders. The findings of the review highlight the importance of gender-sensitive practice.