



Phoenix
AUSTRALIA

CENTRE FOR POSTTRAUMATIC
MENTAL HEALTH

Understanding trauma.
Renewing lives.

ANNUAL REPORT

2020-21

Acknowledgement of Country

Phoenix Australia acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of Country throughout Australia and pays respect to all Elders, past and present. We acknowledge continuing connection of Aboriginal and Torres Strait Islander peoples to land, water and communities—places of age-old ceremonies, of celebration and renewal—and their unique contribution in the life of these lands.

We are committed to fostering an environment in which the relationship between Aboriginal and Torres Strait Islander peoples and their fellow Australians is characterised by a deep mutual respect, leading to positive change in our nation’s culture and capacity.



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Chair's message

The past two years have been an extraordinary challenge that we have faced as individuals, as families, in our broader community and in our workplace. To varying degrees, the experience of a global pandemic has provided many of us with an opportunity to reflect and it has also provided lessons from which we have learned.

For me, one reflection is how we initially addressed the challenge of the COVID-19 pandemic with an element of fear of the unknown. But we also addressed it with energy, strength and actions that guided Phoenix Australia through uncharted waters and helped us make necessary changes to become an organisation for the future.

I was struck by the importance of leadership during a crisis. As Chair, I was so proud of our Director, Professor David Forbes, Deputy Director Professor Andrea Phelps and the entire senior leadership team. They quickly swung into action to support staff who were working from home and maintained connection and engagement to ensure the mental health of all our staff was, and continues to be, the best it can be during these unprecedented times.

I was also particularly proud of how, at every level, our people stepped up to and beyond, to nurture Phoenix Australia through challenging financial and work-related issues. The saying that 'a problem shared is a problem halved' was never so true as our teams worked collaboratively while dealing with lockdowns, homeschooling, isolation and a lack of personal, family and community connection.

The role of trauma has never been so stark. But as we know, trauma is not new to Australia. Over the past few years, Australians have experienced drought, floods, bushfires, mice plagues and then COVID-19. So many profound events in a short space of time. How does a community get through when traumatic events follow one after the other, compounding the impact and stress?

These events have pushed mental health into the open when, not so long ago, it was hidden away or talked about in hushed tones. Such traumas highlight the importance of the work we do. Understanding how people unpack these compounded potentially traumatic events is very important as we go into a very uncertain future. At Phoenix Australia, our sense of purpose has been elevated. We recognise the fundamental importance of the research and work we do for the community's wellbeing. Now, more than ever before, the community and governments at all levels also recognise the importance of our work.

Three in four Australians will experience an event that can cause psychological trauma in their lifetime – that's nearly 19 million people. As we have all discovered during the last two years, every one of us can be affected by trauma in its many forms.

Our strategy **Understanding Trauma. Renewing Lives.** has provided a platform and roadmap for us during these challenging times. It recognises there is trauma in people's lives, but also that there is a road to recovery. Our research is proactive and focussed on how to help people recover and renew their lives.

We transitioned a large part of our evidence-based training online by establishing a Training and Workforce Development Portfolio. Face-to-face contact will always be important, but the ability to offer online training packages means we can now reach into any place and to anyone where our assistance is needed – nationally and internationally.

Partnerships and collaboration are key for our work. An example is our partnership with State Trustees Australia Foundation and its continued support to expand our Skills fOr Life Adjustment and Resilience (SOLAR) initiative in regional and rural Victoria. SOLAR is an early intervention program aimed at preventing serious psychiatric disorders following natural disasters like bushfires. The program can have important impacts in communities where there is less medical and health support than in urban centres.

Another important example is the strong relationship that Phoenix Australia has formed with the Canadian Centre of Excellence – PTSD. The two organisations share values and purpose and this year have embarked on a collaborative program of work to improve outcomes for veterans and their families.

Collaboration is also at the heart of the Centre of Excellence in Emergency Worker Mental Health. Phoenix Australia is leading the centre on behalf of the Victorian Government to provide best practice care for emergency workers. We believe it will be a game changer.

We are also strengthening our relationship with the Australian Government through a new professorial role in Defence Health.

Congratulations to our Director, Professor David Forbes, for his role as lead author of *Effective treatments for*

PTSD: Practice guidelines from the International Society for Traumatic Stress Studies and for the book he has co-edited on anger in high risk workplaces. These achievements indicate the esteem in which senior staff in our organisation are held.

I also congratulate our Deputy Director, Andrea Phelps, on her Professorship and her role in drafting the *Australian Guidelines for the Prevention and Treatment of Acute Stress Disorder, Posttraumatic Stress Disorder and Complex PTSD*.

I thank Greg Ridder and Lesley Podesta whose tenure on the Board finished in the past financial year. We are truly grateful for their wise counsel and contribution. I welcome Rodney Piltz, EY's Melbourne Managing Partner as a Director and Chair of our Audit and Risk Committee. We welcome back to the Board Professor Mal Hopwood, Director of the Professorial Psychiatry Unit at the Albert Road Clinic, who also chairs our Clinical Governance Committee.

Thanks to our Patron, Air Chief Marshal Sir Angus Houston AK AFC, and our ambassadors David Mann AM and Wing Commander Sharon Bown FN, FACN (Ret'd) for their continued support of our work. I welcome our new Ambassador, Magda Szubanski AO, and acknowledge the valuable work she has already done with Phoenix Australia to help spread the word about the impact of trauma and the potential benefits of seeking appropriate care.

Finally, I would like to thank the Phoenix Australia staff for their continued efforts and commitment to the organisation and our mission. The Board recognises the importance of every one of our people in their continuing efforts to deliver the best possible outcomes for our clients and the community.

Janine Kirk AO



Director's message

It has been a significant and challenging year as the impact of the COVID-19 pandemic has continued to influence so many aspects of how we live and work. Each of us has had to adapt to the circumstances brought about by COVID-19 – and so it has been at Phoenix Australia.

I am incredibly proud of all our Phoenix Australia team members as, despite challenges, they have continued their work to meet our strategic goals and mission – **Understanding Trauma. Renewing Lives.** – to improve outcomes for survivors of trauma.

Over the past year, Phoenix Australia has continued to expand our collaborations and partnerships across Australia and internationally, which has seen further growth in our impact. We continue to diversify the breadth of our clients across service agencies, trauma-exposed workplaces, federal and state government settings, and of course with the community directly. Furthermore, to meet our mission we broadened our organisational portfolios, expanding our Research and Policy and Practice areas. We established a Training and Workforce Development portfolio and increased our direct clinical footprint through an emerging Clinical Services portfolio.

A series of standout initiatives illustrate Phoenix Australia's commitment to **Understanding Trauma. Renewing Lives.** and the strategic plan that brings our mission to life.

Funding from federal and state health departments and collaboration with Primary Health Networks (PHNs), professional colleges and a range of community-based organisations enabled us to support frontline workers in managing their mental health and wellbeing in the context of the continued impact of the Black Summer bushfires. We were also able to provide targeted support in the context of the overlay of the COVID-19 pandemic on mental health and wellbeing.

Another important initiative has been the establishment of the Centre of Excellence in Emergency Worker Mental Health. Phoenix Australia is honoured to be leading this initiative on behalf of the Victorian Government, and we have been working closely with the emergency worker community to ensure the new services are tailored to their unique needs.

Under the new banner, Responder Assist, the initiative will provide Victoria's past and present emergency workers access to best practice community-based mental health care. We will achieve this through a targeted research project, as well as the establishment of a specialist network of clinicians that are trained in emergency worker mental health. Responder Assist aligns with our existing pilot initiative for police, the BlueHub, which was outlined in last year's report.

Like many organisations, we have had to make some rapid adjustments to accommodate restrictions associated with COVID-19. Over the past year, our Training and Workforce Development portfolio has successfully transitioned a considerable portion of our training to an online format, notably in the areas of psychological first aid, trauma-informed care, and evidence-based treatments for trauma-related disorders.

We have continued to build on the early intervention program, Skills fOr Life Adjustment and Resilience (SOLAR), of which Phoenix Australia led the development through an international consortium of trauma and disaster experts. Thanks to a range of new partners across government and community, the application of the low intensity SOLAR program has expanded across trauma populations demonstrating positive results, with seven SOLAR studies being conducted over the course of the past year. The need for accessible low intensity, evidence-informed early intervention programs is particularly high in the context in which we now live.

Phoenix Australia has continued to examine innovations in the treatment of trauma-related mental health problems. This includes exploring new treatments and new ways of delivering existing evidence-based treatments. An example of this includes the RESTORE trial. Funded through a National Health and Medical Research Council partnership grant with the departments of Veterans' Affairs and Defence, and Open Arms, the trial tested a more intensive form of prolonged exposure therapy for current and ex-serving veterans with posttraumatic stress disorder (PTSD). This trial has successfully concluded this year with very encouraging outcomes.

With the support of the Victorian Government, Phoenix Australia has also expanded its treatment research clinic at the Royal Park campus of the Royal Melbourne Hospital. This traumatic stress clinic, now open to the community, carries out a range of trials to advance the treatment of PTSD and associated trauma-related mental health problems, across a wide variety of trauma-exposed populations.

The current and ex-serving military community remains central to the mission of Phoenix Australia and we continue to support DVA and Defence on best practice for military-related mental health issues. More specifically we also look forward to appointing a new Professor of Military Mental Health in the coming year, funded through the Department of Defence.

In support of our mission around veteran and military mental health, Phoenix Australia continues to Co-chair the Five Eyes Mental Health Research and Innovation Collaboration (the Five Eyes MHRIC). The Five Eyes MHRIC brings together leading centres of military and veteran mental health with advisory roles to government across the UK, Australia, NZ, US and Canada and acts as a forum to share ideas and innovations across our countries.

I would like to thank our Chair, Janine Kirk AO, and the Board for their consistent support during a turbulent year. I would also like to thank Greg Ridder and Lesley Podesta whose tenure on the Board finished in the past financial year and whose service was of enormous benefit to me and the organisation. I would also like to welcome Rodney Piltz to the Board.

Congratulations to our Deputy Director Andrea Phelps on being awarded her Professorship over the past year. We also look forward to welcoming Professor Patricia Watson from the US National Center for PTSD as our newly appointed Director of the Centre of Excellence in Emergency Worker Mental Health.

Finally, I would again like to thank the executive management group and all the staff of Phoenix Australia for their continued professionalism and dedication to the work and mission of our organisation – to aid the understanding of trauma and renewing of lives.

Professor David Forbes

What is trauma?

Any one of us can be affected by trauma

Australian lives have and will be devastated by traumatic events. Three in four Australians will experience an event that can cause psychological trauma in their lifetime – that's nearly 19 million people living in Australia today.

Psychological trauma comes in many forms and impacts people from all walks of life.

Three in four Australians will experience an event that can cause psychological trauma in their lifetime

The impact can be deep and complex

The problems that arise can be complex and impair our physical and emotional wellbeing. The way we see ourselves, our relationships and activities, and our ability to feel safe in the world can be turned upside down.

People need help moving beyond harrowing events. Help and support takes many forms, but recovery and renewal is always possible.

Recovery and renewal is always possible

We are trusted experts

Phoenix Australia are experts in trauma-related mental health and wellbeing and are internationally recognised leaders in our field.

We are committed to driving forward the mental health agenda both at home and abroad.

We understand trauma and renew lives.

The National Centre of Excellence in Posttraumatic Mental Health

Phoenix Australia is Australia's National Centre of Excellence in Posttraumatic Mental Health.

For more than 25 years we have been a national and international leader in our field. We are at the forefront of the understanding, prevention and recovery from trauma.

Phoenix Australia is an independent not-for-profit organisation and a registered charity. With an affiliation with the University of Melbourne, our staff are employed by the University and we have a close working relationship with the Department of Psychiatry within the Melbourne Medical School.

Our Board of Directors includes independent members as well as senior representatives from the departments of Veterans' Affairs and Defence.

We have more than 60 researchers, clinicians and specialists in psychology, psychiatry and social work, allowing our reach to stretch to individuals, organisations and communities Australia wide.

Our vision

Improved wellbeing and quality of life for individuals and communities who experience trauma.

Our mission

To be an international leader in building the capability of individuals, organisations and the community to understand, prevent and recover from the adverse mental health effects of trauma. To be at the forefront of world's best practice in veteran and military mental health.

Research is at the heart of everything we do. We build evidence and translate knowledge into action such as improved treatment options and greater support for trauma-affected individuals, families and communities.

We are a vocal leader and support those impacted by trauma.

Our Expertise

Advancing knowledge and understanding of trauma

Our program of internationally acclaimed research advances the knowledge of posttraumatic mental health. Through the application of diverse research methodologies, we create real-world solutions and translate research findings into practical implications for governments, organisations and communities.

Serving organisations and communities

Our Policy and Practice portfolio encompasses policy and service development work as well as workforce education and training.

Our policy and service development work aims to establish the best practice standards for the management of trauma. We translate research into best practice policies and procedures, and work with organisations to build their capacity to minimise the impact of workplace trauma.

Our evidence-based workforce education and training programs improve the practice of those working with people, organisations and communities affected by trauma. We provide tailored and integrated training, supervision and consultation services that meet the specific needs of a diverse range of clients.

Knowledge mobilisation

We draw on our extensive research and clinical expertise in posttraumatic mental health to provide education, training and implementation solutions for organisations and communities that have been impacted by trauma or that work with people affected by trauma.

These may include one of our publicly available self-paced online courses that have broad application across diverse industries and professions, tailored face-to-face workshops, or a combination of the two.

Experienced subject matter experts liaise with the organisation to understand its specific challenges and can customise the training programs to suit unique circumstances or requirements.



Progress against the Strategic Plan 2020-22

Phoenix Australia's strategic plan for 2020-22 sets out an exciting and ambitious vision for our future. Our mission – Understanding Trauma. Renewing Lives – provides the frame for all that we do. Our values – passion, integrity, collaboration, responsiveness, excellence and guided by science – guide all aspects of our work and are reflected in our goals and the initiatives planned for this three-year period.

In reflecting upon our progress against the Strategic Plan 2020-22, we have detailed our goals, initiatives and the activities that are underway or have been completed to date.

Strategic Goal 1 – Phoenix Australia as a learning organisation centred around our people

Initiatives	Activities	Current status	
Enhance health and wellbeing of our staff	• Staff Representative Council established	Complete (ongoing)	✓
	• Additional five days 'recharge' leave granted	In progress	✎
Provide leadership and professional development opportunities and clear career progression pathways	• Standard provision for professional development introduced	Complete	✓
	• Participation in ACOTS supported for all staff	Complete	✓
Enhance operating model to enable staff to better support and respond to clients and stakeholders	• Move to Company Limited by Guarantee	In progress	✎
	• Strengthen Management Group with new Heads of Government Relations and Training and Workforce Development	Complete	✓
	• Build online training	Complete (ongoing)	✓
Build our digital capability and its application both internally and externally	• Formalise IT governance	In progress	✎
	• Rationalise software ecosystem	In progress	✎

Strategic Goal 2 – Improve outcomes for individuals, families and communities

Initiatives	Activities	Current status	
Enhance our national online trauma portal	• Ongoing development of www.recoveryonline.org.au	Complete	✓
	• Disaster portal developed	Complete	✓
Establish enhanced mechanisms to engage those with lived experience	• Appointment of senior specialist Police and Emergency Services with lived experience	Complete	✓
	• Co-design is being built into several projects	In progress	✎
Continue to test the feasibility of providing clinical services including assessment, planning and / or treatment	• Provision of clinical services through BlueHub	Complete (ongoing)	✓
	• Establishment of psychiatric assessment clinic	In progress	✎

Strategic Goal 3 – Advance evidence-informed practice and treatment

Initiatives	Activities	Current status	
Develop fully operational Traumatic Stress Research Clinic	• Three randomised controlled trials	In progress	✎
	• Four PhD projects	Complete	✓
	• Halaxy patient management system implemented	Complete	✓
Expand our Practitioner Support Service (PSS)	• DVA PSS renewed	Complete	✓
	• Multidisciplinary Advisory Panel established as part of the CoE in Emergency Worker Mental Health	In progress	✎
Enhance our training portfolio	• Appoint new Head of Training and Workforce Development	Complete	✓
	• Development of online training modules in PFA, TIC, TF-CBT	Complete	✓
	• Adaptation of PFA and TIC to industry	Planning in progress	✎
Establish implementation science-led model within policy and practice	• Established through collaboration with Canadian CoE-PTSD	Complete	✓

Strategic Goal 4 – Enhance the system of help and support for those affected by trauma

Initiatives	Activities	Current status	
Provide international leadership, build national and international network of collaborators	• Co-chair of Five Eyes Mental Health Research and Innovation Collaboration	Complete (ongoing)	✓
Establish best practice framework to guide trauma policy work	• Development of a framework to be used in work with high-risk organisations	Complete	✓
Enhance our capability in big data, advanced analytics, AI and machine learning and improve its application into our services	• Machine learning and machine listening used in research projects	Complete (ongoing)	✓
	• Development of partnership to access large international data sets e.g. US Strongstar data subject to funding		
Promote quality assurance and evaluation across the system	• QA/measurement systems established for BlueHub	Complete	✓
	• Outcome monitoring and communities of practice for DVA trauma recovery programs	Complete	✓
	• QA/measurement systems established for CoE in Emergency Worker Mental Health	In progress	✎
Develop research and clinical capability	• Establish postgraduate training opportunities		
	• two postdoctoral positions	Complete	✓
	• three master students and a clinical psychiatrist register in 2022	Planning in progress	✎

Who we work with

Exposure to trauma at work is common in many industries and services. We partner with and guide organisations, communities and individuals to reduce the effects of trauma.

Our approach is to work collaboratively and closely with organisations to gain an understanding of the risk and protective factors for their workforces, and the systems and processes that support employee wellbeing and performance. We consult widely with staff at all levels of the organisation, to determine their priorities and the best approaches for implementing and sustaining any required changes, such as through frameworks, policies, practices, services and training.

We help organisations with:

- benchmarking policies and procedures against international, industry-specific best practices
- undertaking research to improve the understanding of issues facing workplaces
- implementation of policy and practice improvement
- training of staff to ensure they have the knowledge, skills and confidence to implement best practice in trauma management
- advice on evidence-based interventions
- procuring the best employee support and health treatment services.

Our clients include:

- government departments with responsibility for people at risk of being impacted by psychological trauma, including Veterans' Affairs, Defence, Home Affairs, Foreign Affairs, Health, Human Services and Education
- insurers and compensation agencies that fund treatment and support
- police, ambulance, fire, rescue and other emergency service providers
- peak bodies and professional associations
- organisations that provide treatment and/or support to individuals, families and communities impacted by trauma, including disaster
- other industries and organisations whose employees are at high risk of being impacted by psychological trauma.



75%

of Australians will be exposed to a traumatic event in their lifetime



More than

1 million

Australians suffer from PTSD

Partners, supporters and donors

State Trustees Australia Foundation expands disaster program

State Trustees Australia Foundation funding enabled Phoenix Australia to expand a successful program in disaster-affected Victorian regional and rural communities to help residents deal with the impacts of bushfires, floods and COVID-19.

The Skills fOr Life Adjustment and Resilience (SOLAR) Program is a skills-based program that has been proven to improve community mental health and wellbeing following disaster. It is delivered by trained local and community leaders and healthcare workers.

The Foundation granted \$238,000 for the expansion, on top of its initial grant last year of \$250,000 to establish SOLAR.

In partnership with the Mental Health Professionals' Network, training of SOLAR coaches has started.

EML partnership fast tracks online training

EML donated \$100,000 to enable Phoenix Australia to fast track a five-year plan to convert face-to-face training to online – especially important given the effects of COVID-19 restrictions.

EML manages workers insurance and injured workers compensation claims. EML chose to partner with Phoenix Australia on bushfire support because of a long history of collaboration.

More than 500 participants have benefited from psychological first aid and trauma-informed care training since the online programs were released last year.

Phoenix Australia innovation awarded Ideas Grant

A world-leading, novel approach developed by Phoenix Australia that harnesses wearable and smartphone technology to manage problem anger has won a \$690,000 Ideas Grant.

The National Health and Medical Research Council's NHMRC Ideas Grant scheme supports innovative research projects and is supporting a four-year project, 'Developing a just-in-time-adaptive-intervention for problem anger'.

Led by Professor Forbes and Dr Olivia Metcalf, the project is a collaboration with Harvard University and the University of Melbourne to develop a smartphone app that will deliver evidence-based, tailored interventions to support the many thousands of people who live with problem anger as a result of experiencing trauma.

It is the first time that this type of intervention has been researched and tested specifically for problem anger management.

Charlie's Walk to step up vital PTSD research

Newcastle teenager Charlie Edwards has raised several thousand dollars to support Phoenix Australia's world-leading research into posttraumatic stress disorder (PTSD) after tragically losing his father.

Charlie's father, a NSW police officer for 28 years, passed away early this year after struggling with PTSD, the most common mental health condition after depression.

Charlie is on a mission to break down the stigma and raise important funds to support vital research.

He created 'Charlie's Walk', a 40-kilometre journey with several mates around Newcastle, planning to visit police stations and local communities along the way.

While COVID-19 delayed the event, Charlie has proudly raised close to \$8,000.

Shaping policy in mental health

Phoenix Australia workplace trauma and employee wellbeing framework

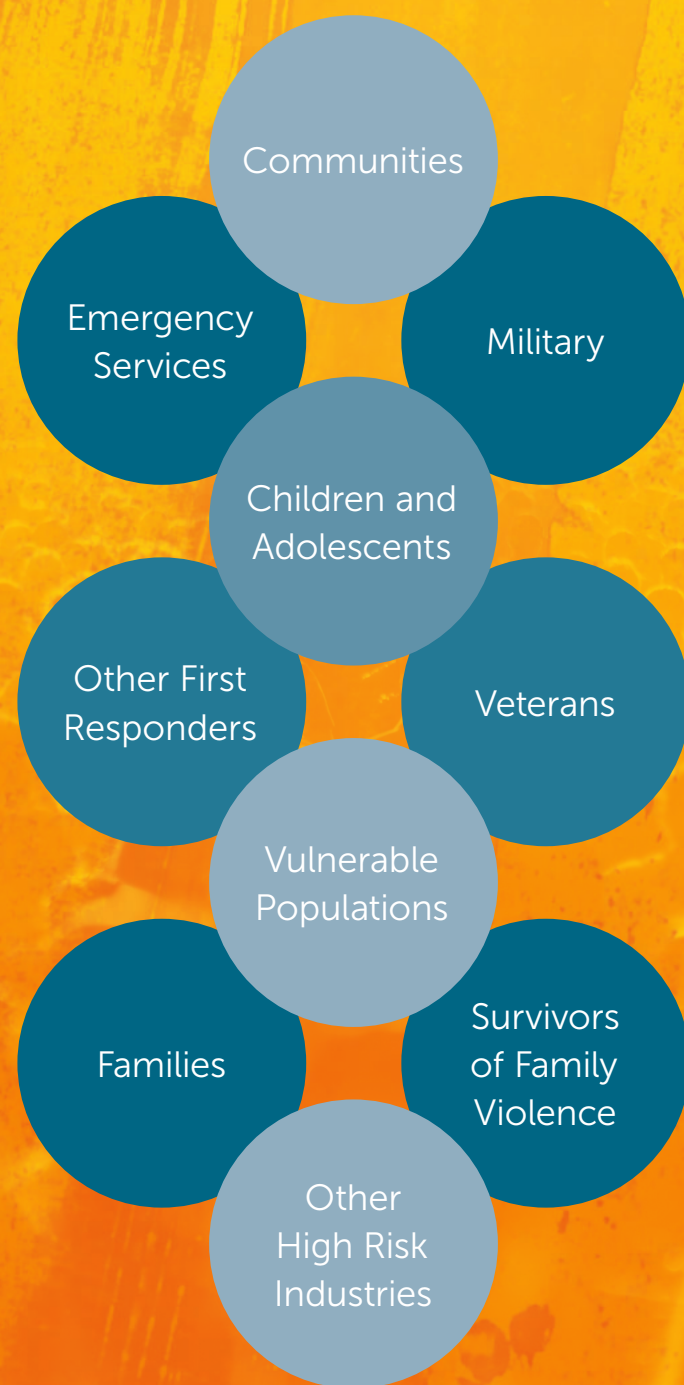
Phoenix Australia has developed a best practice framework for how to support employees and volunteers impacted by workplace trauma, particularly those affected by cumulative trauma. The framework is based on our extensive body of research, policy advice and practice improvement work. It provides evidence-based strategies to help identify mental health risks, develop strategies to protect wellbeing, or provide best practice approaches to support staff exposed to trauma.

The framework’s principles and assessment criteria are designed to assist a range of organisations to improve their approach to mental health support, including promotion of employee mental health, management of work-related exposure to traumatic events and vicarious trauma and provision of early workplace support.

Principle	Area of practice	Statement of principle
Promoting mental health and minimising psychological harm	Mental health is an organisational priority	A clear commitment to employee mental health and wellbeing across all organisational levels
	Culture that supports equity and engagement	A culture that provides meaningful and engaging work
	Minimisation of stress and promotion of role readiness	A mentally healthy workplace that has strategies in place to minimise organisational stress and increase role readiness
	Leadership support	Leaders at all levels have a key role in supporting employee mental health in individuals, across team and the whole organisation
	Mental health promotion	Proactive self-care, early identification of mental health issues and timely access to support
	Monitoring wellbeing	Monitoring employee wellbeing to ensure needs are addressed in a timely manner
	Critical incident management and support	A stepped response following exposure to trauma to prevent adverse mental health outcomes and ensure effective risk minimisation
Early response and support	Integrated service system that provides stepped support	An integrated stepped approach to mental health support for staff with emerging mental health issues
	Access to evidence-based care for emerging issues	Evidence-based interventions delivered before the development of mental health disorders
Specialist care to support recovery	Specialist mental health care and return to work services	A coordinated approach to mental health and rehabilitation, along with established pathways to specialist care support and return to work
Quality assurance and continuous improvement	Evaluation framework for policy and strategy	Program evaluation processes and continuous improvement culture



Our reach



Fast facts

 **324,159**
website visitors ↑ 25%

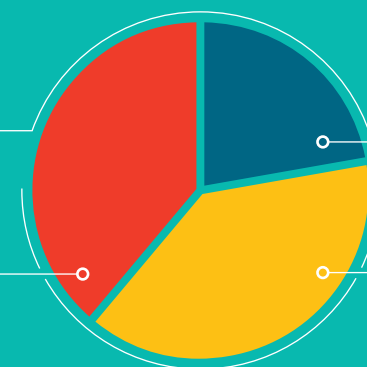
 **31,627** PTSD
Guidelines downloads ↑ 64%

 **174** calls to our
Professional Advice Line

Project delivery

121 projects

47 active



27 delivered

47 started

 **2100**
people enrolled in
online training

 **30**
courses on
offer

 **156**
workplaces

 **61**
webinars held

 **4616**
webinar
participants

 **21**
conference
presentations



59,313
resources downloaded

Top three:

- 1 What is trauma?
- 2 About posttraumatic stress disorder
- 3 Treatment for posttraumatic stress disorder

Flagship hubs

Our hubs connect people to targeted health services and to clinicians with an understanding of trauma.

Responder Assist

Responder Assist is a Centre of Excellence in Emergency Worker Mental Health that aims to improve mental health outcomes for emergency workers, including volunteers and those who have retired from service.

Responder Assist supports emergency services organisations by:

- opening doors to evidence-based, independent treatment pathways for their employees
- supporting early intervention by providing an easily accessible mental health service
- providing independent referral pathways to support tailored care for emergency workers.

The hub also works to build and support the capacity of Victorian health practitioners delivering clinical services to emergency services workers by providing providing access to training and education opportunities together with expert clinical advice and peer support networks.

Responder Assist is funded by the Victorian Department of Health.

BlueHub

Psychologically injured police in Victoria can now access a specialised clinical network that provides expert assessment of their mental health injury and evidence-based treatment from clinicians trained specifically to deal with the impacts of trauma-related injury for police.

The pilot program is available to Victoria Police, Protective Services Officers and Australian Federal Police based in Victoria.

The hub connects Victoria Police and Victorian-based AFP members to services and clinicians who understand the nature of their work and who provide evidence-based treatment. A suite of resources is available to support first responders and their mental health including chaplaincy, peer support, in-house psychology, employee assistance programs and access to clinicians with experience in dealing with emergency services workers.

BlueHub is funded by the Federal Department of Health.

Disaster Mental Health Hub

Disasters are common in Australia. Bushfires, extreme weather, floods and other traumatic events can be devastating for those directly impacted as well as for the people involved in disaster management efforts. The psychological effects can be felt in both the short and long term.

The Disaster Mental Health Hub is an online source of information, resources and training for Primary Health Networks and other recovery workers who support individuals and communities experiencing the mental health impacts of disasters.

The hub provides free disaster mental health information, resources such as tip sheets and videos, and online training programs. Health practitioners will find tailored information, resources and training to help them during the three phases of disaster response: preparation (before), response (during and immediately after), and recovery (medium and longer term).

The Disaster Mental Health Hub is funded by the Federal Department of Health.

Trauma and Aged Care Information Hub

Many older people have experienced trauma at some point in their life. Aged care workers can also be exposed to trauma as part of their work. The Trauma and Aged Care Information Hub delivers a comprehensive suite of trauma-informed resources for older people, their families and their carers along with tools and training for aged care workers and managers.

The resources provide a person-centred approach that can build a sense of safety, control and empowerment for the trauma-affected individual, and help aged care staff look after their own wellbeing.

The hub also ensures aged care staff have access to training in trauma-informed care, including advice on self-care and support for aged care residents living with dementia or experiencing adverse physical, social and psychological impacts.

Notable tools and training include the managers workbook, trauma-informed care checklist and trauma-informed care training tailored specifically for aged care workforce and managers.

The Trauma and Aged Care Information Hub is funded by the Federal Department of Health.



Skills fOr Life Adjustment and Resilience (SOLAR)

Phoenix Australia has been instrumental in the development and testing of a new program called Skills fOr Life Adjustment and Resilience (SOLAR).

SOLAR is a brief, psychosocial program designed to help individuals manage high levels of stress and distress following disaster and trauma exposure.

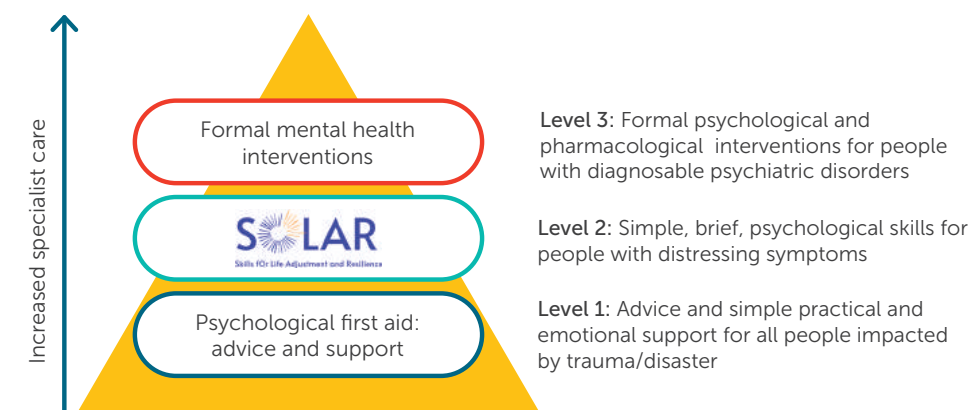
SOLAR is a Level 2 or low intensity intervention. This means, in a comprehensive mental health system, it sits between general mental health education (Level 1) and formal mental health interventions for those with a psychiatric disorder (Level 3).

There is a substantial lack of programs based on good evidence, so we set out to solve this problem.

SOLAR was developed through an international collaboration with trauma and disaster mental health experts and now has an emerging evidence base with four pilot studies published in the scientific literature. SOLAR-KIDS/Teens was developed through a separate international collaboration.

SOLAR and SOLAR-KIDS/Teens takes a 'task shifting' model that involves training everyday people ('Coaches') to deliver it. This is particularly important because, after disaster and trauma, expert mental health professionals have limited availability.

By giving people access to training and supervision to deliver SOLAR and SOLAR-KIDS/Teens, we can increase the reach of the program, enabling more people to access it.



Phoenix Australia is currently running six research and evaluation studies to test the efficacy of SOLAR and SOLAR KIDS/Teens. These are:

- The **SOLAR-Disasters** project – this aims to produce evidence of the benefits of the SOLAR program in regional and rural communities of Victoria that have been impacted by bushfires, drought and COVID-19. It comprises a randomised trial of SOLAR, which is being delivered by members of the Mental Health Practitioners Network who are based in disaster-affected communities. This is compared to a 'minimal intervention' comprising self-guided materials. This project was funded by the State Trustees of Australia and the Victorian Department of Health.
- **SOLAR-KIDS/Teens** – this aims to develop, implement and evaluate an online training program that supports staff in schools affected by the 2019-20 Black Summer bushfires. The project, which delivers kids and teens versions of the SOLAR program, is funded by the Victorian Department of Health and delivered in partnership with the Department of Education and Training (DET). It involves developing a feasible online training model, training up to 100 DET staff and evaluating the effects of SOLAR Kids and Teens who complete the program.



- The **SOLAR Ambulance Victoria** project – this aims to pilot test an online version of the SOLAR program with Ambulance Victoria corporate, operational and volunteer staff, delivered through a learning management system. The project is investigating the advantages of most of the coaching component being delivered online. We're trialling a facilitation model where the Ambulance Victoria mental health team is checking on participants to see how they are going to see if this increases engagement with the program.
- The **SOLAR Aged Care** project – this is an online version of the SOLAR program for aged care employees who have had stressful and traumatic experiences associated with COVID-19. This project involved the cultural adaption of SOLAR to those with English as a second language. It was funded by the Australian Government Department of Health.
- **SOLAR-Mobile for Firefighters** – we are looking to convert the SOLAR program to a smartphone app for NSW firefighters, and then test the efficacy of the culturally adapted program relative to a control app using a randomised controlled trial. This project has been funded by icare.
- The **Well-Ahead** project – this aims to culturally adapt the SOLAR smartphone app for female ex-serving military and former emergency services members and then evaluate its usefulness in managing stress and trauma symptoms. This project was funded by the Victorian Department of Premier and Cabinet.



Advancing knowledge and understanding of trauma

The future of trauma care

Our research is very much focussed on moving trauma care into the future. The ways in which we are doing this are:

1. Identifying people exposed to trauma who lack access to trauma care

While there has been much focus on people exposed to trauma in their workplace, such as military members and first responders, there are other groups that we know less about. People exposed to intimate partner violence and women exposed to birth trauma are two groups we are focussed on. Research in this area plays an important role in highlighting the service needs of these groups so they can access appropriate care.

2. Developing new treatments

While there is no question that we have evidence-based treatments for the posttraumatic mental health disorders that develop after trauma, there is an urgent need to develop new treatments for those who do not respond to what is currently available. We are developing new treatments for posttraumatic stress disorder so patients and their clinicians have improved choice about which pathway is best for them.

3. Improving current treatments

We can also advance care for trauma survivors who develop psychiatric disorders by improving our current treatments. Adjunctive interventions are those that are added to existing treatments to increase their efficacy, and we are testing a range of these.

4. Increasing access to care via digital interventions

The COVID-19 pandemic has seen a plethora of new digital interventions available for mental health. It is essential that any digital intervention is evaluated to ascertain whether people engage in these interventions and whether they benefit from them. This year we developed, and are testing, a number of digital offerings for people exposed to trauma.

5. Embedding early intervention in the community

The COVID-19 pandemic has clearly demonstrated a lack of specialists available to deliver mental health services. This is a situation that we often see after disasters. Task-shifting models of intervention are those where components of an invention are delivered by non-specialists. We are testing models of early intervention delivered by trained 'coaches' in rural and regional Victoria.

Testing and developing new trauma interventions

Our Traumatic Stress Clinic at Royal Park is uniquely at the forefront of developing and testing science-based interventions to support survivors of trauma. The clinic hosts cutting edge clinical treatment trials that inform the latest treatments in posttraumatic mental health.

Our flagship trial 'Intervention to Manage PTSD, Adjustment Disorder and Comorbidity after Trauma' (IMPACT), now in its third year, tests a promising emotion regulation-based transdiagnostic treatment for posttraumatic stress disorder (PTSD) against the gold standard treatment. This critical trial expands our knowledge of recovery mechanisms in PTSD to help inform a new way forward in treatment that addresses the barriers of traditional interventions. This study was funded by an National Health and Medical Research Council Program grant and the Canadian Centre of Excellence on PTSD and Related Mental Health Disorders.

Our Transdiagnostic Intervention for Remote Ex-military and first-responDers (TIRED) study, now in its second year, examines the benefits of a novel transdiagnostic treatment for comorbid sleep disorders in veterans and first responders. We're also testing the use of high tech actigraphy to support clinical decision-making.

Our collaboration with Professor Kim Felmingham continues with the Brain-Derived Neurotrophic Factor trial in which we are examining whether exercise is useful as an adjunct to PTSD treatment.

Understanding anger and trauma

Problem anger remains a key issue for serving military and veterans, and a focus of the Anger Lab in the next year is to develop a research program that addresses gaps in treatment for those impacted.

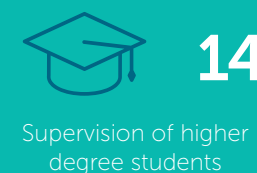
The Anger Lab began in 2018, focussed on understanding, assessing and developing treatments for problem anger in people who have experienced trauma.

In 2020, investigators from the Anger Lab were awarded a prestigious National Health and Medical Research Council Ideas Grant to develop a novel intervention for problem anger in individuals who have experienced trauma.

Phoenix Australia has also published four studies in the peer-reviewed scientific literature that:

- examine the relationships between anger, violence and suicidality
- review anger treatments for veterans with PTSD
- explore the relationships between anger and sleep
- investigate the prevalence of problem anger in disaster-affected individuals.

Research at a glance



Advancing the research on trauma and intimate partner violence

Phoenix Australia is leading the way in investigating the emotional consequences and service implications of intimate partner violence (IPV). Key components of research for 2020-21 are:

- We conducted a study that aimed to help guide organisational policies to address IPV among clients of Open Arms services. We provided new data on how Open Arms service providers currently identify and respond to disclosures of IPV, and how confident they feel in addressing both the use of violence and exposure to IPV among veterans and family members. This research was funded by the Defence Health Foundation and Department of Veterans' Affairs Applied Research Program. Early findings have been presented at meetings of the project advisory committee, the Open Arms all staff group, and to the DVA Mental Health Research Advisory Committee. The report will be finalised in 2021.
- The DVA Applied Research Program funded an investigation of IPV exposure in current serving and ex-serving military members, using data from the military Transition and Wellbeing Research Program. Phoenix Australia and Open Arms will collaborate to lead the program, which also involves the Australian Institute of Family Studies.
- In a collaboration with the Canadian Centre of Excellence on PTSD and Related Mental Health Disorders, we conducted a review of the international literature on IPV among current and ex-service personnel. This has produced two reports focussed on:
 - best available estimates of the rates of IPV and exposure to it among current and ex-service military
 - developing a framework for IPV intervention approaches that have been considered in internationally published studies and military and veteran specific health services. These reports are currently under peer review.
- For the first time, the Australian PTSD Guidelines included a chapter on victims of IPV. This was produced by Phoenix Australia and collaborators at the University of Melbourne and the Institute for Child Protection Studies at the Australian Catholic University.
- Phoenix Australia staff are co-supervising a University of Melbourne Department of Psychology PhD project focussed on the mental health implications of coercive and controlling behaviours and subtypes of intimate partner violence.

Improving recovery after natural disasters

Australia has been impacted by many major disaster events over the recent years, including the 2019-20 Black Summer bushfires and the compounding impact of the COVID-19 pandemic. We are building a program of research around disaster mental health. Of note:

- The State Trustees Australia Foundation awarded a research grant to Phoenix Australia to implement and evaluate the Skills for Life Adjustment and Resilience (SOLAR) program in bushfire-affected regions of rural and regional Victoria. This enabled delivery of SOLAR by members of project partner, the Mental Health Professionals Network, and a randomised design intended to demonstrate the benefits of SOLAR in the aftermath of disaster.
- In partnership with the Melbourne School of Population and Global Health, Phoenix Australia started a project to demonstrate the educational and mental health impacts of the 2019-20 Black Summer bushfires. Co-funded by the Victorian Department of Education and Training and the Teacher's Health Foundation, the project comprises wellbeing surveys of both students and staff in bushfire-affected regions of eastern Victoria.

Improving ways in which research evidence is understood

The Evidence Synthesis Hub offers a service that conducts high quality reviews, using a range of methodologies, from conception through to publication.

The Evidence Synthesis Hub played a critical role in supporting updates to the Australian PTSD Treatment Guidelines.

Notable reviews published in 2020-21 in quality peer-reviewed journals examined:

- dropout rates from guideline-recommended PTSD treatments
- preventing the onset of PTSD
- best practice injury compensation processes following intentional vehicular assaults.

The Evidence Synthesis Hub produced the *Understanding evidence: a framework for guiding the use of evidence in decision-making for mental health interventions including adjunct therapies* for the Department of Veterans' Affairs. This framework is currently in use to support policy decisions for new and emerging treatments.

The Evidence Synthesis Hub provides consultation and advice within Phoenix Australia to ensure our research and training products are underpinned by robust and transparent evidence of the highest quality.

Improving mental health in the military

With an emphasis on optimising mental health and wellbeing, our Military Mental Health program focusses on supporting military, veterans and frontline workers in the aftermath of exposure to trauma.

Our program of work is nestled around four key areas:

phenomenology

mental health
screening and
assessment

novel
interventions

real world
evaluation and
implementation

Key projects in 2020-21 included:

- the first randomised controlled trial in Australia testing a novel way to deliver prolonged exposure therapy for the treatment for posttraumatic stress disorder (PTSD) – the Rapid Exposure Supporting Trauma Recovery (RESTORE) trial
- the Wellness Action Through Checking Health (WATCH) project, which seeks to enhance our understanding of the emergence of early mental health challenges for current serving Australian Defence Force members
- the Well-Ahead study, which takes a deep-dive into understanding the mental health challenges of female veterans and former first responders
- a suite of moral injury projects that focus on understanding the impacts of experiencing morally injurious events, including developing the first ever outcome measurement tool for this construct in collaboration with a global consortium of experts.

We are also expanding our understanding of the intersect between physical and mental health through our mechanistic work in understanding the interplay that specific biomarkers have in the development of PTSD.

Our evaluation and implementation hub continues to support the Phoenix Australia training programs through the development of standardised evaluation protocols for all training.

A major highlight for our stream in the last year has been the strengthening of our collaboration with the Department of Defence through the Professor of Military Mental Health grant. We have worked closely with the department to assist in building its program of research, translation and implementation, as well as supporting the translation of research outcomes.

Looking ahead we plan to continue our work in supporting recovery from trauma using the outcomes of our program of research to identify the unique factors that predict and enhance recovery.

Phoenix Australia higher degree supervision projects 2020-21

Student name	Degree	Research title
Helen Benassi	PhD (completed)	Pathways to mental health care and self-managed care in the Australian Defence Force
Martine Cosgrove	PhD (completed)	Mapping trajectories of psychological adjustment across ADF life cycle
Belinda Pacella	MClin (completed)	Adjustment disorder following disaster
Marisa Schlichthorst	MPhil (completed)	A novel social media evaluation of the Man Up documentary
Kylie King	PhD (completed)	The use of television documentary to improve men's resiliency
Susanne Lohmann	PhD	Finding a trauma lens to mental health responses for intimate partner violence
Rahul Khanna	PhD	Biometric markers of a PTSD diagnosis
Hope O'Brian	PhD	The role of emotion regulation in promoting recovery after complex trauma
Andrea Putica	PhD	The role of alexithymia in response to PTSD treatment
Loretta Watson	PhD	Healthy ageing in Vietnam veterans
Nicole Sadler	PhD	Suicide risk in serving and ex-serving members of the Australian Defence Force.
Fiona Henrich	PhD	Investigation of the differences between adaptive dreams and posttraumatic nightmares as featured in posttraumatic stress disorder
Cecily Schwab	PhD	Supporting the mental health of CEOs

Building capacity in organisations and communities

Phoenix Australia provides evidence-informed services, advice and staff support across government, emergency service, health and community sectors. We translate research into best practice policies and procedures and work with organisations and communities to build their capacity to minimise the impact of trauma.

Our approach is trauma informed. We work collaboratively and closely with the people and groups we support to gain an understanding of their unique risk and protective factors and the systems and processes that support their wellbeing.

We consult widely with staff at all levels of organisations through interviews, focus groups and surveys, and we review policies and procedures.

Our team works to align with national and international research findings and evidence-informed and best practice guidelines, including our own best practice workplace trauma and employee wellbeing framework. We then work with each organisation to determine their priorities and best approaches for implementing and sustaining any required changes, such as through strategies or frameworks, policies, practices, services and training.

We provide services in three main areas:

- **Workplace trauma** – we support organisations and agencies to minimise the mental health impact of workplace stress and trauma. We develop tailored frameworks, provide advice on trauma management policy and regulations, review current policies and practices, and develop training and tools to build workforce capacity.
- **Evidence-based support and treatment** – we promote evidence-based interventions and support in organisations that offer services to people affected by trauma, including through the development of guidelines, programs and training.
- **Resources for trauma-affected communities** – we develop tools and resources for people and communities affected by trauma, such as webpages and information booklets. Our team also provides advice to organisations on how to engage effectively and ethically with trauma-affected people who use their service.

What we did this year

We have continued to build on our longstanding work with the military and veterans, as well as with police and emergency service employees. We have also worked with a broad range of federal and state government departments and community organisations.

Of note is the work undertaken to establish the Victorian Centre of Excellence in Emergency Worker Mental Health and the ongoing implementation of the BlueHub initiative. These projects seek to improve mental health outcomes for police and emergency service workers by training and supporting mental health providers and ensuring workers are provided with high-quality, evidence-based services.

Concurrently, we have continued to expand our work to assist frontline healthcare workers, as well as employees and clients of the workers' compensation and industry safety regulation sectors.

A key focus has been on supporting organisations and their workforces to effectively respond to the ongoing uncertainty and challenges associated with the COVID-19 pandemic. This has included frontline and emergency service workers and frontline healthcare workers, with a significant focus on supporting those working in residential aged care.

Work has continued in directly supporting regional communities across Australia that have been impacted by disasters – in particular the devastating bushfires during the summer of 2019-20.

Centre of Excellence in Emergency Worker Mental Health

Phoenix Australia is leading a new Centre of Excellence (CoE) aimed at improving mental health outcomes for emergency service workers by building the capability of health practitioners to support them.

The CoE will also facilitate access to high quality, evidence-based mental health treatment for emergency workers who live and work in Victoria. This includes those in operational and non-operational roles, volunteers, and those who are ex-serving.

Launched in March 2021 by Premier Dan Andrews, the CoE is funded by the Victorian Department of Health through to June 2023.

There are three broad pillars of activity within the Centre of Excellence:

Referral service to specialist clinicians:

The CoE facilitates access to high quality mental health care for emergency workers from seven first responder organisations, including a centralised intake and referral service and development of a specialist network of clinicians.

Awareness, training and clinician support:

The CoE increases the capacity and capability of health providers across Victoria who work with emergency workers with mental health problems, including development of a competency framework and suite of training activities to support each competency.

Research and evaluation:

The CoE provides the research platform to drive optimisation of clinical services for emergency workers, including evaluating the effectiveness of treatment provided, training and clinical support, and projects aimed at improving the quality of treatment.



How we have supported disaster-impacted communities

Through our bushfire-related projects, Phoenix Australia staff have visited several bushfire-impacted communities across Australia.

The opportunity to directly engage with community leaders, frontline workers, healthcare providers and other community members has greatly enriched our ability to provide relevant resources and training.

We have continued to demonstrate our ability to respond strategically and with agility to emerging threats as the Australian community has endured the challenges of cumulative natural disasters and the COVID-19 pandemic.

In late 2020, a dedicated director role was established to better coordinate our work responding to large-scale emergencies, such as bushfires, floods and pandemics. This role has been central in coordinating our work on funded projects, as well as responding rapidly to emerging events with targeted trauma-related resources and policy advice.

Disaster mental health digital platform

The Disaster Mental Health Hub is a digital platform, funded by the Federal Department of Health. It provides information, resources and training for general practitioners, other health professionals and recovery workers who support individuals and communities experiencing the mental health impacts of disasters.

This website was developed in collaboration with Primary Health Networks and other stakeholder groups and was officially launched in February 2021 via a webinar attended by more than 350 people. Since the launch, the Disaster Hub audience continues to grow, with 3725 visits to the site, 790 resource downloads and 100 people enrolled in the training.

The team continues to build additional materials in response to emerging issues, to improve user experience. We are planning a series of disaster-related 'Leading the Way' webinars and other activities to increase reach and engagement.

National bushfire mental health response

Phoenix Australia has been engaged by the Australian Government Department of Health to provide trauma-related training and resources over three years to support the recovery of communities impacted by the 2019-20 bushfires.

This work is being undertaken across five states and territories in collaboration with Primary Health Networks, bushfire coordinators and local emergency service agencies.

The support package includes:

- trauma-informed care training for emergency service frontline workers
- psychological first aid training for their leaders
- supporting individuals after disaster resources and training for primary health care teams.

Since pivoting the training programs online in late 2020, close to 600 people have registered for online training programs and approximately 100 people from more than eight regions have attended a live workshop. Satisfaction with the training programs remains high and the program has had widespread regional media coverage. The team also hosted two webinars aimed at emergency service members, with each having more than 300 people in attendance.

Victorian Black Summer response

The Victorian Department of Health engaged Phoenix Australia to strengthen the capability of frontline staff and community leaders across the East Gippsland and North-East regions of Victoria to support the recovery of communities impacted by the 2019-20 bushfires.

The project conducted a **training needs analysis** to identify any specific knowledge and skills gaps of the target audience. Its outcomes informed the development of a **strategic implementation plan** which recommended training offerings that align with the stepped care approach to mental health support.

The package includes psychological first aid, Skills fOr Life Adjustment and Resilience (SOLAR) and trauma-focussed cognitive behavioural therapy. Close to 400 people across Victoria have registered for training, which is offered in both fully online and blended formats.

Magda helps fund regeneration project

Our newest Phoenix Australia Ambassador, Magda Szubanski AO, helped fund a regeneration community-based project with donations raised by the public in the wake of the Black Summer bushfires.

The project works with local creative practitioners in bushfire impacted communities, supporting them and their communities in a long term and sustainable way.

The project is overseen by staff from the Faculty of Arts and Design at the University of Canberra, in partnership with Phoenix Australia and The Hospital Research Foundation.

The regeneration project is built around the principles of trauma-informed care to ensure people conducting workshops are mindful of the trauma histories of participants. Phoenix Australia has been providing trauma-informed care training to project staff and participants.

Serving organisations and communities – at a glance

Frontline mental health support

In response to COVID-19, the Victorian State Government announced in late 2020 that Phoenix Australia would develop and deliver initiatives aimed at providing additional mental health and wellbeing support to Ambulance Victoria, Victoria Police and Victorian Public Health Services employees.

The initial phase of the project identified gaps and areas for improvement within existing support initiatives, including in-house psychology services, employee assistance programs and external preferred provider networks. Following a series of consultations, it was agreed to develop a series of online training modules for mental health providers to improve their cultural competency and confidence in undertaking assessments and interventions with workers from these sectors. Training modules will be available from late 2021.

EML occupational violence and aggression in the aged care sector

Employers Mutual Limited (EML) engaged Phoenix Australia to provide education and training to workers in the aged care sector on the trauma-related mental health risks associated with occupational violence and aggression (OVA). The project aims to accurately assess and understand the educational and training needs of:

- **frontline workers** who are at risk of exposure to OVA from residents and/or family members

- **managers and supervisors** working in aged care facilities who are required to support staff in the immediate aftermath of an incident and later during the post-incident period
- **EML case managers** who manage claims for injured workers, supporting them in the aftermath of incidents of OVA through to their return to work.

Queensland Police Service

The Queensland Police Service (QPS) engaged Phoenix Australia to review its current approach to managing critical incidents and potentially traumatic events to ensure it aligns with best practice. A desktop document review and stakeholder consultations identified the strengths and gaps of the QPS policy, guidelines, screening and monitoring processes.

Department of Mines, Industry Regulation and Safety

Phoenix Australia conducted a review for the Department of Mines, Industry Regulation and Safety. It looked at the department's proposed critical incident response support services framework and practices in relation to managing the long-term impact of possible exposure to repeated trauma.

Review of Comcare PTSD claims

Comcare engaged Phoenix Australia to undertake a review of posttraumatic stress disorder (PTSD) claims to enable it to implement better practice principles on individual claim matters and look at a broader proposed framework for future claims management.

The project included a series of consultations with Comcare staff, a review of documents and procedures and an audit of a sample of PTSD claims files. The summary report provided recommendations on ways in which the compensation claims policies, procedures and practices could be adapted to improve the claims experience and support of a worker suffering from PTSD.

Australasian College of Paramedicine webinar series

The Australasian College of Paramedicine engaged Phoenix Australia to develop and facilitate four webinars focussed on the mental health and wellbeing of college members.

The aim of the series was to improve the understanding of the potential mental health and wellbeing impacts of being a paramedic, as well as strategies for building and maintaining mental health and wellbeing at all career stages.

Each webinar addressed different themes. This included issues for students and early career paramedics, the mental health and wellbeing impacts of transitioning out of a paramedic role, and the role of leaders and supervisors at all levels in supporting mental health and wellbeing. The series was very well received and

included panel discussions with mental health experts as well as industry experts and leaders. The webinars reached a wide audience across Australasia.

DVA trauma recovery program monitoring and data collection

Since 1996, Phoenix Australia has had a role in monitoring Department of Veterans' Affairs trauma recovery program monitoring and data collection. In addition, we are assisting the department to implement some recommendations from a review of trauma recovery programs conducted in late 2019. We will streamline accreditation standards for the programs and conduct a workshop to get input into refreshing the current data collection methods.

Royal Melbourne Hospital

Phoenix Australia undertook an innovative project with the University of Melbourne and the Royal Melbourne Hospital to provide digital tools for Emergency Department staff to help them cope with COVID-19 pandemic-related stress.

We provided subject matter expertise on content and assessment and developed 18 educational videos and five animations. These resources provide targeted and practical tips and strategies, with senior members of Phoenix Australia providing expert onscreen advice. The project was partially funded by the Australian Government Department of Health, and the products were shared on the Black Dog Institute webpage for COVID-19 first responders.

Safer Families Consortium – Readiness Program

The Readiness Program aims to develop and deliver a practical, consistent and national training program for primary health care providers to respond to disclosures of domestic and family violence more confidently and effectively.

The program is being developed by the Safer Families Centre in partnership with the Royal Australian College of General Practitioners, Blue Knot Foundation and Phoenix Australia. We are developing the content for a trauma and violence-informed online course.

WorkSafe Victoria Fatalities Investigation Team

WorkSafe Victoria commissioned Phoenix Australia to undertake a 12-month follow-up review of its Fatalities Investigation Team’s wellbeing support systems and processes.

The review examined and reported on staff perceptions of current strategies used to mitigate role-related risks, wellbeing support and the implementation of systems and processes created in the previous year. Phoenix Australia assessed and made recommendations on the team’s performance in several key areas based on one-on-one interviews with team members.

1800RESPECT manual review

We conducted a desktop review of the 1800RESPECT Service Delivery Manual to ensure it was meeting the needs of its audience and was in line with best practice.

This included a counselling practice framework and operations manual used across the 1800RESPECT national program. The principles, practices and standards outlined in the manual were reviewed against best practice principles in trauma-informed care, single session therapeutic interventions, risk assessment and interventions for family and sexual violence, and employee support.

Key 1800RESPECT staff members were involved in consultation throughout the review, which was well received by both 1800RESPECT and government stakeholders.

The New South Wales Rural Fire Service

The New South Wales Rural Fire Service (NSW RFS) engaged Phoenix Australia to re-design its mental health strategy, framework and action plan into an integrated approach.

The project started by establishing a working group of key NSW RFS representatives. The methodology included stakeholder interviews, workforce consultation, document review, working group engagement and thematic analysis of information.

The project deliverables include a mental health strategy and implementation plan, which will be completed by the end of 2021.



A new vision and implementation approach for veteran mental health systems globally

Phoenix Australia and the Canadian Centre of Excellence – PTSD have collaborated to create a shared vision for a system of support and care services to optimise the wellbeing of veterans and their families.

Our new *Conceptual framework to guide the implementation of best and next practice in services and supports for veterans and their families* provides a design and implementation approach for an effective and constantly evolving system of services and supports that will better meet the needs of veterans and their families.

Many systems that support veterans with their mental health needs emphasise high quality and accessible treatment as a key priority in their reform effort and are working towards this goal. While progress has been made in many areas, it remains a significant challenge for many systems globally.

The Conceptual Framework is intended to progress the conversation and drive further reform work to provide veterans and their families with the best possible support and care. It is relevant to any system globally that provides support to veterans and their families at a local, regional or national level. It is not intended as an analysis of current systems and their respective outcomes, nor a reflection or criticism of current approaches and policies of different countries.

The Conceptual Framework aims to help any stakeholder with the capacity to influence outcomes for veterans and their families – governments, insurers, regulators, service providers, support organisations, practitioners, intermediary organisations, as well as individual veterans, their families and communities.



DVA mental health advice

The Department of Veterans' Affairs (DVA) appointed Phoenix Australia to provide a range of initiatives to support its work, and that of practitioners, to improve the mental health outcomes of veterans, their families and the veteran community.

Our work with DVA includes:

- establishing a community of practice for posttraumatic stress disorder trauma recovery programs
- analysing emerging trends for policy and service delivery to DVA through monthly research abstracts, quarterly presentations and ad hoc advice
- supporting the veteran community by sharing knowledge and information through VetAffairs, VetNews and veteran forums
- providing a DVA practitioner support service and veteran mental health consultation service
- providing a frequently asked questions document for DVA and Open Arms websites, which is updated twice a year
- providing quarterly and ad hoc advice to DVA and Open Arms advisory committees.

Phoenix Australia facilitates quarterly forums that provide opportunities for trauma recovery program directors, managers and staff to share knowledge and information, problem-solve common issues, explore treatment innovations and extend learning through case discussions and paper presentations. An information portal provides access to literature updates, information on veteran mental health and a discussion board.

The DVA practitioner support service and veteran mental health consultation service is a free national service accessed via a 1800 number or the Phoenix Australia website. Expert advice and case consultations are provided by a dedicated expert multidisciplinary panel that includes psychiatrists, a mental health social worker, GP and psychologists. The service also provides general advice and information on veteran mental health care to non-health professionals and veteran support agencies working with or supporting veterans with mental health problems and their families.



Building a trauma-informed workplace

What we do and where we focus

Training and Workforce Development provides engaging education and training programs to organisations, practitioners and communities to build knowledge and skills in trauma awareness and management.

Our commitment to evidence-informed content and pedagogies backed by extensive expertise in mental health sets us apart from other training services. Our programs are informed by our research and policy expertise and are available as digital, face-to-face or blended training and implementation solutions.

We have developed several publicly available self-paced online courses that can be easily accessed at any time through our website. These include:

- Psychological First Aid (PFA)
- Trauma-informed Care (TIC)
- Trauma-focussed cognitive behavioural therapy.

Each is structured as a set of interactive and engaging modules that can be completed at a pace that suits the learner.

Our PFA and TIC courses have broad relevance for people in a wide range of organisations and professions, whereas trauma-focussed cognitive behavioural therapy targets health professionals working with trauma-affected clients. Phoenix Australia experts are available throughout the learning journey, and discussion boards allow participants to share their thoughts and reflections with others.

We regularly consult with organisations that seek to enhance overall trauma awareness and capability across their practices and staff. Developing best practice skills for the workforce may involve one of our online courses, tailored face-to-face workshops, or a combination of the two. Experienced subject matter experts liaise with organisations to understand specific challenges and can customise the training programs to suit unique circumstances where required.

Blended combinations of online learning, followed by web-facilitated or face-to-face small group training sessions allow facilitators to reinforce key principles. They explore with participants how these, and the skills they have acquired, can be applied in specific scenarios relevant to them and their workplace.

Our experience spans from high-risk industries such as emergency workers and first responders, through to diverse education, transport, financial services and legal sectors.

Be it government departments, industry or community groups, we aim to provide a suite of solutions that holistically address organisational needs. In addition to online training and tailored workshops, this may include digital and audio-visual products such as apps, web tutorials, demonstration videos, workbooks, information pamphlets, posters and other print materials.

We have a wealth of experience tailoring training and educational materials to meet a range of staff and organisational needs and work with all our partner groups to design evidence-informed, engaging and impactful solutions.

A year of growth



Training and Workforce Development was established as a separate portfolio in June 2021 and the team and services continued to expand and evolve across the year.

As the demand for Phoenix Australia services grew substantially with the compounding stressors of bushfires, unemployment, isolation, financial hardship and strained support services, and our delivery methods rapidly adapted. Where restrictions permitted, we continued to deliver in the traditional mode, but opportunities to do so were limited and web-mediated workshops became the norm. But this was insufficient to reach the expanding numbers of communities and organisations in need and we developed our most in-demand training programs for online access.

Interest in our online format continued to grow as an accepted effective alternative to face-to-face training and allowed Phoenix Australia to extend its reach across new locations, industries and professions.

With a growing portfolio of online programs, the Training and Workforce Development team began to take shape. We expanded our capacity to develop new programs with in-house course and content designers and online program support staff, and we introduced new processes and

technologies to improve the learner experience. In 2021 we introduced a new learning management system with improved functionality to track knowledge acquisition, streamline data capture and improve user engagement.

This meant we could train more than 2100 health professionals, emergency workers, peer supporters and community members in a variety of locations without issues caused by border and travel restrictions and social distancing requirements. Many learners chose the convenience of self-paced online learning; others preferred 'live' group webinars – and many opted for a combination of the two.

Blended options with web-mediated seminars delivered after online training became popular for reinforcing the key principles learnt online and discussing workplace situations unique to an organisation or community.

Federal and state government departments and agencies continued to seek Phoenix Australia's expertise, and we initiated large support programs with a mix of traditional and new deliveries. This included programs for aged care industry workers, bushfire-affected communities and COVID-19 first responders.

Aged care

In early 2021, the Training and Workforce Development team began adapting the psychological first aid and trauma-informed care courses for the aged care sector as part of the Australian Government COVID-19 grief and trauma response package.

Mindful of the different backgrounds of potential users, these tailored courses provided an introduction to key principles in

a more accessible format with added media and relevant case studies. These are supplemented with specialised programs for staff and managers.

The SOLAR program, an online early intervention tool developed by the Phoenix Australia's researchers, was also applied to the aged care project.

Bushfire recovery

The Bushfire Recovery program, co-funded by the Australian and Victorian governments, included a comprehensive approach to support first responders and communities in bushfire-affected regions.

This included peer support programs, informative resources and targeted training delivered face to face and online.

Online psychological first aid and trauma-informed care courses were made available to

emergency services, frontline health workers and community leaders. Workshops were conducted for regional bushfire-affected communities across NSW, Victoria and South Australia.

A blended program 'Supporting individuals after disaster' was developed for general practitioners and allied health staff, and trauma-focussed cognitive behavioural therapy was converted to the online format for mental health practitioners.



Disaster response

Another major project that included production of specialised online training was the Disaster Mental Health Hub, an Australian Government initiative under the Disaster Response – Improving Mental Health Outcomes and Promoting Recovery from Trauma Program. We developed a short online course introducing the principles of trauma-informed care and psychological principles of disaster care, along with three other courses:

- **Trauma-informed Self-care** – for frontline workers who support disaster impacted individuals
- **Working with the Effects of Disaster and Trauma** – for general practitioners as a practical guide to helping patients both in the immediate aftermath of a disaster and during the months to follow
- **Working with Posttraumatic Attributions** – for mental health practitioners who are competent in the use of cognitive therapy to identify and challenge common posttraumatic attributions.

Targeted trauma awareness training

The demand for targeted trauma awareness training came from individual organisations as well as governments.

We developed 'Understanding and managing vicarious trauma', a face-to-face workshop for staff who experience trauma symptoms from repeat exposure to the trauma of others when reading reports, interviewing, processing claims, or viewing objectionable materials. This supports staff in the legal, consulting and services sectors and will soon be available in a blended delivery mode.

Other training programs developed participants' understanding of the cultural impact of trauma, the importance of trauma-informed self-care, and complex case treatment strategies for mental health professionals.

As the need for evidence-led initiatives in preventing and managing posttraumatic mental health continues to grow, so too will Phoenix Australia's portfolio of education and training programs. We will make our programs available in different formats, delivery modes and levels to meet the various needs of diverse organisations and individuals.



Providing better access through digital delivery

As lockdowns and travel restrictions continued and digital communications became the norm, more organisations began to request access to online training as a standalone service. This included participants from diverse industries such as mining, aviation, education and services. Organisations included the Pharmacy Guild Australia NSW Branch and Department of Veterans' Affairs for our Trauma-informed Care course, and the Wimmera Primary Care Partnerships and ESTA for Psychological First Aid.

Since the first releases, both courses have continued to evolve to reflect user feedback, diversity and recent developments in the field. Varied scenarios and case studies take users through a learning journey, and the visual and interactive nature of the content makes it accessible to all workers regardless of their background or level within an organisation.

Psychological First Aid

This foundation-level course is a practical and recommended approach to helping people in the aftermath of trauma with the aim of reducing the long-term impact and potential for posttraumatic stress disorder or other mental health pathologies. The application of this course helps reduce initial distress and assists people to cope better in the days and weeks following a traumatic event, such as a disaster, workplace accident or assault. Individuals trained in PFA ensure safety, provide emotional comfort and support and offer practical advice and assistance to address people's immediate needs.

Trauma-informed Care

Our evidence-informed training develops the learner's understanding of the effects of trauma and embeds critical concepts across key principles that inform evidence-based strategies. Traumatic experiences are common and effects can be profound for an individual, their families, colleagues and organisation. This course is beneficial for individuals as well as leaders responsible for the wellbeing of their

teams. It provides strength-based interventions that build safety, trust, positivity and personal control, and teaches participants how to best facilitate connections that ensure their own wellbeing as well as those they are supporting.

Trauma-focussed Cognitive Behavioural Therapy

We launched our online course that targets mental health practitioners in June 2021. It immediately attracted interest from health professionals including counsellors, psychologists, nurses and general practitioners. It is an evidence-based approach to the treatment of children, adolescents and adults with clinically relevant posttraumatic stress symptoms.

This approach can help individuals come to terms with trauma through exposure to, and emotional processing of, memories of the event. Central to the approach is the use of imaginal and in-vivo exposure therapy and trauma-focussed cognitive therapy.



Where we were published

We are always focussed on how we can report our findings and therefore we disseminate our research, training and service development findings in many ways.

This year we published across a wide variety of trauma and mental health areas. We are committed to improving treatments for posttraumatic stress disorder (PTSD), and this is evident from the number of publications in this area. Importantly we are consolidating our work in anger, as well as disaster mental health. These are some of our highlighted publications:

At a glance



31

Peer-reviewed publications



25

Technical reports



21

Conference presentations



16

Webinars

Key peer-reviewed publications

PTSD and treatment

Bisson, J., Wright, K., Jones, K. A., Lewis, C., Phelps, A., Sijbrandij, M., Varker, T., & Roberts, N. P. (2021). **Preventing the onset of posttraumatic stress disorder: A systematic review of posttraumatic stress disorder.** *Clinical Psychology Review*, 86, 102004. doi: 10.1016/j.cpr.2021.102004

O'Donnell, M. L., Lau, W., Chisholm, K., Agathos, J., Little, J., Terhaag, S., Brand, R., Putica, A., Holmes, A. C. N., Katona, L., Felmingham, K., Murray, K., Hosseiny, F., & Gallagher, M. W. (2021). **A pilot study of the efficacy of the unified protocol for transdiagnostic treatment of emotional disorders in treating posttraumatic psychopathology: A randomized controlled trial.** *Journal of Traumatic Stress*, 34, 563-574. doi: 10.1002/jts.22650

Putica, A., Van Dam, N. T., Steward, T., Agathos, J., Felmingham, K., & O'Donnell, M. (2020). **Alexithymia in post-traumatic stress disorder is not just emotion numbing: Systematic review of neural evidence and clinical implications.** *Journal of Affective Disorders*, 278, 519-527. doi: 10.1016/j.jad.2020.09.100

Varker, T., Jones, K. A., Arjmand, H.-A., Hinton, M., Hiles, S. A., Freijah, I., Forbes, D., Kartal, D., Phelps, A., Bryant, R. A., McFarlane, A. C., Hopwood, M., & O'Donnell, M. (2021). **Dropout from guideline-recommended psychological interventions for posttraumatic stress disorder: A systematic review and meta-analysis.** *Journal of Affective Disorders Reports*, 4, 100093. doi: 10.1016/j.jadr.2021.100093

Varker, T., Kartal, D., Watson, L., Freijah, I., O'Donnell, M., Forbes, D., Phelps, A., Hopwood, M., McFarlane, A. C., Cooper, J., Wade, D., Bryant, R., & Hinton, M. (2020). **Defining response and non-response to PTSD treatments: A systematic review.** *Clinical Psychology: Science and Practice*, 27, e12355. doi: 10.1111/cpsp.12355

Varker, T., Watson, L., Gibson, K., Forbes, D., & O'Donnell, M. (2020). **Efficacy of psychoactive drugs for the treatment of posttraumatic stress disorder: A systematic review of MDMA, ketamine, LSD, and psilocybin.** *Journal of Psychoactive Drugs*, 53(1), 85-95. doi: 10.1080/02791072.2020.1817639

Veteran and military mental health

Howard, A., Agathos, J., Phelps, A., Cowlshaw, S., Terhaag, S., Arjmand, H.-A., Armstrong, R., Berle, D., Steel, Z., Brewer, D., Human, B., Herwig, A., Wigg, C., Kemp, P., Wellauer, R., & O'Donnell, M. (2021). **Prevalence and treatment implications of ICD-11 complex PTSD in Australian treatment-seeking current and ex-serving military members.** *European Journal of Psychotraumatology*, 12, 1844441. doi: 10.1080/20008198.2020.1844441

Sadler, N., Forbes, D., & O'Donnell, M. L. (2020). **Mental health, wellbeing and suicidality following separation from the military: Advancing research and practice.** *Psychiatry: Interpersonal and Biological Processes*, 83(2), 176-178. doi: 10.1080/00332747.2020.1767991

Sadler, N., Van Hooff, M., Bryant, R., Lawrence-Wood, E., Baur, J., & McFarlane, A. (2021). **Suicide and suicidality in contemporary serving and ex-serving Australian Defence Force personnel.** *Australian & New Zealand Journal of Psychiatry*, 55(5), 463-475. doi: 10.1177/0004867421998751

Terhaag, S., Cowlshaw, S., Howard, A., O'Donnell, M., & Phelps, A. (2021). **A longitudinal exploration of hearing loss, tinnitus and PTSD treatment outcomes in Australian veterans.** *Psychosomatic Medicine*. doi: 10.1097/psy.0000000000000978

Trauma and gambling

Cowlshaw, S., Metcalf, O., Little, J., Sbisá, A., Deans, C., O'Donnell, M., Sadler, N., Van Hoof, M., Lawrence-Wood, E., Crozier, M., Battersby, M., Forbes, D., & McFarlane, A. C. (2020). **Gambling problems among military personnel after deployment.** *Journal of Psychiatric Research*, 131, 47-53. doi: 10.1016/j.jpsychires.2020.07.035

Disaster mental health

Bryant, R., Gibbs, L., Gallagher, H. C., Pattison, P., Lusher, D., MacDougall, C., Harms, L., Block, K., Ireton, G., Richardson, J., Forbes, D., Molyneaux, R., & O'Donnell, M. (2020). **The dynamic course of psychological outcomes following the Victorian Black Saturday bushfires.** *Australian & New Zealand Journal of Psychiatry*, 55(7), 666-677. doi: 10.1177/0004867420969815

O'Donnell, M. L., Lau, W., Fredrickson, J., Bryant, R. A., Bisson, J., Burke, S., Busuttill, W., Coghlan, A., Creamer, M., Gray, D., Greenberg, N., McDermott, B., McFarlane, A. C., Monson, C., Phelps, A., Ruzek, J. I., Schnurr, P. P., Ugang, J., Watson, P., Whitton, S., Williams, R., Cowlshaw, S., & Forbes, D. (2020). **An open label pilot study of a brief psychosocial intervention for disaster and trauma survivors.** *Frontiers in Psychiatry*. doi.org/10.3389/fpsyt.2020.00483

Trauma and anger

Adler, A. B., LeardMann, C. A., Roenfeldt, K. A., Jacobson, I. G., & Forbes, D. (2020). **Magnitude of problematic anger and its predictors in the Millennium Cohort.** *BMC Public Health*, 20, 1168. doi: 10.1186/s12889-020-09206-2

Cowlshaw, S., Metcalf, O., Varker, T., Stone, C., Molyneaux, R., Gibbs, L., Block, K., Harms, L., MacDougall, C., Gallagher, C., Bryant, R., Lawrence-Wood, E., Kellett, C., O'Donnell, M., & Forbes, D. (2021). **Anger dimensions and mental health following a disaster: Distribution and implications after a major bushfire.** *Journal of Traumatic Stress*, 34, 46-55. doi: 10.1002/jts.22616

Kakaje, A., Alsamara, K., & Forbes, D. (2021). **Assessment of problematic anger using an Arabic adaptation of the Dimensions of Anger Reactions Scale-5 (DAR-5).** *Journal of Affective Disorders Reports*, 4, 100128. doi: 10.1016/j.jadr.2021.100128

For our whole publication list for this financial year, see phoenixaustralia.org/resources/our-research-publications

Governance and management

An independent not-for-profit organisation, Phoenix Australia has a Board of Directors that provides oversight of strategic direction, strategic risk management, governance and performance. Our Board includes independent members and senior representatives from the departments of Veterans' Affairs and Defence.

Board meetings and attendance 2020-21

	7/7/20	29/9/20	24/11/20	AGM 24/11/20	24/2/21	27/4/21	28/6/21
Ms Janine Kirk AO	●	●	●	●	●	●	●
Ms Jenny Cotton CSC		●	●	●			
Professor Christopher Davey		●	●	●	●	●	
Mr Paul Dolan	●	●	●	●	●	●	
Professor David Forbes	●	●	●	●	●	●	●
Mr Michael Harper					●	●	●
Professor Malcom Hopwood	●						●
Mr Rodney Piltz							●
Ms Lesley Podesta	●	●	●	●	●	●	
Mr Gregory Ridder	●	●	●	●	●	●	
RADM Sarah Sharkey AM CSC RAN	2	2	2			1,2	1,2
Mr Don Spinks AM		●			●	●	●

●

AGM attendance

●

Attendance

Non-appointment at time of meeting

Non-attendance

1 RADM Sarah Sharkey AM CSC RAN – Leave of Absence 27 April 2021 - 27 July 2021
2 Mr David Morton, Director General Health Policy, Programs and Assurance Australian Defence Force Centre for Mental Health attending as observer on behalf of RADM Sharkey

Our board

Board members as at 30 June 2021

- Ms Janine Kirk AO

Professor David Forbes


Professor Christopher Davey

Mr Michael Harper
- Professor Malcolm Hopwood


Mr Rodney Piltz

Rear Admiral Sarah Sharkey AM CSC RAN


Mr Don Spinks AM




Chair
Ms Janine Kirk AO




Professor David Forbes




Professor Christopher Davey




Mr Michael Harper



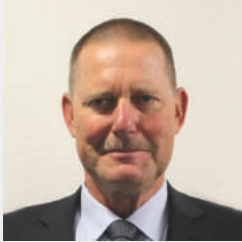
Professor Malcolm Hopwood



Mr Rodney Piltz



RADM Sarah Sharkey AM CSC RAN



Mr Don Spinks AM

Patron and ambassadors



Patron
Air Chief Marshal
Sir Angus Houston, AK,
AFC (Ret'd)



Ambassador
David Mann AM KSJ FAICD



Ambassador
Wing Commander
Sharon Bown RN, FACN
(Ret'd)



Ambassador
Magda Szubanski AO

Statement of profit or loss and other comprehensive income for the year ended 30 June 2021

	Notes	2021 \$	2020 \$
Revenue	2	9,982,175	9,769,731
Expenses			
Consultants fee	14(a)	723,591	219,325
Contractors fee	14(b) & (c)	625,871	971,287
Design, printing and production		120,866	107,466
Travel and accommodation		27,972	277,496
Employment expense		7,468,896	7,159,420
Student stipends		19,484	28,497
Depreciation and amortisation	3	242,612	241,478
Independent board member fees		46,900	49,000
Rent expenses		125,468	145,793
General expenses		552,958	591,812
Interest expense (leases)		16,026	23,088
Total expenses		9,970,644	9,814,662
Profit / (loss) before income tax expenses		11,531	(44,931)
Income tax expense		-	-
Profit / (loss) after income tax expense for the year		11,531	(44,931)
Other comprehensive income for the year, net of tax		-	-
Total comprehensive income for the year		11,531	(44,931)

The above statement should be read in conjunction with the accompanying notes to the accounts.

Statement of financial position as at 30 June 2021

	Notes	2021 \$	2020 \$
Current assets			
Cash and cash equivalents	4	3,316,566	3,799,484
Trade and other receivables	5	2,706,195	464,926
Other assets	6	338,560	100,630
Work in progress / advance	1(b)	1,061,194	1,002,382
Total current assets		7,422,515	5,367,423
Non-current assets			
Property, plant & equipment	7	66,078	43,813
Intangible assets	8	236,631	15,595
Right-of-use leased assets	13(a)	352,317	547,972
Total non-current assets		655,026	607,380
Total assets		8,077,539	5,974,803
Current liabilities			
Trade and other payables	9	2,806,170	2,232,830
Borrowings	10	22,246	23,586
Other liabilities	11	3,246,153	1,533,659
Lease liabilities	13(b)	179,393	193,289
Total current liabilities		6,253,962	3,983,364
Non-current liabilities			
Lease liabilities	13(b)	185,774	365,166
Total non-current liabilities		185,774	365,166
Total liabilities		6,439,736	4,348,530
Net assets		1,637,803	1,626,273
Equity			
Retained surpluses		1,637,803	1,626,273
Total equity		1,637,803	1,626,273

The above statement should be read in conjunction with the accompanying notes to the accounts.

Statement of changes in equity for the year ended 30 June 2021

	Retained surpluses \$	Total equity \$
Balance at 1 July 2019	1,671,204	1,671,204
Profit / (loss) after income tax expense for the year	(44,931)	(44,931)
Other comprehensive income for the year, net of tax	-	-
Total comprehensive income for the year	(44,931)	(44,931)
Balance at 30 June 2020	1,626,273	1,626,273
Balance at 1 July 2020	1,626,273	1,626,273
Profit / (loss) after income tax expense for the year	11,531	11,531
Other comprehensive income for the year, net of tax	-	-
Total comprehensive income for the year	11,531	11,531
Balance at 30 June 2021	1,637,803	1,637,803

The above statement should be read in conjunction with the accompanying notes to the accounts.

Statement of cash flows for the year ended 30 June 2021

	Notes	2021 \$	2020 \$
Cash flows from operating activities			
Receipts from customers		42,200	87,797
Operating income received		9,398,846	9,896,494
Interest paid on leases		(16,026)	(23,088)
Payments to suppliers and employees		(9,433,270)	(10,527,930)
Net cash from / (used in) operating activities	12(b)	(8,250)	(566,727)
Cash flows from investing activities			
Interest received		8,878	80,890
Payments for purchase of property, plant and equipment		(27,583)	(28,918)
Payment for marketing software		-	(13,900)
Payment for LMS phase I		(252,369)	-
Net cash from / (used in) investing activities		(271,073)	38,072
Cash flows from financing activities			
Repayment of lease liabilities		(203,594)	(185,171)
Net cash from / (used in) financing activities		(203,594)	(185,171)
Net increase/(decrease) in cash and cash equivalents		(482,918)	(713,826)
Cash and cash equivalents at the beginning of the financial year (note 4)		3,799,484	4,513,310
Cash and cash equivalents at the end of the financial year	12(a)	3,316,566	3,799,484

The above statement should be read in conjunction with the accompanying notes to the accounts.

Notes to the financial statements for the year ended 30 June 2021

Note 1: Statement of significant accounting policies

"This financial report is a special purpose report prepared for use by the Board of Directors to satisfy the financial reporting requirements of the company. The Board of Directors has determined that the company is not a reporting entity."

The financial report covers Phoenix Australia Limited as an individual company in Victoria under the *Corporations Act 2001*.

These financial statements have been prepared in accordance with the *Associations Incorporation Reform Act 2012* and the *Corporations Act 2001* as applicable, the recognition and measurement requirements specified by the Australian Accounting Standards and Interpretations issued by the Australian Accounting Standards Board (AASB) and the disclosure requirements of the following standards:

- AASB 101: Presentation of financial statements
- AASB 107: Statement of cash flows
- AASB 108: Accounting policies, changes in accounting estimates and errors
- AASB 1048: Interpretation of standards
- AASB 1054: Australian additional disclosures
- AASB 15: Revenue from contracts with customers
- AASB 1058: Income of not-for-profit entities
- AASB 16: Leases

New or amended accounting standards and interpretations adopted

The company has adopted all of the new or amended Accounting Standards and the disclosure requirements by the AASB that are mandatory for the current reporting period.

Any new or amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

The financial report is prepared on an accrual basis and is based on historical costs and does not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following is a summary of the material accounting policies adopted by the company in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

(a) Property, plant & equipment

Each class of plant and equipment is carried at cost less, where applicable, any accumulated depreciation.

Furniture and office equipment

Furniture and office equipment is measured on a cost basis.

Depreciation

All fixed assets are depreciated on a diminishing value basis over their expected useful lives to the company as follows:

Leasehold improvements	3-5 years
Plant and equipment	3-7 years
Office equipment	3-5 years

The residual value, useful lives and depreciation methods are reviewed, and adjusted if appropriate, at each reporting date.

Intangible assets

Assets related to systems and software are carried at cost, less accumulated amortisation. Systems and software costs are amortised on a straight -line basis over 5 years.

Impairment of assets

Non-financial assets are assessed for impairment annually. Any excess of an asset's carrying amount over its recoverable value is recognised immediately as an expense in profit or loss.

(b) Revenue recognition

Revenue from contracts with customers

Revenue is recognised at an amount that reflects the consideration to which the company is expected to be entitled in exchange for transferring goods or services to a customer. For each contract with a customer, the company: identifies the contract with a customer; identifies the performance obligations in the contract; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative standalone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Grants

Grant revenue is recognised in profit or loss when the company satisfies the performance obligations stated within the funding agreements. If conditions are attached to the grant which must be satisfied before the company is eligible to retain the contribution, the grant will be recognised in the statement of financial position as an unearned income liability (as outlined below) until those conditions are satisfied.

Unearned income

The liability for unearned income is the unutilised amount of grants received on the condition that specified services are delivered or conditions are fulfilled. While agreed services are usually provided or the conditions usually fulfilled within 12 months of receipt of the grant, where some portion of the agreed services are yet to be provided as at the end of the financial year, a liability is recognised based on the estimated amount of services that will be provided after year end.

Work in progress / advance

Represents any preliminary work undertaken for a project where the contract is yet to be signed or when work under contract is in progress but not yet billed.

(c) Taxation

Income tax

No provision for income tax has been raised as the company has been endorsed as an Income Tax Exempt Charitable Entity and

Deductible Gift Recipient under the provisions of the *Income Tax Assessment Act 1997*.

Goods and services tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST except where the amount of GST incurred is not recoverable from the Australian Taxation Office, in which case it is recognised as part of the cost of acquisition of an asset or as part of an item of expense.

(d) AASB 16 leases

The Association has adopted AASB 16 from 1 July 2019. The standard replaces AASB 117 leases and for lessees eliminates the classifications of operating leases and finance leases. Except for short-term leases and leases of low-value assets, right-of-use assets and corresponding lease liabilities are recognised in the statement of financial position. Straight-line operating lease expense recognition is eliminated with a depreciation charge for the right-of-use assets (included in operating costs) and an interest expense on the recognised lease liabilities (included in finance costs).

For classification within the statement of cash flows, the interest portion is disclosed in operating activities and the principal portion of the lease payments are separately disclosed in financing activities.

Notes to the financial statements for the year ended 30 June 2021

Note 1: Statement of significant accounting policies – continued

Right-of-use assets

A right-of-use asset is recognised at the commencement of recording a lease under AASB 16. The right-of-use asset is measured at cost, which comprises the initial amount of the lease liability adjusted for, as applicable, any lease payments made at or before the commencement date net of any lease incentives received, any initial direct costs incurred, and an estimate of costs expected to be incurred for dismantling and removing the underlying asset, and restoring the site or asset. Right-of-use assets are depreciated on a straight-line basis over the unexpired period of the lease or the estimated useful life of the asset, whichever is the shorter. Where the company expects to obtain ownership of the leased asset at the end of the lease term, the depreciation is over its estimated useful life. Right-of use assets are subject to impairment or adjusted for any remeasurement of lease liabilities.

(e) Critical accounting judgements, estimates and assumptions

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts in the financial statements. Management continually evaluates its judgements and estimates in relation to assets, liabilities, contingent liabilities, revenue and expenses. Management bases its judgements, estimates and assumptions on historical experience and on various other factors, including expectations of future events that management believes to be reasonable under the circumstances. The resulting accounting judgements and estimates will not always equal the related actual results. The judgements, estimates and assumptions of most significance in the preparation of these reports include:

- useful life estimations used in determining amortisation and depreciation of assets
- estimations in relation to project completion that can impact unearned income calculations and revenue recognition.

Note 2: Revenue

	2021 \$	2020 \$
Revenue from contracts with customers		
Grants	507,155	5,022,889
Fee for services	9,420,465	4,464,357
	9,927,621	9,487,246
Other revenue		
Donations	5,368	134,733
Income from other activities	38,085	83,082
Interest	6,986	59,954
Publications and audio visual sales	4,114	4,715
	54,554	282,484
Revenue	9,982,175	9,769,731

Note 3: Expenses

	2021 \$	2020 \$
Surplus before income tax includes the following specific expenses:		
Depreciation		
Furniture and office equipment	17,807	20,413
Lease (AASB 16)	193,472	194,033
	211,279	214,446
Amortisation		
Website development	3,317	22,965
Toolbox database and report system	-	2,446
LMS phase I	25,237	-
Marketing software	2,780	1,622
	31,333	27,032
Depreciation and amortisation expense	242,612	241,478

Notes to the financial statements for the year ended 30 June 2021

Note 4: Cash and cash equivalents

	2021	2020
	\$	\$
Petty cash	804	830
Cash at bank - NAB public fund account	44,222	39,040
Cash at bank - NAB cheque account	3,115,576	1,473,826
Term deposit - NAB (investment)	155,964	2,285,788
	3,316,566	3,799,484

Note 5: Trade and other receivables

	2021	2020
	\$	\$
Current		
Trade debtors	2,668,721	463,061
Security deposit	37,474	1,865
	2,706,195	464,926

Note 6: Other assets

	2021	2020
	\$	\$
Current		
Interest accrued	205	2,097
Prepayments	96,329	46,679
Other current assets	242,026	51,856
	338,560	100,630

Note 7: Property, plant and equipment

	2021	2020
	\$	\$
Furniture & office equipment	614,194	574,121
Less: Accumulated depreciation	(548,116)	(530,309)
	66,078	43,813

Note 8: Intangible assets

	2021	2020
	\$	\$
Project management system	59,125	59,125
Less: Accumulated amortisation	(59,125)	(59,125)
Website development	111,759	111,759
Less: Accumulated amortisation	(111,759)	(108,442)
Toolbox database and report system	37,501	37,501
Less: Accumulated amortisation	(37,501)	(37,501)
Marketing software	13,900	13,900
Less: Accumulated amortisation	(4,402)	(1,622)
LMS phase I	252,369	-
Less: Accumulated amortisation	(25,237)	-
	236,631	15,595

Note 9: Trade and other payables

	2021	2020
	\$	\$
Current		
Trade creditors	211,061	80,729
Accruals	2,246,351	2,094,608
GST owing	348,759	57,493
	2,806,170	2,232,830

Note 10: Borrowings

	2021	2020
	\$	\$
Current		
Credit cards	22,246	23,586
	22,246	23,586

Note 11: Other liabilities

	2021	2020
	\$	\$
Current		
Unearned income	3,246,153	1,533,659
	3,246,153	1,533,659

Notes to the financial statements for the year ended 30 June 2021

Note 12: Notes to the cash flow statement

(a) Reconciliation of cash and cash equivalents

For the purposes of the Cash Flow Statement, cash and cash equivalents includes cash on hand and in banks and investments in money market instruments, net of outstanding bank overdrafts. Cash and cash equivalents at the end of the financial year as shown in the Cash Flow Statement is reconciled to the related items in the Statement of Financial Position as follows:

	2021	2020
	\$	\$
Petty cash	804	830
Cash at bank - NAB public fund account	44,222	39,040
Cash at bank - NAB cheque account	3,115,576	1,473,826
Term deposit - NAB (investment)	155,964	2,285,788
	3,316,566	3,799,484

(b) Reconciliation of surplus/(deficit) for the year to net cash flows from operating activities

	2021	2020
	\$	\$
Reconciliation of surplus/(deficit) for the year to net cash flows from operating activities		
Net surplus / (deficit) for the year	11,531	(44,931)
Adjusted for:		
Depreciation	17,807	20,411
Amortisation of intangibles / Right-of-use assets	224,805	222,687
Interest income (shown as investing activity)	(8,878)	(80,890)
Changes in assets and liabilities, net of effects from acquisitions and disposals of business:		
(Increase) / decrease in assets		
Trade and other receivables	(2,241,268)	943,475
Other assets	(296,742)	484,244
Increase / (decrease) in liabilities		
Trade and other payables	573,341	(1,415,816)
Borrowings	(1,340)	(26,947)
Unearned Income	1,712,493	(668,960)
Net cash from / (used in) operating activities	(8,250)	(566,730)

Note 13: Right-of-use assets

	2021	2020
	\$	\$
(a) Right-of-use assets		
Right-of-use assets	704,632	743,627
Less: Accumulated amortisation	(352,316)	(195,655)
	352,317	547,972
(b) Lease liabilities		
Current	179,393	193,289
Non-current	185,774	365,166
	365,167	558,455

Lease liabilities are measured at the present value of remaining lease payments, discounted at an appropriate incremental borrowing rate.

Right-of-use assets are depreciated on a straight-line basis over the unexpired period of the lease or the estimated useful life of the asset, whichever is the shorter.

Note 14: Contractors and consultants

(a) Consultants

Person or company that undertakes a contract to provide specialised advice and/or labour to Phoenix Australia. Consultants usually perform work outside the skillsets available across Phoenix Australia staff.

(b) Contractors

Person or company that undertakes a contract to provide labour and/or materials to perform a service for and/or on behalf of Phoenix Australia. Contractors usually perform overflow work that Phoenix Australia would otherwise be able to perform itself given greater availability of internal resources.

(c) Contractors include co-partners

A co-partner is a person or company that undertakes a large portion of the work in a particular project, perhaps even a larger portion than that undertaken by Phoenix Australia. Co-partners are hence project-specific. Co-partners usually perform major functions in a project that fall outside the skillsets of Phoenix Australia staff, even if, Phoenix Australia has been determined 'lead' partner in these projects.

Board of Directors declaration

The Board of Directors has determined that the company is not a reporting entity.
The Board of Directors has determined that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to these financial statements.

In the opinion of the Board of Directors:

- 1. The financial statements and notes to the financial statements for the year ended 30 June 2021 present fairly the financial position of the company at 30 June 2021 and the results of its operations for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.
- 2. There are reasonable grounds to believe the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board and is signed for and on behalf of the Board on 28th September 2021.

Ms Janine Kirk AO Chair

Professor David Forbes Director

Independent audit report

To the Members of Phoenix Australia Limited -
(Formerly Phoenix Australia - Centre For Posttraumatic Mental Health Inc.)

Opinion

We have audited the accompanying financial report, being a special purpose financial report, of Phoenix Australia Limited (the Company), which comprises the statement of financial position as at 30 June 2021, statement of profit or loss and other comprehensive income, statement of changes in equity, cash flow statement, a summary of significant accounting policies, other explanatory notes and the Board of Directors Declaration.

In our opinion, the financial report of Phoenix Australia Limited presents fairly, in all material respects the financial position of the Company (formerly Association) as of 30 June 2021 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.

Basis of Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor’s Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Company in accordance with the auditor independence requirements of the Corporations Act 2001 and the ethical requirements of the Accounting Professional and Ethical Standards Board’s APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist Phoenix Australia Limited to meet the requirements of the Associations Incorporation Reform Act 2012 and the Corporations Act 2001 as applicable. As a result, the financial report may not be suitable for another purpose.

Other Information

The Board of Directors are responsible for the other information. The other information comprises the information in the Company’s annual report for the year ended 30 June 2021, but does not include the financial report and the auditor’s report thereon.

Our opinion on the financial report does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Independent audit report continued

Board of Management's Responsibility for the Financial Report

The Board of Directors of the Company are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial statements, which form part of the financial report, are consistent with the financial reporting requirements of the Associations Incorporation Reform Act 2012 and the Corporations Act 2001 as applicable and are appropriate to meet the needs of the members. The Board of Directors' responsibilities also include establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgment and maintain professional scepticism throughout the audit.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: www.auasb.gov.au/auditors_responsibilities/ar4.pdf. This description forms part of our auditor's report.

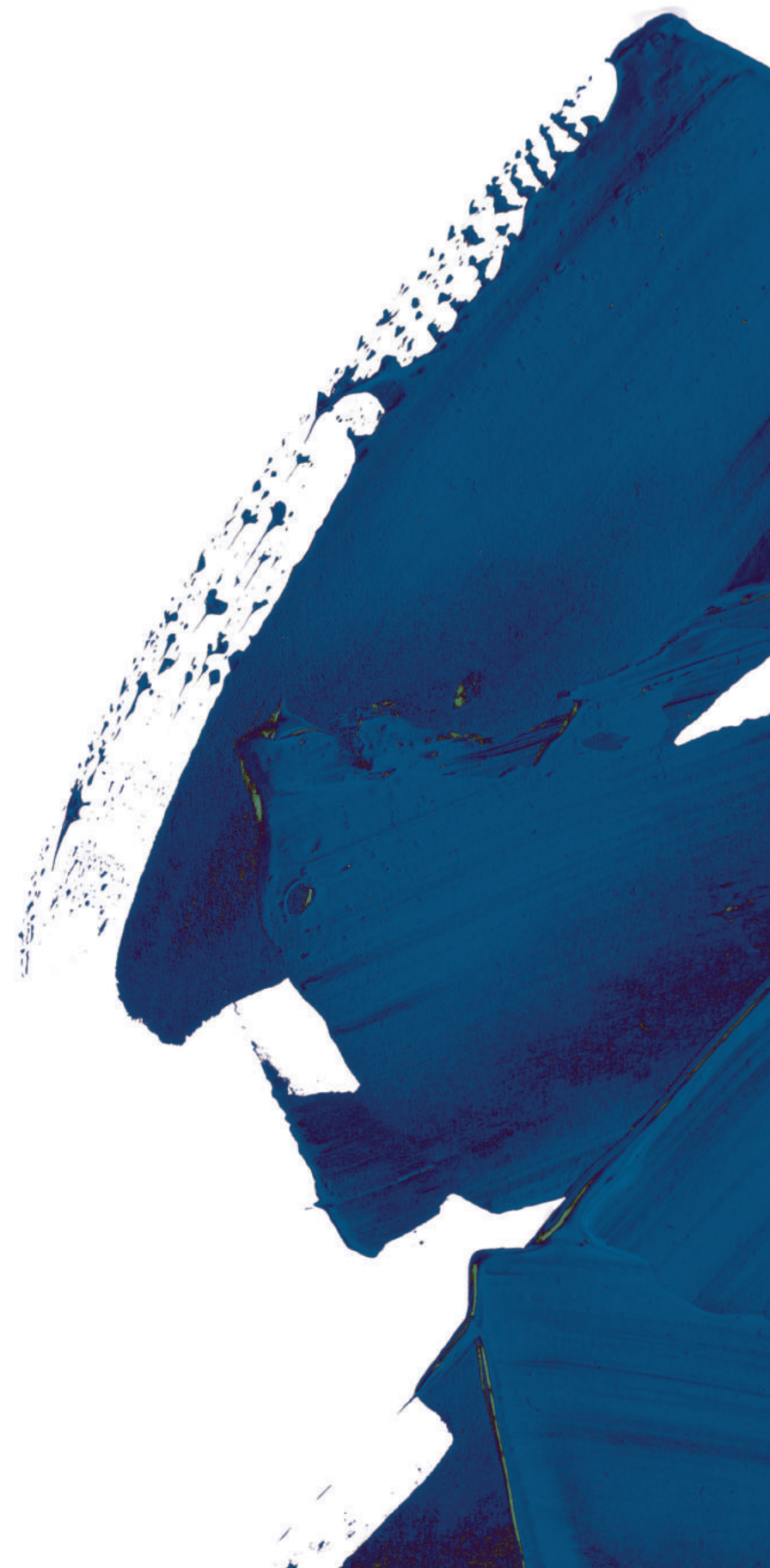
We communicate with the Board of Directors of the Company regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Mazars Melbourne Assurance Pty Ltd



Craig Silvester
Director

Dated this 28th day of September 2021 at Melbourne.





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A U S T R A L I A

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Phoenix Australia.

Australia's National Centre of Excellence
in Posttraumatic Mental Health.

We build evidence and translate
knowledge into action, such as
improved treatment options and greater
support for trauma-affected individuals,
families and communities.

Understanding trauma. Renewing lives.

For more information about trauma, its effects and
best practice treatments, visit **phoenixaustralia.org**

Phoenix Australia is an Australian not-for-profit company
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Psychiatry at the University of Melbourne.

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