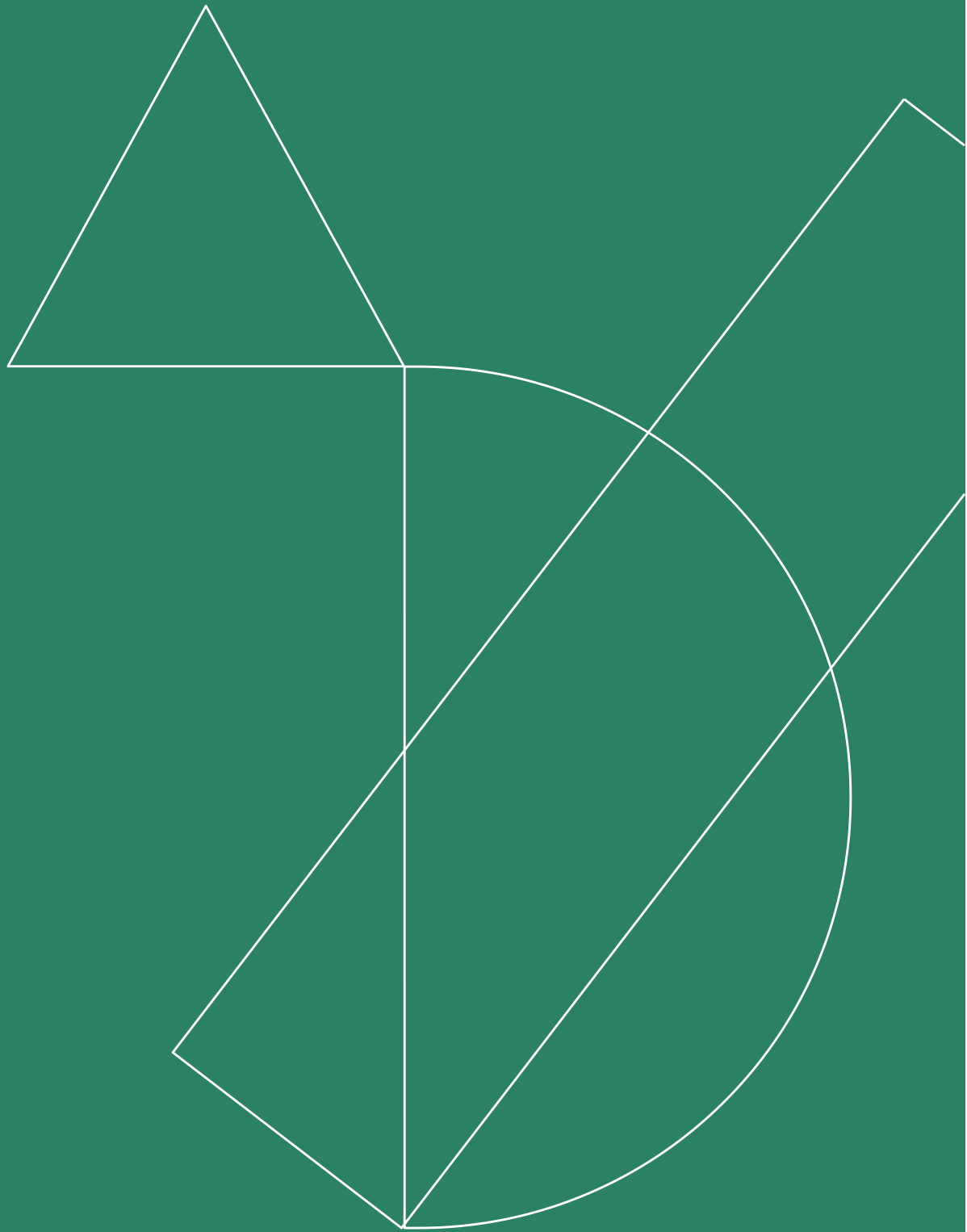




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Extra Care for General Insurance
Customers Experiencing Vulnerability.



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1. Purpose

This guidance outlines good industry practice for how general insurers can identify and take [extra care](#) with customers experiencing vulnerability.

It explains:

- How to recognise a customer may be experiencing vulnerability in a general insurance context, from types of [claims events](#) to certain personal circumstances or characteristics.
- When and how to identify the [extra care](#) needs of customers experiencing vulnerability, including at key moments across the insurance journey.
- How to provide [extra care](#) that is relevant and timely.
- Practical suggestions and case studies for insurers and service suppliers to consider in developing and embedding [extra care](#) capability in organisational practices.

This guidance is voluntary and not legally binding on insurers. Insurance Council of Australia ('Insurance Council') members are free to adopt or adapt the guidance as suits their business needs. This guidance provides a practical resource to assist the industry in their operations, internal processes, procedures and policies.

This guidance complements the General Insurance Code of Practice ([Code](#)). It draws on leading international standards such as [ISO 22458](#) on Consumer [Vulnerability](#), is informed by lived experience, and incorporates emerging better practice.

1.1 Context

General insurance plays an important role in protecting individuals and businesses from the financial risk of the unexpected. General insurance differs from other financial services in that many customer touchpoints – particularly claims – often occur after a disruptive or distressing event. These moments may coincide with heightened emotional, financial, or day-to-day stress, needing insurers, suppliers and service suppliers to respond with enhanced care and flexibility. The need for [extra care](#) can be amplified and rendered more challenging in the context of natural disasters. In situations where [trauma](#) may be widespread, recognising and responding to urgent needs helps customers experiencing vulnerability receive the support they need to navigate the claims process with confidence.

When a product is distributed via a [broker](#), insurers may have limited visibility of customers who could be at risk of, or experiencing, [vulnerability](#). With minimal direct engagement, insurers have fewer opportunities to ask targeted questions or observe potential [vulnerability](#) indicators. In these situations, [brokers](#) play a key role in identifying and communicating a need for additional care or support.



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1.2 Application

This guidance is relevant across the entire insurance customer journey from policy inception to policy changes, renewals, cancellations, claims and complaints. It is also a relevant and useful guide for distributors and [service suppliers](#) acting on behalf of insurers, who interact with customers or influence their experience.

The principles in this guidance are intended to be practical, proportionate, and scalable, so they can be adapted to different insurer sizes, geographic areas, and customer groups.

1.3 Review mechanism

The expectations of customers and the community are rapidly evolving. The Insurance Council proposes to review this industry guidance every two years to keep pace with these changes.

The Insurance Council will consider completing a review earlier than every two years if it receives significant feedback from members or community stakeholders that the guidance requires updating to address a significant issue.



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2. Principles for supporting customers experiencing vulnerability.

Vulnerability may arise from a wide range of circumstances and may affect a person's ability to understand information, make decisions, or navigate insurance processes.

Insurers engage with customers at several touchpoints across the insurance lifecycle, which can present opportunities to identify if a customer needs extra support. Embedding vulnerability identification into everyday business practices helps to prevent the inadvertent exacerbation of a customer's vulnerabilities.

2.1 Recognising vulnerability.

Customers may not describe themselves as vulnerable or may be unwilling or unable to disclose their situation upfront. Vulnerability may be temporary or ongoing, and may stem from personal circumstances, the nature of a claim event, or even the way information is communicated or understood. Recognising that vulnerability can take many forms is important, because it ensures insurers remain aware of circumstances that could limit a customer's ability to engage confidently – see [Section 3](#).

Certain claims events may increase a customer's vulnerability due to a higher likelihood of, and potential for, trauma. In these situations, insurers can draw on trauma principles to assess whether the customer requires extra support, including where a customer's claim arises out of a traumatic event such as a natural disaster.

Trauma-informed care: a core part of extra care

Trauma is a common and compounding driver of vulnerability. Many customers who need extra care are navigating the effects of trauma, whether from a single event like a disaster or assault, or from longer-term experiences such as family violence, systemic discrimination, poverty, or loss. Trauma can affect how people process information, make decisions, or engage with systems, particularly where navigating those systems may feel rushed, impersonal, or difficult.

Delivering trauma-informed care well requires training and practice, while recognising the presence of trauma symptoms and acknowledging the role trauma may play in a person's life. Trauma-informed care supports staff in:

- Understanding and recognising how trauma may be affecting a customer's engagement.
- Responding in ways that support safety.
- Referring customers to specialist teams or services when appropriate.

[Section 4.2](#) provides some guidance on how insurers can develop trauma-informed care into everyday processes, including key decisions like settlement offers and how family violence is identified and managed.



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2.2 Identify needs, not labels.

Vulnerability isn't always visible or predictable. There are no fixed categories or checklists, and not all customers experiencing the same event will identify as vulnerable or require the same level of support. A needs-based approach focuses on what support the customer requires, prompting front line staff to observe, ask, and respond in practical ways, i.e. "What might this person need right now to access, understand, and receive a safe experience with insurance?" – see [Section 3](#).

Not every customer will need tailored support at every stage of their insurance journey, and not all customers experiencing the same event will identify, or wish to identify, as vulnerable. Insurers can play an important role in:

- Recognising when a customer may be experiencing vulnerability.
- Responding in a way that is appropriate to the customer's needs and circumstances.
- Designing processes that are flexible and responsive, when a customer's situation calls for it, across the insurance lifecycle, so that they may better address the customer's need – see [Section 4](#). This includes, where appropriate, making customers aware of external support services available to them.

2.3 Embed extra care in the customer journey.

Embedding extra care across the customer journey is important as vulnerability can arise at any time – from policy inception through to renewals, claims or complaints. Customer insights, case studies, and stakeholder input show that providing timely, appropriate support at key moments can improve customer outcomes and reduce barriers to engagement. Helping customers understand their cover and claim, and recognising when extra care may be needed, are key components of delivering a safe and accessible experience. For some customers, communication may be a matter of convenience. For others, it determines whether they can effectively engage at all, particularly where circumstances, stress or the nature of an event make the process more difficult to navigate - see [Section 4](#).

2.4 Build organisational capability.

Extra care starts with people. Everyone who interacts with customers, including service suppliers, needs the skills, confidence, and tools to be able to both recognise when extra care may be needed, and to respond in ways that are timely, respectful, and effective.

This means going beyond general awareness to building capability across an organisation so that staff and service suppliers can act early and respond appropriately. Each insurer will determine how to best operationalise and train their workforce based on their organisational structure, operating model, and available resources. Operational examples can be found in [Section 5.2](#).

3. Proactively recognise the risk of vulnerability.

Effective support for customers experiencing [vulnerability](#) starts with recognising when [extra care](#) may be needed. This guidance uses a three-step model, *Assess, Ask, Anticipate*, to help insurers proactively identify the *risk* of vulnerability and respond with care, even without formal disclosure.

3.1 Assess, ask, anticipate.

Extra care needs don't begin and end with a claim. They can arise at any point in the customer's insurance journey, including routine or transactional moments.

1. **Assess** the signs – is there a risk of vulnerability based on the claim, circumstances, or behaviour?
2. **Ask** safely and respectfully about the person's extra care needs or preferences.
3. **Anticipate** there may be a level of trauma for specific claims events and seek to understand extra care needs are required using trauma-informed care.

Examples of touchpoints presenting an opportunity to provide extra care could include:

- **Policy inception or renewal** noting relevant restrictions around the provision of financial advice,¹
- **Hardship**, where factors such as job loss, domestic and family violence, or illness may be contributing to requests for financial assistance.
- **Cash settlements**, where the customer may not have the resources, capability, or confidence to manage repairs or reconstruction independently. It is important to note that insurers may not always be able to make an assessment of whether the customer has the capacity to manage the repair or reconstruction, and there may be instances where cash settlement is the only possible outcome. In some cases, customers may also be working with a [Claims Management Company](#), who will require the customer to accept the cash settlement.
- **The claims process**, where customers may require additional support to navigate complex, stressful or disruptive [claims events](#). For example, [extra care](#) may be shaped by the [claim event](#) or type, the context in which it occurs, and who it happens to.
- **Complaints**, In certain cases, a complaint may reflect a customer's need to remain engaged with the claims process rather than an intention to dispute an outcome. [Vulnerability](#), such as stress, fatigue, or cognitive overload following a loss event, can impact a customer's ability to communicate their needs

¹ Australian Government | Federal Register of Legislation. 2020. '[Corporations Act 2001](#)'.



effectively. As a result, the customer may lodge a complaint as a means of seeking reassurance or progress updates, rather than raising a substantive concern.

Applying the *Assess, Ask, Anticipate* model at key customer touchpoints can assist an insurer to identify customer needs, recognising these may change over time, and to respond as needed to provide [extra care](#).

3.1.1 Assess the risk factors for vulnerability.

Many support needs stem from a customer’s life context. Customers may be more likely to experience [vulnerability](#) when characteristics of their extra care needs are due to one or more of the following drivers:

- Health – health conditions or illnesses that affect ability to carry out day to day tasks, such as chronic illness, mental health conditions, neurodivergence, cognitive decline.
- Life events – such as bereavement, relationship breakdown, a natural disaster or other catastrophic event, family and domestic violence including financial abuse, job loss, displacement, trauma.
- Resilience – including reduced ability to manage financial or emotional shocks, caregiving stress, poverty.
- Capability – limited literacy, digital access, financial knowledge, or cultural familiarity.

A straightforward claim for one person may be overwhelming, inaccessible, or even unsafe for another. Not every person who has one or several of the below characteristics will need extra care. But if someone is struggling to access, recover or engage with their insurer, policy or claim, even with a low-value or routine claim, their circumstance may be an important factor to consider. That’s why effective identification starts by asking: “What barriers might this person be facing right now, and how can we reduce them?” Any observations or insights can only be recorded with the person’s knowledge and consent.

Table 1: How Circumstances and Needs Connect: Personal characteristics that can shape a person's experience.

Customer circumstances	Potential customer needs could include:
Domestic and family violence	Privacy protections; safety planning; safe disclosure environments; options to only tell their story once; flexible communication channels.
Trauma	Flexible, trauma-informed care and focus on safety, empathy, control and minimising re traumatisation.



Customer circumstances	Potential customer needs could include:
Cultural background	Interpreter services including, where available, Aboriginal and Torres Strait Islander languages; translated materials; culturally sensitive communication and support; easy-read documents.
Disability	Accessibility accommodations (e.g. assistive technologies); alternate communication formats (e.g. easy-read documents); flexible claims and complaints processes.
Financial difficulty	Flexible payment arrangements; empathetic hardship support; proactive communication about available support.
First Nations customers (Aboriginal and/or Torres Strait Islander)	Culturally safe communication and support; community-based engagement; interpreter services ; flexible proof of identity processes; respect for kinship structures, intergenerational trauma and local language needs.
Older customers	Accessible communication; assistance navigating digital platforms; accessible support services; additional support with complex decision-making processes.
Physical or mental ill health	Trauma-informed care ; empathetic and non-judgemental communication; flexible and simplified claims handling.
Cognitive impairment	Simplified explanations; additional decision-making time; support person involvement where needed.
Neurodivergence	Clear, step-by-step predictable communication; extra time to process and respond; option to use preferred communication channel; support person or advocate involvement where needed.
Customers with serious medical conditions	Priority processing of claims; flexible documentation requirements; clear, empathetic, and time-sensitive communication and an support person involvement where needed.
Elder Abuse	Privacy and security protections; careful verification of third-party authorities; safeguarding against financial coercion or manipulation.



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Customer circumstances	Potential customer needs could include:
Customers experiencing financial abuse	Confidential and trauma-informed care ; independent hardship assistance pathways; secure management of claims and payment information.
Customers with literacy and/or language barriers (including limited English)	Interpreter services ; simplified language; translated documents; culturally respectful communication practices communication and a support person or advocate involvement where needed.
Remote Location	Flexible communication methods (e.g. telephone, postal services); support navigating digital platforms; time allowances for limited internet or transport access.
Incarcerated or recently released persons	Flexible identification and verification processes; trauma-informed care ; assistance in re-establishing financial engagement post-release.
Bereavement	Empathetic, compassionate communication; trauma-informed care ; sensitivity around repeated information requests; option for a support person .

The claims process is one of the key touch points in the insurance journey. Certain claims – particularly those involving complex, high-stress, or disruptive events need to be managed with appropriate care.

For example, a natural disaster is a situation where many claims occur at once, often affecting people who become displaced, traumatised, or disconnected from normal support networks. The same event may affect people in very different ways. What matters is not *what the claim is for*, but *how the person is impacted*.

Recognising a potential risk means being open to the possibility that someone might benefit from [extra care](#). The next step is to create space for the customer to express what they need, in a way that feels safe and respectful.



Examples:

John* is an 85-year-old man who lived independently in his home that was flooded during the October 2022 Flood event. John does not have family and is isolated within the community and at home. John suffers from hearing loss so wears hearing aids and struggles to hear on the phone or in loud environments. John is of sound mind and is intelligent. John suffers poor mobility and can be unsteady on his feet.

Leah* is 59-year-old woman living in south-east Queensland and experiencing domestic violence (DV). Her property was under contract of sale when it flooded in 2022. The contracted owners were happy to continue with the purchase if it was cleaned out.

While the cause of the claim is the same, the nature of support each customer may need is different. Understanding John's extra care needs means ensuring accessibility of information, and help accessing appropriate temporary accommodation. For Leah, support looks like confidential and flexible communication channels that prioritise her safety, prioritising the clean out to her property, and providing [trauma-informed care](#) that recognises the complexity and the real potential of existing [trauma](#).

3.1.2 Ask about needs.

Asking a customer about the assistance they require supports safe inclusive service. Good questions invite the customer to share preferences or request adjustments.

Example questions:

- "What is the most important thing for you right now?"
- Is there anything we can do to make this process easier for you?"
- "Would you like us to explain this another way, or send it in writing?"
- "Is there anyone else you'd like to involve in this conversation?"
- "Would more time help you feel more comfortable?"

Examples of when to ask:

- At relevant customer touchpoints which could include, claim, financial hardship request, complaint.
- There are personal circumstances or characteristics that may indicate a risk of vulnerability.
- If the customer seems overwhelmed, disengaged, or unsure, or has disclosed a lack of understanding.
- When a claim is complex or high impact.
- Before offering cash settlements, requesting documentation, or making decisions that affect recovery.

You're not asking what's wrong with the customer, you're asking what they need from you right now.

It is also prudent to record these extra care needs with the customer's consent.



3.1.3 Anticipate a level of trauma for specific claim events.

As recognised, some situations may call for default extra care because of the likelihood of vulnerability.

Table 2: Claims events where there may be a level of potential trauma

Claims event	Potential customer needs could include
Relates to a catastrophic natural disaster	<u>Trauma-informed care</u> ; deployment of staff to recovery centres; proactive, meaningful and timely updates to reduce confusion and emotional distress, where possible, fast-tracked, simplified claims; immediate crisis support (e.g. emergency accommodation); referral to confidential counselling support.
Associated with a fatality, multiple deaths or medical emergency	<u>Trauma-informed care</u> ; referral to bereavement support; medical evacuation; avoid requiring detailed retellings of the incident; <u>support person</u> involvement where needed.
Loss or of displacement from a customer’s home or car in certain circumstances²	<u>Trauma-informed care</u> ; priority claims response and resolution.
Home invasion or armed burglary	<u>Trauma-informed care</u> ; privacy protections; replacement locks; offer of referrals to counselling or specialist victim support services; avoid requiring detailed retellings of the incident.
Occurs as a result of or in an environment of domestic abuse	<u>Trauma-informed care</u> ; privacy protections; safety considerations including safe disclosure environments; options to only tell their story once; flexible communication channels.

² Customers experiencing vulnerability may rely on their cars not just for transport but as a lifeline for accessing essential services, employment and, in some cases, temporary shelter.



4. Respond with appropriate support.

When someone needs [extra care](#), their experience with insurance will depend on how well insurers respond to said need. A timely, proportionate, and flexible response can contribute to a positive experience with recovery. A poor response, or no response at all, can entrench disadvantage, erode trust, and trigger further distress.

The following table brings together the key elements of responding with [extra care](#) by showing how customer needs align with practical support across different stages of the insurance lifecycle, and why each response matters. It provides a quick reference for frontline staff to understand when support may be needed (lifecycle stage), what the customer’s extra care needs may be, how insurers can respond appropriately, and the intended outcome for the customer.

Table 3: Customer Journey, Examples of Customer Needs, Support and Outcomes

Life cycle stage	Examples of extra care need could be	Examples of appropriate support could include	Intended outcome
Pre-Purchase/ & Purchase	Make it easy to communicate.	Offer information on interpreter services , including, where practicable, information for First nations customers who do not speak English as their first language.	Customer is aware of the policy and coverage options.
Servicing/ Renewal	Remember me and my circumstances.	Record, with consent, the customer’s preferred channel of communication, unless unable to do so or required to do so by law.	Customers experience continuity of care, feel recognised across interactions, and with privacy considerations, don’t have to retell their story.
Claims	Be trauma-informed.	Phone based support, flexible documentation options, extra time for actions required of customers in the claims process (especially after trauma or displacement, or if the customer lives remotely), fast-tracking a claim where a customer is in urgent financial need, claims management support by vulnerability specialists.	Customers feel emotionally safe and able to progress claims without distress or re-traumatisation.



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Life cycle stage	Examples of extra care need could be	Examples of appropriate support could include	Intended outcome
Disputes	Refer me to a specialist.	Case manager access, simple complaint guidance, referrals to advocacy or external dispute channels.	Customers access timely, relevant expertise to manage their situation.

4.1 Provide accessible and proactive communication.

Providing accessible and proactive communications helps customers communicate with confidence, understand their options, and stay informed in ways that work for them.

Some customers need information in a different language or format. Others may rely on a [support person](#), or feel overwhelmed by the pace or complexity of the insurance process. These are not just preferences, they are common, predictable support needs for people experiencing vulnerability.

This section outlines how insurers can make *communication* more inclusive, empowering, and effective, particularly when a customer may not know what to ask for, or how to engage.

4.1.1 Written communication

Why this matters: Insurance is a document-heavy industry. When written materials are unclear, overly technical, or emotionally blunt, they can exclude or distress people, especially during claims, complaints, or disaster recovery. While there are necessary contractual and legal terms that must be included, insurers could balance these with [Plain English](#) and where possible, [Easy English](#) options.

Examples could include:

- Offer accessible formats where possible and refer to services that can provide support such as formatting into large print, audio, or screen-reader compatible documents.

4.1.2 Verbal and interpreter communication.

Why this matters: Some customers are more comfortable speaking than reading. Others may face language barriers, hearing loss, or may prefer for someone else to speak on their behalf. Providing safe, supported ways to communicate, including in-language and interpreter support, is important for these customers.

Examples could include:

- Offer information to assist with interpreter services, and, where available, Aboriginal and Torres Strait Islander Languages, and promote them clearly.



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4.1.3 Digital and website access.

Why this matters: Websites, apps, and digital forms are often the first, or only, interaction customers have with their insurers. When designed without accessibility in mind, they can exclude people with a disability, limited digital skills, or those using assistive technologies.

Examples could include:

- Design websites and online forms to meet [WGAC 2.1](#) accessibility standards³.
- Make help options, including phone support, easy to find.
- Include “quick exit” buttons on content that relates to domestic and family violence.
- Include alternate claim lodgement channels for customers who are unable to use digital services.

4.1.4 Proactive communication and follow-up.

Why this matters: When customers are distressed, overwhelmed, or unfamiliar with insurance, they may not know what to ask, or may unintentionally disengage. Proactive, clear outreach can prevent claims from stalling.

Examples could include:

- When communicating with customers, explain next steps clearly, including what the customer needs to do to comply with their contracted responsibilities or to progress a claim.
- Provide reminders before deadlines (e.g. missing documents, policy lapses, renewals).
- Identify delayed/missed payments, missed steps, or inconsistent responses as signals that a customer may need extra support. Reach out to clarify if additional support is required.
- Refer customers to a dedicated contact person or team that is available to support them.

³ World Wide Web Consortium (W3C). 2025. '[Web Content Accessibility Guidelines](#)'. *w3.org*.



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4.2 Offer safe and flexible options.

For customers to feel safe and stay engaged where possible, design flexible processes that adapt to real-world experiences.

For customers experiencing [vulnerability](#), inflexibility, complex requirements, or emotionally unaware interactions can unintentionally retraumatise people or shut them out of support altogether.

4.2.1 Adapt processes with care and flexibility.

Why this matters: Standard processes, such as rigid deadlines, or automated decisions – can unintentionally exclude or disadvantage customers experiencing [vulnerability](#). Flexibility doesn't mean lowering standards or compromising reporting obligations, it means focusing on removing unnecessary barriers.

Examples could include:

- Allow extra time and flexibility for customers in remote or regional areas, where access to services, mail, or digital tools may be limited.
- Follow up proactively when key documents aren't returned, not as a compliance task, but as an opportunity to offer support.
- When cover is declined, provide clear reasons for the decision, telling the customer about their right to ask for information relied upon and referring the customer to the Insurance Council of Australia or the National Insurance Brokers Association of Australia for information about other insurers who may offer the product needed.

4.2.2 [Cash settlements](#) and [vulnerability](#).

Why this matters: [Cash settlements](#) transfer responsibility for a repair, rebuild, or replacement to the customer. Customers receiving a [cash settlement](#) for their home and/or contents claim may need to manage quotes, engage trades, and oversee repairs. This responsibility is often compounded by a need to navigate commonly occurring localised trades shortages after disasters, and may not be feasible for people experiencing [vulnerability](#).

It is also important to recognise that insurers may not always be able to fully assess a customer's capacity to manage repairs or reconstruction. In some situations, a [cash settlement](#) may be the only practical or available option, for example, if the customer is underinsured or building restrictions prevent repair or rebuild work.

Examples could include:

- Provide additional information along with a [cash settlement](#) fact sheet, highlighting considerations such as consumers having to manage their own repairs.



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4.2.3 Domestic and family violence response.

Why this matters: Family and domestic violence can impact every aspect of a customer's interaction with their insurer, from safety and privacy to decision-making and control. A [trauma-informed](#), survivor-centred approach is important to help insurers avoid unintentionally putting people at greater risk.

Examples could include:

- Encourage customers to share their circumstances if they feel comfortable, without requiring formal disclosure or proof of violence to access support.
- Use safe contact protocols, including communication preferences and private channels.
- Where family violence risk is known or suspected, ask about the customer need and, with consent, record that need.
- Customers are offered safe options for verifying identity or accessing updates.
- Where conflicting claims are received, the insurer investigates with a family violence lens.
- Specialist family violence experts are consulted on policy design and relevant customer materials.
- Consider policy reinstatement, and claims paid where a perpetrator's deliberate actions resulted in lapsed or voided cover.
- Potential for property damage resulting from family violence to be covered under a policy.
- Victim-survivors receive access to indemnity or [cash settlements](#), even where policies are jointly held.

4.3 Be consistent and empathetic.

Why this matters: For many customers, especially those experiencing [vulnerability](#), trust is built through consistency. Having to repeat their story, re-explain preferences, or chase updates can erode confidence and compound distress. Respecting communication preferences where possible, following through on commitments, and providing continuity across the claim lifecycle, are key to delivering safe and reliable service.

Examples could include:

- Where possible, communicate via the preferred contact method unless unable to do so, not appropriate, or required to do otherwise by law.
- If unable to do so, work with the customer to find another way of communicating.
- Where possible, maintain a consistent touchpoint available to support customers experiencing vulnerability. This may include a dedicated person or a specialist team.



4.4 Refer to a specialist.

Why this matters: Some people need more than general support. They need help from someone with specialist skills or lived experience relevant to their situation. That support might come from a specialist team within the insurer or from trusted external services (such as financial counsellors or legal [advocates](#)).

Examples could include:

- Provide clear, up-to-date contact details for relevant external services (e.g. financial counselling, legal advice, mental health or domestic and family violence support).
- Make it easy for customers to involve a [support person](#) with consent.
- Train staff to identify when external specialist support could help the customer navigate their claim or situation more safely.

4.5 Working with a [support person](#).

Why this matters: Many people rely on trusted advisors like financial counsellors, lawyers, or support workers, to help them understand their rights, communicate with insurers, and navigate complex claims. Failing to recognise, or to work respectfully with, a [support person](#) can delay outcomes, increase stress, and undermine access to appropriate advice.

Examples could include:

- Make it easy for customers to nominate a [support person](#).
- Engage respectfully with advisors and follow agreed communication preferences when possible.
- Honour authorised advisor arrangements across systems and teams, so customers don't need to re-explain or re-authorise repeatedly.

4.6 Activate surge capacity and crisis response.

Why this matters: Disasters create unique, large-scale pressures for both customers and insurers. In these moments, [vulnerability](#) can be widespread, unpredictable, and often hidden.

Examples could include:

- Activate surge protocols that include extra care responses, not just operational capacity.
- Embed vulnerability-aware triage to prioritise customers with heightened needs.
- Provide face-to-face support options, such as recovery hubs or mobile outreach.

5. Build organisational capability and resilience

Delivering consistent, respectful support for customers experiencing [vulnerability](#) requires more than individual goodwill. Organisation-wide systems, leadership, and accountability to translate this into everyday practice is also important.

5.1 Clear policies, processes and escalation pathways.

[Vulnerabilities](#) need to be considered in the development of policies and procedures as part of how claims, complaints, renewals, hardship, and customer service are delivered, outlining when and how support needs are identified, how decisions are made, and when escalation is required.

Examples could include:

- **Clear internal guidance** on identifying, recording and responding to [extra care](#) needs.
- **Documented processes** for [extra care](#), disaster response, and [trauma-informed care](#).
- **Escalation protocols** that trigger specialist review or support where needed.



5.2 Embedding training.

Staff confidence, knowledge and emotional intelligence are key to recognising and responding to customer [vulnerability](#). Rather than being a one-off for specialist staff, training can be included at onboarding, refreshed regularly, and adapted to role type.

Training staff to recognise and respond to [vulnerability](#) is not just about customer care, it's a core risk-management strategy. When frontline staff miss signs of [vulnerability](#), it can lead to uninformed judgements, complaints, reputational damage, or legal escalation. Staff need to be equipped to recognise when standard processes may lead to adverse customer outcomes and how to respond appropriately.

Examples could include:

- **Training all customer-facing staff**, including claims teams, contact centre agents, assessors, and dispute resolution specialists, to recognise risk factors for [vulnerability](#) and know when to ask, anticipate, or escalate.
- **Include foundational [trauma-informed care](#) training for all customer-facing staff** across onboarding and refresher programs. For customer claims and high care teams, provide more in-depth training, supported by consistent guidance and practical case example. Example includes the Red Cross guidance on Psychological First Aid.
- **Requiring [service suppliers](#) who insurers directly contract with and interact with customers** (such as builders, repairers, loss adjusters, collection agents, and investigators) to undertake [vulnerability](#) training and implement referral protocols.
- **Developing a clear set of processes** that help frontline staff understand how to escalate concerns or notify the appropriate teams when a customer appears to need additional support or care, and providing training on these processes. Empowering specialist teams to make flexible decisions quickly and support other staff with escalation or advice.
- **Specialist modules** on [trauma-informed care](#), disability awareness, family violence, and cultural safety.
- **Cultural awareness training for staff** who engage with Aboriginal and Torres Strait Islander customers, developed in partnership with First Nations organisations, where possible.
- **Consider vicarious [trauma](#) for staff** and manage as a workplace health and safety risk.
- **Ongoing supervision, coaching, or reflective practice** for teams dealing with high-stress situations.
- **Consideration of customer [extra care](#) needs** in product design, governance and change.
- **Raising awareness of financial safety by design⁴ principles** that consider the potential risks of misuse of products and services in the context of domestic and financial abuse.

⁴ Centre for Womens' Economic Safety. 2024. '[Discussion Paper: Designed to Disrupt: Reimagining General Insurance Products to Improve Financial Safety](#)'. [cwes.org.au](#).



5.3 Measuring and reviewing outcomes

Organisations also need to consider tracking how well they are identifying and supporting customers with [extra care](#) needs, and whether that support is leading to better experiences and outcomes for customers.

Strong governance signals that [vulnerability](#) is a business priority, not just a compliance issue.

Examples could include:

- Develop a [vulnerability](#) strategy, policy or procedure that is endorsed by an executive sponsor.
- Monitor employees' training for completion via internal learning platforms.
- Establish feedback loops with frontline teams to identify practice gaps and adjust training, scripts or processes accordingly.
- Integrate insights from lived experiences and customer advocates to refine what good support looks like in practice.
- A system for regular internal reporting on [vulnerability](#)-related outcomes, risks, and complaints.
- Consideration of customer [vulnerability](#) in risk frameworks and product/service design decisions.

5.4 Partner with service suppliers.

Some [service suppliers](#) such as Investigators, loss Assessors or insurance Claims Managers are often the first or only people a customer interacts with in person. Providers acting on behalf of the insurer should be held to the same expectations as internal teams.

Examples could include:

- Contracts, where [service suppliers](#) are acting on behalf on the insurer, include clear obligations around customer [vulnerability](#).
- Regular reviews of supply chain complaints.

5.5 Embed lived experience.

Insurers can create structured ways to understand and respond to the experiences of people affected by [vulnerability](#), creating structured channels for people with lived experience to inform, test, and shape their approach.

Examples could include:

- Lived experience panels or partnerships to shape future service and product design.
- Use of customer insights in decision-making forums, not just marketing surveys.
- Opportunities for customer representatives to review materials and processes.



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5.6 Data, systems and privacy.

Effective [vulnerability](#) support relies on the right infrastructure, including how customer support needs are recorded, shared, protected, and which:

- Enables continuity of care.
- Respects the customer's autonomy and privacy.
- Is compliant with privacy legislation.
- With consent, supports future interactions without requiring re-disclosure.

Systems and data processes that support staff to provide consistent, respectful care while safeguarding privacy help create a more trusted experience. Gaining consent before recording or flagging a customer's needs is essential and helps maintain trust and transparency.

Examples could include:

- Flagging extra care needs with consent:
Recording support needs in a way that is clear, accessible across relevant teams, with consent. Customers should know why information is being collected, how it will be used, and how long it will be retained.
- Using neutral, non-stigmatising language.
- Ensuring staff only have access to customer information where it is relevant to their role.
- Reviewing flagged needs periodically with the customer, where appropriate.
- Discussing customer concerns with regard to consent; explaining the impacts of not providing consent.



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Appendices

Appendix A: Glossary

Accessible Communication: Communication that can be understood and used by people with different needs and abilities — including formats such as [Easy English](#), large print, audio, and translated materials.

Advocate A third party (such as a financial counsellor, community lawyer, or support worker) who is authorised to act or speak on behalf of a customer, especially to support their rights, entitlements, or well-being.

Anticipate (in the context of vulnerability) To apply extra care based on a known high-risk situation (such as a disaster or total loss claim) without requiring the customer to self-identify or disclose personal information.

Broker Any person acting on your behalf that arranges the insurance policy covered under the Code.

Cash Settlement (referring to home building policies only) Finalising a claim for a home building under a home building policy where a scope of works is required by paying the money (rather than the insurer repairing or rebuilding the home building). This may also be referred to as 'Cash Settling'.

Claim Event A situation that gives rise to an insurance claim, for example, a flood, fire, or vehicle accident. Claim events can trigger or intensify vulnerability.

Claim Management Companies (CMC) (sometimes known as third party intermediaries). For-profit business that act on behalf of the policyholder to manage the entire claims process for a fee, including paperwork and documentation, assessments, and negotiating a cash settlement with the insurer. Since 1 January 2022, CMCs providing claims handling and settling services have been required to hold an Australian Financial Services License (AFSL) and be members of the Australian Financial Complaints Authority (AFCA).

Code The General Insurance Code of Practice.

Easy English A writing style that helps people who find it hard to read and understand English. It is simpler and has lower reading level than [Plain English](#). This style uses short sentences with an image or a picture.

Extra Care the additional support or flexibility we provide to you to assist you while you are experiencing Vulnerability.

Flag / Vulnerability Flag A secure note or indicator on a customer record that signals a support need or vulnerability, used to enable continuity of care across teams and processes.

Interpreter Services Support for customers who prefer or need to communicate in a language other than English, including First Nations languages.

Personal Circumstances A customer's life situation, including health, disability, income, caring responsibilities, or exposure to trauma, that may affect their ability to engage with insurance processes.

Support Person / Support Representative Someone nominated by the customer to assist them during interactions with an insurer, who may or may not be a formal [advocate](#).



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Trauma Refers to events or experiences that are overwhelming, threatening, or deeply distressing, and that can have lasting emotional, psychological, or physical effects. Trauma can result from a single incident (such as a natural disaster, accident, or assault) or from repeated or ongoing experiences such as violence, abuse, discrimination, poverty, or displacement. Trauma can affect how people process information, make decisions, communicate, and interact with systems, even if they do not disclose their experience.

Trauma-Informed Approach A way of working that recognises the impact of trauma and helps insurers deliver services in ways that are emotionally safe, respectful, and empowering. A trauma-informed approach is guided by five key principles: safety, trust, choice, collaboration, and empowerment. It involves understanding how trauma may affect a person's ability to engage, responding with compassion and flexibility, and referring to appropriate support when needed.

Trauma-Informed Care The practice of providing care while recognising the presence of trauma symptoms and acknowledging the role trauma may play in a person's life and responding appropriately. It is based on knowledge and understanding of trauma, how it affects people's lives, their service needs as well as how clients might present to services. It aims to mitigate the impacts of trauma and avoid exacerbating it.

Service Supplier means an Investigator, Loss Assessor, Collection Agent or Insurance Claims Manager who is not our Employee but is contracted by us in relation to a Retail Insurance claim.

Vulnerability means circumstances that can limit your ability to access or use our products or services, including your capacity to make financial decisions or submit a claim. These circumstances may increase the risk you could experience poor outcomes, unless extra care is taken. You may be more likely to experience Vulnerability if the following factors are present:

- a) **Health** – health conditions or illnesses that affect your ability to carry out day-to-day tasks, such as chronic illness, mental health conditions, neurodivergence, cognitive decline.
- b) **Life events** –bereavement, relationship breakdown, a natural disaster or other catastrophic event, family and domestic violence, including financial abuse and elder abuse, job loss, displacement or trauma.
- c) **Resilience** –reduced ability to manage financial or emotional shocks, caregiving stress, poverty.
- d) **Capability** –limited literacy, digital access, financial knowledge, or cultural familiarity.



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Appendix B: Resource links

Curated links to key tools, frameworks, and guidance documents such as family violence protocols, [Easy English](#) standards, inclusive service design principles.

- (1) **Australian Government | Federal Register of Legislation. 2020.** '[Corporations Act 2001](#)'. *legislation.gov.au*.
- (2) **Australian Government | Office of the Australian information Commissioner. 2018.** 'Guide to securing personal information: 'Reasonable steps' to protect personal information'. *oaic.gov.au*.
- (3) **Australian Human Rights Commission, 2021.** '[Guidelines for Working with a Trauma-Informed Approach](#)'. *itstopswithme.humanrights.gov.au*.
The Australian Human Right Commission's 5 core principles to help guide organisations' approach to trauma-informed work are defined as below:
 - **Safety:** Interpersonal and environmental settings should promote a sense of physical, emotional and cultural safety.
 - **Trustworthiness:** All organisational operations and decisions are conducted with transparency with the goal of building and maintaining trust.
 - **Choice:** Ensure that targets of racism are not obliged to solve issues within your organisation or provide education to perpetrators of racism or other staff members.
 - **Collaboration:** Promote the reduction of power imbalances by shifting to 'collaborative' ways of working where the target of racism is part of decision-making processes that affect them.
 - **Empowerment:** Centre the experiences of person/s experiencing racial discrimination in all aspects of the complaint handling processes. Decisions and actions taken by your organisation must be transparent and clear, and target/s of racism should be supported in shared decision making. Note that decision-making is distinct from the complaint handling or investigation process itself. The target's input should be sought throughout the decision-making process and should inform the way an independent complaint handling process takes place.
- (4) **Centre for Inclusive Design. 2020.** '[Easy English versus Plain English](#)'. *centreforinclusivedesign.org.au*.
- (5) **Centre for Womens' Economic Safety. 2024.** '[Discussion Paper: Designed to Disrupt: Reimagining General Insurance Products to Improve Financial Safety](#)'. *cwes.org.au*.
- (6) **International Organization for Standardisation (ISO). 2022.** '[ISO 22458:2022. Consumer vulnerability – requirements and guidelines for the design and delivery of inclusive service](#)'. *iso.org*.
- (7) **Our Watch, 2021.** '[Change the story: A shared framework for the primary prevention of violence against women in Australia](#)'. *ourwatch.org.au*.
- (8) **UK Financial Conduct Authority (FCA). 2021.** '[FG21/1 Guidance for firms on the fair treatment of vulnerable customers](#)'. *Fca.org.uk*.
- (9) **World Wide Web Consortium (W3C). 2025.** '[Web Content Accessibility Guidelines](#)'. *w3.org*.



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