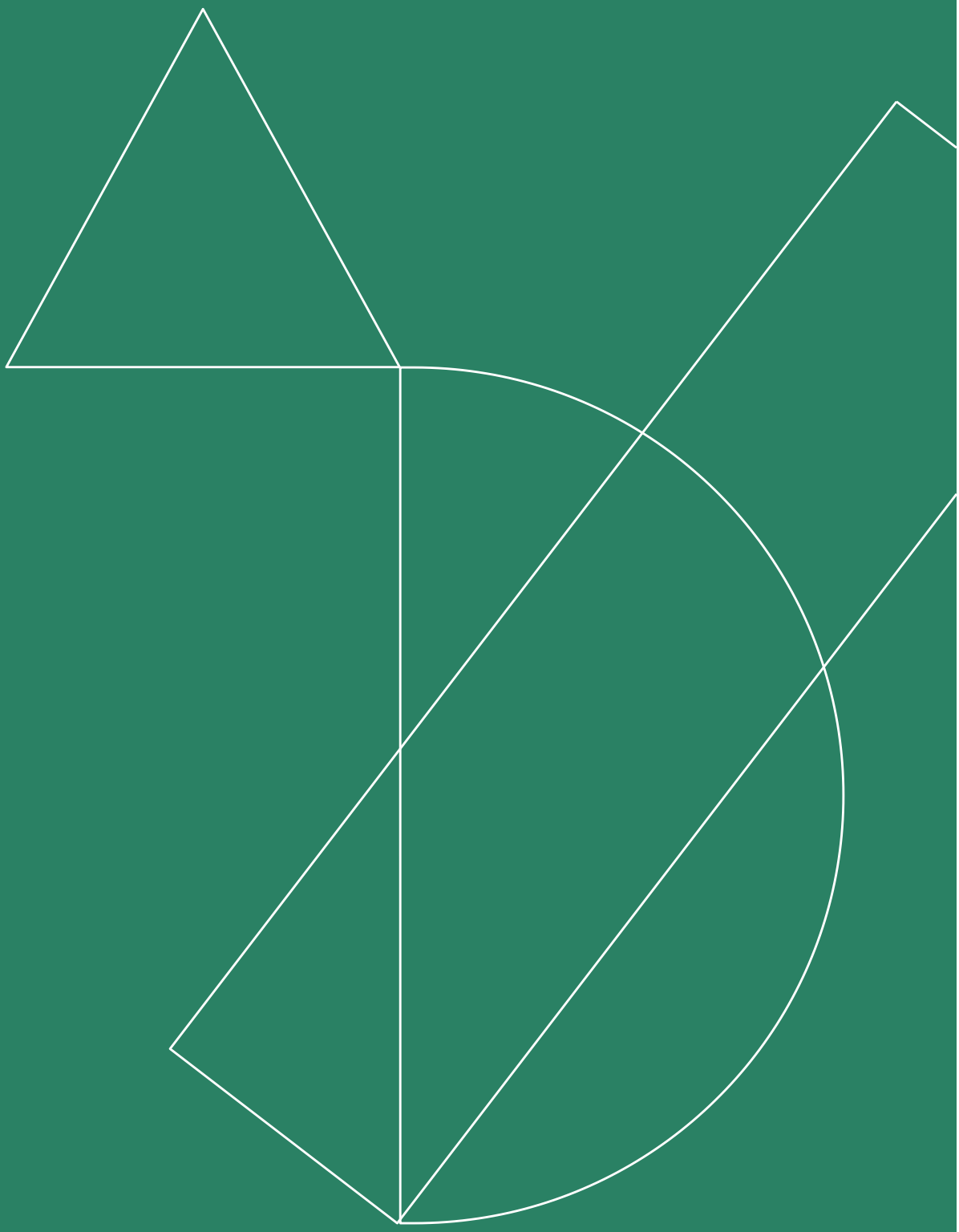
Insurance Council of Australia



Industry Guide on Vulnerability

Insurance Council of Australia

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Section 1: Purpose

This guide 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; and
- how to provide extra care that is relevant and timely, with practical suggestions and case studies for insurers and service suppliers to consider in developing and embedding extra care capability in organisational practices.

This guide is voluntary and not legally binding on insurers. Members of the Insurance Council of Australia are free to adopt or adapt the guide to suit their business needs. It is a practical resource intended to assist insurers in their operations and the development of internal processes, procedures and policies.

This guide complements the General Insurance Code of Practice. 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. This may require insurers and their 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 vulnerability or experiencing vulnerability. With minimal direct engagement, insurers have fewer opportunities to ask targeted questions or observe potential vulnerability indicators. In these situations, a broker can play a key role in identifying and communicating a need for additional care or support.

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1.2 Application

This guide 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 guide 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 of Australia proposes to review this industry guide every two years to keep pace with these changes.

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

Section 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.

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 Recognise 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. Refer to Section 3.

Certain claims events may increase a customer's vulnerability because of the likelihood of trauma and its potential impacts. In these situations, insurers can draw on trauma-

informed practice 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 practice: 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 practice 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 practice supports staff in:

- understanding and recognising how trauma may be affecting a customer's engagement;
- responding in ways that support safety; and
- referring customers to specialist teams or services when appropriate.

Section 4.2 provides guidance on how insurers can develop and consider trauma-informed practice in everyday processes, including key decisions like settlement offers and how family violence is identified and managed.

2.2 Identify needs, not labels

Vulnerability is not aways 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, for example by considering "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; and
- 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. This includes, where appropriate, making customers aware of external support services available to them. See Section 4.

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.

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.

For example, communication may be a matter of convenience for some customers. For others, it determines whether they can effectively engage at all, particularly where circumstances, stress or the nature of a claim event can make the process more difficult to navigate.

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.

Section 3: Proactively recognise the risk of vulnerability

Effective support for customers experiencing vulnerability starts with recognising when extra care may be needed. This guide uses the three-step *Assess, Ask, Anticipate.* model 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 do not begin and end with a claim. They can arise at any point in the customer's insurance journey, including routine or transactional moments.

- **Assess** the risk factors for vulnerability: Consider if there a risk of vulnerability arising from the claim event, the customers' circumstances or their behaviour.
- **Ask** about needs: Ask safely and respectfully about the person's extra care needs and their preferences.
- **Anticipate** a level of trauma for specific claim events: Anticipate that some types of claims event may create or execrate a level of trauma and seek to understand extra care needs using trauma-informed practice.

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.

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;
- financial 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;
- claims management, where customers may require additional support to navigate complex, stressful or disruptive claims event; and.
- 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.

3.11 Assess the risk factors for vulnerability

Many support needs stem from a customer's life context. Customers may be more likely to experience vulnerability if the following factors are present:

- 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 that impact a person's ability to make decisions, such as bereavement, relationship breakdown, job loss, displacement or trauma resulting from a natural disaster or other catastrophic event, family and domestic violence, financial abuse and elder abuse;
- personal circumstances that reduce a person's ability to manage financial or emotional shocks, including caregiving stress, poverty or stigmatisation due to someone's race, culture, gender identity, sexual orientation or sex characteristics; and/or

- personal capability, such as 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 these characteristics will need extra care.

However, 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 about a customers' circumstances can only be recorded with the person's consent.

Table 1: Circumstances and needs: Personal characteristics that can shape a person's experience

Customer circumstances	Potential customer needs could include:
Customers impacted by domestic and family violence	Privacy protections; safety planning; safe disclosure environments; options to only tell their story once; flexible communication channels.
Customers impacted by trauma	Flexible, trauma-informed practice with a focus on safety, empathy, control and minimising re traumatisation.
Customers from culturally diverse background	Interpreter services including Aboriginal and Torres Strait Islander languages, where available; translated materials; culturally sensitive communication and support; easy-read documents.
Customers living with disability	Accessibility accommodations; alternate communication; flexible claims and complaints processes.
Customers in financial difficulty	Flexible payment arrangements; empathetic support; proactive communication about available support.
Aboriginal and Torres Strait Islander customers	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.

Customer circumstances	Potential customer needs could include:
Customers with physical or mental health conditions	Trauma-informed practice; empathetic and non-judgemental communication; flexible and simplified claims handling.
Customers with cognitive impairment	Simplified explanations; additional decision-making time; support person involvement, where needed.
Customers living with 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; involvement of a support person, where needed.
Customers experiencing elder abuse	Privacy and security protections; careful verification of third-party authorities; safeguarding against financial coercion or manipulation.
Customers experiencing financial abuse	Confidential and trauma-informed practice; 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; involvement of a support person or advocate, where needed.
Customers in remote locations	Flexible communication methods; support navigating digital platforms; time allowances for limited internet or transport access.
Incarcerated or recently released persons	Flexible identification and verification processes; trauma-informed practice; assistance in re-establishing financial engagement post-release.
Customers experiencing bereavement	Empathetic, compassionate communication; trauma-informed practice; 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

While the cause of a customer's claim could be the same, the nature of support each customer may need is different.

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 a 59-year-old woman living in south-east Queensland and experiencing domestic violence. 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.*

Understanding John's extra care needs means ensuring accessibility of information and help accessing appropriate temporary accommodation. For Leah, support looks like providing confidential and flexible communication channels that prioritise her safety, prioritising the clean out to her property and applying trauma-informed practice to recognise the complexity and impact of existing trauma.

**Not real name*

3.12 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 buying or renewing insurance, cancelling insurance, making a claim and making a complaint.
- If there are personal circumstances or characteristics that may indicate a risk of vulnerability.
- If the customer seems overwhelmed, disengaged or unsure, or who 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.

3.13 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: Examples of claims events where there may be a level of potential trauma

Claims event	Potential customer needs could include:
Relates to a catastrophic natural disaster	Trauma-informed practice; 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; referral to confidential counselling support.
Associated with a fatality, multiple deaths or medical emergency	Trauma-informed practice; referral to bereavement support; medical evacuation; avoid requiring detailed retellings of the incident; support person involvement, where needed.
Loss or displacement from a customer's home or car. Refer to the note below	Trauma-informed practice; priority claims response and resolution.
Home invasion or armed burglary	Trauma-informed practice; 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	Trauma-informed practice; privacy protections; safety considerations including safe disclosure environments; options to only tell their story once; flexible communication channels.

Note: Some 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, also as a place of temporary shelter.

Section 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: Examples of customer needs, support options and intended outcomes along the customer journey

Life cycle stage	Examples of what extra care could be	Examples of appropriate support could include	Intended outcome
Buying insurance	Make it easy to communicate	Offer information on interpreter services, including information for Aboriginal and Torres Strait Islander customers who do not speak English as their first language, where practicable.	Customer is aware of the policy and coverage options.
Renewing insurance	Remember the customer and their circumstances	Record details of a customer's circumstances, if you have permission or consent to do so.	Customers experience continuity of care, feel recognised across interactions with consideration to their privacy, and do not have to retell their story.
Making a claim	Be trauma-informed	Provide 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.	Customers feel emotionally safe and able to progress claims without distress or re-traumatisation.
Making a complaint	Provide information	Provide simple guidance about making a complaint, including 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.

4.11 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 Easy English options, where possible.

Examples could include:

- Offering accessible formats, such as formatting documents in large print, using read-aloud or screen-reader compatible documents where possible, and referring to services that can provide support.

4.12 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:

- Offering information to assist with interpreter services including Aboriginal and Torres Strait Islander languages, where available.

4.13 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:

- Designing websites and online forms to meet WGAC 2.1 accessibility standards.
- Making help options, including phone support, easy to find.
- Adding "quick exit" buttons on webpages and other content that relates to domestic and family violence.
- Providing alternate claim lodgement channels for customers who are unable to use digital services.

4.14 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:

- Explaining next steps clearly, including what the customer needs to do to meet their responsibilities or to progress a claim.
- Providing reminders before deadlines, for example missing documents, policy lapses and renewals.
- Identifying delayed or 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.
- Referring customers to a dedicated contact person or team that is available to support them.

4.2 Offer safe and flexible options

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

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

4.21 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 does not mean lowering standards or compromising reporting obligations, it means focusing on removing unnecessary barriers.

Examples could include:

- Allowing extra time and flexibility for customers in remote or regional areas, where access to services, mail or digital tools may be limited.
- Following-up proactively when key documents are not returned, not as a compliance task, but as an opportunity to offer support.
- When cover is declined, providing 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.

4.22 Cash settlements and vulnerability

Why this matters: A cash settlement transfers 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:

- Providing additional information along with a cash settlement fact sheet, highlighting considerations such as consumers having to manage their own repairs.

4.23 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 survivor-centred approach that applies trauma-informed practice is important to help insurers avoid unintentionally putting people at greater risk.

Examples could include:

- Encouraging customers to share their circumstances if they feel comfortable, without requiring formal disclosure or proof of violence to access support.
- Using safe contact protocols, including communication preferences and private channels.
- Where family and domestic violence is involved, asking about the customer need and, with consent, recording that need.
- Offering safe options for verifying identity or accessing updates.
- Where conflicting claims are received, investigating with a family violence lens.
- Consulting with specialist family violence experts on policy design and relevant customer materials.
- Considering policy reinstatement and claims paid where a perpetrator's deliberate actions resulted in lapsed or voided cover.
- Considering how property damage potentially resulting from family and domestic violence could be covered under a policy.
- Providing victim-survivors 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 all key to delivering safe and reliable service.

Examples could include:

- Where possible, communicating via the preferred contact method unless unable to do so, it is not appropriate or required to do otherwise by law.
- If unable to do so, working with the customer to find another way of communicating.
- Where possible, maintaining 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 an advocate.

Examples could include:

- Providing clear, up-to-date contact details for relevant external services, for example financial counselling, legal advice, mental health or domestic and family violence support.
- Making it easy for customers to involve a support person.
- Training 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:

- Making it easy for customers to nominate a support person.
- Engaging respectfully with advisors and following agreed communication preferences when possible.
- Honouring authorised advisor arrangements across systems and teams, so customers do not 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:

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

Section 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 are also needed to translate this commitment into everyday practice.

5.1 Clear policies, processes and escalation pathways

Vulnerability needs to be considered in the development of policies and procedures as part of how claims, complaints, renewals, financial 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:

- Providing clear internal guidance on identifying, recording and responding to extra care needs.
- Documenting processes for extra care, disaster response and trauma-informed practice.
- Documenting 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 is also a critical 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.
- Providing foundational training in trauma-informed practice 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 examples.
- Requiring service suppliers who insurers directly contract with and interact with customers 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.
- Developing specialist modules on trauma-informed practice, disability awareness, family and domestic violence, and cultural safety.
- Providing cultural awareness training for staff who engage with Aboriginal and Torres Strait Islander customers, developed in partnership with Aboriginal and Torres Strait Islander organisations, where possible.
- Considering vicarious trauma for staff and managing this as a workplace health and safety risk.
- Delivering ongoing supervision, coaching or reflective practice for teams dealing with high-stress situations.
- Considering customer extra care needs in product design, governance and change.
- Raising awareness about financial safety by design principles that consider the potential risks of misuse of products and services in the context of domestic and financial abuse.

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:

- Developing a vulnerability strategy that is endorsed by an executive sponsor.
- Monitoring employees' training for completion via internal learning platforms.

- Establishing feedback loops with frontline teams to identify practice gaps and adjust training, scripts or processes accordingly.
- Integrating insights from lived experiences and customer advocates to refine what good support looks like in practice.
- Developing a system for regular reporting on vulnerability-related outcomes and complaints
- Considering customer vulnerability in risk frameworks and product/service design decisions.

5.4 Partner with service suppliers

Some service suppliers are often the first or only people a customer interacts with in-person. These service suppliers, acting on behalf of the insurer, should be held to the same expectations as internal teams.

Examples could include:

- Outlining clear obligations around customer vulnerability in contracts, where service suppliers are acting on behalf on the insurer.
- Conducting regular reviews of supply chain complaints.

5.5 Embed lived experience

Insurers can create structured engagement channels 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:

- Convening lived-experience panels or partnerships to shape future service and product design.
- Using customer insights in decision-making forums, not just marketing surveys.
- Considering opportunities for customer representatives to review materials and processes.

5.6 Data, systems and privacy

Effective support for customers experiencing vulnerability relies on appropriate infrastructure for recording, sharing and protecting information about a customer's needs. This infrastructure should:

- enable continuity of care;
- respect the customer's autonomy and privacy;

- comply with privacy legislation; and
- support 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 details about a customer's circumstances is essential.

Examples could include:

- Recording support needs in a way that is clear, accessible across relevant teams.
- Using neutral, non-stigmatising language.
- Ensuring staff only have access to customer information where it is relevant to their role.
- Considering opportunities for customer representatives to review materials and processes.

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Appendices

Appendix A: Glossary

Advocate means 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.

Broker means any person acting on behalf of a customer, carrying on a business of arranging policies covered by the Code.

Cash Settlement means finalising a customer's home building claim under their home building policy, by paying money rather repairing or rebuilding the home building. This may also be referred to as 'Cash Settling'.

Code means the General Insurance Code of Practice.

Easy English means 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 means the additional support or flexibility an insurer is reasonably able to provide to an individual, to assist them while they are experiencing Vulnerability, which may include:

(a) making it easier for the customer to communicate with us, and/or

(b) referring the customer to a financial counsellor or an appropriate community support service.

Interpreter services means support for customers who prefer or need to communicate in a language other than English, including Aboriginal and Torres Strait Islander languages.

Support person means someone nominated by the customer to assist them during interactions with an insurer, who may or may not be a formal advocate.

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 affect how people process information, make decisions, communicate and interact with systems, even if they do not disclose their experience. Trauma can result from a single incident, such as a natural disaster, accident or assault. It could also result from repeated or ongoing experiences, such as violence, abuse, discrimination, poverty or displacement.

Trauma-informed practice means providing care while recognising the presence of trauma symptoms and acknowledging the role trauma may play in a person's life and

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responding appropriately. It is based on knowledge and understanding of trauma, how it affects people's live and their needs as well as how customers may engage with insurance products and 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 appointed and authorised by us in relation to a Retail Insurance claim.

Vulnerability means circumstances that have the impact of limiting a customer's ability to access or use an insurer's products or services, including their capacity to make financial decisions or submit a claim. Vulnerability is more likely to be created or exacerbated in the following circumstances:

a) health conditions or illnesses that affect their ability to carry out day-to-day tasks, such as chronic illness, mental health conditions, neurodivergence, cognitive impairment or decline;

b) life events that impact their ability to make decisions, such as 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) personal circumstances that reduce their ability to manage financial or emotional shocks, including caregiving stress, poverty or stigmatisation due to your race, culture, gender identity, sexual orientation or sex characteristics; and/or

d) personal capability, such as limited literacy, digital access, financial knowledge or cultural familiarity.

Note: Any other terms used in this document that are defined in the Code have the same meaning in this document, unless otherwise stated. This includes the capitalised terms listed in the definition of service supplier.

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Appendix B: Resource links

(1) International Organization for Standardisation (ISO). ISO 22458:2022. Consumer vulnerability – requirements and guidelines for the design and delivery of inclusive service. *iso.org.*

(2) Australian Government | Office of the Australian information Commissioner. Guide to securing personal information: Reasonable steps to protect personal information. *oaic.gov.au.*

(3) Australian Human Rights Commission. Guidelines for Working with a Trauma-Informed Approach. *itstopswithme.humanrights.gov.au.*

The Australian Human Right Commission's five core principles to help guide organisations' approach to trauma-informed work are defined 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.

(4) Centre for Inclusive Design. Easy English versus Plain English. *centreforinclusivedesign.org.au.*

(5) Centre for Womens' Economic Safety. Discussion Paper: Designed to Disrupt: Reimagining General Insurance Products to Improve Financial Safety. *cwes.org.au.*

(6) Our Watch. Change the story: A shared framework for the primary prevention of violence against women in Australia. *ourwatch.org.au.*

(7) UK Financial Conduct Authority. FG21/1 Guidance for firms on the fair treatment of vulnerable customers. *fca.org.uk.*

(8) World Wide Web Consortium. Web Content Accessibility Guidelines WGAC 2.1. *w3.org.*

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