



Australian Government
Department of Health

Actions to support older Aboriginal and Torres Strait Islander people

A guide for aged care providers

All older people experience a high quality aged care system that ensures equitable access and outcomes and embraces their diverse characteristics and life experiences.



Aged Care Sector Committee Diversity Sub-group
February 2019

Actions to support older
Aboriginal and Torres Strait Islander people
February 2019

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The need for a trusted entity Case study from regional Victoria

Aunty Dot is a 60 year old Aboriginal woman living in regional Victoria who is supported by her partner and son. She has a range of chronic health conditions and was not accessing medical services due to financial constraints.

Aunty Dot was not aware of her eligibility to receive any supports through Close the Gap or My Aged Care. She did not understand the role of My Aged Care and required the support of a trusted entity to assist with navigating the system, explaining her situation and advocating on her behalf.

Aunty Dot would not have received any supports or services had it not been for the persistence of the trusted entity, making three calls to My Aged Care and negotiating with the Aged Care Assessment Service, whom had attempted once to contact Aunty Dot.

Aunty Dot is now in receipt of a high level home care package and linked in with other community based supports.

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Foreword

This Action Plan addresses the challenges experienced by Aboriginal and Torres Strait Islander communities in accessing the aged care system, and having the full diversity of their needs met, wherever they live.

The Working Group records its appreciation of the November 2017 decision by the Minister responsible for Aged Care, Hon Ken Wyatt MP, to commission the development of an Aboriginal and Torres Strait Islander Action Plan within the Commonwealth's Aged Care Diversity Framework.

This decision reinforces recognition of the special needs of older Aboriginal and Torres Strait Islander people aged 50 years and over within the aged care system. This Aboriginal and Torres Strait Islander Action Plan is the first of its kind for Australia.

The Working Group acknowledges the assistance provided to the Working Group by Secretariat staff in the Commonwealth Department of Health, and thanks all those who contributed their experiences and knowledge to the development of this Action Plan through their consultations and survey responses.

As a result of continuing efforts to redress inequalities in life expectancy of Aboriginal and Torres Strait Islander Peoples – especially the contributions from the 150 Aboriginal and Islander Community Controlled Health Services – the cohort of older Aboriginal and Torres Strait Islander people is increasing and their numbers will continue to do so year on year.

The timing of, and the need for, this Action Plan has been validated by the ageing of the Aboriginal and Torres Strait Islander population.

The national Aboriginal and Torres Strait Islander population is projected to grow from around 670,000 in 2011 to around 1,060,000 by 2031, that is from around 3.0 per cent of the total population in 2011 to 3.8 per cent by 2031. Over the last intercensal period, the highest rate of growth was amongst those aged 55 years and over. Whilst the total Aboriginal and Torres Strait Islander population is projected to grow by 59 per cent between 2011 and 2031, the population aged 65 and over is projected to grow by 200 per cent. [CAEPR Indigenous Population Project. 2011 Census Papers. Paper 14: Population Projections.]

This demographic change requires action by the aged care system, including government, mainstream providers and specialist providers, to acknowledge and respond to increased service demands from older Aboriginal and Torres Strait Islander people, in both residential and home care environments. This action plan sets out steps that providers can take to this outcome and will be complemented by a plan of government actions.

These actions are required to address the current disparities that exist for older Aboriginal and Torres Strait Islander people to gain aged care assessments and access to the full range of aged care programs that are available in Australia.

In order to achieve equitable outcomes, current barriers to service access and use must be overcome. The heterogeneous nature of this group means there are marked differences in attitudes, cultural identification and need across different geographic settings and as such, a national Action Plan needs to be agile enough to be able to deal with such diversity. Strategies to provide for greater policy and service connectivity, along with workforce recruitment, development and retention are essential to improved service delivery outcomes. Community participation can be facilitated by forming meaningful partnerships between Aboriginal and Torres Strait Islander communities and mainstream organisations supporting innovative service models at the local level.

There is a paucity of information on aged care service provision for Aboriginal and Torres Strait Islander people in Australia. With 2,866 aged care service providers to Aboriginal and Torres Strait Islander people being identified by the Australian National Audit Office in 2015-16 in its May 2017

Report on Indigenous Aged Care, this gap must be addressed and accountability requirements for providers to report on access and outcome measures adopted. Additionally, the Government's MyAgedCare Portal needs to better track, monitor and report on Aboriginal and Torres Strait Islander participation.

The Action Plan calls for evidence-based investment strategies. The Working Group is concerned that public policy and its investments have failed to reflect the diversity of circumstance and need of Aboriginal and Torres Strait Islander people across Australia, within and between remote, rural, regional and urban areas. Currently, 75 per cent of Aboriginal and Torres Strait Islander people live in urban environments – metropolitan cities and rural and regional towns. The previously cited CAEPR Report noted that the Aboriginal and Torres Strait Islander population is projected to become much more urban over the next 20 years, and there is clear evidence of Indigenous regional population growth centres.

Remote and very remote communities warrant customised solutions. This is due to unique challenges relating to geographical isolation, poor access to health services, low literacy, language diversity, poor internet access, workforce training and employment issues, transport issues (high price fuel, lack of public transport, scarcity of licenced drivers) and high living costs (Carroll et al, Lungurra Ngoora Community Care Final Report, 2010).

Additionally, in light of the rapid growth, urbanisation and ageing of Australia's Aboriginal and Torres Strait Islander Peoples it remains important to recognise that the predominantly urban populations do not currently have equal access to the aged care and health care services and resources that are available to the non-Indigenous population. Despite geographical proximity of facilities there are major barriers to access and equity in service use. Furthermore high density urban Indigenous communities have similar mid-life death rates, similar levels of chronic disease and disability and, importantly for aged care, the same levels of cognitive decline and dementia as found in remote communities. The barriers to aged care service access for rising urban Indigenous population centres need to be identified and removed.

The analysis of population projections by CAEPR highlighted that, based on current rates of fertility, mortality and mobility, the regions which are projected to experience the most rapid population growth between 2011 and 2031 are in Brisbane, Rockhampton, Cairns - Atherton, South-Western WA, South Hedland and Townsville - Mackay. By 2031, the Brisbane Indigenous Region (which includes the Gold Coast) is projected to have an Aboriginal and Torres Strait Islander population of a little over 132,000 people, around 50 per cent higher than the entire projected population of the Northern Territory, which is a little under 89,000.

The Australian Government's aged care investment commitments going forward in the period of this Action Plan and at least until 2031 need to reflect the urban lived experience of Aboriginal and Torres Strait Islander people generally, respond to the unique needs of people living in remote and very remote regions, and to the specific growth centres and regions.

Matthew Moore

Chairperson on behalf of the working group

What is this plan about?

Australia is a diverse nation, and this is reflected in the diversity of religion, spirituality, sexuality, culture, socio-economic background, geographic spread, medical and care needs, and personal experiences of our senior population.

The Australian Government is committed to ensuring that all consumers of aged care can access information, and receive aged care services, appropriate for their individual characteristics and life experiences. The Aged Care Diversity Framework (the Framework), launched in December 2017, is a key part of achieving this.

This is one of four distinct action plans developed under the Framework:

- *Actions to support all diverse older people, an overarching set of actions in recognition of the many commonalities within and between diverse groups.*
- *Actions to support older Aboriginal and Torres Strait Islander people*
- *Actions to support older people from Culturally and Linguistically Diverse backgrounds*
- *Actions to support older Lesbian, Gay, Bisexual, Trans and gender diverse, and Intersex peoples*

The plan can assist providers to identify actions they could take to deliver more inclusive and culturally appropriate services for consumers. It acknowledges that there is no 'one-size-fits-all' approach to diversity, and that each provider will be starting from a different place and operating in a different context. Therefore, this action plan is designed so that providers can work through three levels of actions – Foundational, Next Steps, and Leading the Way – and decide which are most relevant to their organisation, in consultation with consumers, their support people, and staff.

Delivery of safe and inclusive services to people with diverse needs and life experiences is built into the Aged Care Quality Standards. Diversity is woven through the standards and underpinned by Standard 1 to value the identity, culture and diversity of each consumer and to deliver culturally safe care and services. The Aged Care Quality and Safety Commission will assess aged care providers based on the quality of service experienced by service users (consumers).

There are many benefits for providers in taking action to provide better services to diverse groups. These include opportunities to:

- celebrate successes with consumers, their support people and the wider community;
- engage with new groups of potential consumers;
- improve the wellbeing and satisfaction of consumers;
- build new partnerships with the community;
- increase the vibrancy of the service environment;
- demonstrate to employees with diverse backgrounds and life experiences that they are valued and engaged within the service.

Actions to support inclusive care for Aboriginal and Torres Strait Islander consumers

The following six outcomes, taken from the Aged Care Diversity Framework, provide a guide for assessing current performance, identifying gaps and designing pathways to improve inclusive service provision. Each outcome has example actions to support providers:

Outcome for Consumers 1: Making informed choices

Older people have easily accessible information about the aged care system and services that they understand and find the information helpful to exercise choice and control over the care they receive.

Provide information in an appropriate format, through different forms (online/hardcopy/newsletter/verbal) and in a language the consumer understands)

Foundational Actions

- Establish partnerships, sub-contracting arrangements, or collaborate with Aboriginal and/or Torres Strait Islander organisations to facilitate more effective and timely dissemination and sharing of information with Aboriginal and Torres Strait Islander older people, their families and their communities, recognising that there are frequently barriers for Aboriginal and/or Torres Strait Islander people hearing, absorbing and trusting communications from mainstream organisations.
- Establish referral pathways to advocacy organisations/trusted entities which can support the older person and/or their families to interpret information that you provide to them, if needed.
- Where possible, employ Aboriginal and/or Torres Strait Islander people and/or ensure mandatory competency-based cultural safety training for non-Indigenous supervisors and staff is in place to facilitate effective communication between staff and Aboriginal and Torres Strait Islander consumers.
- Encourage Aboriginal and/or Torres Strait consumers to involve a trusted entity or support person and/or interpreter in their assessment process and other decision making processes, if they wish, to ensure appropriate participation and informed consent.
- Provide Aboriginal and Torres Strait Islander consumers with an easy to understand care plan which is itemised against the budget for the consumer's package level, as well as an easy to understand monthly statement.
- Seek out guidance to ensure that information about access to aged care services as well as the presentation formats resonate with the local/regional Aboriginal and/or Torres Strait Islander cultural context and history as well as discussing information face to face with Aboriginal and/or Torres Strait Islander consumers, their families and/or chosen advocates.

Outcome for Consumers 1: Making informed choices

Moving Forward

- Work alongside an Aboriginal or Torres Strait Islander advocate or system navigator to assist individual older consumers and their family members with accessing assessment and care services.
- Develop resources and materials to inform all staff, as well as Aboriginal and Torres Strait Islander people, about efforts to improve cultural competency.

Leading the Way

- Put in place governance structures which support partnerships with Aboriginal and Torres Strait Islander communities, consumers and carers and enable dissemination of relevant and culturally appropriate information.

‘Delivery of safe and inclusive services to people with diverse needs and life experiences is built into the Aged Care Quality Standards. Diversity is woven through the Standards and underpinned by Standard 1 to value the identity, culture and diversity of each consumer and to deliver culturally safe care and services.’



Outcome for Consumers 2: Adopting systemic approaches to planning and implementation

Older people are active partners in the planning and implementation of the aged care system

Engage consumers in a culturally safe, supportive environment that enables them to participate as active partners, as well as articulate their individual needs.

Foundational Actions

- Design, deliver and evaluate aged care services and the organisation's cultural competence through accessible, culturally responsive and safe processes which involve Aboriginal and Torres Strait Islander consumers.
- Ensure processes to measure organisation-level performance (including organisational self-assessments of cultural competency activities) involve Aboriginal and Torres Strait Islander consumers.

Moving Forward

- Establish mechanisms to enable community input into design and delivery of care/service models.
- Record accurately all Aboriginal and Torres Strait Islander older consumers receiving services on an electronic information management system to ensure a range of data reports can be provided relating to access and services.
- Collect data and set performance indicators to ensure cultural safety targets are being achieved and service delivery is improving.
- Partner with a broader range of Aboriginal and/or Torres Strait Islander service providers to develop and deliver holistic services consistent with the Aboriginal model of health.
- Maintain executive-level responsibility for implementing and monitoring cultural safety and responsiveness across organisational systems against quality outcomes.

Leading the Way

- Establish partnerships, sub-contracting arrangements or collaborate with Aboriginal or Torres Strait Islander organisations to:
 - Validate the current and 5-year projected 'latent demand' for aged care services by Aboriginal and Torres Strait Islander consumers in your provider's 'footprint';
 - Plan systematic steps to supply services to targeted groups within this consumer market.
 - Develop culturally appropriate and responsive services.
- Where the number of Aboriginal and Torres Strait Islander clients reaches 5%, appoint at least one Aboriginal or Torres Strait Islander person to the Board of the provider organisation from amongst partner/ collaborating organisations.

Outcome for Consumers 3: Accessible care and support

Older people in rural, remote, regional and metropolitan Australia have access to aged care services and supports appropriate to their diverse characteristics and life experiences

Collaborate with stakeholders to identify and overcome barriers in accessing the aged care system

Foundational Actions

- Adopt workforce recruitment, retention, and development approaches that ensure an adequately skilled and culturally competent workforce which is responsive to local need.
- Ensure assessments are conducted by staff with appropriate cultural competency training and who understand the limitations of mainstream assessment rubrics.
- Ensure organisational policy supports culturally safe and responsive practice, including particular support for training and professional development towards cultural capabilities.

Moving Forward

- Broker assessments and the development of individual care plans to trusted Aboriginal or Torres Strait Islander organisations with suitably qualified staff – and translators in remote areas – to ensure informed participation and consent.
- Integrate with other service providers to achieve better co-ordination and continuity of care, especially local and regional Aboriginal Medical Services, specialised mental health and/or healing services, and community cultural organisations. In undertaking this action, be particularly sensitive to the complex needs of consumers from the Stolen Generations.

Leading the Way

- Undertake procurement via policies that bind selection of providers, and provision of procured services, to cultural safety standards.
- Ensure organisational leadership actively models cultural safety and responsiveness by staff at all levels and across the organisation.
- Enter into a formal commitment to improving cultural safety and responsiveness that is visible in all aspects of core business, including vision and mission statements, organisational principles and values, and continuous improvement activities.

Outcome for Consumers 4: A proactive and flexible aged care system

A proactive and flexible aged care system that responds to the needs of existing and emerging diverse groups, including an increasingly diverse aged care workforce.

Engage with the local community and stakeholders to identify emerging needs and how service delivery models can be adapted to embrace those needs, including how the organisation's workforce demonstrates an inclusive approach to care

Foundational Actions

- Seek advice and guidance from reputable Aboriginal and Torres Strait Islander organisations about what suitable cultural safety training is available from local sources to meet your organisation's needs and reflect local culture, helping ensure service delivery can be adapted to local protocols.
- Implement strategies to employ and retain Aboriginal and/or Torres Strait Islander workers.
- Accommodate and facilitate visits and ongoing involvement from members of consumers' families and communities.

Moving Forward

- Plan ahead for the provision of culturally appropriate trauma-informed care for members of the Stolen Generation, 100% of whom will be at least 50 years old by 2023. Ensure aged care workers understand the meaning of 'healing' and the risks of re-traumatising members of this community.

Leading the Way

- Partner with Aboriginal community controlled organisations in the development and delivery of shared and flexible service delivery models for Aboriginal and Torres Strait Islander older consumers.

Outcome for Consumers 5: Respectful and inclusive services

Services effectively meet the specific needs of older people with diverse characteristics and life experiences, their families, carers and representatives in a respectful and inclusive way.

Seek out, develop and use tools, training and information that support delivery of care that is inclusive of diverse characteristics and life experiences

Foundational Actions

- Ensure culturally safe and responsive environments are developed (including, for example, specific literature, artworks, flags, posters, and décor), and physical environments are designed with consideration for local Aboriginal and Torres Strait Islander consumers.
- Ensure consumers have opportunities to continue participating in cultural events and activities, and hobbies they enjoy.
- Acknowledge cultural factors and life experiences could be responsible for challenging behaviours.
- Implement as a standard operating procedure ongoing monitoring and review and active case management to ensure that services remain responsive to the needs of older Aboriginal and Torres Strait Islander consumers.
- Understand the concept of Elders in Aboriginal culture and respect the roles and responsibilities they hold in the community.
- Understand the importance of the role of informal care givers in Aboriginal and Torres Strait Islander communities and support consumers and their families to continue such arrangements as required.

Moving Forward

- Ensure managers employed by providers with 5% or more Aboriginal and Torres Strait Islander consumers complete an advanced level of cultural competency training to position them to provide leadership and informed guidance to staff regarding their behaviours and service delivery relationships with those consumers.
- Develop policies and processes for identifying and reporting racism and discrimination in services and promote these to consumers and staff.
- Recognise and celebrate historical events of significance and important annual events (e.g. Close the Gap, Mabo Day, etc.) as a normal part of business.

Outcome for Consumers 6: Meeting the needs of the most vulnerable

Older people can access high quality and culturally safe aged care services and supports that meet their needs irrespective of their personal, social or economic vulnerabilities.

Provide inclusive service models to address the needs of the most vulnerable, and work with other stakeholders to ensure that the full spectrum of needs are met

Foundational Actions

- Ensure members of the Stolen Generation are supported by staff trained to provide trauma informed care.
- Ensure culturally safe spaces are made available to allow Aboriginal and Torres Strait Islander families and communities to come together when and as required i.e. to celebrate or grieve.
- Put in place referral and reporting procedures in the event of elder abuse or family violence..

Moving Forward

- Co-design facilities, services and programs with local Aboriginal groups and work in partnership with organisations that have necessary expertise to develop culturally appropriate and responsive services for vulnerable consumers such as members of the Stolen Generations.

Leading the Way

- Establish protocols with Aboriginal and Torres Strait Islander aged care providers to transition vulnerable Aboriginal and Torres Strait Islander consumers from your service where their assessed needs and condition indicate quality and culturally safe aged care services would be better assured from such a transfer.

‘This Aboriginal and Torres Strait Islander Action Plan is a resource that will assist aged care service providers to better understand how they can advocate for and support elders and older people.’

Resources

General resources

Aged Care Complaints Commissioner available in a variety of languages

www.agedcarequality.gov.au/accessibility

NSW Nurses and Midwives Association: 10 Questions to Ask

www.10questions.org.au/leaflets.html

Department of Health Aged Care Diversity Framework

www.agedcare.health.gov.au/support-services/people-from-diverse-backgrounds/aged-care-diversity-framework

People with diverse needs Department of Health

www.myagedcare.gov.au/eligibility-and-assessment/eligibility-diverse-needs

Dementia

Dementia Australia in partnership with the Multicultural Communities Councils of Illawarra "*It's not a disgrace...it's dementia*" series available in community languages- Spanish, Arabic, Serbian, Ukrainian, Cambodian, Croatian, Assyrian, Vietnamese, Italian, Portuguese, Mandarin, Hindi

www.youtube.com/playlist?list=PLAwhBH-4GO5iKAMS5wIMSFSuncvoBYuRM

Dementia Australia: *Perceptions of dementia in ethnic communities*

www.dementia.org.au/files/20101201-Nat-CALD-Perceptions-of-dementia-in-ethnic-communities-Oct08.pdf

Storey, Rowland, Basic, Conforti and Dickson 2004, International Psychogeriatrics, 16 (1), 13-31: *The Rowland Universal Dementia Assessment Scale RUDAS*

www.multiculturalmentalhealth.ca/wp-content/uploads/2014/04/20110311_2011NSWRUDASscoring_sheet.pdf

Dementia Australia: *Resources for Aboriginal and Torres Strait Islander communities*

www.dementia.org.au/resources/for-aboriginal-and-torres-strait-islander-communities

Dementia Training Australia: *Cultural Assessment for Aboriginal and Torres Strait Islander People with Dementia: Guide for Health Professionals*

www.dta.com.au/wp-content/uploads/2017/03/2370_DTA_WA_DT_manual_5web.pdf

Aboriginal and Torres Strait Islander resources

Edith Cowan University with funding from the Australian Government Department of Health
Australian Indigenous Health Infonet

(The Infonet collates journal articles and other resources so clinicians and service providers can find information about biomarkers as well as social determinants that impact upon health and ageing. It includes sections on older people as well as dementia and disability)

www.healthinfonet.ecu.edu.au/

Ivan Lin, Charmaine Green and Dawn Bessarab

'Yarn with me': applying clinical yarning to improve clinician–patient communication in Aboriginal health care

Lin I, Green C and Bessarab D 2016 *'Yarn with me': applying clinical yarning to improve clinician–patient communication in Aboriginal health care* Australian Journal of Primary Health (22), 377–382

Refer to www.healthinfonet.ecu.edu.au

Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS): *Map of Indigenous Australia (this interactive map represents the language, tribal or nation groups of the Indigenous peoples of Australia)*

www.aiatsis.gov.au/explore/articles/aiatsis-map-indigenous-australia

Queensland Health: *Aboriginal and Torres Strait Islander Cultural Capability Framework 2010-2033*

www.health.qld.gov.au/_data/assets/pdf_file/0014/156200/cultural_capability.pdf

Queensland Government Department of Aboriginal and Torres Strait Islander Partnerships *Know Your Community (This website has a tool to see Indigenous population numbers and other demographic data such as age and employment which can be broken down to specific geographic areas)*

statistics.qgso.qld.gov.au/datsip/profiles

Royal Australian College of General Practitioners (RACGP): *Identification of Aboriginal and Torres Strait Islanders in General Practice*

www.racgp.org.au/FSDEDEV/media/documents/Faculties/ATSI/Identification-of-Aboriginal-and-Torres-Strait-Islander-people-in-Australian-general-practice.pdf

Australian Institute of Health and Welfare: *National best practice guidelines for collecting Indigenous status in health datasets*

Australian Institute of Health and Welfare 2010 *National best practice guidelines for collecting Indigenous status in health datasets* Cat no. IHW 29 Canberra AIHW

Western Australian Centre for Health and Ageing: *Kimberley Indigenous Cognitive Assessment (KICA)*

www.perkins.org.au/wacha/our-research/indigenous/kica/

Palliative Care Australia: *Dying to Talk – Aboriginal and Torres Strait Islander Discussion Starter*

www.dyingtotalk.org.au/aboriginal-torres-strait-islander-discussion-starter/

Industry Capability Network Queensland: *Black Business Finder*

www.bbf.org.au/

Aboriginal and Torres Strait Islander resources

Healing Foundation: A national Aboriginal and Torres Strait Islander organisation that partners with communities to address the ongoing trauma caused by actions like the forced removal of children from their families

www.healingfoundation.org.au/

Link Up: An organisation within each jurisdiction that helps Aboriginal and Torres Strait Islander people impacted by stolen generation to find their families

www.linkupnsw.org.au/national-link-ups/

Australian Human Rights Commission

Aboriginal and Torres Strait Islander Peoples Engagement Toolkit

[www.humanrights.gov.au/sites/default/files/content/pdf/about/Aboriginal%20and%20Torres%20Strait%20Islander%20Peoples%20Engagement%20Toolkit%202012%20\(pdf\).pdf](http://www.humanrights.gov.au/sites/default/files/content/pdf/about/Aboriginal%20and%20Torres%20Strait%20Islander%20Peoples%20Engagement%20Toolkit%202012%20(pdf).pdf)

Australian Human Rights Commission Targeted Guidelines

www.humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/targeted-recruitment

Queensland Health: One Talk: Queensland Health's Aboriginal and Torres Strait Islander Community Engagement Manual

www.trove.nla.gov.au/work/35267224?selectedversion=NBD43842091

Prepared by Australian Health Ministers' Advisory Council's National

Aboriginal and Torres Strait Islander Health Standing Committee: Cultural Respect Framework 2016-2026 for Aboriginal and Torres Strait Islander Health: a national approach to building a culturally respectful health system

www.coaghealthcouncil.gov.au/Portals/0/National%20Cultural%20Respect%20Framework%20for%20Aboriginal%20and%20Torres%20Strait%20Islander%20Health%202016_2026_2.pdf

National Health Organisations and Programs

Healing Foundation: *A national Aboriginal and Torres Strait Islander organisation that partners with communities to address the ongoing trauma caused by actions like the forced removal of children from their families*

www.healingfoundation.org.au/

Link Up: An organisation within each jurisdiction that helps Aboriginal and Torres Strait Islander people impacted by stolen generation to find their families

www.linkupnsw.org.au/national-link-ups/

Australian Human Rights Commission: *Aboriginal and Torres Strait Islander Peoples Engagement Toolkit*

[www.humanrights.gov.au/sites/default/files/content/pdf/about/Aboriginal%20and%20Torres%20Strait%20Islander%20Peoples%20Engagement%20Toolkit%202012%20\(pdf\).pdf](http://www.humanrights.gov.au/sites/default/files/content/pdf/about/Aboriginal%20and%20Torres%20Strait%20Islander%20Peoples%20Engagement%20Toolkit%202012%20(pdf).pdf)

Australian Human Rights Commission Targeted Guidelines

www.humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/targeted-recruitment

Queensland Health: *One Talk: Queensland Health's Aboriginal and Torres Strait Islander Community Engagement Manual*

www.trove.nla.gov.au/work/35267224?selectedversion=NBD43842091

Prepared by Australian Health Ministers' Advisory Council's National Aboriginal and Torres Strait Islander Health Standing Committee: *Cultural Respect Framework 2016-2026 for Aboriginal and Torres Strait Islander Health: a national approach to building a culturally respectful health system*

www.coaghealthcouncil.gov.au/Portals/0/National%20Cultural%20Respect%20Framework%20for%20Aboriginal%20and%20Torres%20Strait%20Islander%20Health%202016_2026_2.pdf

Case Studies

The need for culturally appropriate assessments

Case study from central Queensland

Uncle Charlie* has endured a very traumatic past. As a child he was diagnosed with leprosy, taken from his family and sexually abused. During his first assessment for aged care services he wasn't asked questions about his past that may impact his current health. Uncle Charlie said: "The woman who did the assessment was a nice lady, but she just asked a set of questions and I didn't have time to think about it. She didn't ask about my history that impacts on my health. My leg was sore but I didn't tell her."

Uncle Charlie was assessed at Level 2. A staff member at his regular respite disagreed with this assessment. She knew Uncle Charlie's health concerns and thought he required a higher level. This staff member arranged another assessment for Uncle Charlie and he was recently assessed at a higher level. Uncle Charlie suggested that assessments should be open to gathering information as a story instead of a set of questions. The assessor needs to spend some time establishing trust.

*name had been changed to protect the identity of participant.

The need for trauma informed care

Case study from rural Western Australia

Barbara* is an Aboriginal Elder of 80 years of age living in rural Western Australia. When she was two years of age she was forcefully taken from her family to a mission in south-west Western Australia, where she suffered physical and emotional abuse. She was previously living with her daughter in a nearby town, however, following a number of falls and apparent memory issues, Barbara has recently moved into the residential care home in the region.

When a male staff member came to ask Barbara to come to the dining room for dinner he found her hiding behind her bed anxiously holding her pillow. When asked to come for dinner she covered back from the staff member repeatedly saying "don't take my baby". A female Aboriginal staff member was asked to come in to talk to Barbara. She sat on the floor and began to yarn calmly with Barbara who kept holding her pillow. Eventually when Barbara was calm they went outside where they spoke about the plants there, the trees and birds that Barbara liked, and her grandchildren. A medical review was later organised, and found that she had a urinary tract infection, which was treated with antibiotics. Once the infection was treated a Kimberley Indigenous Cognitive Assessment (KICA) assessment identified Barbara had some cognitive impairment, and a further medical review was organised which led to the identification of depressive symptoms, not dementia. Trauma informed care training was organised for residential care staff, and the organisation adopted healing recommendations such as culturally safe places for family and community members to visit and spend time together with Barbara, and opportunities to tell stories and share her knowledge to fulfil her Elder role with younger community members.

*name has been changed to protect the identity of participant.