

Queensland Health multicultural services newsletter

Issue 9 – Winter 2011

Better health for CALD communities in QLD

Queensland Health is well positioned to deliver the necessary culturally appropriate government programs and services to improve the health and wellbeing of culturally and linguistically diverse (CALD) communities in Queensland.

Queensland Health Multicultural Services Director Ellen Hawes said Queensland Health had long recognised the importance of addressing the specific health needs of CALD communities with culturally tailored health programs and services.

This comes in response to the recent launch of a suite of policies by the Ethnic Communities Council of Queensland (ECCQ) which outlines the recommended actions for government to meet the needs of Queensland's CALD population.

ECCQ's policy suite identifies the improvements required across government in a range of key areas, including health, education, housing employment and family support.

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Welkom¹

Welcome to the Winter edition of the Queensland Health Multicultural Services newsletter.

This edition marks the transition into the final year of the Queensland Health Strategic Plan for Multicultural Health 2007-2012. The next financial year will see the final actions of the current plan being implemented and planning for our next long-term strategic plan begin.

However, just because we are moving into the final year of a five year strategic plan doesn't mean that things will be winding down. In fact, 2011-12 is shaping up to be our busiest year yet.

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QHMS staff celebrate Harmony Day 2011

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Queensland Health leads the way

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ECCQ's health policy identified the following issues that are faced by CALD communities in relation to health care:

- CALD communities experience language and cultural barriers to health care
- Health care approaches don't always reflect cultural sensitivity
- Education and information may not be accessible
- General health care professionals need more skill development in cultural competency
- The health system generally needs to institutionalise roles for bilingual or 'multicultural' health workers (including in promotion and preventative health care)
- There is a lack of data about CALD communities' health needs, issues and outcomes
- There are few tested models of culturally appropriate service delivery
- Different cultural traditions and diets may have an impact on health in the Australian context.

Ellen said Queensland Health, through the *Queensland Health Strategic Plan for Multicultural Health 2007-2012*, has actively worked to address these issues by developing and implementing a range of dedicated health programs and activities targeting the needs of CALD communities.

"In 2010, we developed the Queensland Health Organisational Cultural Competency Framework, which provides a context for improving Queensland Health's ability to respond to the health needs of CALD communities," she said.

"The framework identifies the eight core outcome areas that require action and the four foundation areas which are necessary in order for Queensland Health to achieve organisational cultural competency.

"These outcome areas include developing the cultural competency of staff, providing professional interpreter services, developing effective multicultural health resources for staff and patients, and collecting and analysing data on the health of CALD communities."

Ellen said initiatives such as the Queensland Health Cross Cultural Learning and Development Strategy 2009-2012 and the Queensland Health Interpreter Service were working to overcome many of the issues which have been identified by ECCQ.

Welkom

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The next 12 months will see projects and activities implemented in each of the eight action areas of the Queensland Health Organisational Cultural Competency Framework. This includes a major refresh of our website, the launch of a new awareness raising campaign for the Queensland Health Interpreter Service, and the delivery of cultural competency training for more than 10,000 staff.

These and other activities will be outlined in the upcoming 2011-12 Implementation Plan which is expected to be published in early August.

I hope you enjoy the latest issue of our newsletter.

Ellen Hawes

Director
Queensland Health Multicultural Services

¹ Welkom is the Dutch word for *welcome*.

"In 2011-12, the Queensland Health Interpreter Services is expected to deliver more than 60,000 interpreting sessions to patients, and more than 10,000 Queensland Health staff will be provided with instruction that will help to develop their cultural competency in the workplace," she said.

"We have worked to develop a number of resources for staff to assist them in understanding the cultural and religious needs of Queensland's diverse population, and have worked to actively address the health information needs of CALD communities by developing culturally tailored health resources and translating health information."

Ellen said Queensland Health was also implementing strategies which are working towards increasing the availability and quality of data about the health of CALD communities.

"What this means is that barriers to accessing appropriate health services, such as language and cultural barriers, are actively being reduced and that Queensland Health is proactively implementing strategies to increase the cultural competency of the organisation on a personal and an administrative level."

For more information about the Queensland Health Strategic Plan for Multicultural Health 2007-2012 and the Queensland Health Organisational Cultural Competency Framework, go to www.health.qld.gov.au.



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Interpreter service launches new resources

We use interpreters here

A new campaign to promote the use of interpreters in Queensland Health facilities will be launched this month.

The central focus of the campaign is a new poster which features the message, "We use interpreters here. Interpreters are available in more than 100 languages", to encourage staff to make use of the Queensland Health Interpreter Service.

The poster aims to reinforce the use of interpreters, promote the Queensland Health Interpreter Service and to direct staff to contact their District Interpreter Service Coordinator for more information on the use and booking of interpreters.

The poster is available in A4 and A3 sizes and can be ordered by contacting Queensland Health Multicultural Services on multicultural@health.qld.gov.au.

Quick Reference Cards now available

A new quick-reference card has been developed to provide Queensland Health staff with simple step-by-step instructions for requesting an accredited interpreter.

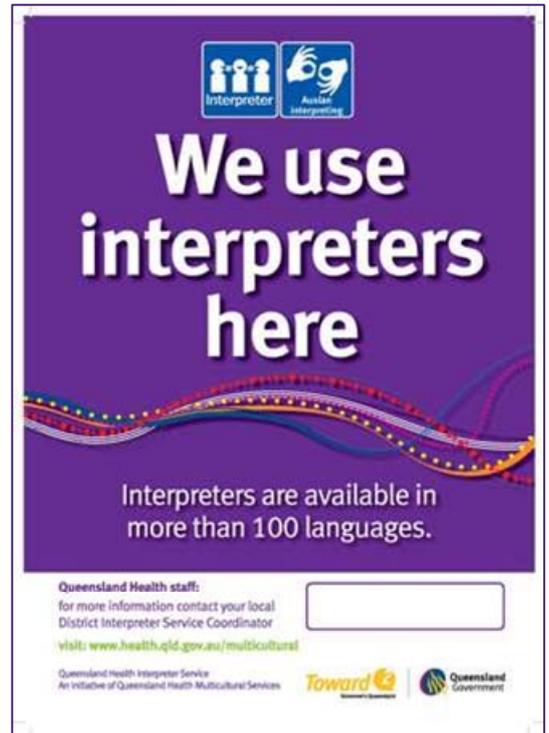
The plastic, credit card-sized reference card is designed to fit neatly behind Queensland Health staff identification cards and security passes to allow for easy access anywhere in a clinical environment.

The reference card contains instructions on how to book an interpreter, guidelines on interpreter usage and a space to write relevant cost centre and District Interpreter Service Coordinator contact details.

The reference card was developed in response to staff feedback on the need for easy to access instructions on how to access interpreters that could be carried easily on a day to day basis.

It has been trialled since July 2010 in regional, rural and remote health service districts has proved to be one of the most popular and frequently requested resources.

Reference cards will be distributed via District Interpreter Service Coordinators. To contact your coordinator, go to www.health.qld.gov.au/multicultural/interpreters/QHIS_contact.asp.



Translated Video Remote Interpreting fact sheets

A fact sheet containing information for patients about the Queensland Health Interpreter Service video remote interpreting system is now available in 14 languages.

The fact sheet describes how the system works, addresses security and privacy concerns and explains to patients what to do when using the system.

The fact sheets are available in the following languages:

- | | |
|-------------|--------------------------|
| 1. Arabic | 8. Russian |
| 2. Burmese | 9. Simplified Chinese |
| 3. English | 10. Traditional Chinese |
| 4. Farsi | 11. Somali |
| 5. Italian | 12. Thai |
| 6. Japanese | 13. Torres Strait Creole |
| 7. Korean | 14. Vietnamese |

A DVD is also available in Auslan for deaf patients.

Contact Queensland Health Multicultural Services on multicultural@health.qld.gov.au to order your copy of the DVD or go to www.health.qld.gov.au/multicultural/interpreters/QHIS_vri.asp to download the fact sheets.



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Child health services for CALD community of Logan

A Queensland Health outreach clinic in Logan City which provides culturally appropriate child health services to parents from a culturally and linguistically diverse (CALD) background is helping to improve the health of children in the local community.

The clinic operates each Wednesday between 9am and 11.30am and offers infant and toddler weight checks, development checks, and support for parenting and other health issues.

Child health nurse Narelle Lehmann said the service enabled people from a CALD background to access equitable child health services in a culturally appropriate environment.



(L-R) Lawm from Burma and her baby Malsawm, Child Health Nurse Narelle Lehmann, and Rose from Burundi with her baby Rita

"It demonstrates how a small amount of resources allocated to an innovative health service can result in effective health improvement for the growing CALD community of Logan City," Narelle said.

Queensland Health also runs a CALD parent information session at the Community Health Centre in Logan Central on the first Tuesday of each month.

The parent information session offers a variety of information to CALD clients on safety in the home, poisons, car safety, food safety and women's health.

Burundi migrant Rose said she enjoyed attending the child health services clinic because the environment helped her to feel relaxed.

"It's a very good place for me, I can bring my baby to weigh, and I learn things. It's very good here, and I like to see people from my country," she said.

The clinic was formed in partnership with the non-profit community support service ACCES Services in February 2009.

An evaluation of the clinic's clients in July 2010 indicated the service has become well recognised and valued amongst the CALD community of Logan Central.

The clinic is located at 7/2 Carmody Street, Logan Central. For more information call 3387 5319.

Preventing female genital mutilation

New resources which aim to prevent the practice of female genital mutilation (FGM) and increase affected women's access to information and services to improve their sexual and reproductive health are now available.

The Family Planning Queensland (FPQ) Multicultural Women's Health Education project launched a new campaign recently, which includes a poster that conveys a powerful message to women and men that FGM is a dangerous and damaging practice.

To complement the new poster, an audio CD featuring women sharing their personal stories

about how they have been affected by FGM is in production, and will be available soon.

If you would like a copy of the poster for your community organisation, private or public hospital, local or regional clinic, doctor's office, or other community service, please contact Odette Tewfik on 3250 0240 or via email otewfik@fpq.com.au.

To learn more about the project or other resources available in different languages, please visit www.fpq.com.au/education/multicultural/projects_fgm.php.



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Hospital forum emphasises cultural competency

Multicultural health was the focus of a Community Interface Services Hospital Community Forum at the Royal Brisbane and Women's Hospital recently.

Guest speakers from three organisations with a focus on multicultural health facilitated sessions at the forum, addressing a diverse range of topics relevant to the care of culturally and linguistically diverse (CALD) patients.

Marina Chand from Queensland Health Multicultural Services spoke about the importance of cultural competency in healthcare and discussed the training courses available for staff to help them to care for patients from a CALD background, and to work in culturally diverse teams.

Marina said these courses could give staff an understanding of the skills and knowledge required to become culturally competent in their daily work interactions.

Patrice Davanne from Carers Queensland presented an overview on how health services can work with Carers Queensland to achieve the best outcomes for CALD clients.

Ruth Rowan from the HACC multicultural program, Spiritus, focussed her presentation on the care of older CALD clients in a community setting.

In addition to the guest speakers, Community Interface Services clinical nurses Natalie Paton and Rosina Randall spoke of strengthening linkages with multicultural organisations to better support patients in the transition from hospital to home.

Natalie said the forum provided Community Interface Services with a great networking opportunity to raise the issue of cultural sensitivity as a focus for Queensland Health clients, and also for colleagues.

Rosina, a New Zealander of Māori descent, has a personal interest in multicultural issues and said statistics indicate that there is a thriving CALD community in Queensland and that the need for culturally aware health services will continue to grow.

"As health care providers, increasing our cultural awareness and contact with CALD communities is important as we need to have the support of community providers to ensure

Harmony Day 2011

Queensland Health Multicultural Services celebrated Harmony Day 2011 on 21 March by encouraging staff members to celebrate what makes each of us unique and to share what we all have in common.

Staff members from the 15 Butterfield Street building in Herston were encouraged to show their support by wearing orange or wearing an orange ribbon.

Staff members were also invited to participate in a Diversity Map, which was designed to show the huge variety of places from which Queensland Health staff draw their ancestry.



Participants were able to place a pin on the map, either in the region of the world where they were born, or where they identified their ancestry.

In all, pins were placed in more than 30 countries across five continents.

Harmony Day celebrations were also held in hospitals and Queensland Health facilities around the state.

For more information about Harmony Day, go to www.harmony.gov.au.

discharges are handled in a culturally appropriate way," Rosina said.

"It is also important to be able to put faces to names when meeting people from CALD communities, especially when planning appropriate care for this patient population."

The Hospital Community Forum provides a platform for hospital and community health professionals to discuss and share information and issues which promotes continuity of care for our clients and their carers.



Two new articles on CALD health

Two new articles which examine the health of adult male refugees and culturally appropriate interventions in chronic disease treatment are now available.

- Saras Henderson, Elizabeth Kendall and Laurene See. **The effectiveness of culturally appropriate interventions to manage or prevent chronic disease in culturally and linguistically diverse communities: a systematic literature review.** *Health and Social Care in the Community* 19(3), 225-249.

A new systematic literature review examining the effectiveness of culturally appropriate interventions to manage or prevent chronic disease in culturally and linguistically diverse (CALD) communities suggests that the use of bi-lingual community health workers may promote greater uptake of chronic disease prevention strategies.

The review shows that CALD communities in Australia experience health disparities and a lack of access to services. Consequently, there have been calls for culturally appropriate services for people with chronic disease in CALD populations.

As part of the review, evidence was sought from randomised controlled trials and controlled studies that examined strategies for promoting cultural competence in health service delivery to CALD communities. The outcomes examined included changes in consumer health behaviours, utilisation/satisfaction with the service, and the cultural competence of health-care providers. Of the 202 studies that were identified, only 24 met the inclusion criteria.

The five categories of culturally appropriate intervention that were identified were:

1. The use of community-based bi-lingual health workers
2. Providing cultural competency training for health workers
3. Using interpreter services for CALD people
4. Using multimedia and culturally sensitive videos to promote health for CALD people
5. Establishing community point-of-care services for CALD people with chronic disease.

The review supported the use of trained bi-lingual health workers as a major consideration in the development of an appropriate health service model for CALD communities.

- Ignacio Correa-Velez, Adrian G. Barnett, Sandra M. Gifford and Donata Sackey. **Health status and use of health services among recently arrived men with refugee backgrounds: a comparative analysis of urban and regional settlement in South-east Queensland.** *Australian Journal of Primary Health* 17(1) 66-71.

A recent study of male adult refugees who entered Australia and settled in urban and regional South-East Queensland between 2004 and 2008 shows that, despite their recent traumatic history, they report good levels of subjective health status, moderate to good levels of well-being, and a low prevalence of mental illness.

The study shows that while approximately one-third of refugee and humanitarian entrants to Australia are adult men, and many of these men and their families settle in regional areas, little is known about their health status and their use of health services, and whether or not there are differences between those living in urban and regional areas.

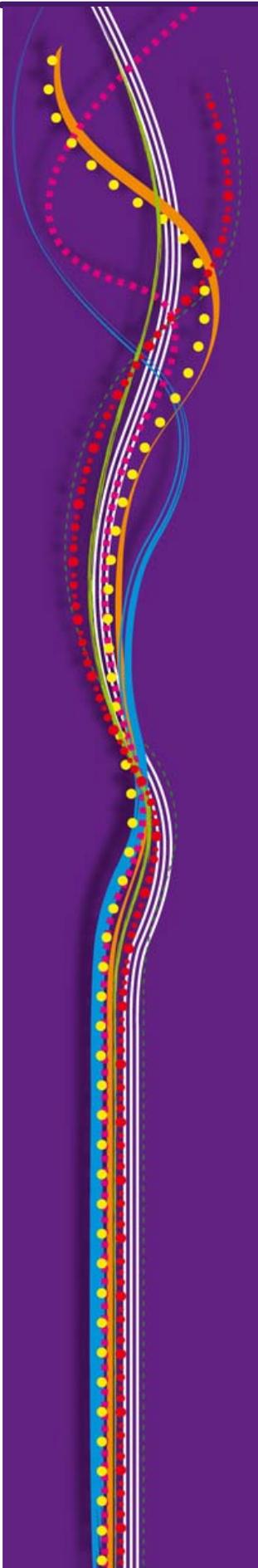
The paper reports on the cross-sectional differences in health status and the use of health services among a group of 233 recently arrived refugee men living in urban and regional areas of South-East Queensland.

The study found that men living in urban areas were more likely to have a long standing illness and report poorer health status than those settled in regional areas.

In contrast, men living in regional areas reported poorer levels of well-being when it came to issues of physical safety and security, and access to financial resources, quality health and social care, information and skills, recreation, and transport (the environment domain), and were more likely to visit hospital emergency departments.

Overall, the proportion of participants reporting poor subjective health status is similar to the general Australian adult male population.

The authors conclude that there is a need to develop adequate targeted health promotion and disease prevention programs to ensure that refugee men remain healthy. It also highlights the need for programs which facilitate access to primary health care in regional areas to promote more appropriate use of hospital emergency departments.



Advocacy support for people from a CALD background

Queensland Aged and Disability Advocacy (QADA) is now able to respond more effectively to the needs of people from culturally and linguistically diverse (CALD) backgrounds after receiving funding to employ a full time multicultural advocate.

Mareesa Contarino has been appointed to the new position and will be based in QADA's head office in Brisbane. Mareesa will be available to assist clients throughout Queensland.

The position, which is funded through the Home and Community Care (HACC) program, will also function as a point of expertise for other advocates in Brisbane and regional offices who are supporting people from a CALD background.

QADA has also received funding through HACC to produce "how to access an interpreter" postcards in 14 additional languages (Bosnian, Croatian, Dutch, Filipino, French, German, Hindi, Japanese, Macedonian, Maltese, Polish, Portuguese, Samoan and Thai).

These new postcards will complement the 12 languages already available (Arabic, Cantonese, Greek, Italian, Korean, Mandarin, Persian, Russian, Serbian, Spanish, Turkish, and Vietnamese).

These interpreter cards allow clients to contact QADA directly with the assistance of an interpreter, enabling people who speak little or no English to access advocacy services.

QADA has also received funding to add to its suite of fact sheets which are currently available in six languages (Chinese, Dutch, Greek, Italian, Samoan and Vietnamese). The funding will enable QADA to produce two fact sheets in 14 additional languages.

This new funding will significantly enhance QADA's capacity to provide advocacy services to people from a CALD background and ensure that their voice is heard.

For more information or to speak to Mareesa call QADA on 1800 818 338 or go to www.qada.org.au.

Culturally appropriate maternity care

The Queensland Centre for Mothers and Babies recently launched a new website to help Queenslanders to be better informed about the policies, practices and facilities of maternity services in the state.

The *Birthplace: Your Guide to Birthing Facilities in Queensland* website is an online tool that provides information about every birthing facility in Queensland, including information about policies and practices relevant to people from a culturally and linguistically diverse (CALD) background.

The website answers many of the frequently asked questions women from a CALD background have about different birthing facilities including:

- What models of care are offered?
- Are interpreters available?
- Can I be cared for by a female care provider?
- Can I have a private room?
- Can I have support people in the room during labour and birth?

The website also includes feedback about birthing facilities from women who have given birth there.

For more information about *Birthplace*, or to provide feedback or suggestions for improving the website, please contact Rachel Thompson on 3346 3179 or rachelth@psy.uq.edu.au or go to www.havingababy.org.au/birthplace.

Women who have given birth in Queensland can also provide feedback about their pregnancy, labour, and birth and after birth care by completing the Having a Baby in Queensland Survey online at www.havingababy.org.au/yourstory.

The Queensland Centre for Mothers and Babies is funded by Queensland Health and based at The University of Queensland. For more information about the centre, please go to www.qcmb.org.au.

