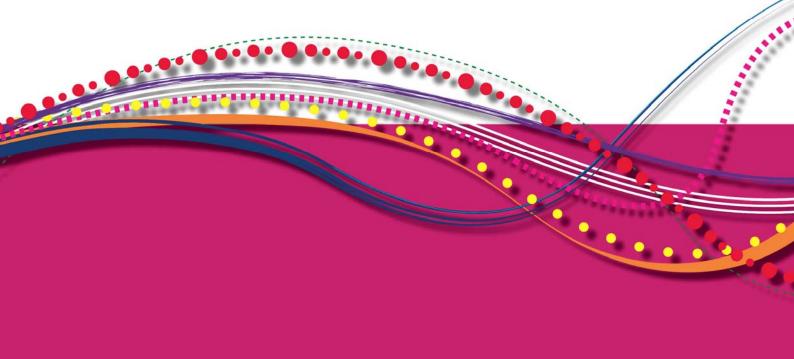
Health care providers' guide

to engaging multicultural communities and consumers





Engaging multicultural communities and consumers

Queensland is a culturally and linguistically diverse (CALD) state – in 2006 nearly one in five Queenslanders (17.9 per cent) was born overseas and 7.9 per cent spoke a language other than English at home.

The increasing cultural diversity in the Queensland population means that to be safe, health services need to be culturally appropriate and responsive. The value of consumer and community participation in the planning, delivery and evaluation of health services is well established, and given Queensland's diverse population, engaging with multicultural communities is becoming increasingly important.

However, multicultural communities and consumers are often unfamiliar with *how* to participate in consumer engagement processes. Some multicultural community groups may be reluctant to be involved due to poor experiences with previous government consultations, prior negative experiences of state authorities and governments, or a lack of understanding of democratic processes or trust in government institutions. As a result, building trust and capacity within these communities is important.

This guide aims to assist health care providers to effectively engage multicultural communities/consumers in the planning, delivery and evaluation of health services.

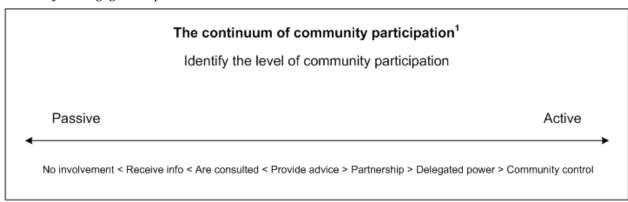
Step 1: What you want to achieve from the engagement process?

Having clear parameters and purposes about your engagement process will assist you to communicate clearly and honestly, and articulate realistic expectations and outcomes about your engagement process.

- 1. Define your purpose and clarify your motives and parameters. Asking the following questions may help:
 - a. why do you want to engage multicultural communities?
 - b. what do you hope to achieve?
 - c. why do you want to increase the participation of multicultural communities/consumers?
 - d. what do you intend to do with the feedback or engagement you gain?
 - e. how will you provide feedback to those you engage?

Possible reasons for multicultural community/consumer engagement:

- improve service efficiency, acceptability, effectiveness, access or equity
- contribute to quality services
- strengthen participatory processes
- reorient services towards community needs and priorities
- 2. Clearly communicate your aim and engagement parameters to the communities you wish to engage. Define your purpose and develop a detailed communication strategy to refine what it is you wish to engage with the communities about and to identify the activities necessary to engage and communicate with CALD communities in an appropriate manner.
- 3. Choose an appropriate level of engagement. Do not establish a partnership if the partner cannot be given equal power in the relationship and do not consult if there is no scope to change your plan or service. Refer to the *Continuum of community participation* to guide your thinking. Do you just want to inform the community about an event or policy or do you want the community to actively participate in the development of a service?



¹Adapted from Consumer and Community Participation Toolkit, Oueensland Health 2002

Step 2: Who will be involved?

Identify who to engage with and how. Direct contact with community associations and leaders may not always be the best way to engage with some communities.

You should talk with key members of multicultural communities about *how* they want to participate in the engagement process. This will help you to identify the level of engagement possible.

Mediating direct engagement with local multicultural communities can be done through peak bodies, community associations, religious groups, community leaders, and other prominent community groups/representatives. Other health care providers with direct experience in working with multicultural communities/consumers may also be able to assist with facilitating access to communities.

It is important to research the local community to determine the best *entry points* for your particular purpose and to understand how to make engagement with government organisations accessible, and culturally appropriate for the community.

Key actions:

- identify the key groups/communities which should be involved in the process
- make contact with key community
 representatives to obtain advice about the
 best methods of engaging with their
 communities. The Multicultural Affairs
 Queensland Multicultural Resource
 Directory can be used to help locate key
 community representatives. The resource
 directory can be accessed at:
 www.communities.qld.gov.au/multicultural
 /services-and-resources/multiculturalresource-directory.
- contact the people you need to engage.

Key questions for identifying who should be involved:

- Does your health service target a particular age group or gender? Do you need to engage with newer communities which have arrived more recently, or with older and more established communities?
- Is there a particular community that uses the service regularly? Is there a local community that you would expect to be using the service that is not currently accessing it?

- Who will you consult about developing/ implementing your engagement mechanisms?
- Who will your engagement mechanism target?

Key issues for community engagement (representation and representativeness):

- How will you ensure that the members you engage with can/do represent the wider community?
- How will you get a representative sample and engage a diverse cross-section of the community you wish to target?
- How will you build capacity within particular communities to engage with government? Have you considered how to overcome any barriers that might be experienced by multicultural communities in engaging with government?

Often, the most appropriate way of working with particular communities is to identify and work with community elders and leaders. Community elders are often formally recognised and designated spokespersons for a particular community; they could be chiefs, elders, acknowledged community leaders within the community, or spiritual leaders. It may also be culturally appropriate to first speak to these people to gain the trust of the community and to have the engagement process recognised within the community.

However, it is important to recognise that no individual from a particular community can ever be truly representative of, or speak for, the entire community. It is critical to understand that there is just as much diversity *within communities* as there is difference *between communities*.

Community engagement activities should involve a diverse range of people from within a particular community to truly represent the full range of perspectives and concerns. Gender, sexuality, age, disability and socioeconomic status should all be considered where necessary. For certain engagement activities, it may also be important to target specific groups within the community e.g. women and youth.

Resources to assist with identifying who should be involved:

 a multicultural demographic profile of each Health Service District can be found at www.health.qld.gov.au/multicultural/health-workers/mc-profileHSD.asp. This will provide you with a snap-shot of the

- largest multicultural communities in your area that may need to be involved in your engagement process
- The People of Queensland 2006 –Statistics from the 2006 Census provides census data by Local Government Area. It is available online from Multicultural Affairs Queensland www.communities.qld.gov.au/multicultural/services-and-resources/the-people-of-queensland-statistics-from-the-2006-census
- the Department of Immigration and Citizenship settlement tool provides up-todate data on population and settlement. This tool can be used to search by local government area and by ethnic community. The tool is available at the department's website www.immi.gov.au/living-in-australia/delivering-assistance/settlement-reporting-facility
- the Multicultural Affairs Queensland *Multicultural Resource Directory* <u>www.communities.qld.gov.au/multicultural/services-and-resources/multicultural-resource-directory</u>
- the Queensland Government multicultural resource directory online www.communities.qld.gov.au/multicultural /services-resources/resource-directory/ index.page
- Engaging Queenslanders: An introduction to working with CALD communities www.getinvolved.qld.gov.au/engagement/g uides/cald/cald.html and the information kit and factsheets available at www.qld.gov.au/web/communityengagement/guides-factsheets/caldcommunities/factsheets

Step 3: When to be involved?

Community engagement is most effective if consumers/communities are involved from the beginning of the process. However, there may be good reasons why this cannot be achieved.

In these situations, consult with consumers and organisations to work out when engagement would be most appropriate.

Step 4: How to engage consumers/communities?

The table below identifies methods of engagement at three levels on the *Continuum of community participation*, with pointers on how to start and who to approach.

The first column represents the Queensland Government engagement continuum (see www.getinvolved.qld.gov.au). The second column represents the engagement strategies from the Centre for Culture Ethnicity and Health's Consumer Participation Strategies Matrix (www.ceh.org.au). And, finally, the third and forth columns present practical 'where do I start?' and 'where do I go?' information.

Additional resources about the methodologies of consumer and community engagement are also available (see Attachment 1).

Definitions

Consumer

Consumers are people who use, or are potential users, of health services including their family and carers. Consumers may participate as individuals, groups, organisations of consumers, consumer representatives or communities.²

Community

Community refers to groups of people or organisations with a common local or regional interest in health. Communities may connect through a community of place such as a neighbourhood, region, suburb; a community of interest such as patients, industry sector, profession or environment group; or a community that forms around a specific issue such as improvements to public health care or through groups sharing cultural backgrounds, religions or languages.³

² Health Consumers Queensland, (2010). *Consumer Engagement Framework: August 2010*. Brisbane.

³ Adapted from Department of Communities (2005) Engaging Queenslanders: an introduction to community engagement and Health Consumers Queensland, (2009). Consumer Representatives Program: Consumer Handbook.

Effective community and consumer engagement occurs in the context of developing ongoing relationships with communities. Building trust takes time. Developing experience also takes time.

| Engagement | Strategy | Where do I start? | Where do I go to make contact?4 |
|------------------------|--|--|---|
| continuum | | | |
| Information sharing | Information sessions and disseminate printed materials | ✓ need to access the local community to disseminate printed materials ✓ use multicultural media to promote the printed materials ✓ hold information sessions in locations familiar to the local community – use interpreters if necessary ✓ if required, organise translations of the printed materials⁵ | ✓ multicultural media outlets ✓ speak with multicultural community or Local Area Multicultural Partnership (LAMP) workers⁶ to gain contacts within the local community ✓ contact local ethnic community and religious groups directly |
| Consultation | Consumer planning days | For effective planning you need to hear from: ✓ consumers ✓ migrant service workers and multicultural community workers who have advocacy experience in accessing or dealing with your service ✓ the peak multicultural body that has policy advice experience. If one particular community features in your service, consider a planning day for non-English speaking consumers, with the assistance of an interpreter. | ✓ ethnic community and religious groups in your area ✓ migrant service workers and multicultural community workers ✓ the peak body – Ethnic Communities Council of Queensland |
| | Consumers on project reference and steering groups and consumer advisory groups | Contact ethnic community groups, particularly those that are incorporated (i.e. have Inc. in their name). These groups already have some meeting protocol know-how. Multicultural community or LAMP workers may have a contact list or network of people they could contact on your behalf. It is important to select consumers who have knowledge, experience and interest in the issues. | ✓ ethnic community and religious groups ✓ multicultural community workers ✓ LAMP workers |
| | Focus groups | Discuss your needs with multicultural community workers and/or the multicultural peak body. These workers already have experience in conducting focus groups with multicultural groups. | ✓ multicultural community workers ✓ the peak body – Ethnic Communities Council of Queensland ✓ Queensland Health Multicultural Services, Queensland Health |
| Active participation | Multicultural consumers on boards of management | Identify which communities you wish to involve: ? which communities feature in your service? ? which communities are present in your catchment area? You will require consumers with some meeting protocol know-how and English language skills. | ✓ ethnic community and religious groups in your area ✓ LAMP and multicultural community workers in your catchment area for advice on contacts ✓ use multicultural media to reach consumers who are not involved with community groups. |

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For a full description of the groups and contacts mentioned, refer to Multicultural Who's Who (www.health.qld.gov.au/multicultural/health_workers/who_who_mcultrl.pdf) on the Queensland Health website.

see <u>www.health.qld.gov.au/multicultural</u> for Queensland Health's *Practical guide to organising translations*

⁶ see www.communities.qld.gov.au/multicultural/community/community-partnerships/local-area-multicultural-partnerships-lamp-program for LAMP worker contacts



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Brisbane Queensland 4001
email IP_Officer@health.qld.gov.au
phone 07 3234 1479

Attachment 1 - Additional resources on the methodologies of consumer and community engagement

- Queensland Transcultural Mental Health Centre A model for CALD consumer and community participation in mental health www.health.qld.gov.au/pahospital/qtmhc/consumer.asp
- Centre for Culture Ethnicity and Health (2004). Consumer Participation Strategies Matrix: A Practical Guide to Engaging Culturally and Linguistically Diverse Consumers www.ceh.org.au/downloads/Consumer matrix.pdf
- Centre for Culture Ethnicity and Health (2005). Consumer Participation and Culturally and Linguistically Diverse Communities www.ceh.org.au/downloads/Consumer Participation and CALD Communities.pdf
- The Health Issues Centre at La Trobe University summary of resources and literature relevant to consumer participation www.bnpca.org.au/publications/items/2009/02/265385-upload-00001.doc
- Centre for Culture Ethnicity and Health (2007). A practical guide to CALD consumer participation www.ceh.org.au/downloads/CALD Consumer Participation.pdf
- Department of Communities engagement guides <u>www.qld.gov.au/web/community-engagement</u>
- Engaging Queenslanders: Improving Community Engagement Across the Queensland Public Sector
- Engaging Queenslanders: An Introduction to Community Engagement
- Engaging Queenslanders: Community Engagement in the Business of Government
- Engaging Queenslanders: A Guide to Community Engagement Showcasing Events
- Engaging Queenslanders: A Guide to Community Engagement Methods and Techniques
- Engaging Queenslanders: A Guide to Evaluation Community Engagement
- National Resource Centre for Consumer Participation in Health, (2000). Improving health services through consumer participation: A resource guide for organisations, www.healthissuescentre.org.au/documents/items/2008/08/226533-upload-00001.pdf
- National Resource Centre for Consumer Participation in Health (2000). Feedback, participation and consumer diversity: a literature review, www.healthissuescentre.org.au/documents/detail.chtml?filename_num=226293
- National Health and Medical Research Council, (2006). Guide to effective participation of consumers and communities in developing and disseminating health information, www.nhmrc.gov.au/, files nhmrc/media.releases/20110205/givepub.pdf
- The original engagement continuum on which later works are based: Brager, G. & Specht, H. (1973) Community Organizing, New York: Columbia University Press.