

## Behind Every Person is a Long Journey: Meeting the Aged Care Needs of Our Culturally and Linguistically Diverse Community

Migrants undergo not only a physical journey to a new land, but also the ongoing journey of resettlement and adjustment to life in a new country. It is these individual stories and experiences of migration to which the aged care industry must now respond in order to meet the needs of our ageing culturally and linguistically diverse population.

While the Australian population as a whole is ageing, the migrant population is ageing even more rapidly. In less than four years' time it is predicted that nearly 23% of Australians aged 65 and over will be from a culturally and linguistically diverse background, with one in every five people aged 80 and over from a culturally and linguistically diverse background.\*

The demographics of Australia's ageing population - reflective of the patterns of migration following World War II - have immediate and far-reaching implications for all those responsible for planning and delivering aged care services.

Older people from diverse cultural backgrounds share with other Australians the range of needs that arise from the ageing process. However, they may also have unmet cultural, linguistic and spiritual needs and face multiple barriers in accessing appropriate aged care services.

With the theme 'Behind every person is a long journey. Meeting the aged care needs our culturally and linguistically diverse community', the Cultural Diversity in Ageing 2007 National Conference brings together speakers with community, industry, academic and government expertise to explore issues around language and communication, current and future service responsiveness, culturally inclusive management and policy development.

The conference aims to provide an understanding of the migration experience, information on ageing in specific communities, examples of culturally responsive service initiatives from around Australia, and an opportunity for the aged care industry to better understand the needs of our culturally and linguistically diverse society.

The Centre for Cultural Diversity in Ageing welcomes you to the Cultural Diversity in Ageing 2007 National Conference.

\*Australian Institute of Health and Welfare (AIHW): 'Projections of Older Immigrants: People from Culturally and Linguistically Diverse Backgrounds, 1996-2026, Australia' (2001). Persons from culturally and linguistically diverse backgrounds are defined by AIHW as persons born overseas in countries where English is not the main language spoken.



Benetas is proud to auspice the Centre for Cultural Diversity in Ageing. Supported by the Australian Government through the Partners in Culturally Appropriate Care initiative, the Centre aims to ensure the needs of older people from culturally and linguistically diverse backgrounds are identified and addressed.

I am pleased to participate in, and welcome you all to the Cultural Diversity in Ageing 2007 National Conference.

Sharon Callister, CEO Benetas



## Conference Program

### Thursday 7th June 2007

8.15am-9.00am	Registration
9.00am-9.20am	<b>Welcome and Housekeeping</b> Helen Lawrence, Conference Facilitator
	<b>Welcome to the Land</b> Aunty Doreen Garvey Wandin, Wurundjeri Elder
	<b>Welcome</b> Helen Hambling, Australian Government Department of Health and Ageing
9.20am-10.00am	<b>Aged Care Needs in the Aboriginal Community</b> Lena Morris, Rumbalara Aboriginal Co-operative
10.00am-10.30am	<b>A Mosaic of Culturally Appropriate Responses for Australian CALD Background Elderly</b> Voula Messimeri-Kianidis, Federation of Ethnic Communities' Councils of Australia
10.30am-11.00am	Morning Tea
11.00am-11.30am	<b>Brimbank or Boroondara, Moreland or Maroondah: Diversity in Ageing in Melbourne's CALD Communities</b> Anna Howe, Consultant Gerontologist
11.30am-12.30pm	<b>Encouraging our Ancestral Stories and the Art of Creative Listening</b> Arnold Zable, award-winning writer and best-selling author
12.30pm-1.30pm	Lunch
1.30pm-3.00pm	<b>Concurrent Session 1: Culture and Language - Key Considerations</b> Chair: Rosa Colanero, Multicultural Aged Care South Australia
	<ul style="list-style-type: none"><li>• Diversity in the HACC Workforce - Understanding, Planning and Good Practice Katherine Wositzky, Municipal Association Victoria</li><li>• Translation and Interpreting: the Other Side of Tapestry Eva Hussain, Australian Institute Interpreters and Translators</li><li>• Like My Own Family - Positive Health Outcomes through Language Matching Jo Krizmnic-Wilson and Nikki Marshall, Northern Migrant Resource Centre</li></ul>
	<b>Concurrent Session 2: Management Considerations and Cultural Diversity</b> Chair: Simon Fountain, Migrant Resource Centre (Southern Tasmania)
	<ul style="list-style-type: none"><li>• Cultural Diversity Impacts on Policy Development Janis Klavins, Southern Cross Care Victoria</li><li>• Building Culturally Competent Aged Care Serena Ann, Partners in Culturally Appropriate Care, ACT Health</li><li>• Meeting the Challenges of Cultural Competence at the Organisational Level - Responding to Cultural and Linguistic Diversity Sophie Diamandi, University of South Australia, and Gosia Skalban, Metropolitan Domiciliary Care</li></ul>
	<b>Concurrent Session 3: Understanding Community Needs</b> Chair: Sharon McGowan, Benetas
	<ul style="list-style-type: none"><li>• Embracing Culture and Diversity; Honouring Individual and Community Nicky Golan, Sir Moses Montefiore Jewish Home</li><li>• Overlooked and Under-Serviced - Why is SA's German-Born Older Population Under-Represented in Aged Care Support Services? Christa Michaelis, Resthaven</li><li>• Responding to the Needs of an Ageing Greek Community Tina Douvos-Stathopoulos and Stavroula Mavroudis, Australian Greek Welfare Society</li></ul>
3.00pm-3.30pm	Afternoon Tea
3.30pm-4.00pm	<b>Inspiring Diversity in Aged Care</b> Gerard Mansour, Aged and Community Care Victoria
4.00pm-4.30pm	<b>Patterns of Ageing and Service Use in a Culturally Diverse Population</b> Dr Diane Gibson, Australian Institute of Health and Welfare
4.30pm-4.45pm	<b>Summary and Close of Day 1</b> Helen Lawrence, Conference Facilitator
5.30pm-7.30pm	Cocktail function - Immigration Museum

## Conference Program

### Friday 8th June 2007

8.15am-9.00am	Registration
9.00am-9.20am	<b>Address by the Federal Minister for Ageing</b> , the Hon Christopher Pyne MP
9.20am-9.30am	<b>Welcome and Housekeeping</b> Helen Lawrence, Conference Facilitator
	<b>Welcome</b> Sharon Callister, Benetas
9.30am-10.00am	<b>Strength through Diversity</b> Greg Mundy, Aged and Community Services Australia
10.00am-10.45am	<b>Leadership and Relationship Capital in Multicultural Mental Health</b> Nicholas Procter, University of South Australia
10.45am-11.15am	Morning Tea
11.15am-11.45am	<b>A Life Without (English) Words, and the Survival Techniques of Migrants and their Some times Ingenious Skills of Adaptation to a Life Without Words</b> Alice Pung, Melbourne writer and full-time lawyer
11.45am-12.30am	<b>Health and Human Rights in an Ageing Society: Implications for the Care of Older People from Diverse Cultural and Linguistic Backgrounds</b> Professor Megan-Jane Johnstone, RMIT University
12.30pm-1.30pm	Lunch
1.30pm-3.00pm	<b>Concurrent Session 1: Culture and Language - Key Considerations</b> Chair: Maria Bunn, Multicultural Aged Care Service WA <ul style="list-style-type: none"><li>• Interpreting Older Australians' Needs - Cultural and Linguistic Perspective Izabela Winczewski, Australian-Polish Community Services</li><li>• Aged Care Service Initiatives that Focus on Communication and Language Angelika Tyrone, Ethnic Link Services</li><li>• Blossoms from Babel: Maintaining Identity Integrity for Ageing Migrants in a High-Level Care Setting Pamela Freeman, The Smorgon Family Nursing Home, Jewish Care</li></ul>
	<b>Concurrent Session 2: Future Challenges for Aged Care Services</b> Chair: Carolyn McColl, Southern Cross Care (Vic) <ul style="list-style-type: none"><li>• A New Strategy for Community Care - The Way Forward Tracey Duffy, Australian Government Department of Health and Ageing</li><li>• Dementia Has No Barriers Helena Kyriazopoulos, Alzheimer's Australia</li><li>• Closing the Information Gap: Communicating with Elderly People from Culturally and Linguistically Diverse Backgrounds Klaudia Vainshtein, Centre for Cultural Diversity in Ageing</li></ul>
	<b>Concurrent Session 3: Role of Partnerships and Collaboration in Service Planning and Development</b> Chair: Jaklina Michael, Royal District Nursing Service <ul style="list-style-type: none"><li>• Meeting the Aged Care Needs of a Culturally Diverse Community - Board Perspective Tony Crivelli, Villaggio Italiano</li><li>• Aged Care Service Initiatives Fiona Dunt, Asian Partners in Aged Care, Helping Hand Aged Care</li><li>• Partnership in Culturally Responsive Assessment Nelum Buddhadasa, City of Port Phillip, and Ania Sieracka, Ethnic Communities' Council of Victoria</li></ul>
3.00pm-3.30pm	Afternoon Tea
3.30pm-4.00pm	<b>Positive Ageing as Seen by Women from Small and Emerging Communities</b> Melba Marginson, Victorian Immigrant and Refugee Women's Coalition
4.00pm-4.30pm	<b>Summary and Close of Day 2</b> Helen Lawrence, Conference Facilitator

## Keynote Speakers

### Lena Morris

Lena Morris is a Yorta Yorta woman who has lived in Victoria all her life. Lena is the Executive Manager Aged Care and Disability Services at Rumbalara Aboriginal Co-operative and has held this role since 1987. Lena's desire to care for her Elders - to ensure their longevity, enhance their quality of life and their health, and to make sure their needs are met, that they are listened to and not pushed aside - is inspired by her mother and her grandparents. Her philosophy is that as her mother and grandparents looked after her, so she wanted to look after them. Her effectiveness and innovative approach to identifying issues and providing successful solutions has resulted in her nomination to many state and federal aged care committees and welfare organisations.

### Voula Messimeri-Kianidis

Voula Messimeri-Kianidis has been involved in the community services field for 20 years, with a particular focus on multicultural affairs and women's issues. As Executive Director of the Australian Greek Welfare Society, she manages an agency with a diverse range of programs, including aged and disabilities, childcare, training, counselling and community education. Previous positions have included family counselling in country Victoria, coordination of a service that focused on occupational health and safety, equal opportunities for girls in secondary education project officer and genetic counselling. Voula has a strong commitment to social justice and community building and to this end she has served on a number of Boards and advisory bodies. Past positions include: Inaugural Chairperson of the Women's Health Service in the North; Member on the SBS Advisory Committee; Chairperson of the Immigrant Women's Domestic Violence Service; a founding member and Deputy Chairperson of the Victorian Immigrant and Refugee Women's Coalition Current positions include: Chairperson of the Federation of Ethnic Communities' Councils of Australia; Deputy Chairperson of VITS Language Link; Deputy Chairperson of Ethnic Communities' Council of Victoria; Council member of RMIT University; Trustee, Radiomathon Trust (for children with disabilities).

### Dr Anna Howe

Dr Anna Howe is a consultant gerontologist with over 25 years' experience in aged and community care research and policy development in Australia and overseas. She completed her PhD at Monash University in 1982 and then held academic positions at Melbourne University and La Trobe University. She was President of the Australian Association of Gerontology from 1997-99. From 1989-1993, she was Director of the Commonwealth Office for the Aged, and Principal Policy Advisor to the Mid Term Review of the Aged Care Reform Strategy. Dr Howe became a consultant in 1998 and her recent projects for commonwealth and state governments have covered aspects of post-acute care, and assessment and targeting in community care. In 2006 she prepared a major report on ageing in Victoria's culturally and linguistically diverse communities and the implications for Home and Community Care as part of the Victorian Government's Culturally Equitable Gateways Strategy. Internationally, she has carried out consultancies with the Organisation for Economic Co-Operation and Development, the World Health Organisation, United Nations, and for AusAid in China and Thailand. Most recently, she has been a consultant to World Bank projects on the development of aged care services in Slovakia and Estonia. She has prepared over 100 papers and reports, published locally and internationally.

## Arnold Zable

Arnold Zable is an award-winning writer, educator, and human rights advocate. He holds a doctorate from the School of Creative Arts, Melbourne University. His books include: 'Jewels and Ashes', which depicts his journey to Poland to trace his ancestry; 'The Fig Tree', a book of true stories set in Greece, Eastern Europe, Melbourne and outback Australia; and 'Café Scheherazade', a novel that depicts the lives of former refugees who now meet in a seaside café in Melbourne. His most recent novel, 'Scraps of Heaven', is set in the immigrant community of post-war Carlton. He is the author of numerous feature articles, columns, short stories and essays, and is a co-writer of the play 'Kan Yama Kan', in which asylum seekers tell their stories. Arnold speaks with passion about memory and history, displacement, and the multiplicity of cultures within Australia. In recent years he has written extensively about the plight of asylum seekers, and been involved in campaigns on their behalf. He has been a visiting lecturer at Deakin, Melbourne, Monash, RMIT, La Trobe and Victoria Universities. Arnold has worked in the USA, Papua New Guinea, China, and many parts of Europe and Southeast Asia, and is a member of the Immigration Museum Advisory Committee, the patron of the Victorian Storytellers guild, and President of International PEN, Melbourne.

## Gerard Mansour

Gerard Mansour has been CEO of Aged and Community Care Victoria since July 2006, and has led the merger of two former entities into a single peak membership organisation. Gerard has over 25 years' experience creating opportunities and delivering quality outcomes for the community and aged care sector, as well as child, youth, family services, community education, schools and local community organisations. He has a high level of commitment to hands-on strategic and consultative methods, with a make-it-happen, outcomes-focused approach to life. Qualifications include: a Fellow, Executive Program for Non-Profit Leaders, Stanford University; Master of Arts by Research - Work and Family, Victoria University; Bachelor of Arts (Social Science), Latrobe University; Diploma of Youth Work, Phillip Institute together with having completed studies in Human Resource Management as part of a Masters degree in Commerce at the University of Melbourne.

## Dr Diane Gibson

Dr Diane Gibson is the Head of the Welfare and Housing Group at the Australian Institute of Health and Welfare (AIHW). The Welfare and Housing Group analyses and disseminates statistics and information relating to ageing and aged care, child and youth health and well-being, housing assistance and homelessness. She was previously the founding Head of the Ageing and Aged Care Unit at the Institute, a position she held for nine years. Her earlier career included teaching and research positions at the Australian National University, Griffith University and Queensland University. She is a Fellow of the Academy of Social Sciences, a member of the National Council of the Australian Association of Gerontology and a former Editor-in-Chief of the Australasian Journal on Ageing. Dr Gibson has published widely in national and international journals in the fields of ageing, social policy, social philosophy and sociology. She has co-edited six volumes of 'Australia's Welfare' (AIHW 1995, 1997, 1999, 2001, 2003, 2005), which analyse the state of the nation's welfare services, and developed the widely disseminated 'Older Australia at a Glance' (AIHW/HFS 1997, 1999 and AIHW/DoHA 2002). She is the author and co-author of a number of AIHW publications, and of 'Aged Care: Old Policies, New Problems' (Cambridge University Press 1998).

## Greg Mundy

Greg Mundy is the Chief Executive of Aged and Community Services Australia (ACSA), the national peak body for providers of residential care, community care and housing for older people. Greg has an extensive background in the aged and community care sector and in the broader health and human services field. Before joining ACSA, Greg was a senior executive in the Victorian Government Department of Human Services. Greg was responsible, at different times, for various aspects of aged care, community care, mental health and other programs. Greg has a Masters degree from the Australian National University. He was born in England and educated in England, New Zealand and Australia.

### **Nicholas Procter**

Nicholas Procter is currently Associate Professor and Academic Integrity Officer in the School of Nursing and Midwifery at the University of South Australia. Professor Procter has received several awards and honours for his professional and community work. His teaching, research and consulting for government and non-government organisations has delivered outcomes in clinical reform, practice development and knowledge application. Most recently, he has undertaken research in the design of clinical care for marginalised and disenfranchised people with mental health problems, and evaluation of rural and remote mental health services. Currently he is an advisor to Multicultural Mental Health Australia, the national program for mental health promotion and suicide prevention for people from culturally and linguistically diverse backgrounds. He is a former Hawke Fellow and current Fellow of the Governor's Leadership Foundation.

### **Alice Pung**

Alice Pung is a Melbourne writer and full-time lawyer. She has had her short stories published in *The Good Weekend*, *Meanjin* and *The Other Side*. In 2002 her story 'Unpolished Gem' was nominated for a Premier's Literary Award, and in 2005 her story *Words* won *The Other Side* prose competition. Alice's first novel, 'Unpolished Gem' (published by Black Inc) tells the story of growing up with a Chinese-Cambodian family in Australia. It became the best-selling book at the Melbourne Writer's Festival, reached the top 10 books in the Queensland Writer's Festival and the Sydney Morning Herald's independent best-seller list, and has been nominated for a NSW Premier's Literary Award. 'Unpolished Gem' has resonated with its readers due to its empathetic treatment of its migrant characters and the humour and affection for the community it portrays. Alice is also a creative writing and political science tutor, as well as the Writer in Residence and pastoral care adviser at Janet Clarke Hall, the University of Melbourne.

### **Megan-Jane Johnstone**

Megan-Jane Johnstone is currently Professor of Nursing and Director of Research, Division of Nursing and Midwifery at RMIT University. Professor Johnstone is best known for her work in the area of health care ethics, with a particular emphasis on health and human rights, cross-cultural ethics, professional conduct and, more recently, patient safety ethics. She has published several books and is the co-author (with Professor Olga Kanitsaki AM) of the research report 'Cultural safety and cultural competence in health care and nursing: an Australian study' as well as a number of recent articles exploring the link between culture, language and patient safety and quality care in health care domains.

### **Melba Marginson**

Melba Marginson is the Executive Officer of the Victorian Immigrant and Refugee Women's Coalition. She is of Filipino background and has worked extensively in the area of multicultural affairs. She has a Master's degree in Social Science, has sat on many government advisory bodies, in 2001 was listed on the Victorian Government's first Honour Roll of Women, and served on the Victorian Multicultural Commission for five years.

## Abstracts – Keynote Speakers

### Rumbalara Making a Difference

**Lena Morris – Executive Manager Aged Care and Disability Services, Rumbalara Aboriginal Co-Operative**

Aged and Disability Services at Rumbalara Aboriginal Co-operative cover Home and Community Care, Community Aged Care Packages and National Respite for Carers Program services over the Hume and Loddon Mallee regions.

Rumbalara Aged and Disability Services are a respected team across all other co-operatives from Mildura to Seymour and Bendigo to Wodonga. We pride ourselves on our ability to change with the times and extend our services to other cultures in strengthening our future with our community of many cultures, and make a commitment to move forward together in the true spirit of reconciliation.

Our DVD presentation 'Rumbalara Making a Difference' will take you on a journey from where it all began. Many steps have been taken and many steps remain as we learn our shared histories. Listen to stories of our Elders past and present, and services providers who walk with us into the future where they will have the opportunity to achieve their full potential.

### A Mosaic of Culturally Appropriate Responses for Australian CLDB Elderly

**Youla Messimeri-Kianidis – Chairperson of the Federation of Ethnic Communities' Councils of Australia**

The Federation of Ethnic Communities' Councils of Australia (FECCA) is the national peak body representing and advocating for culturally and linguistically diverse background (CLDB) communities. Its role is to advise, advocate and promote issues on behalf of its constituency to government, business and the broader community. FECCA promotes Australian multiculturalism, community harmony, social justice, community participation and the rejection of discrimination so as to build a productive, culturally rich Australian society.

The CLDB ageing population is one of the major groups that concerns FECCA. It is well recognised that Australia has a rapidly ageing population and this will demand a comprehensive whole-of-government approach to ensure the needs of all Australians can be comprehensively met as they age.

Within this context, the CLDB ageing group, as a proportion of the population, is increasing at a significantly higher rate than the Australian-born. Persons from CLDBs in 1996 comprised 18% of Australians aged 65 and over. By 2011 this figure is expected to rise to 23%, that is, over one million in 2011, and by 2021, 30% of older Australians will come from a CLDB. This group of people, on the whole, speak English poorly and rely on their language of origin for communication with service providers.

In order to cater to this numerically large and culturally and linguistically diverse population in an appropriate and timely manner, we need to accelerate and deepen our understanding of their needs. Equally, more flexible solutions need to be trialled, building on the existing collaborative initiatives between local, state and federal governments, while recognising the unique role of ethno-specific and multicultural providers as an essential and integral part of the service solutions for CLDB ageing people.

### Brimbank or Boroondara, Moreland or Maroondah: Diversity in Ageing in Melbourne's CALD Communities and Service Responses

**Anna Howe – Consultant gerontologist and former Director of the Commonwealth Office for the Aged**

This presentation will unmask the diversity that lies behind the oft-quoted average that 'older people from culturally and linguistically diverse background now account for some 20% of the population aged 65 and over in Australia.' It will draw on the report 'Cultural Diversity, Ageing and HACC: Trends in Victoria in the next 15 years', compiled for the Victorian Department of Human Services as part of the research component of the Culturally Equitable Gateways Strategy.

A glimpse of cultural diversity in ageing is seen in older people from culturally and linguistically diverse (CALD) backgrounds accounting for 66% of the older population in Brimbank, 50% in Moreland, 20% in

Boorondara, and 12% in Maroondah. Four aspects of geographic variations in the distribution of Victoria's older CALD population will be examined:

- Variations in the older population of CALD backgrounds, highlighting variations between metropolitan and regional Victoria, between the four metropolitan regions, and between local government areas within each region;
- The composition of CALD populations in local areas, highlighting the mix of CALD groups in all areas with substantial older CALD populations;
- The shifts that emerge when proficiency in English is taken into account; and
- Trends in growth of older CALD populations, taking account of the CALD population aged 45-64.

The second part of the paper will take up the implications of this diversity for delivering community care services that are responsive to differing needs in different local and CALD communities. The range of strategies with varying degrees of cultural orientation that are now in place have long bridged the 'ethno-specific vs mainstream' divide, and two case studies will illustrate the 'mix and match' of approaches that are being applied in:

- Responding to ageing in the Turkish community; and
- Addressing the diversity of needs in the City of Greater Dandenong.

## Encouraging our Ancestral Stories and the Art of Creative Listening Arnold Zable – award-winning writer and best-selling author

Australia is a diverse democratic, cosmopolitan society. It is a land of immigrants and indigenous peoples, a new world with an ancient past, a grand symphony with many melodies. Aged care workers and policy makers are privileged to work with people from a great diversity of backgrounds, with great stories to tell. There is an art to listening to other voices and entering other cultures, and helping the aged find their voice. It is a rewarding journey that can enrich both the teller and the listener. Many Australians who are now approaching old age are of the generation of post-war immigration. Sharing their stories is often vital to their wellbeing and sense of worth. At the heart of storytelling lies the art of listening. The gatherer and teller of stories understands that it is not only the story, but the way it is told that defines its uniqueness. In a culturally diverse society the original language assumes great importance. Each language contains its own riches, and is an integral aspect of the story.

This talk will explore the art of storytelling, its healing and humanising power, the art of creative listening, and the common threads and themes of our immigrant journeys. It will look at ways of encouraging aged immigrants to tell their stories, and will explore stories from a range of cultures to give an indication of their vast scope and power. We are, as a nation, the sum total of our stories, and we are all enriched in sharing them.

## Inspiring Diversity in Aged Care Gerard Mansour – CEO Aged and Community Care Victoria

Cultural diversity is often understood in terms of the country in which we inherited our culture or the language we speak. It adds another dimension to the diversity of our human existence.

In 2005 ACCV launched its culturally and linguistically diverse (CALD) issues paper titled 'The Provision of Aged and Community Care Services to People from Culturally and Linguistically Diverse Backgrounds'.

The report assumes a whole person and individually focused model of care, placing culture at the centre of service planning for CALD elderly, while engaging family members and ethnic communities in the provision of appropriate care.

Appropriate CALD care is focused on reducing social isolation and cultural dislocation, clients effectively exercising their rights, and experiencing positive health outcomes.

Key issues are cultural awareness and the implementation of culturally appropriate strategies for best practice care. Culture, linguistic usage and communication are seen as crucial issues for the development of policy, for service strategies and for promoting CALD access.

Broad enablers include developing the concept of culturally appropriate care and unity across the various service systems, staffing and training, partnering, policy, evidence, planning and resourcing.

We need to better understand the challenges this report has put to many stakeholders in its 38 recommendations and to consider how we might measure and inspire progress towards managing cultural diversity in aged care.

## Patterns of Ageing and Service Use in a Culturally Diverse Population

**Dr Diane Gibson – Senior Executive, Welfare and Housing Group, Australian Institute of Health and Welfare**

People born overseas account for over one third of older Australians, and that proportion is continuing to increase. Moreover, the majority of older Australians who were born overseas come from non-English speaking countries (around two-thirds). This means that older Australians are a particularly diverse segment of the Australian population in terms of their cultural and linguistic background. Changing patterns of migration over time have a strong impact on the profile of the older population in subsequent decades; at present the number of older people born in African, Asian and Middle-eastern countries is increasing, while the number from European countries such as Poland and Italy is declining. Available evidence clearly demonstrates that older people from culturally and linguistically diverse backgrounds have differing patterns of use with regard to aged care services, and that they also have some differences with regard to other aspects of the experience of ageing. This paper explores some of the changing demographic trends associated with cultural diversity, the characteristics and circumstances of older people from culturally diverse backgrounds, and differences in patterns of service use.

## Strength through Diversity

**Greg Mundy – CEO Aged and Community Services Australia**

Australia is a richly diverse nation that has been profoundly shaped by post-war migration. While the whole Australian population is ageing, demographics indicate that the proportion of older people from culturally and linguistically diverse backgrounds is increasing at a greater rate. By 2011 it is projected that 22.5% of over 65s will have been born overseas in countries where English is not the main language. These populations will be unevenly distributed and concentrated in Australia's capital cities. Given the waves of migration, there will be a changing demand for services as different ethnic groups age within varying locations. This adds an additional complexity to the task of policy makers and service providers in meeting this growing and variable demand.

In September 2006 Aged and Community Services Australia (ACSA) launched its National Policy Position following consultation with service providers, ethnic organisations and government departments. ACSA has been advocating for a whole of system approach where we aim to enhance the capacity of all services to respond to their local communities and therefore create a culturally competent service system. Greg will discuss the assumptions and recommendations within that policy.

## Leadership and Relationship Capital in Multicultural Mental Health

**Nicholas G Procter – Associate Professor and Academic Integrity Officer, School of Nursing and Midwifery, University of South Australia**

This presentation will focus on the challenges faced by mainstream mental health services to meet the needs of our ageing population who speak languages other than English - both now and in the future. The 'Framework for the Implementation of the National Mental Health Plan 2003-2008 in Multicultural Mental Health Australia', for example, provides a range of action areas to respond to Australia's multicultural community. But how achievable are these? The challenge for mainstream services is really about knowing the distinct group of people they currently have or are likely to have in the future, and working backwards. For mainstream mental health services to be truly effective they must deliver programs from the perspective of diverse communities - understanding how they will experience it, using their language, and incorporating their priorities. Current funding models and client load pressures within health and human services may

tempt some services to approach the problem inside out, putting a program together in ways that make life easier for the service provider rather than the consumer of mental health services. The first step is to value relationship capital: the quality time we spend with each other, understanding the way we think and respecting each other's point of view. In some instances this will mean making radical changes in the way services are designed and delivered.

## **A Life without (English) Words, and the Survival Techniques of Migrants and their Sometimes Ingenuous Skills of Adaptation to a Life without Words**

**Alice Pung – Melbourne writer and full-time lawyer**

Older non-English speaking background migrant women face great difficulties in integrating/assimilating in Australian society due to language barriers, self-esteem issues and shyness. These difficulties are accentuated by the passage of time and the fact that many migrant women work from home in low skilled professions with minimal contact with people outside their community.

As a child, I was raised by my grandmother and my mother, both of whom did not speak any English. My grandmother came to Australia in her seventies from Pol Pot's Killing Fields in Cambodia. My talk will focus on how life may be lived without (English) words, exploring the survival techniques of migrants and their sometimes ingenuous skills of adaptation to a life without words. How does a person get by day-to-day without speaking English in an English speaking country? Why do they end up doing the work that they do? Why don't they assimilate?

I will concentrate on my experiences as a cultural mediator for the women of my family, and the acts of translating and interpreting with a diminishing supply of words in my parents' native language. I will discuss the Confucian concept of filial piety, the role of elderly parents in the household and the cultural 'taboo' of nursing homes.

Finally, I will discuss the changing norms in relation to filial piety and family due to the younger generation assimilating into the dominant culture.

## **Health and Human Rights in an Ageing Society: Implications for the Care of Older People from Diverse Cultural and Linguistic Backgrounds**

**Megan-Jane Johnstone – Professor of Nursing and Director of Research, Division of Nursing and Midwifery, RMIT University**

According to the Australian Institute of Health and Welfare (AIHW), by 2011 the number of older Australians (65 years and over) who are immigrants from culturally and linguistically diverse backgrounds is projected to increase 66%, compared with just 23% for the older Australian-born population. Older Australians who are immigrants from culturally and linguistically diverse backgrounds are also expected to age more rapidly than Australian-born older people, with the number of those aged 80 years and over (the ageing aged) projected to increase from 13% (in 1996) to 22% (approximately one in five) by the year 2011. Significantly, despite a life-time of hard work (often as 'replaceable workers' in low-skilled, low wage jobs), and contributing productively to the 'commonwealth' of Australia in economic as well as social capital terms, older people from culturally and linguistically diverse backgrounds, at an aggregate level, tend to have lower average incomes, lower home ownership rates, and have fewer resources accumulated for old age compared with the older Australian-born population. Because of these and other related factors, many older immigrant Australians require help and need a range of social supports in their old age.

The implications of the above projections are far-reaching, not just for the older people concerned, but for those at the forefront of planning and delivering health and aged care services to Australia's ageing population. The significance of these projections and their implications is underscored when considered in the light of emerging evidence and increasing recognition by those in the field that people from culturally and linguistically diverse backgrounds in Australia are generally underserved by local health care and other social services, experience unequal burdens of disease, confront cultural and language barriers to accessing appropriate health care, and receive a lower level and quality of care when they do access health care services compared to the average Australian-born population. Older people from culturally and linguistically diverse backgrounds are particularly vulnerable in this regard on account of their 'double-jeopardy' status of being both old and of a 'minority "ethnic" background' - characteristics that are widely recognised as being significant predictors of health as well as quality care.

The changing demographics of Australia's ageing immigrants from culturally and linguistically diverse backgrounds, and the emerging evidence of what has been termed 'racial and ethnic disparities in health care', serve to raise important questions concerning not only how committed we are as a fair-minded nation to caring about older people, but also to acting on that caring, and in a manner that is empathic, responsible, and respectful of human dignity. It also raises fundamental questions about the 'right to health' that all people have (and which has been authoritatively interpreted by various international covenants, conventions and treaties, including the United Nations International Covenant on Economic, Social and Cultural Rights), and our correlative duty as individuals and as a community to respect and uphold this right. The aim of this paper is to briefly explore some of the key questions and related ethical issues raised by the changing demographics of Australia's ageing immigrants from culturally and linguistically diverse backgrounds and to make recommendations on how we as individuals, as a community, and as a nation can respond more appropriately and effectively to their right to health.

### **Positive Ageing as seen by Women from Small and Emerging Communities** **Melba Marginson – Executive Officer Victorian Immigrant and Refugee Women's Coalition**

While 'positive ageing' is the buzz word for most Anglo-Australian women and is catching up with older and established communities, it is an alien concept for ageing women in small and emerging communities. 'Ageing' itself is regarded negatively in some communities as it connotes undervaluing the capacity and productivity of the person.

This presentation explores the concept of 'positive ageing' among immigrant and refugee women from small and emerging communities. A number of women between the ages of 55 and 85 have been interviewed to tell their journey as immigrant and refugee women, touching in depth their new experiences of 'ageing' in Australia.

The lack of self-focus and strong sense of family dedication is evident in all the interviewees' stories. Yet, who is to judge if their high level of resilience and sense of responsibility is positive or negative to their ageing process?

## **Abstracts – Concurrent Sessions**

### **Culture and Language – Key Considerations**

#### **Diversity in the Home and Community Care Workforce: Understanding, Planning and Good Practice**

**Katherine Wositzky – Municipal Association of Victoria Culturally Equitable Gateways Project Consultant (MAV CEGS)**

The Culturally Equitable Gateways Strategy (CEGS), implemented in Victoria since 2004, has been an innovative approach to building the capacity of councils' Home and Community Care (HACC) Services, and to address the reported under-representation of elderly people from culturally and linguistically diverse backgrounds in HACC. CEGS' overall aims are to ensure an equitable gateway to, and experience of, HACC services for elderly people from diverse backgrounds.

Through CEGS, councils have developed a wide range of strategies to improve and develop their service responses to elderly people from culturally and linguistically diverse backgrounds. The capacity building of councils' HACC workforce has been one area of focus where a number of councils have undertaken innovative strategies to develop their workforce. Strategies include improvements to recruiting practices and implementing creative and formal cultural awareness training.

But who are the HACC workforce? An Audit by the Municipal Association of Victoria CEGS consultant of the HACC workforce in councils was undertaken to report on the bilingual make-up of the HACC workforce. The Audit findings indicate linguistic diversity across all areas of the HACC workforce and challenge the perception that council HACC services are provided by a predominately Anglo-based workforce.

The presentation will report on the Audit findings and discuss some of the challenges of recruiting and maintaining a diverse workforce. The presentation will promote the need for a continued and informed focus and discussion on 'diversity inclusive' workforce planning, and will provide practical examples of good practice from the workforce developments initiated through the Culturally Equitable Gateways Strategy.

## Translation and Interpreting: the Other Side of Tapestry

**Eva Hussain – Chairperson of the Australian Institute of Interpreters and Translators (AUSIT Vic/Tas)**

This paper will examine the complex structure of the translating and interpreting industry in Australia and how it applies specifically to the aged care industry, including funding, accreditation, legislation and obligations of aged care service providers to culturally and linguistically diverse residents. The presentation, based on case studies, will also touch on issues such as privacy, confidentiality, competence and accuracy, as set out in the Australian Institute of Interpreters and Translators Code of Ethic, codifying the translating and interpreting profession in Australia.

## Like My Own Family – Positive Health Outcomes through Language Matching

**Jo Krizmanic-Wilson – Aged Service Manager, Northern Migrant Resource Centre**

**Nikki Marshall – Workforce Development Project Officer, Northern Migrant Resource Centre**

Nine years ago, the Northern Migrant Resource Centre (NMRC) established a Multicultural Home Support Service (MHSS) to provide in-home and community-based support to people who were eligible for services under Home and Community Care guidelines. For the majority of this period, this service has focused on meeting the care requirements of people who are frail aged from a migrant and refugee background.

The key success factor of this service is the ability to provide community based and in-home support in a culturally sensitive manner, by matching the worker to the language and cultural preferences of the client.

Many people from migrant and refugee backgrounds are reluctant to access services due to the lack of knowledge or sensitivity towards cultural needs and a mistrust of government-funded support. However, our research has indicated that culturally and linguistically diverse communities prefer to use services where they have an established relationship with staff who can communicate in their preferred language, and where this choice is available they will use a wider range of services, thus increasing opportunities for remaining at home longer and maintaining social independence.

The NMRC has initiated the production and screening of 'Like My Own Family', an 18-minute documentary film. The film showcases the MHSS, provides a unique opportunity to step inside the world of ageing migrants and their families, to hear their voices, experience best practice first hand, and to explore why a whole of family approach, combined with language and cultural matching, best meets their needs.

This presentation will involve a screening of the film and then discuss a number of issues raised, such as:

- Positive health outcomes for ageing migrants through the cultural and language matching of the worker to care recipient preferences;
- Issues facing carers of ageing migrants in trying to access culturally appropriate respite; and
- Attracting and retaining bilingual/bicultural staff.

## Management Considerations and Cultural Diversity

### Cultural Diversity Impacts on Policy Development

**Janis Klavins – Executive Manager, Risk and Quality, Southern Cross Care (Vic)**

Within five years, one in four Victorians over 65 will be from culturally and linguistically diverse backgrounds (one in 10 in rural areas). Ignoring the needs and cultural preferences of such an important sector of the ageing community is neither sound business sense nor consistent with the vision and mission of Southern Cross Care (Vic). As such, SCC (Vic) established a Cultural Diversity Advisory Committee, which developed the SCC (Vic) Cultural Diversity Policy Statement and a Cultural Diversity Action Plan. The objective of the action plan is to provide a strategic framework for SCC (Vic)'s responsiveness to the specific needs of people from culturally and linguistically diverse (CALD) backgrounds. Three key result areas have been identified, namely:

- Access, to ensure that people from CALD and Aboriginal and Torres Strait Islander (ATSI) backgrounds have the same access to SCC (Vic) services and employment opportunities as the rest of the community;
- Service delivery, to ensure that SCC (Vic) services, where relevant, are designed and delivered in a manner that is sensitive to the needs of CALD and ATSI clients; and
- Partnerships and participation, to ensure that SCC (Vic) actively seeks out opportunities for partnerships with CALD and ATSI communities that promote mutual understanding, skills transfer and joint ventures.

Action plans developed across the organisation and for each specific site have resulted in a full review of the SCC (Vic)'s vision, mission, values, policies, procedures and practices in service delivery.

### Building Culturally Competent Aged Care

**Serena Ann – PICAC Officer, Partners in Culturally Appropriate Care (PICAC), ACT Health**

The delivery of culturally appropriate care is only possible through structuring a culturally competent organisation. Managers are responsible for delivering accessible and equitable services to clients from all cultural backgrounds and need to take a lead role in building cultural competence into every aspect of services. Managers may delegate to particular staff that are held responsible for the cultural competence of the organisation. In addition, the link between building an 'inclusive service' for clients with building an 'inclusive' work environment for staff is missed.

The Aged Care Standards and Home and Community Care National Standards provide a set of key objectives and common reference points for internal quality controls. Addressing cultural needs of clients is integral across these standards, but is not always demonstrated in the delivery of services. Addressing cultural diversity is often perceived as an additional component to existing services and may be delegated to junior staff such as diversional therapists and care workers.

A cultural competency framework will address cultural diversity in: the vision or mission of the organisation (as culturally inclusive); policies and practice guidelines; language access; cultural knowledge; community engagement; training; workplace diversity; and the physical environment.

This framework includes a process for addressing the rapidly increasing workforce diversity in aged care services and links this process with those that provide inclusive care - culturally appropriate care.

It is a management responsibility to embrace the organisational needs for cultural competence. Such responsibility includes the training of staff in issues of inclusive practices related to workplace diversity, as well as inclusive practices of staff-to-clients/residents and not to delegate that responsibility to junior staff, if culturally appropriate care is to be the result.

## Meeting the Challenges of Cultural Competence at the Organisational Level – Responding to Cultural and Linguistic Diversity

**Sophie Diamandi – Lecturer and Manager of the Cultural Diversity Project, School of Social Work and Social Policy, University of South Australia**

**Gosia Skalban – Multicultural Consultant, Metropolitan Domiciliary Care**

Recent attention to cultural competency in the human services has focused on the development of individual staff skills, knowledge and awareness. As a beginning process this is vital in working towards increased cultural competence at the organisational level. Support for organisations to become more culturally competent in addressing the needs of culturally and linguistically diverse communities need to be put into place. Support for these strategies include addressing recruitment and selection procedures, re-evaluating policies, procedures and systems in place, management and supervisory strategies, decision-making processes and consultative procedures. ('Culturally Competent Practice - A Framework for Understanding Diverse Groups and Justice Issues': D Lum 2007.)

This presentation will explore the importance of clearly defining cultural competence, recognising the importance of working towards a cultural competence framework, identifying strategies to put into place to work with organisations in the ageing sector to embed cultural competency across organisations in order to work with staff at all levels and with all professional streams within the organisation to ensure that all staff are trained in cultural competency. This strategy includes the provision of training in cultural competency, re-viewing the policies, procedures and systems within the organisation to ensure these are culturally inclusive and culturally appropriate. Other areas of focus need to include human resource issues, including mono-cultural recruitment and selection procedures, support for retention of designated multicultural bilingual staff, increasing the representation of these staff within the organisation, incorporating a strategic plan that embeds changes from top down to bottom up in the organisation in relation to cultural competence.

Finally, a model of cultural competence will be discussed and a case example of working strategically with Metropolitan Domiciliary Care in South Australia will be presented to demonstrate the agency's commitment to implementing a phased strategic plan in achieving organisational cultural competence.

## Understanding Community Needs

### Embracing Culture and Diversity; Honouring Individual and Community

**Nicky Golan – Manager of Client Services and Social Work, Sir Moses Montefiore Jewish Home**

As migrants undergo a complex and multi-layered journey to a new home in a new country, so too do Montefiore residents as they leave their own family homes and enter our residential community home.

Our Randwick Montefiore campus officially opened in November 2006. In two months we have admitted over 60 residents to four specialised units: hostel, nursing home, and a low and high-care dementia unit.

Our home is ethno-specific and caters for the Sydney Jewish community. One may assume this results in a homogenous resident population, however our residents are extremely diverse.

All our residents share one commonality - Judaism - but how they each express or manifest their religion and spirituality is unique and varied. They come from every corner of the globe. This global melting-pot delivers a myriad of cultures, histories and experiences. From language and recipes to entertainment and custom, our residents represent diversity.

As our residents undergo the complex, emotional journey of moving into residential care, many face and revisit their traumatic pasts, history's atrocities and other personal traumas. Others experience tremendous and compounding loss.

At Montefiore we care for the whole resident and all of their significant others. Our care team is holistic and multidisciplinary. We strive to improve and enhance their quality of life and support each resident in their unique situation and journey.

This paper will explore how we support our resident's cultural diversity, how we facilitate their communication and language, and how we encourage inclusive practices.

From staff training initiatives to resident support forums, this paper will illustrate creative and innovative ways we care for and support our residents.

## Overlooked and Under-served - Why is South Australia's German-born Older Population Under-Represented in Aged Care Support Services?

**Christa Michaelis – Project Officer, Multicultural Programs, Resthaven**

While having the same need for aged support services as their peers, the German-born population is under-represented in aged services in South Australia and nationally ('HACC Program Minimum Data Set 2003-2004 Annual Bulletin': Department of Health and Ageing, 2005).

The older German-born community is the second largest group of people from non-English-speaking backgrounds in South Australia; currently numbering approximately 4000, this group will reach 5600 by 2011 ('Projections of Older Immigrants - People from Culturally and Linguistically Diverse Background, 1996-2026, Australia': AIHW 2001).

Based on this data and Resthaven's commitment to advocacy and culturally responsive practice, a partnership was formed with the South Australian German Association (SAADV) to apply for Department of Health and Ageing funding through the Community Partners Program (CPP).

The funding supported 'Pathways for German-speaking Seniors' project research to establish the needs and expectations of the target cohort in relation to aged support services with the aim of promoting and facilitating increased access by German-speaking seniors to aged care.

Broadly, findings indicated that the target group's expressed needs were for services to be provided by German-speaking personnel with cross-cultural understanding in a culturally responsive environment - not unlike many other culturally and linguistically diverse populations.

Beyond these findings, however, the project has identified misapprehensions shared by government policy makers, service providers and the community itself as major reasons for the lack of service uptake by the German-speaking community.

While German-speaking community groups and individuals are increasingly aware that the care support needs of their community's seniors are not being met, the question remains: What attitudinal, sociological, experiential and cultural issues impact upon the decision of people from the target cohort to engage or not engage with aged care?

The paper will:

- Discuss the notion of cultural identity within ethnic communities;
- Question the value of census data as an accurate reflection of community need; and
- Suggest strategies to facilitate community capacity building as a means to communicate needs.

## Responding to the Needs of an Ageing Greek Community

**Tina Douvos-Stathopoulos – Deputy Executive and Manager Community Services, Australian Greek Welfare Society**

**Stavroula Mavroudis – Manager Aged and Disability Services, Australian Greek Welfare Society**

Australian Greek Welfare Society (AGWS) is an ethno-specific organisation providing services to the Australian Greek community for more than 34 years. During this time AGWS has developed culturally and linguistically appropriate services and responses to community needs, as well as increasing its capacity to deliver services from locations across metropolitan Melbourne. AGWS continues to be the fundamental and traditional point of entry for access to advocacy and service provision to the Greek community.

AGWS has successfully delivered and expanded aged care services catering to the rapidly ageing Greek community across metropolitan Melbourne. There are approximately 55,000 Greece-born people in Victoria, with the majority settling in metropolitan Melbourne, particularly in the north and south eastern regions of Melbourne. Of these, 35,134 Greek-speaking people are aged over 60 and 13,141 aged over 70.

There are many emerging and residual issues that still impact on the settlement experiences of the Greece-born population. As a result, there continues to be a demand for services for this generation of Greeks, particularly in relation to health and aged care. These issues primarily include mental health and in particular depression, elder abuse, carer support, financial disadvantage, and the need for appropriate recreational activities that maximise community participation. The increasing need for community-based, as well as residential aged and disability-specific services, has been widely documented, and is an issue that has dominated much of the activities undertaken through the AGWS in recent years.

The pivotal role performed by the AGWS in addressing the abovementioned issues is increasingly being defined through current and evolving service provision arrangements within the community services sector. Much of the informal service provision that is evident within the organisation is, however, still not formally recognised. The need for ethno-specific organisations to be formally and appropriately remunerated to perform these roles is paramount for the future delivery of culturally and linguistically relevant services to an ageing community.

## Culture and Language – Key Considerations

### Interpreting Older Australians' Needs – Cultural and Linguistic Perspective Izabela Winczewski – HACC Access Officer, Australian-Polish Community Services

By 2011, one in five people aged 80 and over will come from a culturally and linguistically diverse background. If we care about fairness and equity in our country it is important that we understand all ageing Australians. It's about communication.

In practice it means ensuring that the professionals at ground level have the resources available and the knowledge on how to access them to best meet the needs of their culturally and linguistically diverse clients.

In a situation where a doctor is asking an elderly patient a crucial question about the life-support option available to them, and if that patient is not proficient in English, let's make sure there is a culturally sensitive professional interpreter who will render the question the way it is intended.

Working with professional interpreters and translators is of crucial importance for all service providers, however many service providers are still very reluctant to use professional interpreters.

Cultural awareness training for service providers is also vital. Not only can it prevent unwelcome situations, such as offending and alienating non-English speaking background clients, it also sends a message that we want to provide the best care and services responsive to their needs.

It would be a very effective use of resources if ethnic organisations were allocated funds to develop training programs for interpreters on services available to their elderly community members, making access more equitable.

Ethno-specific organisations, such as Australian-Polish Community Services, are invaluable sources of cultural and linguistic information. They can provide information on services and specialist professionals who speak a particular language, offer consultancy and training sessions to facilitate the dialogue between service providers and ageing culturally and linguistically diverse Australians.

### Aged Care Service Initiatives that Focus on Communication and Language Angelika Tyrone – Manager, Ethnic Link Services

This presentation will discuss some of the issues and complexities regarding communication, language and the cultural aspects of language for aged people of culturally and linguistically diverse (CALD) background. It will outline the responsibilities of service providers to ensure that there are appropriate language services or communication capacities to enable the aged to communicate.

The presentation will present a number of current practice issues related to language and communication for people of CALD background, in particular those who do not have high English language proficiency or those who revert to their primary language during ageing.

In addition, there will be a discussion regarding the development of various models of service for people of culturally and linguistically diverse background and the need to be client focused. The role of advocacy for clients will also be discussed.

The presentation will provide examples of several aged care initiatives that are culturally and linguistically appropriate, including several innovative service models in community and residential aged care which are ethno-specific and use bilingual/bicultural workers. One such service employs 47 bicultural staff who speak some 32 different languages in the process of enabling clients to access services. The service bridges gaps in communication as well as gaps in service provision, the latter requiring the necessity to work collaboratively with other service organisations.

### **Blossoms from Babel: Maintaining Identity Integrity for Ageing Migrants in a High-level Care Setting**

**Pamela Freeman – Lifestyle Coordinator, the Smorgon Family Nursing Home, Jewish Care**

Jewish Care is the major provider of support for members of Melbourne's Jewish Community. The Smorgon Family Nursing Home is a high-level care facility with 90 residents. While all the residents are Jewish, they come from culturally and linguistically diverse backgrounds. Jewish Care's commitment to these people is guided by four values: *mishpacha* (family); *chesed* (kindness); *zedakah* (charity); and *derech erez* (respect for each person's individual needs).

The presentation will focus on one floor of the nursing home where 30 people from eight distinct linguistic and cultural backgrounds live (Romanian, Hebrew, Russian, Ukrainian, Polish, Hungarian, English and the Jewish cultural language, Yiddish). The people are aged from 62 to 96, and share a range of complex physical and/or cognitive health issues.

The staff members working on this floor are also from culturally and linguistically diverse backgrounds (Australia, Poland, Russia, El Salvador, Greece, China and the Philippines). The necessity for good communication is clear, and at a multi-disciplinary team level - from cleaners through to unit managers - individuals have worked hard and enthusiastically to learn effective means of communication to better meet the immediate and long-term needs of our residents.

An exemplary aspect to this is the way staff members have built their language acquisition literally 'on the job', involving residents themselves in teaching them to speak their language. This initiative has deepened inter-personal relationships between staff and residents through a reversal of roles, from the resident being in need of almost total care, to being the expert and providing help to staff 'in need'. It has enhanced self-esteem and a sense of self-worth, as our residents become the teachers.

From a lifestyle perspective, resources on the market are inadequate for our needs, rarely reflecting the diversity of Australia's long-existing multicultural population. Recreation staff members have developed their own resources and strategies to provide cultural and language appropriate programs.

Augmenting this is Jewish Care's individual-focused approach to care, which directly influences internal policy development. This has seen staff education become a key strategy, along with ongoing processes of self-evaluation to continuously improve the quality of life and the emotional wellbeing of our residents.

## Future Challenges for Aged Care Services

### 'A New Strategy for Community Care - The Way Forward'

**Tracey Duffy – Director of Community Care Review Section, Community Care Branch, Australian Government Department of Health and Ageing**

This presentation by the Department of Health and Ageing (DoHA) will provide timely and useful information about 'A New Strategy for Community Care - the Way Forward'.

'A New Strategy for Community Care - the Way Forward' outlines reforms to build on the strengths of community care services. In line with the conference theme, this initiative acknowledges the challenges facing the community care sector and the importance of meeting the aged care needs of our culturally and linguistically diverse community. The reforms are being guided through appropriate consultation with key organisations representing special needs groups as it is imperative that the reforms respond flexibly to, and have positive outcomes for, special needs groups, including people from culturally and linguistically diverse backgrounds.

This presentation will provide delegates with information about the progress of reforms outlined in 'A New Strategy for Community Care - the Way Forward'. Delegates will be updated on key areas of progress, including developments with assessment and eligibility for services, access points and the review of DoHA-funded subsidy and services. During the presentation, delegates will also have the opportunity to provide feedback to help guide the process towards culturally inclusive reforms.

## Dementia Has No Barriers

**Helena Kyriazopoulos – Convenor, National Cross Cultural Dementia Network, Alzheimer's Australia, and Access and Equity Unit, Alzheimer's Australia South Australia**

Dementia is a progressive and disabling condition that affects a person's memory, thinking, personality, judgement and social skills. Dementia is caused by numerous diseases, the most common being Alzheimer's disease, followed by vascular dementia, dementia with Lewy bodies, Parkinson's disease and a variety of others. Dementia can be a long journey for all affected by the disease.

Dementia has no barriers; ethnic communities are not insulated from this disease. In 2006 Access Economics was commissioned by Alzheimer's Australia at the request of the National Cross Cultural Dementia Network to estimate the prevalence and incidence of dementia for people from culturally and linguistically diverse backgrounds in Australia. The report only provides a 'snapshot' and estimates that more than 12 percent of Australians with dementia - around one in eight - do not speak English at home, predicting that these numbers will grow by the year 2050. This growth in people and families affected by dementia will ultimately lead to greater demand for culturally and linguistically appropriate services.

Culturally and linguistically diverse communities continue to face barriers to accessing services; factors such as language, access to transport, family obligations, social isolation, financial and lack of consideration for the needs of ethnic communities in service delivery effect the uptake of mainstream services.

Alzheimer's Australia has called for partnerships between mainstream service providers and ethnic communities to meet the cultural and linguistic needs of people from diverse backgrounds. The Alzheimer's Australia National Cross-Cultural Dementia Network, which is funded by the Australian Government, has proposed a range of strategies at national, state and territory levels to promote access to dementia care services for those who come from non-English-speaking backgrounds. Some of these include the:

- Availability of sensitive screening tools that take into consideration culture and language and also assist in diagnosis;
- Research into cultural factors and dementia; and
- The location of Cross-Cultural Coordinators in Alzheimer's Australia offices to partner with ethnic community organisations in promoting awareness of dementia, delivery of programs and access to appropriate services.

The presentation will explore the dementia 'epidemic' and the strategies that Alzheimer's Australia has set in motion in addressing the diverse needs of culturally and linguistically diverse communities.

## Closing the Information Gap: Communicating with Elderly People from Culturally and Linguistically Diverse Backgrounds

**Klaudia Vainshtein – Senior Project Officer, Education and Training, Centre for Cultural Diversity in Ageing**

The Australian ageing population is growing and becoming more diverse. The challenge for aged care providers is to meet the needs of the diverse population. This means developing awareness, knowledge and skills that encourage effective communication.

In fulfilling an organisation's communication strategies, reaching out to culturally and linguistically diverse (CALD) elderly should be part of a comprehensive service to improve older people's quality of life and further their inclusion into society.

One of the strategies in improving communication between aged care providers and their clients is information dissemination. Information is a key to informed decision-making.

The Centre for Cultural Diversity for Ageing in the last two years has delivered 100 information sessions to more than 3300 CALD elderly people around Victoria, as well conducting numerous community and aged care industry consultations.

This presentation will focus on practical information to enable aged care services to improve their communication with clients from different cultural and linguistic backgrounds. It will also include findings from the extensive work done by the Centre, with a focus on the challenges that CALD elderly people and aged care service providers are facing in the foreseen future.

## Role of Partnerships and Collaboration in Service Planning and Development

### Meeting the Aged Care Needs of a Culturally Diverse Community - Board Perspective

**Tony Crivelli – Chairman of Villaggio Italiano**

Villaggio Italiano is the largest multicultural aged care residential aged care service provider in the Australian Capital Territory. While the main group of residents in 2006 were from Australian background, almost half of the residents were overseas-born. Overseas-born residents at Villaggio came from 20 different cultures including Italy, China, Ukraine, Poland, Latvia, the Netherlands, Vietnam, Burma, Finland, Malaysia, Czech Republic, Germany, Greece, Iraq, Lithuania, the Philippines and Sri Lanka. Care for this diverse group of residents constitutes a significant challenge for Villaggio and reflects the emerging situation across the Australian aged care industry.

The Australian Institute of Health and Welfare projects a 66% growth rate for culturally and linguistically diverse (CALD) groups by 2011. By 2021, 22.8% of the older population over 65 will be from CALD groups. In addition, the dominance of the CALD group by European cultures will eventually give way to people with Asian cultural associations. The largest CALD groups currently are from Italy, Poland, Germany, Greece and the Netherlands. The Chinese will soon replace the Poles and by 2026 the Dutch will no longer be in the top five CALD groups, but the Vietnamese will.

In these circumstances, Villaggio's Board and senior management have been examining long-term strategies that will improve and enhance the organisation's capacity to deliver high quality residential and community aged care services to these CALD clients.

The presentation will outline some of the multicultural strategies Villaggio Italiano might adopt, including identification and understanding of the needs of culturally and linguistically diverse older people, the recruitment of appropriate bilingual staff, and a greater focus on delivering aged care services into people's homes.

## Aged Care Service Initiatives

### Fiona Dunt – Asian Partners in Aged Care Coordinator, Helping Hand Aged Care

Helping Hand Aged Care is a not-for-profit South Australian organisation. Helping Hand Aged Care at Parafield Gardens is situated in northern Adelaide and provides residential care for more than 100 residents, with 100 staff and 75 volunteers. The facility prides itself on being a leader in innovative service development. Our facility is unique in that it is part of a wider community that is diverse in age, cultural backgrounds and experience.

In December 2005, Helping Hand received a \$54,000 grant from the federal Department of Health and Ageing under the Community Partners Program. The purpose of the grant was to assist older persons aged 65 and over from culturally and linguistically diverse (CALD) communities to access appropriate aged care services and to raise the capacity of residential and community-based services to provide culturally sensitive care.

An innovative and exciting alliance between Helping Hand Aged Care, the Cambodian, Vietnamese, Filipino and Wat Lao communities and Multicultural Aged Care was established - Asian Partners in Aged Care (APAC). Our partnership is very much based upon collaboration, friendship and trust with shared goals and visions linked to improving and reducing barriers to access to aged care services. Together we are increasing communities' knowledge of aged care services, developing resources and training packages. A pilot in cultural awareness training has been conducted at Helping Hand Parafield Gardens, with a second workshop being planned in consultation with the University of South Australia, Multicultural Aged Care and the community to promote an all-inclusive learning environment with the aim of increasing our staff's capacity to provide culturally sensitive care.

Our initiative to employ Peer Support Workers (Nhey Hean, Trung Tran, Tessie Holmes and Peng Keo-manivong) from each of the four Southeast Asian communities has proven to be a highly successful strategy. Information about aged care services is disseminated directly to older people by the Peer Support Workers through home visits, educational seminars and visits to Helping Hand Aged Care facilities at Parafield Gardens, Mawson Lakes and Ingle Farm. Nhey, Trung, Tessie and Peng are the critical link with community, having established a high level of trust and rapport through their understanding of community, fluency of language and alliance with Helping Hand Aged Care.

Helping Hand Aged Care has been able to help develop and build the capacity of Peer Support Workers through our extensive knowledge of the aged care industry, facilitation of educational workshops on primary health issues and other topics of interest, and via access to a wider network of mainstream service providers. Culturally significant events have also been jointly celebrated with elders and Helping Hand residents.

Community artists (Katie Harten, Emma Fry and Raylene Snow of Marra Dreaming) have recently been engaged to work collaboratively with Peer Support Workers, elders, Helping Hand Aged Care residents and Parafield Gardens High School students to design five community banners. Banners were officially launched on Harmony Day 21st March 2007 - promoting a visually empowering connection with community, and celebrating our successes as a culturally diverse society.

Our presentation will be on the subject of aged care service initiatives, based on our Asian Partners in Aged Care model. The presentation will incorporate background information (as outlined above), look at successful communication strategies (Peer Support Workers model), and will focus on the sharing of knowledge and developing resources. It will be an extremely visual presentation, enhancing the benefits and friendships derived from our partnership.

## Partnership in Culturally Responsive Assessment

**Nelum Buddhadasa – Culturally Equitable Gateways Strategy Project Officer, City of Port Phillip**

**Ania Sieracka – CEGS Sectoral Project Officer, Ethnic Communities’ Council of Victoria**

The aim of this presentation is to introduce an overview of the trial project that explored the issue of culturally responsive assessment in community care services delivered by the City of Port Phillip. It was conducted in collaboration with four ethnic organisations and triggered by the necessity to respond in new, innovative ways to the demand of the elderly service users from culturally and linguistically diverse (CALD) communities for culturally and linguistically appropriate assessment. The trial has potential to be utilised to influence any policy developments in the area of cultural diversity in ageing at the state and federal levels.

The trial, resourced by the Culturally Equitable Gateways Strategy, consisted of a number of home-based assessments. These were delivered by assessment workers from the council and, depending on the background of service users, supported by ethnic workers from Greek, Russian, Jewish or Polish community organisations. The ethnic workers who participated in this process drew on their extensive cultural and linguistic knowledge and awareness of the services system. In this capacity they supported assessment officers and the CALD elderly who were being assessed. There were two partnership models adapted for the purpose of this trial. One engaged the ethnic workers in the capacity of language aids and the other model engaged interpreters to deliver this task.

The project was a pragmatic response to longstanding concerns about providing access and equity by council community care services and resulted in some clear tangible outcomes. They were numerous and encouraging to the involved organisations and the wider field of the ethnic aged care, and included:

- Delivery of 28 assessments that were culturally and linguistically responsive;
- Successful uptake and retention of services by elderly people from CALD communities;
- Partnership building amongst organisations representing two sectors (the project established sustainable and generous partnerships between organisations and provided a good model for working across organisations);
- Capacity building, formalising activities through protocols, setting up structural frameworks to enhance partnerships; and
- Mentoring of the council’s team leaders and assessment officers by ethnic sector staff in exploring good practice in assessment and care planning.





Based in Victoria, the Centre for Cultural Diversity in Ageing is supported by the Australian Government Department of Health and Ageing through the Partners in Culturally Appropriate Care (PICAC) initiative, which aims to:

- Improve partnerships between aged care service providers, culturally and linguistically diverse communities and the Department of Health and Ageing; and
- Ensure the special needs of older people from diverse cultural and linguistic backgrounds are identified and addressed.

The PICAC initiative provides funding to eight organisations, one in each state and territory:

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