Disability and Aboriginal Cultural Competency Project Report

An EMR MetroAccess and EACH Project

2013

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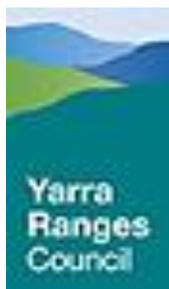
Disability and Aboriginal Cultural Competence Project Report

Background

Aboriginal and Torres Strait Islander people are valued members of Eastern Metropolitan Region (EMR) communities. The EMR consists of the local government areas of Boroondara, Knox, Manningham, Maroondah, Monash, Whitehorse and Yarra Ranges.

In the spirit of reconciliation the partnering Councils and EACH acknowledge the Wurundjeri people as the traditional owners of the land and pay respect to elders past and present. The Aboriginal and Torres Strait Islander population across the EMR is diverse; it includes both traditional owners and people from numerous Aboriginal and Torres Strait Islander communities from around Australia.

Local history includes the establishment of Coranderrk Mission in Healesville which operated from 1863 until 1924. The Aboriginal Protection Board handed over Coranderrk Station to the Soldiers Settlement Scheme in 1950 which resulted in some people being transferred to Lake Tyers. Members of the Stolen Generation were housed at Box Hill Boys Home as well as other sites within the EMR.

A history of dispossession, removal of children, and other discriminatory government policies and non inclusive practices, has lead to many Aboriginal and Torres Strait Islander people to mistrust organisations and services particularly those connected to government. Past experiences, fear and mistrust has lead to self exclusion from services. Government policies and initiatives recognise the under representation of Aboriginal and Torres Strait Islander people in a range of service streams including disability and community health services.

Relationship building requires understanding of culture and experiences. Active engagement and outreach with families, communities and organisations to ensure information is accessible, and that trust can be built through respectful relationships and patience over time is the pathway to developing services that are responsive to the needs of Aboriginal and Torres Strait Islander people with a disability (Dept of Human Services, 2011). It is important that services are culturally competent, welcoming and accessible to Aboriginal and Torres Strait Islander people with a disability to ensure each person can access the services and supports which best meets their interests and needs.

The Centre for Cultural Competence (http://cca.com.au) articulates that cultural competence is a change process that has both an organisational and a staff lens. At an organisation level it focuses on the attributes of the service provider and service provision. At staff level it challenges individual assumptions, values and beliefs to achieve better service outcomes and performance. Cultural competence is defined as "a set of congruent behaviours, attitudes and policies that come together in a

system or agency or among professionals and enables that system, agency or those professionals to work effectively in cross-cultural situations". As part of the process the "professional continually strives to achieve ability and availability to effectively work within the cultural context of the client" (Centre for Cultural Competence).

The ability to access services and supports is critical to the health and wellbeing of people in the community. It is important to remember that the experience of people with a disability including Aboriginal and Torres Strait Islander people with a disability is unique to the individual and or their family. With this in mind it is important to consider the flexibility and responsiveness of the broadest range of service and support providers. Whilst some people with a disability may require access to specialist support services many people with a disability are able to access community based services. Similarly Aboriginal and Torres Strait people may prefer to access services that are culturally specific in preference to mainstream services. All Aboriginal and Torres Strait Islander people with a disability need access to culturally competent services (Dept of Human Services, 2011).

Aim

Imbedding cultural respect and understanding into policy, service delivery and people management to improve outcomes for Aboriginal and Torres Strait Islander people their carers and families takes commitment and time. The Disability and Aboriginal Cultural Competence workshops present an opportunity to share ideas, experiences and begin discussions.

The Disability and Aboriginal Cultural Competency Workshops aim to provide opportunities for a broad range of local community and disability services to build their capacity to be responsive to the needs of Aboriginal and Torres Strait Islander people with a disability.

Policy Connections

The Disability and Aboriginal Competency Training Project relates to the objectives of the following Federal, State and Local Government policy, plans and strategies.

Diagram 1: Federal State and Local Government Policy and Plans connected to this project

Origin	Policy or Strategy	Related Objective
Federal Government	Closing the Gap	Overarching plan to reduce the disadvantage experienced by Indigenous people.
State Government	Koolin Balit: Victorian State Government Strategic Direction for Aboriginal Health 2012-2022	Improve access to services that meet the needs of Aboriginal people across the state.
	Victorian Aboriginal Affairs	Ensuring access to services that meet

	Framework 2013-2018	the needs of Aboriginal people across the state
	The Indigenous Urban and Regional Strategy	Improved access by Indigenous people to better coordinated and targeted services
	Strong Culture, Strong Peoples, Strong Families: Towards a safer future for Indigenous families and communities 2008-2018	Cultural integrity/respect and cultural safety within Indigenous and mainstream services
	Eastern Metropolitan Closing the Health Gap Plan 2009 - 2013	Embed cultural competency in EMR health and family violence service providers
State Government and Local Government partnership	MetroAccess – Community Building Program	To build and strengthen the community's capacity to provide support to people with a disability and their families.
Boroondara City Council	Access and Inclusion Plan 2013 – 2017	Engage with the community to influence attitudes and build knowledge on local access and inclusion needs
Knox City Council	Knox Access and Inclusion Plan 2011-2015	Leadership and Advocacy: Promote the benefits of improving access and inclusion to the local community including the business community
Manningham City Council	Reconciliation Action Plan 2012- 2014	Ensure Council and community service providers are culturally aware and competent
	Disability Access and Inclusion Plan 2013-2017	Explore employment, training and volunteering opportunities within Council and in the broader community to reduce the barriers experienced by people with a disability
Maroondah City Council	Disability Policy and Action Plan 2008- 2012	Community Attitudes and Awareness: Ensure that Council is a community and business leaders in encouraging and supporting inclusive practices to the range of programs services and opportunities on offer
Manningham City Council	Reconciliation Action Plan 2012-2014	Ensure Council and community service providers are culturally aware and competent
	Disability Access and	Explore employment, training and

	Inclusion Plan 2013 -2017	volunteering opportunities within Council and in the broader community to reduce the barriers experienced by people with a disability
Maroondah City Council	Disability Policy and Action Plan 2008 – 2012	Participation and Inclusion: Ensure that Council is a community and business leader in encouraging and supporting inclusive practices to the range programs, services and opportunities on offer.
Whitehorse City Council	Whitehorse Reconciliation Action Plan 2011 -2015	Respect: Education around culture, traditions and cultural competency
	Whitehorse Disability Policy and Action Plan 2012-2016	Changing Attitudes: Work with disability and local community organisations to understand and address issues facing people with a disability, their families and carers.
Yarra Ranges Shire Council	Reconciliation Action Plan 2013 -2023	Improve service access including access to Council services for Indigenous families
	Disability Action Plan 2009 -2012	Improving staff and wider community knowledge, awareness and capacity in relation to disability issues

Demographics of the Eastern Metropolitan Region

The following statistics are based on 2011 Census information Census information indicates that 0.4% of the EMR population identifies themself as Aboriginal or Torres Strait Islander which is slightly lower than the percentage for metropolitan Melbourne (0.47%) and, lower again than the average for all of Victorian (0.74%).

The percentage of population varies between local government areas, from 0.14% for Boroondara and Manningham Council through to 7% Yarra Ranges Shire Council. Diagram 2 depicts the percentage of population by local government area who identify themself as Aboriginal or Torres Strait Islander.

The percentage of people with a disability within the population of people who identify as Aboriginal or Torres Strait Islander is also depicted in Table 1. Comparison with the Victorian average (6.9%) and metropolitan Melbourne (6.6%) indicates that 4 of the local government areas have higher averages than Metropolitan Melbourne and 3 local government areas have higher averages than the Victorian average of people with a disability who also identify as Aboriginal or Torres Strait Islander.

Diagram 2: Percentage of population by LGA that identify as Aboriginal or Torres Strait Islanders and presence of disability

Local Government Area	Percentage of Population identifying as Aboriginal or Torres Strait Islander	Percentage of people with a disability within the population of people identifying as Aboriginal or Torres Strait Islander
Boroondara	0.14% (221 people)	4.7%
Knox	0.37% (544 people)	4.8%
Maroondah	0.41% (412 people)	7.0%
Manningham	0.14% (152 people)	9.4%
Monash	0.22% (355 people)	8.0%
Whitehorse	0.22% (315 people)	6.8%
Yarra Ranges	0.7% (971 people)	5.9%

The Partnership

This partnership and the workshops build on the work undertaken by Christine Mulholland, MetroAccess Officer at Darebin City Council.

The project partnership evolved from discussions between the Family Relationship Support for Carers (EACH) and MetroAccess (Whitehorse City Council) who had both attended workshops offered through Darebin City Council. Recognising the value of the information provided through the workshops and the opportunity to build the capacity of local organisations discussions were held to expand this opportunity across the region. In addition to EACH, MetroAccess Officers from the following Councils partnered in this project:

- Boroondara City Council
- Knox City Council
- Manningham City Council
- Maroondah City Council
- Whitehorse City Council
- Yarra Ranges Shire Council

MetroAccess Whitehorse City Council and EACH took lead roles in administration and organisation of workshop sessions and liaison with the facilitator. EACH managed the financial and registration aspects of the project. Project costs were divided amongst participating organisations.

MetroAccess

MetroAccess is a statewide partnership initiative between the Victorian Department of Human Services and local government. The aim of MetroAccess is to build the capacity of local communities across metropolitan Victoria so that they are more welcoming and inclusive of people with a disability. Regional and Rural Victoria are supported through RuralAccess and deafaccess officers.

The objectives of MetroAccess are:
- To mobilise and support people with a disability to optimise participation in the life of their local community
- To build and strengthen the community's capacity to provide support to people with a disability and their families
- To facilitated integrated local planning and coordination which engages and involves people with a disability and their families, disability service providers and community organisations
- To work with existing disability service providers to enhance their capacity to provide relevant and appropriate supports in the community
- To improve access to information about relevant services and community activities available to people with a disability in their communities.

EACH and Family Relationship Service for Carers (FRSC)

EACH, as an organisation has a strong commitment to assisting Indigenous families and the "Closing the Gap" strategy. This is underpinned by the organisational strategic plan and the organisational access strategy. A priority access policy is in place to assist Indigenous families to access all services offered by EACH. EACH works to enhance and promote health, wellbeing and social inclusion across a range of communities, prioritising people who are vulnerable and disadvantaged with the highest needs.

Victoria has 11 Aboriginal Health Promotion and Chronic Care (AHPACC) partnership sites. The AHPACC partnership initiative supports Aboriginal community-controlled health organisations (ACCHOs) and community health services to work in partnership to develop and deliver local services and programs that prevent and manage the high prevalence of chronic disease within Aboriginal communities.

The AHPACC partnership program for Melbourne's Eastern Region is based on a primary partnership between EACH and Mullum Mullum Indigenous Gathering Place to provide priority access to primary health care services for the Indigenous community and has links to other Aboriginal and mainstream health services and organisations.

EACH has links with the AHPACC program networks in the Eastern region and will be involved with the newly established Aboriginal Health Reference Group.

The Family Relationship Support for Carers (FRSC) offered through EACH is a statewide service providing counselling, mediation and future planning support to family members caring for someone of any age, with any of the following disabilities:
- Intellectual
- Physical
- Neurological
- Autism Spectrum Disorders
- Sensory
- Acquired Brian Injury
- Mental Illness

The Facilitator

To ensure consistency with the Darebin workshops the project partnership engaged Karen Milward to facilitate the workshops. Karen owns and operates Karen Milward Consultancy Services.

Karen is a Yorta Yorta woman who was born and raised in Melbourne. Karen has developed extensive networks within the Victorian Indigenous community and Indigenous communities nationally as well as within State and Commonwealth Government Departments and agencies in Victoria. She has extensive consulting experience within all levels of government and with Indigenous communities and organisations on a broad range of initiatives – especially those targeting Indigenous communities.

Karen is a strong advocate for developing culturally appropriate solutions to the issues confronting Indigenous people, which empower individuals and communities so they can confidently and effectively move forward. As well as being a co-Chairperson of the Indigenous Leadership Network Victoria, Karen is the Chairperson of the Mullum Mullum Indigenous Gathering Place and the Eastern Indigenous Healing Service.

Workshops

Two Disability and Aboriginal Cultural Competence workshops were held in the EMR on 30th May (Whitehorse) and 12th June (Maroondah).

Each workshop included:
- Welcome to Country
- Gathering of participants expectations
- History from an Aboriginal Perspective
- Aboriginal Communities today
- Disability in the Aboriginal community
- Mechanisms to support engagement and understanding cultural differences
- Exploring best practice.

A copy of the workshop agenda is provided in the appendix of this report. Pre and post evaluation surveys were completed at each workshop.

The Disability and Aboriginal Cultural Competence workshop flier was distributed through MetroAccess and EACH networks. In addition the flier was lodged on the RIDE and DARU updates for a two week period. A copy of the flier is in the appendix of this report.

Participants and Organisation Services

The workshops were specifically targeted to disability, health and community service staff working in intake, HACC, case management, personal care, advocacy, community development and the like. To facilitate good communication and the

sharing of ideas during workshops session's, participant numbers were intentionally kept to a maximum of 35 participants.

The pre and post evaluation surveys identified the following data. A total of 61 pre evaluation and 63 post evaluation forms were received; copies of the evaluation forms are located in the appendix of this report.

Attendance

A total of 69 people from 27 different community, disability, and local government organisations attended the two workshops. Two private counselling services connected to the Family Relationship Service for Carers program also attended. People attending were asked to identify their organisational roles which lead to 26 and 23 different roles being identified at respective workshops. Roles varied from volunteer, student on placement, allied health professionals, teachers, support workers, team leaders and program managers.

Services Offered

Anticipating the range of organisations and diversity in position titles alone may not provide insight into the work undertaken through organisations; participants were asked to nominate the services offered by their organisation. Diagram 3 combines the services offered by organisations attending both workshops. There has been no attempt to combine responses where more than one person from an organisation attended the training as it was noted that people working in different streams within an organisation reported different services. It was thought that the person's responses in some instances may relate to the program they work within rather than a whole of organisation response. Community Access and Information & Referral Services were the most often reported services offered through participant organisations. Accommodation and Early Intervention Services were the least reported services identified by participants.

Diagram 3: Services Offered through Participant Organisations
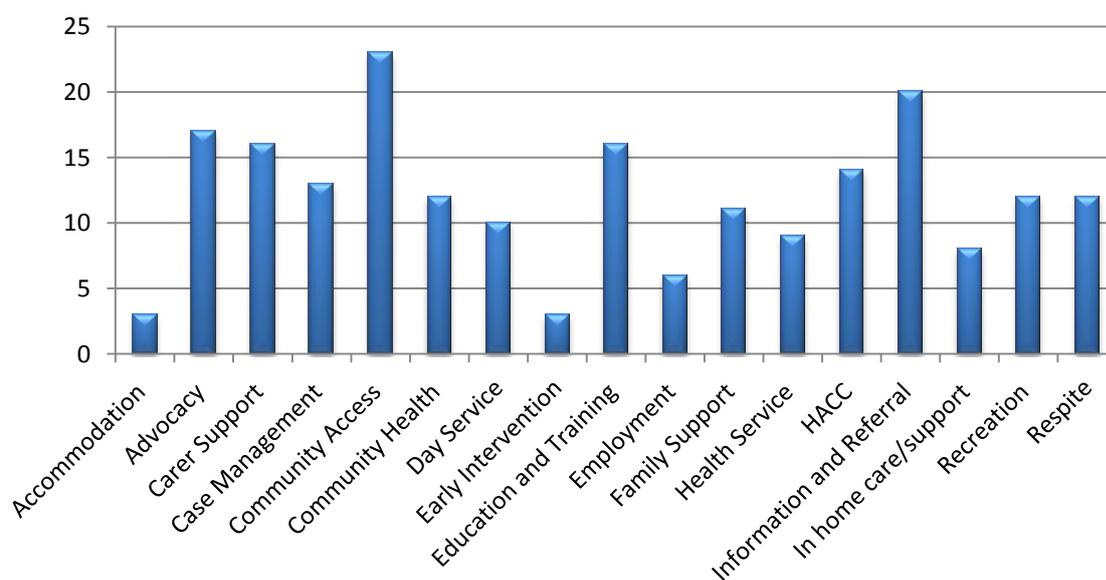
Participants were asked to identify whether the organisation currently provided services to Aboriginal and Torres Strait Islander clients and whether this occurred in mainstream or targeted service provision, Diagram 4 displays the responses. Most people identified that they currently provide services to Aboriginal and Torres Strait Islander people.
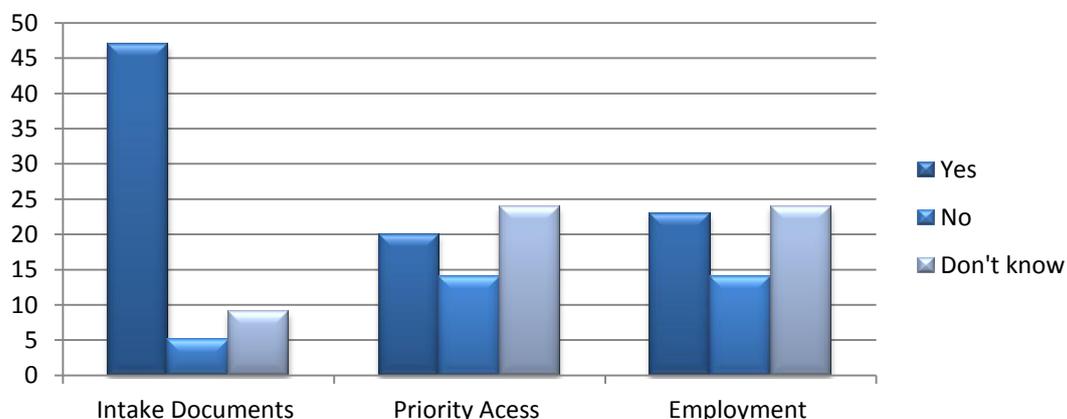
Diagram 4: Current Service Provision to Aboriginal and Torres Strait Islander Communities
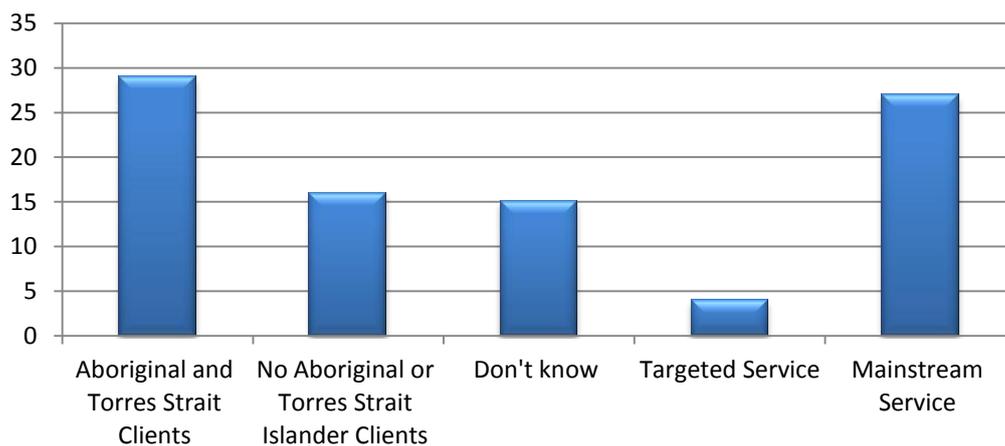
Organisation Practice

Participants were asked to identify whether the organisations intake documents ask if the person identifies as Aboriginal or Torres Strait Islander and whether there was priority access for Aboriginal and Torres Strait Islander People; Diagram 5 identifies the responses. Most participants (47) responded that the organisations intake document (referral, registration, assessment tools etc) includes a question about identifying as an Aboriginal or Torres Strait Islander person. Participants however were more likely to respond don't know (24) when asked if the organisation had priority access for Aboriginal or Torres Strait Islander people.

Diagram 5: Organisation Intake, Priority and Employment of Aboriginal or Torres Strait Islander People

Participants were asked to identify whether the organisation currently employs people who identify as Aboriginal or Torres Strait Islander. As depicted in Diagram 5, responses indicate an almost even rate of yes and don't know responses. Interpretation of these responses is cautioned as the responses may reflect the person knowledge of employees rather than the organisation's practice.
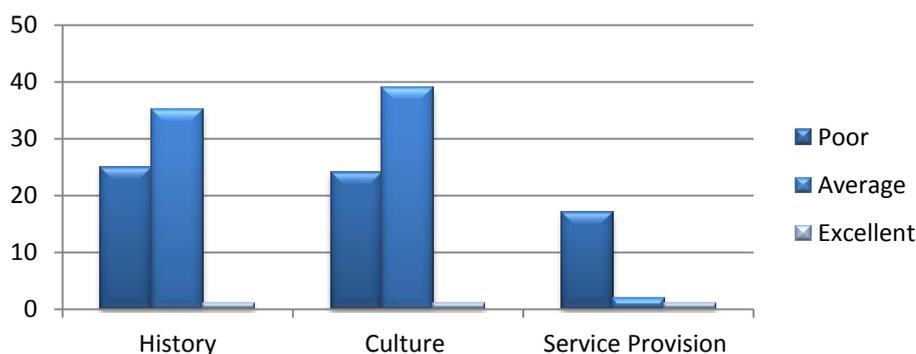
Cultural knowledge, history and confidence

Participants were asked to identify whether they had previously attended cross cultural training specifically targeted at Aboriginal and Torres Strait Islander culture and community. As depicted in Diagram 6, most responses (33) indicated that participants had not attended prior training specifically targeted at Aboriginal and Torres Strait Islander culture and community. 23 participants had previously attended training specifically targeted at Aboriginal and Torres Strait Islander culture and community. The pre evaluation form did not seek clarification of whether prior training had included a focus on disability within Aboriginal and Torres Strait Islander communities.

**Diagram 6:** Previous Training Experience

Participants were asked to rate their knowledge of Aboriginal and Torres Strait Islander history, culture and their confidence in providing service to people from Aboriginal and Torres Strait Islander Communities. Most participants rated their knowledge and confidence as average in the pre evaluation survey, depicted in Diagram 7.

Diagram 7: Pre evaluation ratings of Knowledge, Culture and confidence in providing service to Aboriginal and Torres Strait Islander clients

Post evaluation surveys asked people to rate their gain in knowledge of Aboriginal and Torres Strait Islander culture and history and their confidence in providing a service to people from Aboriginal and Torres Strait Islander communities. Ratings, displayed in Diagram 8 indicated that people had gained a lot more knowledge of both Aboriginal and Torres Strait Islander history and culture. Where people selected more than one option this related to confirming existing knowledge with the addition of either a lot more or some more knowledge gained.

Diagram 8: Post evaluation knowledge of Aboriginal and Torres Strait Islander culture and history
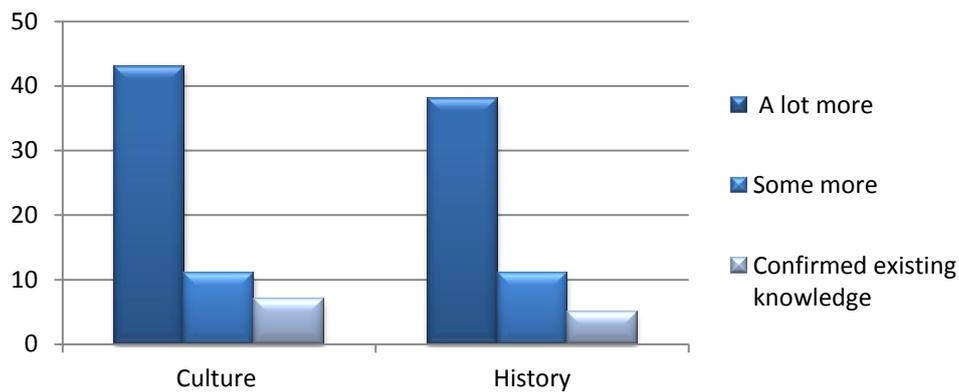
It was anticipated that the Disability and Aboriginal Cultural Competence workshops would strengthen the confidence and capacity of disability, health and community service staff working in intake, HACC, case management, personal care, advocacy, community development and the like. A comparison between pre and post evaluation responses (Diagram 9) indicates that participants have rated their confidence as average prior to and following training. Further interpretation is difficult. Feedback comments however highlighted a realisation amongst participants that there was so much to learn. "I have learnt so much, still a learner but feeling refreshed and refocused, we still have so far to go" (Participant workshop 1).

Diagram 9: Pre and post training confidence in providing service to Aboriginal and Torres Strait Islander clients
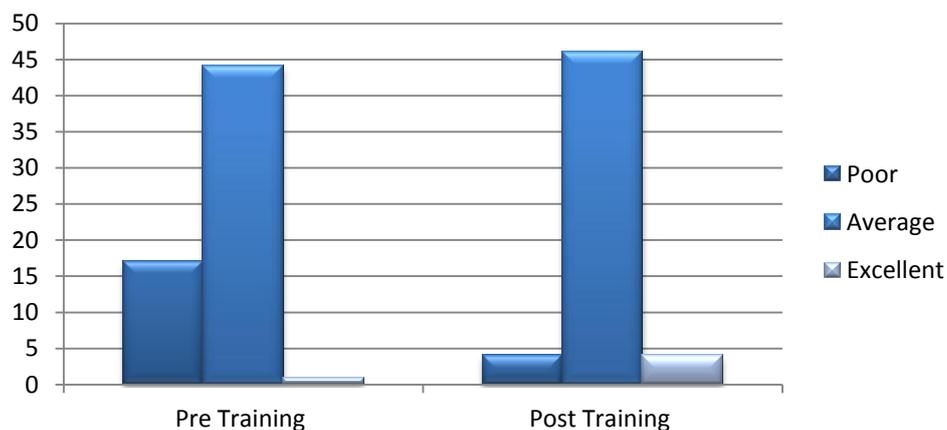
Participants were also asked on the pre evaluation survey if they had knowledge of the DHS publication "Enabling Choice for Aboriginal People living with disability – Promoting Access and Inclusion" overwhelmingly 52 people reported no knowledge of this document. Enabling choice for Aboriginal people living with disability - Promoting access and inclusion outlines ten principles to assist departmental and community-based disability service providers to deliver culturally competent information, supports and services for Aboriginal people with a disability and their families. The document can be viewed on the Department of Human Services website via this link: http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/reports-publications/enabling-choice-for-aboriginal-people-living-with-disability

Participant Comments and Feedback

Participants were asked to provide comment on what they liked and what was missing or didn't work from the training. The majority of responses were extremely positive and the learnings from what was missing or didn't work will be considered in future workshop opportunities.

Liked about the training:

- High praise for Karen's knowledge and ability to engage the audience, share her personal experiences and convey key history and cultural information.
- The depth and breadth of information in relation to legislation and policy directions and the impacts they had on Aboriginal and Torres Strait Islander communities at the time and currently.
- The smoking ceremony was a new experience for some participants and was seen by many as wonderful way to commence the day.
- Having the Panel session to ask questions about elements of service provision and how to make services more welcoming.
- Providing a safe, welcoming environment where questions could be asked and explored without judgement.
- The resources that were provided that will enable people to follow up on areas of interest.

What was missing from the training or didn't work:

- Participants felt that the last section of the day was bit rushed, some participants queried whether the training should be held over 1½ or 2 days to enable greater discussion.
- More information on the disability component of the training, what disability means in Aboriginal and Torres Strait Islander communities, prevalence rates and types of disabilities encountered was consistently raised by participants.

Content rating

Participants were asked to rate the content of the training session. Most participants (42) rated the content as excellent with the remainder of participants (13) identifying it as average.

Learning and Future Directions

The participating Councils and EACH recognise the value in partnering to deliver the Disability and Aboriginal Cultural Competence Workshops as a way to enhance relationships between the individual Councils and EACH. Sharing the financial impact of the workshops also ensured two workshops could be provided in the region providing local organisations with choice of time and venue. Initial discussions of charging an attendance fee of $70 would prohibit community organisations from attending were unfounded as the number of anticipated audience members was reached with minimal promotion.

The Partnering Councils and EACH recognise that participants although gaining a wide range of knowledge and information regarding Aboriginal and Torres Strait Islander history and culture felt that more could have been included regarding "disability" in the context of Aboriginal and Torres Strait Islander communities. To further participants understanding the Partnership has included additional information regarding the profile of disability in Aboriginal and Torres Strait Islander communities immediately following this section of the report.

Council's and EACH thank participants for their honesty and reflections on these workshop opportunities. It is hoped that the knowledge and information gained will lead to Aboriginal and Torres Strait Islander people and their families feeling better supported in terms of accessing and participation in culturally competent services and organisations including determining planning and supports for the person with a disability.

At the time of report writing initial discussions have been held between EACH and the Southern Region MetroAccess Officers to replicate the workshops in that region.

Profile of Disability in Aboriginal and Torres Strait Islander Communities

Defining Disability in Aboriginal and Torres Strait Islander Communities
Defining disability within Aboriginal and Torres Strait Islander communities is difficult. According to the First People Disability Network, "in some ways disability is a new conversation in many Aboriginal communities. The vast majority of Aboriginal people with disabilities do not self-identify as people with disabilities. This continues to occur for a range of reasons these include:
- The fact that in traditional language there was no comparable word for 'disability'. This would suggest that disability was accepted as part of the human experience;
- Much of the terminology within the disability sector many Aboriginal people with disabilities and their families are not familiar with;
- Some families are reluctant to seek help because they fear that they may be judged unfairly and possibly have their family member taken away;
- And a reluctance to take on a perceived negative label of disability particularly if they already experience discrimination based on their Aboriginality." (http://fpdn.org.au)

Supporting the notion of disability being accepted as part of the human experience information presented during the workshops highlighted that traditionally the Aboriginal and Torres Strait Islander elders in community's assigned roles based on a person's skills and strengths.

The Productivity Commission Report on Disability Care and Support (2011) identified that some Aboriginal and Torres Strait Islander view some congenital disabilities as a consequence of "marrying wrong" or attribute the presence of disability to supernatural causes stemming from eating certain foods or doing certain activities while pregnant. Where these views are prevalent people with a disability and or their carers may be too ashamed to seek support and communities may be less cooperative with service providers generally

A diversity of views of disability exist within Aboriginal and Torres Strait Islander communities which is reflective of the diversity of beliefs and cultural practices in conjunction with the lived experiences and social economic standing in the community. Where there is a lack of understanding of the concept of disability it may result in under reporting in data collection and under utilisation of a range of community and specialist services (Productivity Commission, 2011),

Disability Prevalence in Aboriginal Communities
People from Aboriginal and Torres Strait Islander backgrounds experience higher rates of disability than other Australian population groups (Australian National University, 2011.) The National Disability Strategy identifies that the rate of disability among Aboriginal and Torres Strait Islander populations is almost twice as high as that among non-Indigenous people (Commonwealth of Australia, 2011).

The onset of disability can occur at anytime; prior to or at birth, as the result of an accident, injury or chronic illness or trauma during childhood, adulthood or through older age. Further a diverse range of social, environmental, biological and psychological factors can impact on a person's mental health, which can result in a person experiencing a psychiatric disability.

Information regarding the most prevalent disability types in Aboriginal and Torres Strait Islander communities is difficult to locate. The difficulty relates to the definitions of disability, purpose of the data collection and the way in which information is reported. For instance disability service user information reviewed by the Productivity Commission (2011) identified the most common primary disability recorded by Indigenous service users was intellectual disability. However the Australian Institute of Health and Welfare (2011) and Australian Bureau of Statistics (2010) found that physical disability (29%) was the most common form of disability reported by Aboriginal and Torres Strait Islanders followed by sight, hearing or speech disabilities (18%) and psychological disabilities (11%).

Australian Bureau of Statistics (2009) identifies that in every age group Aboriginal and Torres Strait Islander people more likely to have a profound or a severe core activity limitation than non-Indigenous people. The presence of disability increases with age in Aboriginal and Torres Strait Islander as well as non-Indigenous

populations. Within Aboriginal and Torres Strait Islander data there are peaks at earlier age groupings that are indicative of the earlier onset of chronic disease such diabetes and heart disease. Aboriginal and Torres Strait Islander children (0-14 years) have a much higher rate of disability than non-Indigenous children, 14.2% compared to 6.6% respectively. Aboriginal and Torres Strait Islander people aged between 25 -54 years are 2 – 2.5 times more likely to report a disability that their non-Indigenous peers.

Disadvantage – Disability, Aboriginal and Torres Strait Islander Communities
People with a disability and Aboriginal and Torres Strait Islander people are generally recognised as two separate disadvantaged groups in our community. Aboriginal and Torres Strait Islander people with a disability can therefore be seen to have a double disadvantage (Commonwealth of Australia, 2011). Diagram 10 table compares the challenges experienced by Aboriginal and Torres Strait Islander people and people with a disability. This comparison indicates similarities in relation to health, access to services and lower levels of education, training and employment.

Diagram 10: Disadvantages present in Aboriginal and Torres Strait Islander communities compared with disadvantages facing people with a disability

Aboriginal and Torres Strait Islander People	People with a Disability
Lower life expectancy	Relatively poor health
Increased rate of chronic illness	Lower levels of and education training
Increased rate of mental illness	Lower levels of employment
Limited access to health services	Social exclusion
Lower educational outcomes	Lack of access to goods, services and facilities
Lower employment rates	Ongoing discrimination
Over representation in the criminal justice system	

The prevalence of disability amongst Aboriginal and Torres Strait Islander people is not often discussed in relation to health and wellbeing outcomes. Prior to the 2002 National Aboriginal and Torres Strait Islander Social Survey there were no national surveys of Indigenous disability (Productivity Commission, 2011). The interplay between socio economic status and disadvantage is evident in Indigenous communities. For example low educational outcomes are associated with higher rates of smoking, excessive alcohol use and poor nutrition amongst Indigenous Australians increasing the potential for acquiring a disability. The presence of disability is also entrenched in socio economic disadvantage. A person with a hearing impairment is likely to experience poorer educational outcomes which in turn impacts on their employment and income prospects into the future.

Tips for Organisations

Relationships are the key to increasing awareness of services the organisation offers within Aboriginal and Torres Strait Islander communities. Consider:

- Establishing communication with local Aboriginal and Torres Strait Islander community service providers. Create mechanisms thought which ongoing communication with key elders, community workers and other service providers can occur.

- Utilise current networks within the Aboriginal and Torres Strait Islander communities to promote the supports and services offered by the organisation being clear about the boundaries; define terms such as disability, eligibility.

- Effective and authentic consultation within the community

A culturally competent organisation:

- Commits to Aboriginal self determination and respectful partnerships

- Embeds cultural respect within organisational and staff values and attitudes

- Reflects cultural responsiveness in the ability and skills of staff

- Promotes culturally safe environments and client experiences

- Ensures that cross-cultural practice and care applies to all aspects of service provision including:
  - Resources and public symbols that promote Aboriginal Culture
  - Maintaining and strengthening Aboriginal family connections
  - Assessments, planning and service delivery that consider parent-child, extended family and community relationships and dynamics
  - Collaboration with Aboriginal organisations in the development and delivery of culturally competent responses.

References

Australian Bureau of Statistics (2012), 4429.0 - Profiles of Disability, Australia 2009 http://www.abs.gov.au

Australian Bureau of Statistics (2009), 4714.0 – National Aboriginal and Torres Strait Islander Social Survey 2008.   http://www.abs.gov.au

Australian Institute of Health and Welfare (2011) Aboriginal and Torres Strait Islander people with a disability: Wellbeing, participation and support. Australian Government: Canberra, Cat. No. IHW 45

Boroondara City Council http://www.boroondara.vic.gov.au

Commonwealth of Australia (2011) National Disability Strategy 2010 -2020 http://www.fahscia.gov.au

Department of Human Service (2011), Enabling choice for Aboriginal people living with disability – promoting access and inclusion http://www.dhs.vic.gov.au

Family Relationship Support for Carers http://www.each.com.au

Knox City Council http://www.knox.vic.gov.au

Manningham City Council http://www.manningham.vic.gov.au

Maroondah City Council http://www.maroondah.vic.gov.au

Productivity Commission (2011) Disability Care and Support Report 54 Canberra

Whitehorse City Council http://www.whitehorse.vic.gov.au

Yarra Ranges Shire Council http://www.yarraranges.vic.gov.au

Resources

Centre for Culture Ethnicity and Health – Cultural Competence Framework http://www.ceh.org.au

Mullum Mullum Indigenous Gathering Place http://www.mmigp.org.au

Appendix: Agenda

Time	Content
9.00	Arrival and Registration (tea & coffee)
9.15	Session 1: Welcome to Country (Wurundjeri)
9.30	Session 2: Introduction and House Keeping ➢ Acknowledgement of Country, introductions and housekeeping ➢ Discussion: What do you want to get out of today's session
9.45	Session 3: Overview ➢ Overview of today's program and what will be covered in each session ➢ Participant expectations
10.00	Session 4: History from an Aboriginal perspective ➢ Aboriginal people in Victoria and Australia ➢ Aboriginal lore, culture, values and belief: a short overview ➢ Government policies and practices: key issues that happened in the past but still influence Aboriginal community views and decision making processes today
11.00	Moring Tea Break
11.15	Session 4: Continued
12.00	Lunch
12.30	Session 5: Aboriginal communities today ➢ Aboriginal population, health and wellbeing statistics Aboriginal family structures, kinship arrangements and community structures
1.00	Session 6: Disability in the Aboriginal Community (EMR) ACCO Panel ➢ EMR Aboriginal services panel session- discussion about issues experienced in accessing the service system for ACCO and the Aboriginal client/s and their carers. ➢ Questions and discussions with the Panel
1.45	Session 7: Mechanisms to support engagement and understanding Cultural differences. ➢ What does it mean to identify as an Aboriginal and/or Torres Strait Islander person? ➢ Aboriginal family structures, kinship arrangements and community structures ➢ Terminology: understanding whish word/term to use when engaging with Aboriginal people who are clients or staff working at the service provider level. ➢ Protocols – what protocols and processes should I be aware of? ➢ Defining Cultural Competency – understanding from an Aboriginal perspective
2.30	Afternoon Tea
2.45	Session 8: Best Practice and Group Activity ➢ Enabling choices ➢ Best practice examples ➢ Case Study examples based on a positive and negative client journey – report back
3.45	Review and Evaluation
4.30	Conclusion

Disability and Aboriginal Cultural Competence Workshop

Pre Training Survey

The following survey aims to establish a baseline of understanding and experience in engaging and providing services to the Aboriginal community regarding disability.

1. Date   30th May   12th June

2. Organisation Name: _____

3. What is your position in the organisation? _____

4. Type of service (circle all that apply)

   a. Accommodation
   b. Advocacy
   c. Carer Support
   d. Case Management
   e. Community Access
   f. Community Health
   g. Day Service
   h. Early Intervention
   i. Education and Training
   j. Employment
   k. Family Support
   l. Health Service
   m. Home and Community Care (HACC)
   n. Information and Referral
   o. In home support/attendant care
   p. Recreation
   q. Respite

5. Do you currently provide a service to any Aboriginal Clients?

   ☐ Yes   ☐ No   ☐ Don't know

6. If you answered yes to the previous question, what type of service do you provide?

   ☐ Targeted service for Aboriginal and Torres Strait Islander clients

   ☐ Mainstream service inclusive of Aboriginal and Torres Strait Islander clients

7. Do the organisations Intake documents (referral, registration, assessment tools etc) ask if an individual identifies as Aboriginal or Torres Strait Islander?

☐ Yes   ☐ No   ☐ Don't know

8. Does your service have priority access for Aboriginal and Torres Strait Islander clients?

☐ Yes   ☐ No   ☐ Don't know

9. Does your organisation currently employ staff members who are Aboriginal or Torres Strait Islander?

☐ Yes   ☐ No   ☐ Don't know

10. Have you previously participated in cross cultural training specifically targeted at Aboriginal and Torres Strait Islander culture and community?

☐ Yes   ☐ No   ☐ Don't know

11. How do you rate your knowledge of Aboriginal History?

Poor -----------------------Average-------------------------Excellent

12. How do you rate your knowledge of Aboriginal Culture?

Poor -----------------------Average-------------------------Excellent

13. Please rate your confidence in providing service to Aboriginal or Torres Strait Islander people

Poor -----------------------Average-------------------------Excellent

14. Have you seen the DHS publication "Enabling Choice for Aboriginal People living with disability – Promoting Access and Inclusion"?

☐ Yes   ☐ No

APPENDIX EVALUATION FORM
Disability and Aboriginal Cultural Competence Workshop
Evaluation Form

1. Organisation Name: _____

2. What is your position in the organisation? _____

3. From today I have: (circle the ones that apply to you)

   a. Gained lot more knowledge of Aboriginal Culture
   b. Gained some more knowledge of Aboriginal Culture
   c. Been able to confirm my existing knowledge of Aboriginal Culture

   d. Gained a lot more knowledge of Aboriginal history
   e. Gained some more knowledge of Aboriginal history
   f. Been able to confirm my existing knowledge of Aboriginal history

4. Please rate your confidence in providing a service for Aboriginal or Torres Strait Islander people :

   a. Poor ----------------------Average-------------------------Excellent

5. What did you like about the training?
   _____
   _____
   _____
   _____
   _____

6. What was missing or didn't work for you?
   _____
   _____
   _____
   _____

7. How would you rate the content of today's training

   a. Poor ----------------------Average-------------------------Excellent

Disability and Aboriginal Cultural Competency Training

MetroAccess in partnership with EACH are delighted to invite you to attend one of two Aboriginal and Cultural Competence Workshops. Attendance will extend your knowledge of providing culturally sensitive and responsive services to Aboriginal people with a disability and their community.

The workshop is targeted to staff working in the disability, community, health, not for profit sectors and local government.

The workshop will include:
- Traditional Smoking Ceremony
- Aboriginal History
- Current Aboriginal Community Profiles
- Disability in the Aboriginal Community
- Case Study Examples
- Mechanisms to support delivery and engagement

Workshop 1

Thursday 30th May 2013
9.00am – 4.30pm
Willis Room – Civic Centre
397 Whitehorse Rd Nunawading

Workshop 2

Wednesday 12th June 2013
9.00am – 4.30pm
Federation Estate
32 Greenwood Rd Ringwood

Cost: **$70** per person

To Register Contact:

Workshop 1 - http://www.trybooking.com/CRSO

Workshop 2 - http://www.trybooking.com/CRSP

EACH Bayswater Reception:
Phone: 87201100
Fax: 98760100
Email: bayswaterreception@each.com.au

Please advise us if you require an interpreter or have any dietary needs – Lunch and Afternoon Tea will be provided

Register Early Places are Limited