





OUR VISION

All aged care consumers in Australia experience inclusive and accessible care

OUR PURPOSE

To build the capacity and capabilities of Australian aged care providers to deliver services that are welcoming, inclusive and accessible

OUR SERVICE AREAS



Inclusive practice training and workshops



Capacity building to promote cultural inclusion and equity



Diversity advice and consulting

The Centre for Cultural Diversity in Ageing is supported by Benetas & funded by the Australian Department of Health and Aged Care through the Partners in Culturally Appropriate Care (PICAC) program.





Pearl Proud

Pearl Proud has a 25-year long clinical career. She has held roles as a consulting psychologist working with clients across the life span, clinical lead, and AHPRA accredited clinical supervisor.

Pearl is currently overseeing a dedicated CALD mental health program across metropolitan Perth.







Phil Peladarinos

Phil Peladarinos is the Team Leader of the Social Support Program Team at Merri Health in Melbourne Northern region.

Phil has a background in Aged Care, Mental Health, Local Government and Higher Education with over 30 years experience in working with culturally diverse communities.

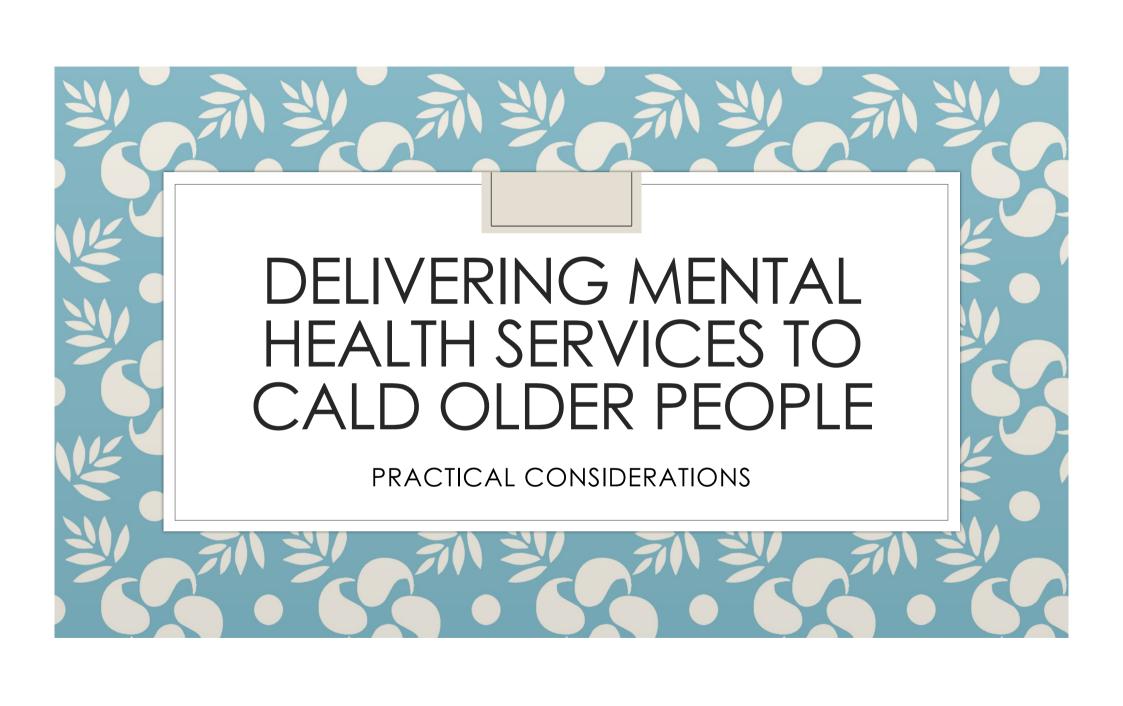






Presentation 1





SCOPE

- Who CALD/Multicultural Older Australians (citizens/PR, migrant, newly arrived, asylum seekers)
- Where settings
- What Psychological/Clinical v Support services
- By Whom Psychologist/Psychiatrists, MD Teams, CAHPs, Aged Care Workers
- How framework, funding, modalities, practical suggestions
- When @ referrals (professional, circumstantial, self)

WHO

- CALD & Multicultural Older Australians & PRs, Seniors (independent)
- Migrant, Refugee background
- Age, Stage of life (life span)
- Cultural background, faith, history (wholistic)
- Family & Carers (systemic)

WHY

- Mental Health Presentations typical disorders, age related
- Assessments
- Mild, Moderate & severe
- Acute (crisis, including Risk)
- Chronic
- Complex

WHEN

- Psychological distress
- Quality of life/relationships
- Poor coping
- Readiness stage of life

Barriers/risks

- CLIENTS:
- Stigma & shame -> reluctance to engage
- Language
- Trauma load (incl Suicide Risk)
- Cultural insensitivity/awareness
- Location
- Inter-generational
- SERVICE/STAFF:
- Vicarious trauma/Triggering
- Burnout/empathy deficit
- Cynicism/toxic environment
- Elevated Risk & poor service/clinical outcomes

Mitigators

- Competent & accountable leadership
- Clearly articulated culture, policies & clinical governance values, evidence base, cultural safety (NMHS, RC recommendations)
- Workforce planning CALD/multicultural service delivery, for CALD clients, by CALD clinicians – recruitment & MH training
- Skilling & Supervision Competence. Line/Clinical. Debriefing/Self-care.
 Acknowledgement
- Cultural Competency (barrier responsiveness Interpreters, digital training/resources, outreach)

Conclusion

- Wholistic approach Mental Health AND Physical Health = Life
- Skill trumps positive regard. Skill improves lives and saves lives
- Intuition is key
- Australia is Multicultural = Cultural Competence is everyone's responsibility

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Presentation 2





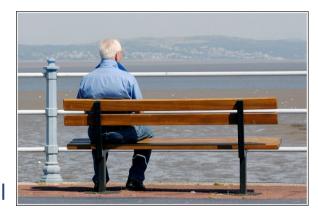
Combating Social Isolation and Loneliness

The Social Support experience in building and maintaining social connectedness during social isolation and social distancing.

Social Isolation & Loneliness

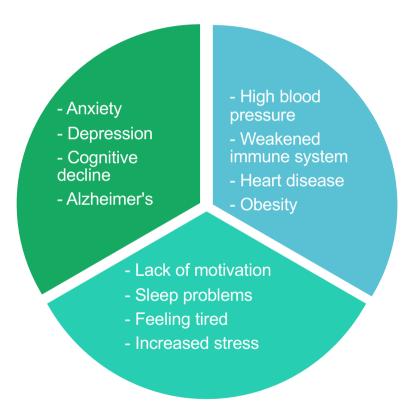
Social isolation is seen as the state of having minimal contact with others.

It differs from loneliness, which is a subjective state of negative feelings about having a lower level of social contact than desired.



(Peplau & Perlman 1982)

Impact of Social Isolation on the Elderly



Social Isolation and COVID-19

COVID lockdowns had a profound effect on the elderly population and especially the elderly from migrant and refugee communities.

In October 2021, an ECCV Report found that its target population was severely impacted upon by social isolation due to:

- · Lack of family contact;
- Lack of local community connection and support;
- Lack of religious participation and practice;
- Insufficient access to essential and other support services;
- Association with traumatic past experiences.





Ethnic Communities Council of Victoria, COVID-19 Recovery and Migrant and Refugee Communities, October 2021

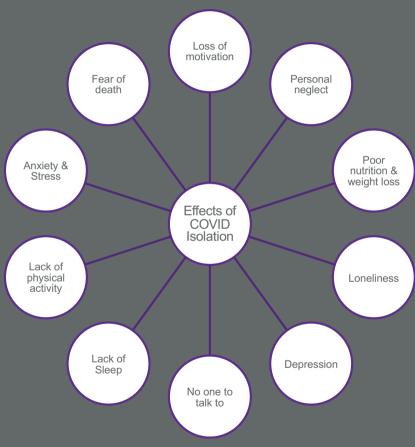
Post COVID Lockdown Challenges for Migrants & Refugees

Social isolation continued even after the easing of restrictions having a significant impact on CALD elderly due to:

- · Linguistic barriers;
- Low level of literacy and formal education;
- Low digital literacy level;
- · Lack of access to digital devices;
- Introduction of QR codes;
- Fear of infection;
- Insufficient knowledge of the service system;
- Cognitive impairment;
- Declining health.



Effects of COVID Isolation on Social Support Program Participants



Merri Health Social Support Program Innovation in Service Delivery



Participant Driven Chat Groups



- Connect and keep in touch with friends;
- Have an enjoyable, fun activity to look forward to;
- Reduce the effects of social isolation and depression;
- Develop new skills in using technology;
- Increase confidence and self esteem;
- Improve emotional and intellectual wellness.

Social Support Participant Feedback

A male participant connected with his grandchildren by reading the dad jokes to them.

A female participant was sending all her colouring activities back to the program to showcase her work A female participant decorated her house with the colouring pages

A participant told staff that the Wellbeing Pack was her lifeline during the lockdown because it kept her busy. A female participant video called her relative in Italy every week to solve word search puzzles together.

A male participant told staff that he used the Wellbeing Pack material with his Support Worker during In-Home shifts.

Making a Difference

Hi Vinnie and Sue (& Angie) and Merri Health delivery fellow,

Many thanks for sending me the activity pack to complete at home during the lockdown - stupid COVID19!

Here's a photo of the Mother's Day
Positivity Jar I put together. The fridge
magnet with the poem is on the fridge.
I will plant the daffodil bulb soon once it stops raining.

Stay safe, and hope to see you soon, Rocco



RIP Rocco Morano 1 April1933 – 19 July 2022









Q & A Session





Where to go for support





























July Free Translations in Aged Care

Aug Collecting Diversity Data to Promote Inclusive Services

Sep The Inclusive Service Standards for Beginners – Diversity Coaching Workshop

Oct Ten Steps to Developing a Diversity Plan

Nov Supporting Older People from Culturally Diverse Backgrounds with a Hearing Impairment

Feb Food for Thought - the Link between Food, Culture & Identity

Mar Harmony Week Video Launch - The Voices of Multicultural Community Leaders & their Visions for a more Inclusive Aged Care System

Apr Recognising Multifaith Initiatives in Aged Care

May Culturally Diverse Perspectives on Mental Health Care

June Cultural Awareness Walk & Talk - Hidden Culture/Decolonising Melbourne with Uncle Shane Charles (Face-to-Face Victoria)

Book at bit.ly/DWS-22-23























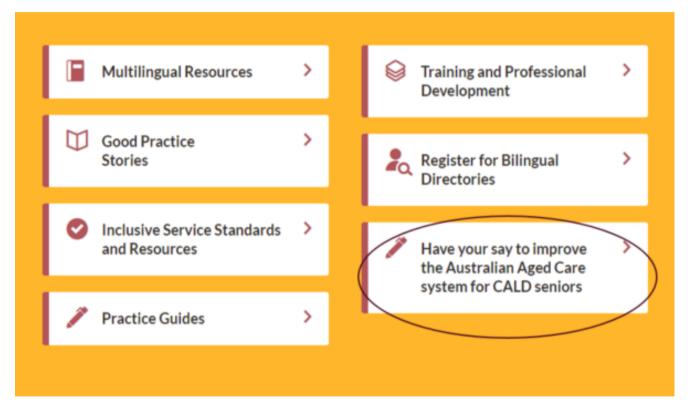




CPD All webinars can be counted as time spent relating to Continuing Professional Development for nurses to meet the CPD registration standard



Have your say survey on our homepage



<u>culturaldiversity.com.au</u>





Everybody has a story – free learning module



Everybody has a story

Delivering culturally inclusive care



Everybody has a story: Delivering culturally inclusive care module by the Aged Care Quality and Safety Commission was created in partnership with the Centre for Cultural Diversity in Ageing.

To learn more visit:

<u>culturaldiversity.com.au/training-development/</u> <u>everyone-has-a-story</u>





Podcast



To listen visit:

<u>culturaldiversity.com.au/news-and-events/podcasts</u>



Listen on Spotify



Listen on Google



Listen on Apple





Practice Guides

- Culturally Inclusive Feedback
- Communication
- End-of-Life Care
- Food and Nutrition
- Living Environment
- 10 Steps to Developing a Diversity, Equity and Inclusion Plan in Aged Care
- Spiritual Support
- Working with Bilingual Staff
- Interpreters Policies
- Accessing Diverse Media
- Digital Inclusion
- Accessing Interpreter Services
- Effective Co-design with Consumers from Culturally and Linguistically Diverse Backgrounds

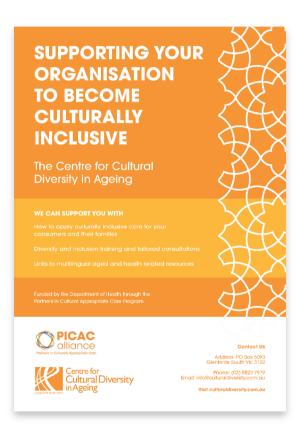


Download from culturaldiversity.com.au





Poster



Download from

<u>culturaldiversity.com.au/about/promotional-posters</u>



Different languages, same aged care

One of the 2021 Aged Care Royal Commission's key recommendations was to ensure that diversity is core business in aged care. **Different languages, same aged care** is funded by the Department of Health and Aged Care in partnership with Icon Agency and aims to:

- Enhance the ability of senior Australians to access information through the timely and targeted provision of translating and interpreting services
- Produce and translate information to allow aged care providers to communicate key written messages to their care recipients in languages other than English and other accessible formats

Aged care providers can request in-language materials through a dedicated website by registering their request + any additional materials they want translated at diversityagedcare.health.gov.au



Partners in Culturally Appropriate Care program

The Centre for Cultural Diversity in Ageing is funded through the Department of Health and Aged Care, PICAC program.

The Centre forms part of the PICAC Alliance, a national body comprising PICAC funded organisations across Australia.

The Alliance aims to be a voice and discussion conduit into information, training and resources to inform aged and community care services.

picacalliance.org







Thank you!

Thank you for participating today.

For more information, good practice stories and resources visit

- <u>culturaldiversity.com.au</u>
- Centre for Cultural Diversity in Ageing
- in Centre for Cultural Diversity in Ageing
- CCDAAUS

Thank you Sarah Burrell-Davis
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