



## **ECCV submission to the Commonwealth Department of Health Survey on Future Commonwealth Home Support Programme (CHSP) Funding Processes**

March 2016

1. Is there a current need for additional services in any geographical areas in Victoria (either metropolitan or rural/regional areas)?

Yes  YES

No

If yes please specify in the box below including the following:

- Specific geographical location/s
- Which CHSP Sub-programme
- Any data that supports the identified need.
- If more than one area of need is specified, please nominate which you consider to have the highest current unmet need.

### **State-wide need for ethno-specific social and multicultural social support services**

- This need is based on ongoing feedback to the Ethnic Communities' Council of Victoria (ECCV) that ethno-specific and multicultural Planned Activity Groups (PAGs) and ethnic seniors clubs play a vital role for seniors from non-English speaking backgrounds in preventing social isolation, promoting healthy ageing. PAGs and ethnic seniors clubs link seniors from non-English speaking backgrounds to the aged and health care system and information and activities relating to wellness and reablement.
- ECCV have received feedbacks from ethno specific organisations about the long waiting list in their Planned Activity Group (PAG) and inability to meet the social support needs of eligible CALD clients.
- Based on an ECCV survey in 2015 with over 35 older people from non- English speaking and culturally diverse backgrounds, older people expressed that they only attend a culture specific PAG, because they highly value the same culture interactions, (i.e., communicate with others in their mother tongue, play card games that is specific to their culture, sing songs in their own language, culturally appropriate meals, outings, peer psycho-social

support, being understood culturally and being at ease etc). Out of the 35 older people consulted, most expressed that they will not participate in a mainstream English speaking PAG due to the language barriers, trust and relationship, and lack of responsiveness in mainstream services.

- Older people expressed that same culture interaction and socialisation is good for their physical and emotional wellbeing because “*they laugh a lot*”, “*sometimes, they talk about family problems*” and “*they are not stuck at home, alone*”. However, ethno specific and multicultural organisations expressed that having the resources to meet the demand is a constant challenge.
- In addition, systematic literature review by Rao, Warburton and Bartlett (2006, cited in ECCV & HAAG, 2016) identified older people from CALD backgrounds as one of the most vulnerable groups at risk of social isolation.
- In line with the *National Ageing and Aged Care Strategy For People from Culturally and Linguistically Diverse (CALD) Backgrounds*

Goal 5: Enhance the CALD sector’s capacity to provide ageing and aged care services

5.6 Develop relevant service models and partnerships that facilitate the involvement of CALD communities in delivering aged care.

- ECCV recommend the Commonwealth Department of Health to consider growth funding for ethno specific and multicultural PAGs and funded organisations that have demonstrated exceptional capabilities in engagement with communities and delivering outcomes through their PAG for older CALD people. Additional resources will also enable ethno specific organisations to work in partnerships with other generic organisations, greater involvement in delivering aged care and continue to strengthen their efforts in implementing CHSP Restorative Care Approaches, Wellness, and Reablement strategies that are culturally appropriate.

#### **Specialised Support Services - Client advocacy for CALD**

- Additional growth funding for Specialised Support Services - Client advocacy for CALD clients. According to research by Radermacher, Feldman and Brown (2009), older people from CALD backgrounds experiences significant barriers due to language and communication. These barriers can be exacerbated by other vulnerabilities including low health literacy, intergenerational cultural change, and limited informal networks.
- Radermacher, Feldman and Brown (2009), also found that a lack of links between mainstream organisations and culturally diverse groups and the availability of bilingual staff may negatively affects older person’s knowledge about aged care services, and reluctant to engage with aged care service providers.
- As outlined in the *National Ageing and Aged Care Strategy For People from Culturally and Linguistically Diverse (CALD) Backgrounds*:

Goal 2: Achieve a level of knowledge, systems capacity and confidence for older people from CALD backgrounds, their families and carers to exercise informed choice in aged care.

2.5 Acknowledge and resource the role of ethno-specific and multicultural services in developing the capacity of people from CALD backgrounds to access the aged care system

- ECCV wish to further highlight the significant cultural and social capitals of ethno specific and multicultural community organisations, it's long standing relationships with older people from CALD backgrounds, and the values of its culturally diverse and multilingual workforce and volunteers. These capitals will provide added values and greater return on investment if Specialised Support Services - Client advocacy for CALD clients - growth funds are allocated to ethno specific and multicultural organisation. The workforce and volunteers are well placed to provide culturally responsive services that help clients, and their carers and families, to manage these barriers due to their cultural and linguistic characteristic and inequity; and maximise client independence to enable them to remain living in their own homes and to age well.

**2. Is there a current need for additional services for any of the eight identified special needs groups in Victoria?**

- **Cultural & Linguistic Diverse Communities**
- **Aboriginal and Torres Strait Islander Communities**
- **People who are homeless or at risk of homelessness**
- **People who are Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI)**
- **People who are socially and financially disadvantaged**
- **Veterans**
- **Care Leavers**
- **Parents separated from their children by forced adoption or removal**
- **Or other key issue (e.g. dementia)**

Yes  YES

No

**If yes please specify in the box below including the following:**

- **The Special Needs Group/s**
  - **Specific geographical location/s (if any) where the need exists.**
  - **Which CHSP Sub-programme**
  - **Any data that supports the identified need**
  - **If more than one area of need is specified, please indicate the special needs group and location you consider to have the highest current unmet need.**
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- Seniors from culturally and linguistically diverse communities need access to additional ethno-specific and multicultural PAGs. Anecdotally, ethno specific and multicultural organisation have eligible older people on PAG waiting list and/or cater for more people than they were funded out of their organisational margins in order to respond to demands.
  - ECCV highlights that there is statewide need for additional social group support services (CHSP Sub-programme) such as access to ethno-specific and multicultural PAGs and wellbeing and support initiatives for ethnic seniors clubs.

- ECCV highlights that there is a lack of research that documents and demonstrates the importance of ethno-specific and multicultural PAGs and ethnic seniors clubs in promoting ageing healthily of seniors from non-English speaking backgrounds. ECCV recommends that research is directed under service system development on the role of ethno-specific and multicultural PAG groups and ethnic seniors clubs in Victoria in promoting wellness and reablement.
- The ECCV and Housing for the Aged Action Group Paper on risk of homelessness paper, highlighted an increased need for culturally specific and sensitive responses directed at seniors from non-English speaking backgrounds.

### **3. Are there any other service gaps or unmet need under the CHSP?**

**In responding to this please consider any innovative solutions which support the CHSP's focus on wellness and reablement. Examples may include:**

- o **The potential to utilise allied health assistants and tele-health services to alleviate the shortage and availability of a skilled workforce in allied health services, particularly in regional and remote locations.**
- o **Expand flexible respite and centre based respite services across Australia, with an emphasis on regional locations.**
- o **Innovative wellness and reablement project/s that focus on short term, intensive services for special needs groups including vision services.**

Limitation in data, evidence and research about the service utilisations by CALD clients, in service types including allied health assistance, flexible respite and centre based respite and effectiveness of short term projects with CALD communities.

- ECCV identified a gap in publically available data, evidence and research relating to CALD older people, including systematic approaches to understand enablers and barriers to participate and greater involvement of CALD older people in Restorative Care Approaches, Wellness, and Reablement initiatives.
- ECCV recommend DoH to consider short term projects that increase evidence based good practices, promote cross sectoral collaborations and enhance understandings in barriers and enablers for CALD communities that will strengthen the aged care sector's capacity to engage, facilitate and deliver greater outcomes for CALD older people on the above mentioned issues.

Roles and contribution of informal volunteer run ethnic social groups in wellness and reablement approaches in CHSP

- ECCV also wish to highlight the roles of volunteer run ethnic senior citizen clubs and their contribution to the CHSP wellness and reablement approaches. Currently, there is little

research and recognitions about the values of these volunteer runs networks and informal social support groups.

- From ECCV's addressing isolation in CALD Seniors project, ECCV identified that ethnic seniors clubs play important roles in connecting older CALD people in the community, especially those who are isolated and disempowered to engage with mainstream aged care system. Participation in ethnic senior groups has been a way for older CALD senior to remain mentally well and physically active.
- ECCV believes that investment into supporting these grassroots, community initiated and organised groups will be a cost effective way to create direct positive outcomes for older CALD people that is complimentary to the formal aged care system. Systematic research will enhance evidence based initiatives, dissemination of good practices to the wider aged care service system and future decision making.

Regional networks as innovative means to encourage and strengthen good practices in CHSP Restorative Care Approaches, Wellness, and Reablement

- ECCV recommend initial funding to set up innovative projects in Victoria that uses "networks" as means to foster collaboration and good practices in CHSP Restorative Care Approaches, Wellness, and Reablement between organisations. The networks may aim at mobilising organisations to work collaboratively to enhance knowledge and participation of CALD older people in wellness approaches that respond to their needs.
- These "networks" may build on existing alliances and networks including regional cultural diversity network such as the Southern Region HACC Cultural Diversity Network facilitated by the Southern Migrant and Resource Centre in Dandenong and the HACC diversity alliance in the North West of Melbourne.
- The purpose of the initiatives is facilitating inter-agencies collaborations and exchange of expertise. These regional cultural diversity networks link ethno-specific and multicultural welfare agencies to generic/mainstream service providers and serve as a platform for information sharing. Generic mainstream providers can also use this opportunity to strengthen their cultural competency. The cross-agencies collaboration will allow co-creation of strategies that encapsulate the essence of culturally appropriate, wellness and reablement approaches to care.

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