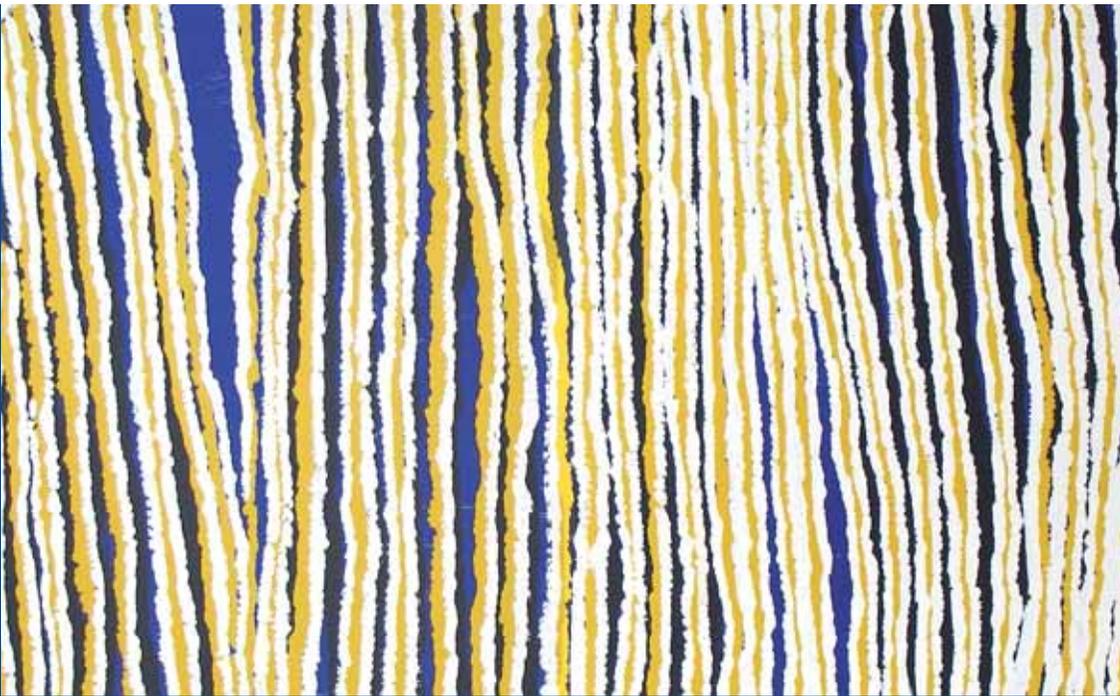




Northern
Territory
Government

DEPARTMENT OF HEALTH AND COMMUNITY SERVICES



SYSTEMS PERFORMANCE AND ABORIGINAL POLICY

Aboriginal Cultural Security

An outline of the Policy and its Implementation

www.nt.gov.au/health

For more information about this publication,
please contact the System Performance and
Aboriginal Policy Unit on **(08) 8999 2871**.

ARTWORK ON FRONT COVER

Katungka Napanangka

Tali at Intinti 2002

Screenprint

Image courtesy of the artist and Ikuntji Arts Centre

■ Forward from the CEO

This Policy represents a significant step forward for the Territory's health and community services sector. It builds on the very real work we have invested in our partnership with Aboriginal communities and community controlled health services. It demonstrates to Aboriginal and Torres Strait Islander Territorians our continuing commitment to drive forward and build on the gains we have made. It also recognises the valuable commitment of our staff to service, professionalism and to sound practice.



A substantial proportion of our clients are Aboriginal so understanding more clearly how Aboriginal people's culture intersects with our services is an important knowledge base from which we can reach even better outcomes.

Aboriginal Health and Families – A Five Year Framework for Action set out an integrated programme of reform and cultural security is an integral part of that vision. I am confident that the diverse talents and commitment of staff and our ever-strengthening partnerships with Aboriginal communities speaks well for the future success of this important policy and service reform.

I look forward to the work ahead with staff, Aboriginal communities and organisations as we cement the Territory's position as a leader in service delivery to Aboriginal people.

A handwritten signature in blue ink, appearing to read 'David Ashbridge'. The signature is stylized and fluid.

DR DAVID ASHBRIDGE

■ Cultural Security Policy Statement

The Northern Territory is a place of great cultural diversity. This is one of our greatest social and economic resources and is integral to the image we present to the world. Given this diversity, it is essential that Government services can meet the needs of all Territorians.

Aboriginal and Torres Strait Islander people are almost one third of our population. They also have the greatest health and welfare needs of any group of Territorians. It is important that the Department of Health and Community Services (DHCS) delivers services in a way that is both effective for Aboriginal people and that protects and respects their cultural rights and values.

Cultural Security is a commitment that the services offered to Aboriginal Territorians by the Department of Health and Community Services will respectfully combine the cultural rights and values of Aboriginal people with the best that health and community service systems have to offer.

Providing culturally secure services requires health and community service providers to:

- *Identify* those elements of Aboriginal culture that affect the delivery of health and community services in the Northern Territory
- *Review* service delivery practices to ensure that they do not unnecessarily offend Aboriginal people's culture and values
- *Act* to modify service delivery practices where necessary
- *Monitor* service activity to ensure that our services continue to meet culturally safe standards.

Providing culturally secure services is a way that we can ensure that all Territorians have access to safe and effective services.

Executive Summary

Culture is central to how Aboriginal people and most people view individual, family and community health and wellbeing. Culture can influence Aboriginal people's decisions about when and why they should seek services, their acceptance or rejection of treatment, the likelihood of adherence to treatment and follow up, the likely success of prevention and health promotion strategies, the client's assessment of the quality of care and their views about the facility and its staff.

Aboriginal people have for many decades pointed to the problems that are created when health and community services fail to take culture into account. Public policy has sought to respond by establishing and pursuing the implementation of cultural awareness programmes. These programmes have sought to change people's attitudes about how they should deal with Aboriginal people and culture. While there have been improvements, Aboriginal people have continued to describe many health and community services as culturally alienating and inappropriate.

Cultural Security is a commitment to further strengthen Aboriginal people's access to health and community services and the benefits they derive from them by making sure that the system recognises the role that culture plays in delivering successful outcomes.

Cultural Security requires a shift in the system's thinking from attitude to behaviour. The Policy seeks to ensure that the development and provision of health and community services sensitively unites Aboriginal cultural rights, views and values with the science of human services. In doing so the Policy intends to produce a best practice model that optimises the benefits Aboriginal people derive from an efficient and quality health and community service system.

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The reconciliation of culturally derived expressions of quality and appropriateness with the necessities of sound technical care will provide the basis on which workforce development, workplace practices, the monitoring and accountability of the system and its engagement with Aboriginal communities can be based.

Essentially the health and community services system and Aboriginal communities will need to:

- Identify those elements of Aboriginal culture that intersect with the delivery of health and community services in the Northern Territory
- Review the practice and custom of health and community services to ensure that it does not unnecessarily conflict with Aboriginal peoples culture and values
- Initiate action to modify the practice and custom of services where this is required
- Monitor service activity to ensure ongoing compliance with cultural standards and practice.

The Systems Performance and Aboriginal Policy Division of DHCS carries the responsibility for implementing the Cultural Security Policy.

The Division can be contacted on **(08) 8999 2871**.

Background

Aboriginal culture is one of the oldest living cultures in the world although it is not homogenous. While there are some common values such as the importance of land to life, different Aboriginal groups live and manifest their culture through different languages and ceremonial and relationship rules.

Nationally and internationally 'culture' has emerged as a critical element of the civic and social structure of nations. Human rights, service programmes and public policy have increasingly recognised 'culture' as a fundamental tenet. Essentially naming 'culture' in this way recognises that people have a 'right to be different' and that the institutions of our society should ensure that service to the community is not skewed by assumptions about the predominance of any one cultural outlook. To do otherwise could marginalise sections of our community.

The Northern Territory has legislation that promotes 'recognition and acceptance within the community of the principle of the right to equality of opportunity of persons'. Commonwealth legislation also seeks to ensure that impairments to the enjoyment, recognition or exercise of fundamental rights and freedoms in the cultural, social and public life are eliminated.

Respect for culture has broad importance to any society. The Council of Reconciliation in their final report draws the reader's attention to the importance of promoting understanding and manifesting culture as a means of building a more cohesive and respectful Australia.

■ Why is Culture important to Health and Community Services?

Culture and the social behaviours surrounding it influence Aboriginal people's decisions about when and why they should seek services, their acceptance or rejection of treatment, the likelihood of adherence to treatment and follow up, the likely success of prevention and health promotion strategies, the client's assessment of the quality of care and their views about the facility and its staff.

For many the reality is that hospitals, health centres, family and community services and other services provided by DHCS are painful reminders of the marginalisation of Aboriginal people. This collective memory of past inappropriate or substandard treatment can be reinforced today by unintentional acts that are viewed as a continuation of the unwelcomed past. For example, a failure to understand the status in culture of senior female and male elders could lead to conflict particularly in palliative, respite or age care areas and reinforce the views of some that Aboriginal people receive inappropriate care. Building Cultural Security reduces conflict, improves quality and outcomes, enhances efficiency and improves customer satisfaction.

The health and community services sector increasingly recognises that a lack of attention to cultural issues leads to less than optimal health care and that conversely, addressing these concerns leads to improved health. Providers and professional groups in New Zealand, Canada and the United States have accepted that a constructive engagement with culture delivers benefits to the client, staff and organisation. They have said 'cultural competence, without it we make mistakes'.

It would be wrong to imply that everything currently done in the health and community services sector offends Aboriginal culture. Implementing Cultural Security will provide pathways to identify areas of action and the means for building best practice.

What is Cultural Security?

Cultural Security seeks to ensure that the construct and delivery of health and community services functions occurs within a framework that sensitively unites Aboriginal cultural rights, views and values and the science of human services. In doing so the policy intends to produce a best practice model that optimises the benefits Aboriginal people derive from an efficient and quality health system.

Best practice will be established only by reconciling culturally derived expressions of quality and appropriateness with the necessities of sound technical care. It will require the system to think carefully about workforce development, workplace practices, the monitoring and accountability of the system and its engagement with Aboriginal communities.

Cultural Security will require a shift in the system's thinking from just knowing and understanding to a focus on how we behave and provide services. Given that aspects of culture vary across regions the changes in service behaviour will be different in some regions than others.

Cultural Security means that the health and community services system will come to understand far more clearly than at present what Aboriginal people value and how we can work with these values to achieve better services, outcomes and more satisfied clients.

■ How is Cultural Security different from what we currently do?

Cultural awareness or appropriateness as a public policy approach has been in place for perhaps three decades. Yet Aboriginal people continue to complain that the system has not yet got it right. Staff who have participated in cultural awareness programmes are generally very positive about the experience and their new knowledge or insights. However, they also point to the enormity of the task of getting the system to make the changes necessary that would allow their new knowledge to be developed and applied in the workplace.

For example, a recent survey has shown that DHCS staff believe that culture is important to how we do our job and that they clearly see that bringing culture to the service interface can significantly contribute to efforts to improve Aboriginal health. But the same survey suggests that staff think the system has some way to go before this potential can be realised.

Neither personal knowledge nor insight alone appears to be enough. This may be because the health and community services system's approach to managing diversity is disjointed. The system does not provide the scope or opportunity for an organised assessment of organisational, clinical and administrative practices to ensure that Aboriginal clients' cultural values are properly included. The high turn-over of staff creates its own difficulties; the lack of specific knowledge about the cultural variables of different groups and how this might be translated into doing things differently, plus the sheer complexity and size of the sector can all work against individual or small group change efforts.

However the adoption of a new approach is not a wholesale rejection of past efforts, but a new opportunity to create space in and standards for the system so that Aboriginal communities and committed staff and managers can work together to develop and deliver best practice health and community services.

■ Implementing Cultural Security

Different parts of the health and community services system will begin the process of making their services culturally secure from different starting points. Figure one below provides a conceptual model that allows the different parts of the system to locate their current style of operation. The objective of the Cultural Security Policy is to move the system to quadrant four:

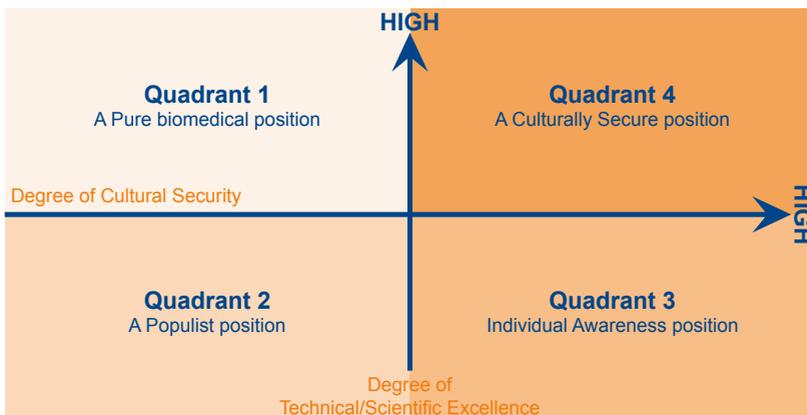
Quadrant One depicts that part of the system where scientific knowledge and information on health and community needs are clear but where the application of cultural values and knowledge is low.

Quadrant Two describes a position driven by stereotypical attitudes and over simplifications. It is often thought of as the ‘tabloid press’ position.

Quadrant Three represents characteristics in a system that might generally be aware of cultural matters but where there is not a means of blending the knowledge with science and the workplace.

Quadrant Four is where culture, science, policy and workplace behaviours are well aligned. Good technical care is embedded with cultural values to produce an enriched service environment.

Figure 1: Locating cultural security*



* Adapted from Hodgson I, 2000

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The implementation of the Cultural Security Policy will work at a regional level to assist all parts of the system to take on the characteristics of quadrant four. The critical work to be undertaken will focus on:

- Identifying those elements of Aboriginal culture that intersect with the delivery of health and community wellbeing services in the Northern Territory
- Reviewing the practice and custom of health and community wellbeing service to ensure that it does not unnecessarily offend Aboriginal peoples culture and value
- Initiating action to modify the practice and custom of services where this is required
- Monitoring service activity to ensure ongoing compliance with cultural standards and practice.

The implementation of the Cultural Security Policy will deliver significant gains in a number of key areas including:

Workforce Development – Improving the knowledge base of professional and broader staff. Recent work suggests that our staff recognise that working in a cross cultural environment requires specific applied knowledge and skill

Workplace Reform – Changing the public health, clinical and administrative practices in our workplace to incorporate critical cultural standards

Monitoring and Accountability – Building measures and indicators of success, building greater trust in the services provided by the health and community sector

Community Engagement – Building Aboriginal community and the wider public's engagement in developing and monitoring the Policy and its functioning.

Conclusion

In one or two generations we have moved from a view that Aboriginal culture was irrelevant to good health and community service provision to a richer understanding of health, wellbeing and development that recognises culture as an integral component of the human experience. In many respects service delivery is catching up with long held views in Aboriginal communities about the need for holistic care, for recognition of the social and cultural influences on health and wellbeing and for a partnership between culture and science. Cultural Security is the next step in public policy towards this reconciliation.

■ Frequently Asked Question

- Q** Why is culture important to the delivery of health and community services?
- A** Culture influences Aboriginal people's decisions about when and why they seek services, their acceptance or rejection of treatment, the likelihood of adherence to treatment and follow up, the likely success of prevention and health promotion strategies, the client's assessment of the quality of care and their views about the facility and its staff.
- Q** What is Cultural Security?
- A** Cultural Security is a strategy to improve services to Aboriginal people by making sure the way we deliver services takes important cultural matters that may have a bearing on the health and Community outcomes into account.
- Q** What will Cultural Security mean for service providers?
- A** At the local and regional level the Policy will mean that Aboriginal communities and DHCS will work closely together to make sure that the services we provide take Aboriginal culture in account. This may mean that we change the way some services are provided, the number of Aboriginal people that are employed in service areas and how we think about quality in our workplaces.
- Q** How is Cultural Security different from cultural awareness?
- A** The potential of cultural awareness to deliver service improvements relies on teaching staff about Aboriginal culture in the hope that they might be able to change the way they and the system deliver services. Cultural Security starts from the position that the system takes the primary responsibility for working with communities and staff to find ways of building Aboriginal culture appropriately into services to promote the best possible outcomes.
- Q** Will Cultural Security be different in different parts of the Territory?
- A** Cultural Security is being rolled out on a local and regional basis so that service providers can build a stronger engagement with local communities and culture. There may be some differences between the way things are done in the Top End and the Centre, the Barkley and the Katherine regions.