

Submission to:

Office of Multicultural, Aboriginal and Torres
Strait Islander Affairs
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Submission to the ACT Languages Policy Discussion Paper

Women's Centre for Health Matters Inc.

February 2011

The Women's Centre for Health Matters acknowledges the Ngunnawal people as the traditional owners and continuing custodians of the lands of the ACT and we pay our respects to the Elders, families and ancestors.

We acknowledge that the effect of forced removal of Indigenous children from their families as well as past racist policies and actions continues today.

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Introduction

The Women's Centre for Health Matters Inc. (WCHM) is a community-based organisation that works in the ACT and surrounding region to improve women's health and wellbeing. WCHM focuses on groups of women who experience disadvantage and uses social research, community development, advocacy and health promotion to empower these women to achieve the highest possible standard of health and wellbeing.

WCHM believes that health is determined not only by biological factors, but by a broad range of social, environmental and economic factors known as the social determinants of health. We acknowledge that the environment and life circumstances that each woman experiences have a direct impact on her health, and in many cases, women's poor health is rooted in social disadvantage. For these reasons, WCHM is committed to taking a 'whole of life' and social approach to women's health, that is also firmly situated within a human rights framework.

Response to the ACT Languages Policy Discussion Paper

WCHM welcomes the development of an ACT Languages Policy as a framework to support language related policy directions in the ACT. Previous policies and plans relating to languages—at the state, territory or national levels—have focused on language education and acquisition to the ends of creating cultural diversity, improving English literacy or enhancing trade and tourism. While these are all important goals, WCHM is pleased to see that the proposed ACT Languages Policy will have a focus on language as an element of human rights, linked to personal and cultural identity, essential to the social organisation of community and as the basis of cognitive and educational development.

WCHM welcomes this opportunity to provide a submission to the *Discussion Paper for ACT Languages Policy* and have chosen to limit our responses to those areas in which we have the most knowledge and expertise, and to support our responses with evidence published by the Centre and its partners on the specific needs of ACT women.

1. What other language policies, principles and approaches should be considered for informing the ACT language policy?

While the three areas of concern for the policy—law, policy and community connectedness—are appropriately encompassing categories for a high level policy, WCHM considers it vital to include a more explicit acknowledgement of the importance of access to health information and services as intimately connected to the principles that inform the ACT Languages Policy.

At the international level, health as a human right is acknowledged in both the United Nations' *Declaration of Human Rights*¹ and the *International Covenant on Economic, Social and Cultural Rights*.² However, health cannot be realised if individuals are unable to obtain information about health and health systems in a language and format that they understand or if they are unable to communicate with health care providers.

Access to health information and services is acknowledged as fundamental to positive multiculturalism in the *ACT Multicultural Strategy 2010-2013*, which the ACT Languages Policy has been designed to support. Five of the six focus areas have either objectives or key performance indicators—and sometimes both—that relate directly to assisting individuals to realising improved health and to supporting multicultural communities better understand the ACT health care system and Australian understandings of health and wellbeing. For example, one of the key objectives for Focus area 1—Languages, is “to ensure that services and programs are accessible to all Canberrans who do not speak the English language well or at all”. The two key performance indicators set against this objective are to ensure that ACT Government publications are provided in alternative languages and formats and to increase and sustain the direct interpreter events undertaken at the Migrant Health Services (MHS).³ To further illustrate the point, one of the key Objectives of Focus area 2—Children and young people is to “improve access to services which support the mental health of children and young people of multicultural backgrounds”, and the key performance indicator set against this will measure the number of young people accessing Mental Health ACT Child and Youth Mental Health Services.⁴

Culturally and linguistically diverse communities—particularly those entering under humanitarian programs—are faced with many difficulties in accessing effective health care when settling in Australia including cultural, language and financial constraints, lack of awareness of available

1 General Assembly of the United Nations, *The Universal Declaration of Human Rights*, United Nations, 1948.

2 United Nations Educational, Scientific and Cultural Organization (UNESCO), *International Covenant On Economic, Social And Cultural Rights*, United Nations, 1976.

3 Department of Disability, Housing and Community Services, *ACT Multicultural Strategy 2010-2013*, ACT Government, Canberra, 2009, p. 11.

4 *Ibid.*

services and lack of understanding by health providers of the complex cultural concerns of refugees and migrants.⁵

In research conducted by WCHM on access to and utilisation of health care by Southern Sudanese women, language and communication emerged as the two most significant barriers, because while interpreter services are available, they do not sufficiently meet the needs of the women. When interpreter services lack quality or are inadequate, they are supplemented by the use of other community or family members.⁶ The Sudanese women who participated in the research believed that low utilisation of health services by refugee women is largely due to socio-cultural barriers to information seeking, inadequate or inappropriate types of information sources and lack of culturally appropriate information.

Ethnic groups which have entered under humanitarian programs are particularly vulnerable to poor health and wellbeing outcomes, as they may have experienced trauma and often have little or no English language. This contributes to the magnification of a variety of complex health issues and support needs and the risk of falling through gaps in service provision.⁷ It is only when individuals and communities can access appropriate health information and care that they can fully participate in community life. Such access can be facilitated by the early provision and availability of interpreter services for individuals accessing the health care system with little or no English and the provision of culturally and language appropriate information for new and emerging communities about ACT health services.

5 Mwanangwa Mpasu, *Report Summary: Navigating a Whole New World: Access to Health Care and Utilization of Health Services by Southern Sudanese Women in the ACT*, WCHM, Canberra, p. 1.

6 Mwanangwa Mpasu, *Report Summary: Navigating a Whole New World: Access to Health Care and Utilization of Health Services by Southern Sudanese Women in the ACT*, WCHM, Canberra, p. 5.

7 Robyn Taranto, *Project Report: Cultural Awareness Training for ACT Women's Services*, WCHM, Canberra, p. 1.

2. What further initiative or strategies could be introduced to ensure access to services in the ACT?

WCHM supports the strategy that “ACT public servants will be provided ongoing training to enable them to provide services which are both accessible and delivered in a culturally sensitive manner”.⁸ However, WCHM would like to see a clearer commitment to working with individuals from major cultural groups in the ACT to design and deliver culture- and gender-specific awareness training.

In the report *Culturally and Linguistically Diverse Women in the ACT: Barriers and Enablers to Achieving Social Connectedness*,⁹ WCHM found that those ACT services working with CALD women needed to be more sensitive, skilled, and well informed about issues facing women from new and emerging cultural groups. In response to this finding, WCHM hosted a forum for ACT service providers to discuss how this issue could be addressed. Two key priorities were identified which were: the need for ACT service providers to have a deeper grasp of culture-specific information about the groups they were most likely to encounter in their work and the small number of CALD women in leadership roles who can provide positive role models for other CALD women in the community.

Funding for a project to address these issues was provided by CIT to:

1. Build the cultural capacity of ACT service providers by presenting cultural awareness training with a specific focus on gender differences and the needs of women from new and emerging cultural communities in Canberra
2. Expand the capacity of CALD women by mentoring them to develop useful skills such as public speaking and the ability to develop and deliver training sessions.

This unique program worked with refugee women to create training modules based on the lived experience of their culture and settling in Canberra. The project aimed to develop the women as advocates and leaders within their communities and to deliver gender- and culturally-sensitive information to ACT services. There was unanimous confirmation from all attendees that the training was valuable to both community and Government agencies.¹⁰

A project such as this—that is developed and delivered by individuals from the major cultural groups in the ACT—has the potential to add value to how ACT services engage with their communities and to create sustainable system-wide improvements with effective strategies for building CALD men and women’s capacity to access health and wellbeing information and support that meets their needs.

8 Department of Disability, Housing and Community Services, *Discussion Paper for ACT Languages Policy: Languages for all Canberrans*, ACT Government, Canberra, 2010, p. 11.

9 Rebecca Brewer, *Culturally and Linguistically Diverse Women in the ACT: Barriers and Enablers to Achieving Social Connectedness*, WCHM, Canberra, 2009.

10 Robyn Taranto, *Project Report: Cultural Awareness Training for ACT Women’s Services*, WCHM, Canberra, p. 16.

This model also brings enormous benefits to the individual trainers, building on their language ability, skills and confidence. This was proved by the feedback of the women who delivered the cultural awareness training at WCHM who felt that the project had assisted them to reach their personal goals of:

- Increased confidence to speak with others both within and outside of their communities
- Increased skills for developing and presenting a training session about their culture and experiences as a refugee woman in Canberra
- Increased confidence to present and share their knowledge on an equal basis
- Time and self-management skills
- The ability to transfer what they learnt to their communities and be a mediator between their community and service providers
- Increase in their understanding of the community services sector and the diversity and roles of service providers

Some of the feedback from the women who completed the project included:

“Confidence – I now speak more confidently because I know what I am talking about. I have a stronger commitment to let the service providers know about my community and help them solve the problem that will come through their workplace”

“Confidence, 90% increase. Now I can speak anywhere, I am not afraid of talking. I understand now that others want to help, from the responses to my presentation. I know they want to listen to me, that makes me confident to speak”

“Now I want to meet with our community especially women and talk with them about different services and help them to know which services they can go to”

As is demonstrated by the feedback, the project helped the women to grow confidence in speaking with service providers, but it also assisted them in communicating information from service providers back to other within their community. Providing culture- and gender-specific awareness training will provide ongoing and invaluable information to support service providers to re-evaluate the way in which they provide support to the CALD community. The project provides a unique model for gender-based and culture-specific training to be delivered in a way that creates equal dialogue between the cultural community and the sector and promotes mutual respect on both sides.¹¹

¹¹ Robyn Taranto, *Project Report: Cultural Awareness Training for ACT Women's Services*, WCHM, Canberra, p. 22.

Are there other issues or strategies that should be considered to encourage the learning of English and other languages?

WCHM learned, through the *Cultural Awareness for ACT Women's Services* project, that there is a need for more specific services for refugees to enter education and training pathways, to remain in them, and to direct themselves through these pathways appropriately where opportunities lie.

Humanitarian entrants can have very negative experiences in entering and remaining in education; especially young men, who often withdraw from English classes and discontinue their education due to a loss of confidence and status associated with migration. In the refugee Mon, Karen and Sudanese communities there has been an issue of young people of high school age facing serious barriers to acquiring education and training in Canberra, due to either no prior education or such limited prior education that they cannot join in high school classes. WCHM understands that young people undertake English language classes for six months before being placed in their age appropriate year level and expected to proceed through the education system. Some of the students may never have experienced formal education and as a result, withdraw from education entirely.¹²

WCHM would also like to see a greater integration of information about health and social issues into English language training for refugees, rather than presenting this information at the commencement of their English training when they understand little and are overwhelmed by their multiple and complex settlement adjustments. By weaving information about health and social issues through the English language training, refugees may have developed sufficient language skills to understand material presented and communicate it to others in their community.¹³

As an extension of this idea, WCHM proposes the following strategies for CIT to be supported to provide:¹⁴

- English classes that expand the focus from everyday life skills to also including bridging language and skills for vocational courses at CIT
- Greater integration between departments to include programs with, for example, childcare and parenting, cooking, health, media and ICT
- Specialised bridging courses for the development of technical language required for specific fields of work such as health or information technology

WCHM would also like to see CIT able to develop partnerships within the ACT community sector to mentor English language students in specific vocational areas such as aged care, disability and community development.

¹² Robyn Taranto, *Project Report: Cultural Awareness Training for ACT Women's Services*, WCHM, Canberra, p. 20.

¹³ *Ibid.*, p. 21.

¹⁴ *Ibid.*

Recommendations:

1. To include access to health and wellbeing information and services as a key approach of the ACT Languages Policy.
2. A clear commitment in the ACT Languages Policy to working with individuals from major cultural groups in the ACT to design and deliver culture- and gender-specific awareness training.
3. More specific services for refugees to enter education and training pathways, to remain in them, and to direct themselves through these pathways appropriately where opportunities lie.
4. The integration of information about health and social issues into English language training.

Conclusion

In conclusion, this submission aims to highlight issues found through WCHM research with women from culturally and linguistically diverse backgrounds, in particular those from new and emerging cultural groups. WCHM looks forward to participating further in the consultation process and to the development of an ACT Languages Policy.

References

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