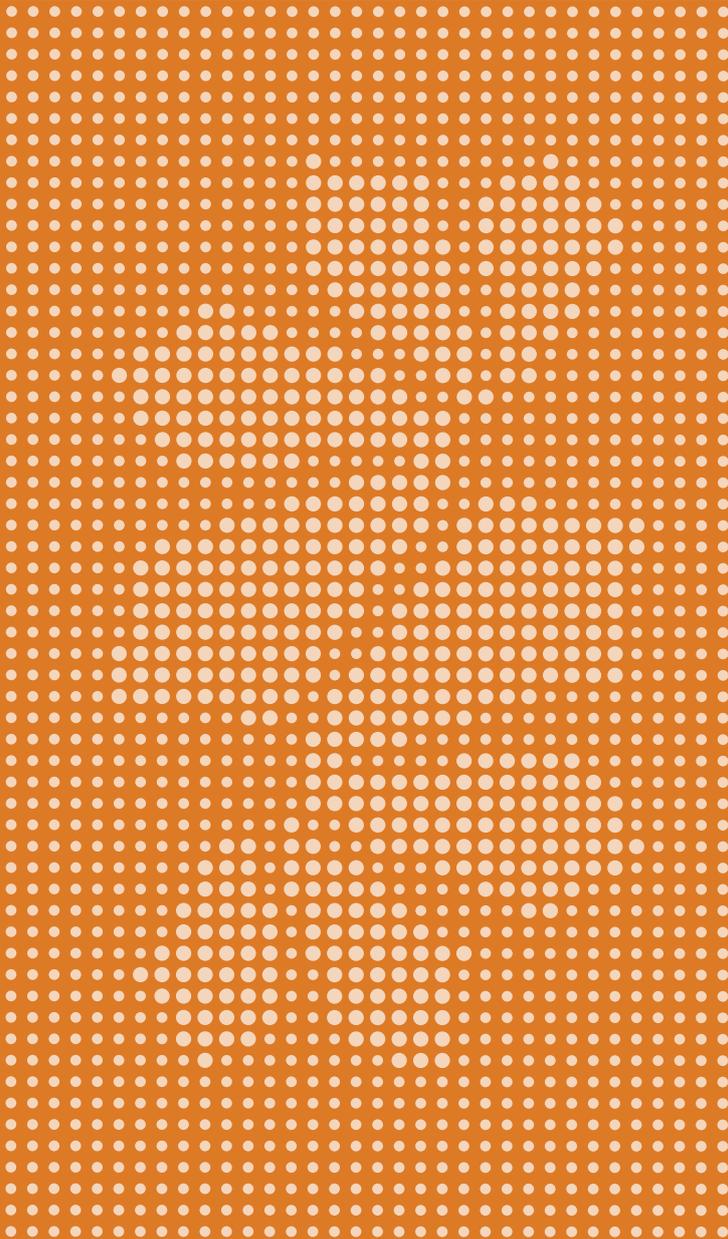


SHAPING INCLUSIVE SERVICES

Cultural Diversity In Ageing

2014 CONFERENCE



12-13 June 2014
Melbourne Convention Centre

Conference Sponsors

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Welcome



On behalf of the Centre for Cultural Diversity in Ageing, it is my great pleasure to welcome you to the 2014 Cultural Diversity in Ageing Conference. This, our 6th biennial conference, marks the next step in our pursuit of excellence in quality outcomes for older people from culturally and linguistically diverse backgrounds.

With this year's theme, Shaping Inclusive Services, we showcase a breadth of inclusive measures and models from across the aged care and other sectors. The range of conference presentations are testament to the traction that this issue had gained over the years. We thank them for their willingness to share their experiences and

look forward to gaining inspiration from their excellent work.

This Conference marks the presentation of our inaugural Excellence Awards. We have been buoyed by the response we have had for this initiative and the number of quality nominations received. We look forward to announcing our three winning nominations on the first day of the Conference.

I would like to extend my gratitude to the Department of Social Services for making it possible to organise this conference through the Partners in Culturally Appropriate Care initiative and to all of our sponsors for their generosity and commitment.

Thank you for your participation in the Conference. I trust you enjoy the many and varied presentations and activities planned for the two days and hope you find it an invigorating and inspiring experience in your ongoing efforts to improve the lives of older Australians.

Ljubica Petrov
Manager
The Centre for Cultural Diversity in Ageing

Partners in Culturally Appropriate Care

The Centre for Cultural Diversity in Ageing receives funding from the Department of Health and Ageing through the Partners in Culturally Appropriate Care (PICAC) initiative.

The PICAC program funds an organisation in each state and territory to improve partnerships between aged care service providers, culturally and linguistically diverse communities and the Department of Social Services, and to ensure the special needs of older people from diverse cultural and linguistic backgrounds are identified and addressed.

ACT & NSW
Multicultural Communities Council of Illawarra
02 4227 4222
www.picacnsw.org.au

South Australia
Multicultural Aged Care
08 8241 9900
www.mac.org.au

Victoria
Centre for Cultural Diversity in Ageing
03 8823 7979
info@culturaldiversity.com.au

Northern Territory
Council on the Ageing NT
08 8941 1004
www.cotant.org

Queensland
Diversicare
07 3846 1099
www.diversicare.com.au

Tasmania
Migrant Resource Centre (Southern Tasmania)
03 6221 0999
www.mrchobart.org.au

Western Australia
ILC Multicultural Aged Care Service (ILCMACS)
08 9381 0660
www.ilc.com.au

Housekeeping

Registration Desk

On arrival at the Conference, please see the registration and information desk. You will receive a delegate satchel and name tag, and staff will be available to assist with any queries you may have throughout the duration of the Conference.

Exhibitor Stalls

You will have time during each break to browse the range of exhibitor stalls in the foyer.

Workshop Registration

The 'Diversity and Inclusion: key barriers and enablers' workshop explores discrimination and its implications for cultural diversity in aged care. Facilitated by Jane Lewis of the Victoria Equal Opportunity and Human Rights Commission, **places in this workshop are limited** and registrations are essential. Visit the registration stand early to book your place in the workshop.

Concurrent Presentations

All concurrent presenters will need to upload their presentation in the Speakers Preparation Room located behind the Plenary Room at least one hour prior to their presentation. Technical assistants will be on hand to assist with this process.

Poster Presentations

Poster presentations will be on display throughout the duration of the Conference in the main foyer area. We encourage you to browse these presentations at your leisure and speak to poster authors during the lunch breaks. Details of poster presentations are located on page 31 of the program.

Internet Access

Free wi-fi is available throughout the Conference venue under 'M Connect' wireless service.

Parking

Parking is available at the Melbourne Convention and Exhibition Centre and South Wharf. Discount parking is also available in the Melbourne Exhibition Centre underground car park (entrance from Normanby Road only). Please collect your discount parking voucher from the registration desk.

Photography

Photos of speakers and delegates will be taken at the event. If you do not wish to have your photo taken, please let the photographer know.

Disabled Access

There are disabled parking bays in the Melbourne Convention Centre's car park. Park near doors 6 and 10 and use these lifts for best access to the Conference venue. Disabled amenities are located next to the lifts (see floor plan on page 3).

Emergency Procedures

In the event of a fire, medical or security emergency, event coordinators will activate relevant procedures. If necessary, delegates can also call extension 6666 from the nearest wall phone, or 9235 8333 from any phone.

First Aid

Should you require first aid assistance during the Conference, please notify the Conference organisers who will assist accordingly. Alternatively, call extension 8333 from a wall phone or call 9235 8333 for assistance.

Prayer Room

The prayer room is located on the ground level of the Melbourne Convention Centre. From the Conference venue, follow the stairs to the ground level and follow the foyer around to the right. The prayer rooms are located past the customer service desk and cloak room on the left hand side.

Master of Ceremonies

Sasha Jovanovic

Sasha is a cultural change expert having delivered some of the world's largest business transformation initiatives in banking, health, insurance and education industries. He is keenly interested in achieving benefits realisation and ROI through capturing the wealth in cultural diversity.



Conference Activities

Social Function

All delegates are invited to attend the social function following the proceedings on Thursday 12 June. This will be a great opportunity to network in a relaxed and social environment, while enjoying drinks, canapés and live music from Melbourne guitar duo The Eamon and Dudi Project. The function will take place in the Conference foyer area.

Massage Area

During the lunch and afternoon tea breaks, all delegates are invited to enjoy a massage to relax and rejuvenate thanks to session supporters Benetas. Look out for the massage therapists in the orange t-shirts located in the foyer area.



Sisterworks

SisterWorks is a social enterprise that supports asylum seekers, refugees, and migrant women from non-English speaking backgrounds in their transition from welfare recipients to businesswomen.

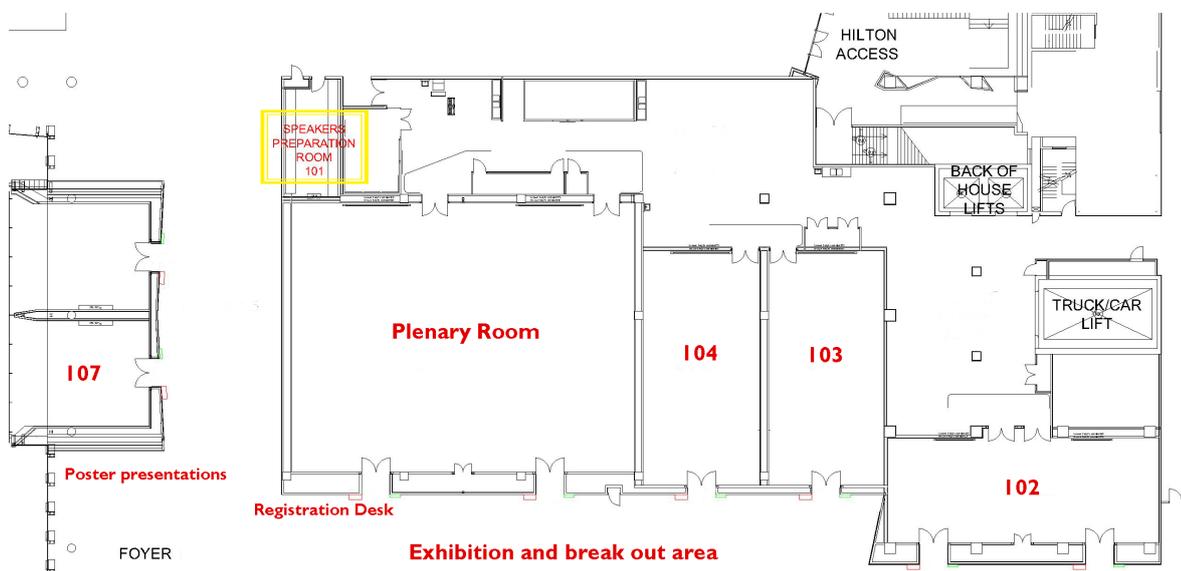
The women who connect with SisterWorks, are supported in creating, selling and marketing handcrafted items. The women build social networks and develop personal confidence by experiencing success and recognising the value of their own and traditional skills.

SisterWorks will be displaying (and selling) their beautiful handcrafted items on both days of the conference.

Social media and hash tag

Remember to include the Conference hashtag '#shapinginclusiveservices' on all your social media posts!

Venue map



Conference Program

Thursday 12 June 2014

8.15am-9.00am

Registration

9.00am-10.30am

Conference welcome and keynote presentations

Plenary Room

Conference introduction

Sasha Jovanovic - Conference Facilitator

Welcome to Country

Conference welcome

Senator the Hon Mitch Fifield, Assistant Minister for Social Services

Government's reform agenda of the aged care sector and the cultural and linguistic diversity of the ageing population

Senator the Hon Mitch Fifield, Assistant Minister for Social Services and Senator the Hon Concetta Fierravanti-Wells, Parliamentary Secretary to the Minister for Social Services

Accepting and celebrating cultural diversity – Aboriginal and Torres Strait Islander perspective

Dr Sally Goold OAM

Older people from culturally and linguistically diverse backgrounds: a national perspective

Eugenia Grammatikakis - Senior Deputy Chair, Federation of Ethnic Communities' Councils of Australia

10.30am-11.00am

Morning Tea

11.00am-12.30pm

Concurrent Presentations

CONCURRENT SESSION 1A	CONCURRENT SESSION 1B	CONCURRENT SESSION 1C	CONCURRENT SESSION 1D
ROOM: Plenary Room	ROOM: 104	ROOM: 103	ROOM: 102
CHAIR: Christine Clifton, EMR - Palliative Care Consortium	CHAIR: Angelika Tyrone, Ethnic Link Services	CHAIR: Rosemarie Draper, RDNS	CHAIR: Rosa Colanero, Multicultural Aged Care
<p>Love Stories: Understanding the Caring Journeys of Aged Greek Carers Dr Debbie Horsfall, University of Western Sydney, NSW</p> <p>Intergenerational Perceptions of Ageing Well: A pilot study of the Australian Greek community Dr Helen Feist, University of Adelaide, SA</p> <p>Cultural Diversity in People's Experiences of Ageing Dr Victoria Team, La Trobe University, VIC</p>	<p>Diversity Includes LGBTI Diana Bernard, The Aged-Care Rights Service, NSW</p> <p>Institutionalised Discrimination? Addressing the health inequalities of patients with low English proficiency Emiliano Zucchi, Northern Health, VIC</p> <p>A Charter of Rights and Freedoms for Older Persons - Is it culturally and linguistically inclusive? Dr Susannah Sage Jacobson, Flinders Law School, SA</p>	<p>Planning a Healthy Ageing Program for Overseas Born Chinese Baby Boomers Christiana Chau, Griffith University, QLD</p> <p>Celebration of Life Events Paul Brophy, Brotherhood of St Laurence, VIC</p> <p>Their Say on End-Of-Life Issues: Perspectives of people from culturally and linguistically diverse (CALD) backgrounds in the Hunter Region, NSW Se Ok Ohr, Hunter New England Local Health District, NSW</p>	<p>A Person Centred Care Paradigm Driven by a CALD Initiative Vicki Kanakaris, Greek Welfare Centre of S.A.</p> <p>Through the Trainers' 'Looking Glass': Walking the path of cultural competency training Monita Mascitti-Meuter, St Vincent's Hospital, VIC</p> <p>Understanding Dementia: From managing challenging behaviours to effective communication Agnieszka Chudecka, Multicultural Aged Care Inc, SA</p>

12.30am-1.30pm

Lunch and Poster Presentations

1.30pm-3.00pm

Concurrent Presentations

CONCURRENT SESSION 2A	CONCURRENT SESSION 2B	CONCURRENT SESSION 2C	CONCURRENT SESSION 2D
ROOM: Plenary Room CHAIR: Dr Barbara Hayes, Northern Health Melbourne	ROOM: 104 CHAIR: Eva Hussain, Polaron Language Services	ROOM: 103 CHAIR: Mary Lyttle, Elder Rights Advocacy	ROOM: 102 CHAIR: Caroline Romeo, Ethnic Communities' Council of NSW
Do our Partnerships Shape Inclusive Services? Annalisa Cannizzaro, Carers Victoria	Culturally Inclusive Services, Best-Practice and Innovative Service Models Within the Greek Community Adonis Maglis, Australian Greek Welfare Society (AGWS), VIC	Incontinence Outreach in CALD Communities Nives Zerafa, Continence Foundation of Australia, VIC	CALD Carers Peer Support Groups - Empowerment, sustainability, linkages to inclusive services Claire Emmanuel, Alzheimer's Australia, VIC
Moving On (Generic chronic disease self management program) CALD Pilot Una Turalic, Nepean Blue Mountains Local Health District & Anne Fitzgerald, Nepean Blue Mountains Medicare Local, NSW	Socially Inclusive Services that Enable Community Involvement for CALD Consumers Pam Pindral & Vesna Haracic, City of Salisbury, SA	Meeting the Information Needs of Older People using an Italian Diabetes Talking Book Tracy Aylen, RDNS, VIC	Older People in Cultural Transition: A psychosocial approach to educating older refugees Sue Cunningham, Service for the Treatment and Rehabilitation of Torture and Trauma Survivors - NSW
Culturally Responsive Palliative Care Strategy: A partnership approach to raise community awareness of palliative care and improve access to culturally inclusive and responsive palliative care services Mike Kennedy, Palliative Care Victoria & Elena Petreska, ECCV	All the Cultures of the Rainbow - LGBTI inclusive practice Annalisa Cannizzaro, Carers Victoria	3 ways to Relate to People with Dementia: Communicate-Connect-Include (a dementia education resource for CALD communities) Amelia Suckling, Alzheimer's Australia VIC	Enhancing the Transition of Overseas Qualified Nurses into the Australian Workforce Se Ok Ohr, Hunter New England Local Health District, NSW

3.00pm-3.30pm

Afternoon Tea

3.30pm-5.00pm

Keynote presentations

Plenary Room

Inclusive spaces

Efterpi Soropos - Founder and Creator, Human Rooms

Excellence in culturally inclusive initiatives

Dr Olga Kanitsaki AM

Leadership in shaping inclusive services

Ljubica Petrov - Manager, Centre for Cultural Diversity in Ageing

Presentation of Centre for Cultural Diversity in Ageing Excellence Awards winners

5.00pm-6.30pm

Social function

Drinks served in the foyer area with entertainment by The Eamon and Dudi Project

Friday 13 June 2014

8.15am-9.00am

Registration

9.00am-10.30am

Introduction and keynote presentations

Plenary Room

SPONSOR ADDRESS - Extending culturally responsive palliative care

Michael Bramwell - Chair, Palliative Care Victoria

Diversity within diversity

Dr Christina Ho - Senior Lecturer, University of Technology, Sydney

The changing face of cultural diversity in the aged care workforce

Associate Professor Debra King - Dean, School of Social and Policy Studies, Flinders University

Australian research on older people from CALD backgrounds

Dr Helen Feist - University of Adelaide

10.30am-11.00am

Morning Tea

11.00am-12.30pm

Concurrent Presentations

CONCURRENT SESSION 3A	CONCURRENT SESSION 3B	CONCURRENT SESSION 3C	CONCURRENT SESSION 3D
ROOM: Plenary Room CHAIR: Van TaPlacidi, Benetas	ROOM: 104 CHAIR: Annalisa Cannizzaro, Carers Victoria	ROOM: 103 CHAIR: Mike Kennedy, Palliative Care Victoria	ROOM: 102 CHAIR: Claire Emmanuel, Alzheimers Australia Vic
Home, but Not Alone! Angela Ng, Villa Maria, VIC Speaking the Language of CALD Community Through the Evergreen College Amar Varsani, ILC MACS & Theresa Kwok, Chung Wah Association, WA New Aged and Community Care for the Chinese Community Lara Calder, Calder Flower Architects, NSW	Engaging with Our People - Managing cultural diversity in emerging populations Michael Foley & Tamara Withanage, Bapcare Westhaven Community, VIC Tiny but Innovative Leena Vuorinen, Australian Finnish Rest Home Association, QLD 'Doing the Right Thing' but also 'Doing Things Right': Shaping a culturally inclusive and integrated aged care service in Geelong Joy Leggo, Multicultural Aged Care Services Geelong, VIC	Financial Planning in Aged Care: Getting the message across to diverse communities Marco Nazzaro, PFG Financial Service, VIC Delivering Culturally Appropriate Services and Value for Money Sam Renk, Care Connect, VIC Managing Workforce Diversity Rosa Colanero, Multicultural Aged Care Inc., SA	Consumer Directed Care and Cultural Inclusiveness Mary Lyttle, Elder Rights Advocacy, VIC Connecting Isolated CALD Seniors and Building Social Inclusion Fiona York, Ethnic Communities' Council of Victoria & representative from Department of Health, VIC Policy Advocacy to Improve Access for New and Emerging Communities to Aged Care Services Nikolaus Rittinghausen & Marion Lau OAM JP, Ethnic Communities' Council of Victoria, VIC

CONCURRENT SESSION 3E

ROOM: 107

CHAIR: Tonina Gucciardo-Masci, Centre for Cultural Diversity in Ageing

Service provision for Aboriginal and Torres Strait Islander elderly – Networking and an explorative discussion about the implications of aged care reforms on services

Facilitator: Noeleen Tunny, Victorian Aboriginal Community Controlled Health Organisation (VACCHO)

Special note: This session has limited availability and registrations are essential. See the Registration Desk to book.

12.30pm-1.30pm

Lunch and poster presentations

Entertainment by Jali Buba Kuyateh

1.30pm-3.00pm

Concurrent Presentations

CONCURRENT SESSION 4A	CONCURRENT SESSION 4B	WORKSHOP	CONCURRENT SESSION 4C
ROOM: Plenary Room CHAIR: Vivienne McDonald, Diversicare	ROOM: 104 CHAIR: Grace Roberto, Alzheimers Australia Vic	ROOM: 103 CHAIR: Tonina Gucciardo-Masci, Centre for Cultural Diversity in Ageing	ROOM: 102 CHAIR: Karen Thode, DBMAS
Interpreters by Broadband - Videoconferencing CALD cognitive assessments Betty Haralambous, National Ageing Research Institute (NARI), VIC	Social Capital and Cultural Diversity Among Older Australians Dr Anita Frayman, Monash University, VIC	Diversity and Inclusion: key barriers and enablers Facilitator: Jane Lewis, Victorian Equal Opportunity and Human Rights Commission	Self-Directed Community Aged Care for CALD, ATSI, and Rural Communities in Australia: A summary of working group outcomes Dr Goetz Ottmann, Uniting Care Community Options/Deakin University, VIC
Development of Technologies to Support Nurses in Improving the Health Literacy of Older Culturally Diverse People Rosemarie Draper, RDNS, VIC	Issues and Innovation in Care Services for the Aged of Culturally and Linguistically Diverse Backgrounds in the Context of the Current Reform Angelika Tyrone, Ethnic Link Services, UnitingCare Wesley Port Adelaide, SA	Special note: This workshop has limited availability and registrations are essential! See the Registration Desk to book.	Western Australian Aboriginal and Torres Strait Islander Rural and Remote Aged Care Training Project Maureen Crowther & Fiona McBeath, Kimberley Training Institute, WA
A Journey into the World of Wisdom Eva Hussain, Carol Yan & Voula Tomaras, Polaron, VIC	Person-Centred Care: Challenges and Success in Providing Cultural, Linguistic and Religious Inclusive Services Urfi Mirza, Southern Cross Care, VIC		Updating the Volunteering Experience for Seniors from Multicultural Backgrounds Caroline Romeo, Ethnic Communities Council of NSW

3.00pm-3.30pm

Afternoon tea

3.30pm-4.00pm

Being an intersex, queer and ethnic community leader in a diverse, multicultural city

Plenary Room

Tony Briffa

4.00pm

Conference close

Poster Presentations

The following presentations will be on display throughout the duration of the Conference, with delegates invited to speak with presenters during the lunch break each day. Abstracts for each poster can be found on page 31.

Celebration of Life Paul Brophy Brotherhood of St Laurence - Sambell Lodge, VIC

Designing a communication tool using health literacy principles Tanya Sofra, HealthWest Partnership, VIC

The effectiveness of a series of Cultural Briefing Sessions in enhancing capacity to deliver culturally-appropriate care in a dementia care organisation Jeanette Van Luyn, Alzheimer's Australia, QLD

Meet Greet and Eat: Encouraging CALD communities' access to health and community services Nicolina Lowe, Latrobe Community Health Service, VIC

Diversity Conceptual Model: Supports thinking about cultural diversity and possible associations with disadvantage in policy, planning and practice Lawrence Walsh, RDNS, VIC

Dementia Care in the Community: Access for Culturally and Linguistically Diverse Communities Jordan King, RDNS, VIC

Supporting professional carers from culturally and linguistically diverse backgrounds Julia Rothwell, Wesley Mission Brisbane, QLD

Remember to... Multilingual Medicines Reminder Cards to promote safe self-management of medicines in CALD communities Ann Johnson, RDNS, VIC

Assessing the Geriatric Depression Scale (GDS) and the Geriatric Anxiety Inventory (GAI) and education about depression and anxiety amongst the older Chinese community in Australia Betty Haralambous, National Ageing Research Institute, VIC

Partnership between WELL PROGRAM TAFE SA and Regency Green Multicultural Aged Care Facility (RG) Cynthia Ofner & Bonnie Hart, Regency Green Multicultural Aged Care Facility (RG) and TAFESA, SA

Disseminating the Have A Try (HAT) exercise program and Healthy Ageing Quiz (HAQ) to older people from culturally and linguistically diverse backgrounds in Melbourne Freda Vratsidis, National Ageing Research Institute, VIC

Keynote Speakers



Senator the Hon Mitch Fifield, Assistant Minister for Social Services

Senator Mitch Fifield was sworn in as Senator for Victoria in the Australian Parliament on 1 April 2004 and re-elected at the 2007 and 2013 elections

Mitch was appointed as the Assistant Minister for Social Services on 16 September 2013 with responsibility for disabilities and ageing.

Mitch also serves as a member of the Senate leadership team as Manager of Government Business in the Senate.

Before entering Parliament, Mitch worked as a senior political adviser to the former Federal Treasurer, Peter Costello, and held senior advisory positions in the Victorian Kennett and New South Wales Greiner governments. Mitch has served as a reservist in the Australian Army Psychology Corps and studied politics at Sydney University.

Mitch was an Ambassador for the not-for-profit school music organisation The Song Room and was an Advisory Board Member for the Yachad Accelerated Learning Project for indigenous students. Mitch is a founding director of the Sir Paul Hasluck Foundation.



Senator the Hon Concetta Fierravanti-Wells, Parliamentary Secretary to the Minister for Social Services

Concetta was born in Wollongong, New South Wales, the daughter of Italian migrants.

After completing her primary and secondary education in Wollongong, she attended the Australian National University in Canberra. She graduated with a Bachelor of Arts in Political Science and European Languages in 1980 and a Bachelor of Laws in 1982.

For 25 years prior to entering the Senate, Concetta was actively involved in a wide range of community activities.

For 20 years, Concetta was primarily a lawyer with the Australian Government Solicitor (AGS). During that time she acted for many Government Departments and statutory authorities. Whilst at the AGS, she had various secondments to other positions including three years as a policy advisor to the Federal Opposition in the early 1990s and a period as Senior Private Secretary to former Premier John Fahey.

In particular, she represented the Australian-Italian community at an international level through the General Council of Italians Abroad (CGIE) and on the General Committee of Italians Abroad (Com.It.Es.) both in the ACT and in NSW. In 1995 at the age of 35, she was recognised for her work by the Italian Government when she was made a Knight of the Order of Merit of the Italian Republic. Concetta was also appointed as Ministerial Adviser to the Global Diversity Conference in 1995 and served as a member of the Multicultural Advisory Committee for SOCOG, Australia's coordinating body for the 2000 Sydney Olympics.

Over the years, Concetta has also participated in a number of other organisations. At age 23, she commenced her community activities as a founding board director of a nursing home in Wollongong. She was also involved with organisations such as Zonta International and fundraising activities with Red Cross and Co.As.It. (Italian Association of Assistance). She also served for four years on the Board of Father Chris Riley's Youth off the Streets, including two years as its Chairman. Concetta became a Senator on 5 May 2005, filling a casual vacancy and located her electorate office to Wollongong.

On 22 September 2008, Concetta was appointed by then Opposition Leader the Hon. Malcolm Turnbull MP, to the roles of Shadow Parliamentary Secretary for Immigration and Citizenship and Shadow Parliamentary Secretary Assisting the Leader in the Senate.

Keynote Presentations - Thursday 12 June 2014



Dr Sally Goold OAM

Accepting and Celebrating Cultural Diversity - Aboriginal and Torres Strait Islander Perspective

We live in a culturally diverse country with many different cultures making up the Australian population.

This presentation will explore acceptance and celebration of the diversity from the perspective of the First Nations people of this country, the Aboriginal and Torres Strait Islander people.

As we are all aware, people who belong to the same culture have a system of shared understanding of words, actions, beliefs and values. Those shared understandings are acquired throughout one's life and become so internalised that people are not conscious of them.

Health and aged care workers need to consider cultural factors in order to ensure culturally appropriate assessments and provision of services.

Aboriginal and Torres Strait Islander people experience the same health problems as others. However, their ageing and health concerns occur earlier and with greater severity. Usually the causal factors also differ and will influence individual cases. Individual experiences, as well as historical factors must not be ignored in the provision of health and aged care services.

Biography

Dr Sally Goold has an extensive nursing background in Acute Care Setting, Cardio-Thoracic and Coronary Care, and conducted the post-basic cardio-thoracic nursing course at the Prince Charles Hospital and St Andrews Hospital, Brisbane. She lectured in both undergraduate and post-graduate programs at the School of Nursing at Queensland's University of Technology.

Dr Goold was instrumental in forming the Congress of Aboriginal and Torres Strait Islander Nurses and was the Executive Director until retirement in July 2012. She assisted in forming the Aboriginal Medical Service, Redfern, with Fred Hollows and worked there from its inception and was the first Aboriginal Registered Nurse to do so.

In 1986 Sally was awarded the Order of Australia Medal for service to Nursing Education and Aboriginal Health, and was named Senior Australian of the Year in the 2006 Australia Day Awards. In 2002, Sally was awarded a Doctor of Nursing, Honoris Causa from RMIT.



Eugenia Grammatikakis

Federation of Ethnic Communities' Councils of Australia

Older People from Culturally and Linguistically Diverse Backgrounds: A national perspective

Eugenia will talk about the national picture in relation to older CALD people in Australia, touching on the recent study undertaken by the Federation of Ethnic Communities' Councils of Australia (FECCA) and the University of Adelaide (which will be discussed in detail on the 2nd day of the conference).

Eugenia will explore what the outcomes of the study may mean for the future focus of research and will talk about FECCA's vision for the current aged care reforms. Will they result in a better outcome for older CALD Australians? How can FECCA, together with its partners, ensure that the voices of older CALD Australians are heard? How do we ensure that the needs and aspirations of older CALD Australians are considered?

Biography

Eugenia has over twenty five years experience in the ethnic and multicultural field particularly in policy development, social planning, research, community development and cross cultural communication. Professionally Eugenia has held roles in multicultural and access and equity policy development and program delivery for Commonwealth Departments including Immigration and Multicultural Affairs, Social Security, Employment, Education, Training and Youth Affairs and more recently in Local Government with the Municipal Association of Victoria, and Moreland City Council. Currently she holds the position of Social Policy and Program Coordinator at Monash City Council.

Currently Eugenia holds the positions of Senior Deputy Chair of the Federation of Ethnic Communities Councils of Australia (FECCA), Vice President of Australian Greek Welfare Society (AGWS), Board member of the Ethnic Communities Council of Victoria (ECCV), Chairperson of the Victorian Local Government Multicultural Issues Network and Member of the SBS Community Advisory Committee.



Efterpi Soropos
Human Rooms

Inclusive Spaces

Efterpi's presentation will introduce us to her work in palliative care and cancer care making Multisensory Environments for patients and family/carer relaxation in hospital settings. The focus of her presentation will then shift to giving an overview of a recent Churchill Fellowship investigating art and sensory programs in culturally specific aged care settings plus a short residency in a new Dementia unit that had been developed as a sensory ward. In the final part of the presentation Efterpi will give us insight into how her findings could possibly be implemented in residential care in Australia.

Biography

Efterpi Soropos is a Visual Artist and Designer. A performing arts designer by trade, Efterpi has spent many years fascinated by the way combinations of light, sound and image can affect audiences, guiding them through spectrums of emotion and sensation.

As part of her Masters Research, Efterpi began a creative partnership with Monash Medical Centre as Artist in Residence in 2007, to research the effects of the interior environments of hospitals in palliative care units. Following on from her research Efterpi developed a work in 2008 called the 'Disambiguation Room' housed in McCulloch House, the palliative care unit at Monash Medical Centre, Clayton, Victoria. The room is a permanent multifunctional art space.

Towards this end she founded Human Rooms™ in 2008. Since then Efterpi has continued research and development of the Human Rooms™ concept as an effective interior/spatial and therapeutic intervention for psychological relief of the symptoms of stress, fear and anxiety during mental, chronic or terminal illness with a focus on aged persons.

In February 2014, Efterpi completed a Churchill Fellowship investigating various art programs and Dementia design in culturally specific settings to solidify the work of Human Rooms™ in aged care.



Dr Olga Kanitsaki AM

Excellence in Culturally Inclusive Initiatives in Aged Care

Ethnicity and culture are being increasingly recognised as predictors of disparities in patient safety and quality care outcomes. These predictors also have resonance in the aged care sector. To help redress the risks of disparities in aged care quality and safety, and to ensure that older people of diverse cultural and language backgrounds get the quality of care they deserve and are entitled to receive, attention must be given to fostering excellence in the provision of culturally inclusive care. The provision of such care must

encompass stakeholders' cultivating a genuine acceptance of difference while recognising similarities, cultivate humility that allows for self analysis and critical reflection, compassion, care and a moral commitment to meeting the needs of those requiring aged care.

In this paper attention will be given to briefly considering: what is excellence, what constitutes culturally inclusive care, and what are the possible disablers and enablers of realising excellence in the delivery of culturally inclusive care in the aged care sector.

Biography

Dr Olga Kanitsaki is the former Head of the Department of Nursing and Midwifery at RMIT University, and the first Professor of Transcultural Nursing. Throughout her career she fought for a more culturally responsive health care system in Victoria. In 1995 she received an Order of Australia in recognition of her achievements, and she completed her PhD in medical anthropology in 2000.

Keynote Presentations - Friday 13 June 2014



Dr Christina Ho
University of Technology, Sydney

Diversity Within Diversity

Australia's immigration program has created one of the most culturally diverse societies in the world. The 2011 Census revealed that over a quarter of Australia's population was born overseas and a further one fifth had at least one overseas-born parent. The increasing number of emerging communities, from countries with no history of migration to Australia, shows

the 'diversification of diversity'.

Service providers now cater for populations hailing from an unprecedentedly large number of cultural backgrounds. In addition, diversity is about more than just birthplace or ethnicity. The notion of 'super-diversity' encompasses other forms of diversity, including gender, age, socio-economic status, immigration status, and geographic residence. These factors intersect with ethnicity to create complex profiles of individuals and communities, which compel us to update how we think about diversity in Australia. For example, women and men from within the same ethnic community may have different, or even opposing, interests in relation to particular issues, such as domestic violence.

Policy makers and service providers need to go beyond traditional assumptions about multiculturalism, and reach out to individuals who may not be adequately represented or serviced by existing community structures. This presentation presents an overview of Australia's diverse population, and presents some approaches for dealing with this 'super-diversity'.

Biography

Dr Christina Ho works at the University of Technology, Sydney, where she is a Senior Lecturer in the Faculty of Arts and Social Sciences, and a member of the Cosmopolitan Civil Societies Research Centre. She researches migration and multiculturalism in Australia, and has recently worked on projects on Muslim women, migrant youth and community arts, and Chinese migration to Australia. Her current research focuses on segregation and inequality within Australian schools.

Her publications include *Migration and Gender Identity: Chinese Women's Experiences of Work, Family and Identity in Contemporary Australia*; *Beyond the Hijab Debates: New Conversations on Gender, Race and Religion*; and 'For those who've come across the seas...' *Australian Multicultural Theory, Policy and Practice*.



Associate Professor Debra King
Flinders University

The Changing Face of Cultural Diversity in the Aged Care Workforce

Migrants are necessary to the sustainability of the Australian aged care workforce. Of the 34% of residential aged care workers born overseas, one-third are from Asia, comprising the fastest growing migrant cohort in the sector.

Using data from the National Aged Care Workforce Census and Survey (2012), a descriptive analysis is provided of workers' demographic characteristics, work conditions, job satisfaction and intention to stay. The analysis differentiates between migrants from South-East, North-East and Southern/Central Asia and compares them to other migrants and Australian born aged care workers.

Asian migrant care workers are overwhelmingly employed in residential rather than community aged care; and as they tend to be younger and more highly educated than their Australian counterparts, understanding their experiences of aged care could have a beneficial impact on the sustainability of the Australian aged care workforce.

Biography

Debra King is the Dean of the School of Social and Policy Studies, Flinders University. She is a sociologist with expertise in qualitative research methods and survey research.

She has a longstanding interest in conducting research into the organisation of care work and the experience of working in aged care. Debra is co-author of the 2012 and 2008 reports on the National Aged Care Workforce Census and Survey, which contained detailed information about the residential and community aged care workforces.

Her research into aged care also includes conducting 200 interviews with direct care workers on their experience of working in the sector and another 100 interviews with managers on their experience of employing workers from culturally and linguistically diverse backgrounds.

She is currently a Chief Investigator (with Prof B Pocock and A/Prof S Charlesworth) on a Department of Health and Ageing: Aged Care Service Improvement and Healthy Ageing Grant (priority 3a) to develop workplace tools and models aimed at simultaneously improving job quality and the quality of services experienced by older Australians.

Debra has numerous refereed articles on the aged care workforce in national and international journals. She is also co-editor of *Paid Care In Australia* (SUP 2009) and co-convenor of the Australian Paid Care Research Network.



Dr Helen Feist
University of Adelaide

A Review of Research on Older CALD Populations in Australia: Promoting translation of research into aged care practices

Australia's older population is not only growing at a rapid rate but it is also becoming more diverse. Over 1.34 million Australians aged 50+ years were born in a Culturally and Linguistically Diverse (CALD) country; this equates to almost one in five of all Australians aged 50 years and over. These figures are even more confronting if we consider ageing within specific birthplace groups.

For example, 88.4 per cent of all Italian born Australians are now aged 50+ years and 87.9 per cent of those born in Greece are currently aged 50+ years.

Dr Helen Feist continued

Anecdotal evidence from service providers tells us that there are substantial barriers and a widespread lack of understanding toward providing culturally appropriate care to meet the needs of the growing number and diversity of the older CALD community. It is imperative that services are provided to older CALD groups with a targeted, evidence-based approach. The translation of research into practice requires identifying what research evidence is available, which population groups and what areas of service delivery it is applicable to, and what the gaps in current research are in order to promote better practice, stronger collaborative partnerships and better outcomes for all older people from CALD backgrounds.

This presentation will explore results of a review of the existing literature and data available in Australia about older CALD populations. This review has allowed for identification of current research evidence and gaps where further knowledge about best meeting the needs of this population group is required. Available research about older CALD populations will be discussed to enable CALD aged care service providers to base future program development on a strong evidence base. Recommendations for further research will also be identified.

Biography

Dr. Helen Feist is the Deputy Director of the Australian Population and Migration Research Centre at the University of Adelaide. Dr. Feist's work has a focus on the dynamics of population change, the demography of Australia's population, with particular attention to the influence of both migration and ageing on our population, and the implications of these issues for society and communities.



Tony Briffa

Being an Intersex, Queer and Ethnic Community Leader in a Diverse, Multicultural City

The City of Hobsons Bay, in Melbourne's west, is an extremely diverse city. Despite the negative stereotypes of Melbourne's western suburbs, in 2008 it became the first city in the world to elect an out intersex person as a Councillor. The following year, it became the first city to elect an out intersex person as Deputy Mayor, and two years later it became the first city in the world to elect an out intersex person as its mayor!

Tony will speak about the diversity within the City of Hobsons Bay, the way the diversity she embodies affected her election to the council and work she did, the way the community responded to her as Mayor, and the challenges of being a publicly elected official when you are also intersex, queer and ethnic.

Biography

Tony was, until recently a Councillor in the City of Hobsons Bay, having been first elected in 2008. Tony also served as Mayor (2011-2012) and two terms as Deputy Mayor. During Tony's time with the Council, Tony has served on a number of committees including the Hobson Bay City Disability Advisory Group, Multicultural Advisory Group, Gay, Lesbian, Bisexual, Transgender, Intersex and Queer Advisory Committee, the Youth Voice Committee and the Interfaith Network.

Tony is also a Bail Justice and Justice of the Peace. Previously Tony has been the Co-convenor of the Hobsons Bay Residents Association, a member of the Western Health Ethics Committee, President of the Genetic Support Network of Victoria and a foster carer.

Tony was born biologically part female and part male (i.e. intersex). As an infant, Tony was named Antoinette and raised as a girl. Tony lived as a woman until learning about being intersex at the age of 30 when she experimented with living as a man - "Anthony". Tony states that '...Years later I feel very comfortable having accepted my true nature. I am not male or female, but both. I am grateful for the years I lived as a woman and as a man, and the insight and experiences it gave me.' Tony is also currently the Vice-President of the two leading groups advocating for the rights of intersex people in Australia.



Jane Lewis
*Victorian Equal Opportunity and Human Rights
Commission*

WORKSHOP: Diversity and Inclusion: Key barriers and enablers

This concurrent workshop explores discrimination and its implications for cultural diversity in aged care. In an interactive and engaging way, we will explore the various types of discrimination, their causes and how progress can be made in addressing it.

Recent research by Deloitte and the Victorian Equal Opportunity and Human Rights Commission challenged the idea that ensuring cultural diversity in the workforce will solve all the resulting issues. It found that it's not diversity by itself but pro-active inclusion of diversity that makes all the difference to the quality of team collaboration, customer service and innovation. We will explore how actively creating a sense of belonging for culturally diverse staff and residents, where their unique value is known and appreciated, is key to unlocking staff potential and improving retention and resident satisfaction. We'll explore key dimensions of differences between cultures, which help us to appreciate that we all have a unique cultural and historic background that affects our actions and reactions today.

Using interactive participant technology, the workshop will explore relevant facts and fables, and engage participants in idea-sharing discussions.

Biography

A trainer and consultant in applied social psychology, Jane has over twenty years' experience designing and delivering workplace education in critical thinking, equal opportunity and human rights.

Since 2011, Jane has represented the Commission in the design and delivery of innovative, evidence based pro-diversity, anti-racism training for the VicHealth-led project, Localities Embracing and Accepting Diversity (LEAD). The response in local government, business and education has been overwhelmingly positive, with many participants making clear statements of intent to change their behaviour and attitudes.

She continues to deliver innovative programs on Cultural Awareness and Inclusion for a range of corporate, government and community organisations. Jane and colleagues also recently completed train-the-trainer materials for addressing systemic racism towards Aboriginal and Torres Strait Islander peoples in federal government service delivery, as part of the Australian Human Rights Commission's National Anti-Racism Strategy.

Abstracts (abridged)

Concurrent sessions

CONCURRENT SESSION 1A - Thursday 12 June 2014 - PLENARY ROOM

Love stories: Understanding the caring journeys of aged Greek carers Dr Debbie Horsfall, University of Western Sydney, NSW

Report on a short-term longitudinal study of 13 aged Greek carers providing in-home care for their spouse. We sought to understand factors influencing carers' decision-making regarding service uptake. Our aim was to provide information to services to improve support to this vulnerable group.

We found that most carers wanted to remain as independent as possible and to avoid forced separation from the one they loved, through institutionalisation. They placed great value on their caring role which, whilst at times was a struggle, gave them a sense of meaning, purpose and belonging. We also found that the carers had great resourcefulness, strengths and competence. They were all in long term relationships, had negotiated coming to a foreign country and establishing themselves and were now in the process of negotiating old age and increasing frailty while at the same time providing care and support to family and friends. Our findings suggest that services need to be designed so that people are more easily able to access them otherwise they will perpetuate exclusion. We propose an outreach in-home service model with an emphasis on ageing well and staying at home.

Intergenerational Perceptions of Ageing Well: A pilot study of the Australian Greek community Helen Feist, University of Adelaide, SA

A growing number of older Australians are from culturally and linguistically diverse (CALD) backgrounds. Older people from CALD backgrounds have been identified as a group that may experience difficulties in accessing health services and home and community care services and may have different needs and preferences when it comes to health and aged care services. It is important to have an understanding of what it means for this population to age well in light of significant aged care reforms.

This paper presents the results of a pilot study that involved in-depth interviews (n=90) with three generations of the Australian Greek community. This research gives a voice to older Greek-born individuals, along with the younger, Australian-born generations to express what 'ageing well' means to them and their expectations with regard to support in older age through the provision of informal family care and formal aged care services. The research shows that cultural norms combined with lifecourse events impact on how older people view older age and ageing well. The experiences of older generations also influence perceptions on ageing for younger generations within the same family and there are different attitudes and expectations around provision of care across generations.

Cultural Diversity in People's Experiences of Ageing Dr Victoria Team, La Trobe University, VIC

Experiences of Ageing in Australia is a qualitative study reflecting upon differences in the ageing experiences of people from culturally and linguistically diverse backgrounds. Funded by Healthdirect Australia and conducted by researchers at La Trobe University, it involved 50 video-recorded narrative interviews with people aged 65 years and over (55 and over for Aboriginal participants) from across the country. A maximum variation sampling strategy was adopted. The interviews were transcribed verbatim, analysed using the constant comparative method and written up as topic summaries with embedded video clips for an Australian website (www.healthtalkonlineaustralia.org).

Findings included limited access to aged care services, the need for local culturally appropriate services for Aboriginal people, and concerns about the loss of culture in younger generations. Overseas-born people listed greater autonomy associated with ageing in Australia than ageing in their home country, being more respected as elders in their community, wealthier lifestyle, and better health and social care services. Some raised concerns regarding lack of culturally specific aged care facilities for small communities in Australia. The website provides evidence-based information on the experiences of ageing and will be of use to elderly people, their families, carers and health professionals.

CONCURRENT SESSION 1B - Thursday 12 June 2014 - ROOM 104

Diversity Includes LGBTI Russell Westacott, The Aged-care Rights Service, NSW

When we consider 'diversity' we often think of people from culturally and linguistically diverse (CALD) backgrounds and Aboriginal Australians. Lesbian, gay, bisexual, transgender and intersex (LGBTI) people are often overlooked. The Aged-care Rights Service (TARS) is a NSW statewide service that promotes the rights of all older people through advocacy, legal services and education.

In 2013 TARS was granted funding from the then Commonwealth Department of Health and Ageing. The project's purpose was to raise awareness of the rights of LGBTI people in communities around the state. The project worked with aged care providers who work with, or potentially could work with, LGBTI people. In total around 1,000 people were reached.

This presentation will report on the project drawing on data from the independent evaluation. In particular the presentation will provide examples of discrimination -- both real and perceived -- the need for some people to 'de-gay' themselves for fear of not being provided an appropriate service, scepticism of faith-based institutions due to early childhood experiences -- all in the ageing sector. Also it will examine the general lack of awareness around planning ahead within this sub-population.

Institutionalised discrimination? Addressing the health inequalities of patients with low English proficiency Emiliano Zucchi, Northern Health, VIC

Australian patients with low English proficiency are considerably disadvantaged compared to patients who are fluent in English; they stay in hospital longer, have higher readmission rates, undergo more diagnostic tests, etc.

Health services have the power to enhance or compromise the health outcomes of patients with low English proficiency. We have evidence that by putting in place a strong structure, or even by partially aligning language services with other disciplines, the results are tangible, and measurable. When health services ignore or fail to invest in Language Services, not only are Australians with low English proficiency further disadvantaged, but the cost to the tax payer is higher.

This paper suggests ways to address this problem by looking at proven strategies, supported by reliable data; it also discusses the structural changes hospitals --in collaboration with industry stakeholders- ought to develop to improve the health outcomes of patients with low English proficiency, and give equal access to services to all Australians regardless of their language proficiency.

A Charter of Rights and Freedoms for Older Persons - Is it culturally and linguistically inclusive? Dr Susannah Sage Jacobson, Flinders Law School, SA

This presentation will introduce and give an overview of the ARNLA Draft Charter of Rights and Freedoms for Older Persons. It will provide a description of how the Charter has been developed by ARNLA, an Australian wide network of legal scholars who are experts in the field of Law and Ageing.

The Draft Charter draws together the rights and freedoms from the principal international law instruments concerning older persons -- the UDHR, UCCPR, ICESCR, CRPD and the UN Principles for Older Persons.

The presentation will explore the challenges of adopting a human rights approach to law and ageing in Australia, a country which remains the only developed Western state without a Bill or statutory Charter of Rights. It will also raise the vexed issue of the inclusiveness of human rights discourse across culturally and linguistically diverse communities of older people in Australia.

Finally the paper will seek to provide an explanation of how the Draft Charter may be used as a tool to promote the rights of older persons and contribute to shaping culturally inclusive aged care services.

CONCURRENT SESSION 1C - Thursday 12 June 2014 - ROOM 103

Planning a healthy ageing program for overseas born Chinese baby boomers Christiana Chau, Griffith University, QLD

Australia's rapidly ageing population presents a great challenge because of its significant implications on Australia's economy and healthcare resources. The World Health Organisation uses the life course approach to plan for healthy ageing as a key sustainable health promotion strategy. Unfortunately, current aged health programs in Australia are based on data collected from those over 65 years old. It is problematic whether the current model is suitable for the upcoming ageing baby boomers (BB).

Another challenge in planning for Australia's BB is that over half of them are from overseas born non-English speaking "cultural and linguistically diverse" (CALD) backgrounds. Studies have shown that the current Australian healthcare system has failed this CALD group. The largest cohort among the CALD background is the Chinese. Studies have revealed that Chinese migrants experience a range of health and service utilization (or access) issues. However, there is limited knowledge about the ageing overseas born Chinese BBs' perspectives on life, ageing and health concepts.

A current study using the Community Needs Assessment and mixed methods, examines in depth the overseas born Chinese BBs' health needs. Preliminary findings show that one of the challenges in planning for this cohort is their heterogeneity.

Our story: two organisations supporting Healthy Ageing for older Bhutanese refugees Giovanna Citta, Foundation House and Liz Harvey, Moreland City Council, VIC

A significant number of older Bhutanese people settled in the northern suburbs of Melbourne. It is unusual for people to be already older when they come to Australia as refugees.

Foundation House: The Victorian Foundation for Survivors of Torture Inc. and Moreland City

Council Aged and Disability Services have worked alongside this group, using an empowerment/community development approach. The 2 agencies worked more intensively and holistically with the older Bhutanese than with other groups due to their high level of dislocation and very complex issues.

Many of the older people were at risk of becoming socially isolated and wanted opportunities to meet with each other. This group works to achieve group goals; gain support from trusted workers, and work towards a better life. However, limited English and familiarity with "how things work" in Australian are challenges they face.

Work continues, with the gradual introduction of other workers and agencies. It is an example of how different sectors can work effectively together. It is also an example of experienced workers learning lessons and reminders from their involvement, including the importance of effective communication, humour, human relationships, resilience and more.

Their say on end-of-life issues: Perspectives of people from culturally and linguistically diverse (CALD) backgrounds in the Hunter Region, NSW Se Ok Ohr, Hunter New England Local Health District, NSW

Dealing with the end-of-life (EOL) issue is challenging both for individuals and health care professionals.

A cross-sectional survey was conducted to investigate the perspectives of people from culturally and linguistically diverse (CALD) backgrounds on EOL issues such as advance care planning, beliefs about dying, and preferences for EOL care. The participants included 453 people aged over 65 years old who attended 17 day care centres and ethnic associations in the Hunter region, NSW.

Regardless of their background, 93% (n=151) of respondents believed that death is part of the life, with 71% (n=114) of them comfortable talking about death. Nevertheless, half of them (n=79) believed that death should be avoided at all costs with 65% of Eastern Europeans who believed so. Asia/Pacific group (93%, n=13) strongly disagree/disagree in the use of life support to prolong life compared with Anglo Celtic (73%), and Mediterranean and Eastern European (approximately 48% for both).

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Health care providers should use cultural sensitivity and person-centred care in conversations about EOL care. Autonomy, whilst still important, should be framed using a person's cultural values and beliefs through balanced and open communication.

CONCURRENT SESSION 1D - Thursday 12 June 2014 - ROOM 102

A person centred care paradigm driven by a CALD initiative Vicki Kanakaris, Greek Welfare Centre of S.A.

Georgia is terminally ill and very despondent. To the shock of the residential staff, willingly got out of bed, got dressed, joined and enjoyed the company of the other six Greek residents at lunch. Maria has advanced Dementia. Much to the surprise of the staff of the Dementia Respite program, she recalled all the steps to different Greek dances and accompanied them all with clear specific song words.

Culturally and Linguistically Diverse (CALD) specific organisations have the advantage of cultural and linguistic attributes that are immeasurable in engagement and direct service delivery for the CALD community. Two Commonwealth funded programs for the Greek Welfare Centre; CPP and ACSIHAG, and four years of real experience have exemplified the significance and real benefits for the Greek elderly migrants living in Australia.

The latest project undertaken by the Greek Welfare Centre, 'Developing and delivering Greek specific, culturally appropriate education and training', has enabled research, identification and the future implementation of culturally specific person centred educational resources. Cultural specific knowledge and education is paramount in shaping inclusive services for those from CALD backgrounds. Ultimately, reciprocal benefits will be achieved, not only for the Greek migrants but for all workers within the aged care sector.

Through the Trainers' 'Looking Glass': Walking the path of cultural competency training Monita Mascitti-Meuter, St Vincent's Hospital, VIC

A growing body of evidence suggests that cultural competency training enables healthcare providers to offer a more inclusive service to their patients. Such training improves cross-cultural communication, knowledge, attitudes and skills as well as adherence/compliance and patient satisfaction, reduces racial and ethnic disparities and, ultimately, also reduces lengths of stay and number of admissions. Can every training program can deliver these outcomes and which factors determine success? What constitutes an effective cultural training curriculum to ensure an optimally inclusive service and what is the role of the cultural trainer and the trainee (healthcare practitioner) in achieving this goal? Here we discuss the results obtained through the qualitative and quantitative research conducted at St Vincent's Hospital, Melbourne, to measure changes in attitude/awareness, knowledge and skills in healthcare practitioners (trainees) following cultural training. Between July 1 2011 and June 30 2013, 2,997 trainees participated across 92 workshops, 22 orientation sessions as well as on-line training. Analyses of a selection of trainees' responses and feedback from the units where training occurred suggest that optimal outcomes for our patients depend not only on the trainer's skills and the quality of the training program but also, importantly, on learner resistance - the trainees' willingness to apply (and expand) their newly gained cultural knowledge.

Understanding Dementia - From managing challenging behaviours to effective communication Agnieszka Chudecka, Multicultural Aged Care Inc, SA

Presentation is based on a training programme funded by the Australian Government and developed in 2011 by WA Dementia Behaviour Management Advisory Service (DBMAS). The training package is recommended for health professionals working with people living with dementia. During a one day workshop through exploring the unique topics in multicultural dementia care, we aim to encourage best practice in the care of people living with cognitive impairment from diverse cultural backgrounds, based on:

- CALD perspectives included in the planning, policies and practices of information and services provision and delivery;
- Processes of communication which are targeted, responsive and in formats and settings appropriate for CALD older people; and
- People and service providers trained to deliver culturally responsive and competent information and services.

The presentation highlights how Multicultural Aged Care (MAC) and the SA & NT Dementia Training Study Centre demystified the stigma of being diagnosed with Dementia; describes ways in which residents' background information (including cultural information) may assist in understanding and addressing behaviours which may not fit the norm and expectations; demonstrates how family caregivers from CALD backgrounds can impact on care giving and explains attitudes towards services and care. In addition, the presenter will share some thought provoking anecdotal examples gained by anticipating the cultural needs of a person with cognitive impairment.

CONCURRENT SESSION 2A - Thursday 12 June 2014 - PLENARY ROOM

Do our Partnerships Shape Inclusive Services? Annalisa Cannizzaro, Carers Victoria

There are many aspects that form the fabric of the Australian community including the diverse mix of cultures and religions. Therefore, it's important to consider whether we wish to thrive in this community as individuals or to form partnerships to sustain us into the future.

Carers Victoria is a not for profit organisation that works to improve the health, wellbeing, resilience and economic security of family carers. There are approximately 2.6 million carers in Australia (with 700,000 living in Victoria) that are currently providing care and support to family members and friends who have a disability, mental illness, chronic condition, or who are frail aged.

We believe that our partnerships are an essential ingredient to the success and longevity of our business, but more importantly, to ensure family carers receive the most comprehensive and inclusive service they deserve. To ensure the sustainability of our partnerships we take careful consideration of the synergy and integrity of the organisations we seek to align with. At Carers Victoria we select our partnerships on the basis of their inclusivity, innovation and shared vision that aims to support family carers.

Moving On (Generic chronic disease self management program) CALD pilot Una Turalic, Nepean Blue Mountains Local Health District & Anne Fitzgerald, Nepean Blue Mountains Medicare Local, NSW

In June 2013, the Nepean-Blue Mountains Medicare Local (NBMML), Arthritis NSW and the Nepean Blue Mountains Local Health District (NBMLHD) commenced a Moving On Culturally and Linguistically Diverse (CALD) Pilot Project.

The 'Moving On' program has been developed by Arthritis NSW. It is a chronic disease self-management program that delivers health information in a facilitated supportive group. The groups are facilitated by Moving On-trained peer and health professional bilingual Leaders and have unprecedented retention (and growth) in participation.

This program has been critical to addressing health service gaps that exist for people from culturally and linguistically diverse backgrounds. The findings regarding the strengths of the piloted model were encouraging and included and are not limited to the following; the importance and strength of bilingual and culturally accepted leaders. The high participant retention and collateral promotion and information sharing to the non-participating group reflected the value of the program. All participant feedback was positive and included an acceptance of the program and identified behaviour change at an individual level. Underpinning the pilot program approach were principles of community development – the importance of and respect for each group's diversity; the importance of local knowledge, local leadership and local cultural consultation.

Culturally Responsive Palliative Care Strategy: a partnership approach to raise community awareness of palliative care and improve access to culturally inclusive and responsive palliative care services Mike Kennedy, Palliative Care Victoria & Elena Petreska, Ethnic Communities' Council of Victoria (ECCV)

Despite nearly a quarter of Victorians speaking a language other than English at home, just seven per cent of community palliative care services are provided to this client group. The lack of awareness and lower utilisation of palliative care services by people from culturally and linguistically diverse backgrounds prompted Palliative Care Victoria to engage in 2010 with multicultural peaks, ethno-specific agencies, palliative care services and other stakeholders before developing a Palliative Care Cultural Diversity Strategy. This presentation will outline how the Strategy is implementing practical community engagement, customised peer education resources and the delivery of peer education, tailored ethnic media and communication strategies to raise awareness and improve access to palliative care services by the Chinese, Maltese, Italian, Turkish and Vietnamese communities in Victoria and another five communities in 2014-15.

Concurrently, the Strategy is strengthening linkages between palliative care services and these communities and developing palliative care services' capacity to provide culturally appropriate and responsive care. PCV is delivering the Strategy in partnership with the Ethnic Communities Council of Victoria and the Multicultural Centre for Women's Health and with a lead agency from each participating community.

CONCURRENT SESSION 2B - Thursday 12 June 2014 - ROOM 104

Culturally Inclusive Services, Best-Practice and Innovative Service Models Within the Greek Community Adonis Maglis, Australian Greek Welfare Society (AGWS)

Two pertinent issues currently affecting the elderly Greek community are complex health issues relating to ageing and intergenerational carers issues. These are exacerbated due to the lack of English language skills and the limited knowledge of culturally and linguistically appropriate aged care and health services available to them, as well as the limited availability and strict criteria for accessing these supports. AGWS creates opportunity for partnerships and collaborative work with other services.

The presentation will consider some of the challenges experienced by professionals in working with CALD elderly and their families, and address how the successful integration of services through collaborations and partnerships can develop culturally responsive programs to address the specific needs of a client group. The establishment of partnerships with a combination of government and non-government services and community groups provides the appropriate cultural response to the needs of Greek clients. This is achieved via the development of language resources, bi lingual community information campaigns, peer education, media engagement and group work as well as the establishment of referral pathways between service providers to support the ongoing needs of clients within the services.

All the Cultures of the Rainbow - LGBTI Inclusive Practice Meredith Butler, Carers Victoria

One group of carers whose needs have often been invisible are lesbian, gay, bisexual, transgender and intersex (LGBTI) carers. Over 30% of LGBTI people (more than 70,000 Victorians) identify as having a caring role (La Trobe University 2012).

Many older LGBTI people have experienced a lifetime of discrimination. Fear of prejudice and exposure can affect their health and wellbeing, ability to seek help and their access to services as well as compound their sense of isolation and vulnerability. For younger LGBTI people, issues may include social isolation, fear of homophobic violence or harassment, high levels of anxiety (especially those aged 16- to 24) and poor physical and mental health. One in five LGBTI people surveyed say they have experienced discrimination from health care providers as a result of their same-sex relationship. This can increase the stress of negotiating services and seeking professional support. It can also increase their own risk of developing depression, anxiety and other mental health issues.

In 2012, changes to the Australian Aged Care Act and the launch of the Australian Government's National Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Ageing and Aged Care Strategy highlighted the need to improve the ageing and aged care experience of LGBTI people.

Socially Inclusive Services that Enable Community Involvement for CALD Consumers Pam Pindral & Vesna Haracic, City of Salisbury, SA

The City of Salisbury has the second largest culturally and linguistically diverse (CALD) population in South Australia.

The City of Salisbury currently provides culturally appropriate support services for aged people from Bosnian, Spanish, Polish, Vietnamese, Italian, Bhutanese, Filipino, Greek and Arabic speaking backgrounds.

Over the past few years, usage by people from CALD backgrounds, has increased by 65 per cent, with approximately 800 seniors from different CALD backgrounds engaged in social support programs and initiatives on a regular basis.

A range of socially inclusive programs are coordinated by Council to bring together our culturally diverse communities and facilitate their involvement in City's life.

One such program is 'Postcards from Salisbury', a project which focused on developing a sense of community, identity and belonging through the collection of short life stories from people who migrated to Australia and have made the City of Salisbury their home. The City is committed to developing the cultural competence of its employees, providing training on cultural awareness, as well as opportunities for staff to join networks of multicultural service providers such as Multicultural Aged Care and other similar networks. Salisbury has approximately 80 bilingual volunteers engaged in social support programs and six employees are bilingual.

CONCURRENT SESSION 2C - Thursday 12 June 2014 - ROOM 103

Incontinence Outreach in CALD Communities Nives Zerafa, Continence Foundation of Australia, VIC

When we consider 'diversity' we often think of people for culturally and linguistically diverse (CALD) backgrounds and Aboriginal Australians. Lesbian, gay, bisexual, transgender and intersex (LGBTI) people are often overlooked. The Aged-care Rights Service (TARS) is a NSW statewide service that promotes the rights of all older people through advocacy, legal services and education.

In 2013 TARS was granted funding from the then Commonwealth Department of Health and Ageing. The project's purpose was to raise awareness of the rights of LGBTI people in communities around the state. Also, the project worked with aged care providers who work with, or potentially could work with, LGBTI people. In total around 1,000 people were reached.

This presentation will report on the project drawing on data from the independent evaluation. It will highlight the implementation of the project and its outcomes. In particular the presentation will provide examples of discrimination -- both real and perceived -- the need for some people to 'de-gay' themselves for fear of not being provided an appropriate service, scepticism of faith-based institutions due to early childhood experiences -- all in the ageing sector. Also it will examine the general lack of awareness around planning ahead within this sub-population. The presentation will illuminate experiences and data collected from workshops in Byron Bay to Sydney to Albury and to Broken Hill.

Meeting the Information Needs of Older People using an Italian Diabetes Talking Book Tracy Ayles, Royal District Nursing Service (RDNS)

Purpose: This study investigated the perceptions and experiences of older Italian migrants in learning about and understanding diabetes information. The study was conducted by RDNS (Royal District Nursing Service) in collaboration with Co.As.It (Italian Assistance Association).

Method: A qualitative, semi-structured interview approach was used to guide focus group discussions with fifty-five older Italian people. Participants were recruited through PAG (Planned Activity Groups) managed by Co.As.It. A qualified interpreter facilitated communication between participants and the project team. The majority of participant's were aged between 65-95.

Results: The data showed that participants wanted diabetes information in the Italian language and that their preference was for a bilingual format (English and Italian) to support information sharing with younger family members. Further, there was strong support for listening to diabetes information rather than just reading it. Participants favoured the use of health professionals, such as nurses, to deliver diabetes information to the community.

Conclusions: The findings of this exploratory study reinforces the evidence found in the literature on the importance of consulting with consumers to ensure the health information needs and health literacy levels of end-users are met, in this case for diabetes.

3 Ways to Relate to People with Dementia: Communicate-Connect-Include (A dementia education resource for CALD communities) Amelia Suckling, Alzheimer's Australia VIC

'3 ways to relate to people with dementia' is an education resource designed to provide guidance on communicating with and including people living with dementia in their communities. The resource consists of an image-based PowerPoint presentation, a facilitator's guide and bi-lingual handouts in booklet format for attendees. While these are currently available in Greek/English and Italian/English, further languages will be included as funding permits. The presentation is delivered by qualified Alzheimer's Australia Vic (AAV) facilitators with support of an interpreter.

The resource provides participants with:

- 1) the understanding of why it is important to continue relating to a person who has dementia,
- 2) simple and effective strategies to assist communication,
- 3) ways to build connection with and include the person in activities appropriate to their interests and abilities.

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The presentation is delivered to a range of CALD communities and is well received. Feedback to date indicates that community members are gaining insight into the confusing world of the person with dementia and now feel more confident about including the person in club activities and social interactions.

CONCURRENT SESSION 2D - Thursday 12 June 2014 - ROOM 102

CALD Carers Peer Support Groups - Empowerment, sustainability, linkages to inclusive services **Claire Emmanuel, Alzheimer's Australia Vic**

Alzheimer's Australia Vic recognises the importance of being inclusive of and supporting CALD people in the caring role for a person living with dementia within the community.

The CALD Carers Peer Support Project is funded by the Department of Health under the Health Condition Support Grants program (HCSG). The project engages with Croatian, Korean, Lithuanian, Mauritian, Japanese, Serbian, Spanish speaking, Turkish and Ukrainian community groups to develop their health literacy, link individuals with health professionals, develop bi-lingual resources development and maintain health and wellbeing of community members through creative activities and social support.

This interesting and effective program demonstrates a method of developing an understanding of dementia and providing information on services by using creative and social activities as the context for a pleasurable and meaningful learning opportunity. The programs were specifically tailored for each of the eight communities and delivered within their own cultural context. Each community was fully engaged in a manner that they could relate to and enjoy, and it is a sound example of effective learning for people from CALD backgrounds

Older People in Cultural Transition - A psychosocial approach to educating older refugees **Sue Cunningham, Service for the Treatment and Rehabilitation of Torture and Trauma Survivors - NSW (STARTTS)**

About 13,000 refugees and humanitarian entrants settle in Australia each year. Most refugees have grown old in Australia after fleeing persecution in their own country. Older refugees face many challenges associated with ageing in a new country with a new language and culture. While many issues are gradually resolved as people make a place for themselves in Australia, settlement is an ongoing process that can take a lifetime.

Common problems faced by older refugees include: social isolation, not understanding Australian systems, difficulties getting around, intergenerational conflict exacerbated by living in a new culture and difficulties accessing health and aged care services.

The NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) has developed a group based psychosocial education program designed specifically for older refugees called Older People in Cultural Transition (OPICT). STARTTS trains bicultural facilitators who speak the language of the community and English and have a good understanding of their community, to run the seven module program in the common language of the participants. Using interactive learning strategies, the facilitators assist the group participants to develop information gathering skills and share experiences on topics ranging from falls prevention, nutrition, gaining better access to allied health services and use of public transport. The modules also address issues around managing conflict in families and changing roles. The presentation will outline the principles the program is based on, give examples of activities and discuss evaluation outcomes.

Enhancing the Transition of Overseas Qualified Nurses into the Australian Workforce **Se Ok Ohr, Hunter New England Local Health district, NSW**

Organisational support is a key factor for improving transition of overseas qualified nurses (OQNs) into new workplace and new society. This is important as the movement of OQNs to practice in Australian is increasing, as is the case in other developed countries worldwide. OQNs make a significant contribution to overcoming the workforce shortages in Australia. However their participation has also raised challenges for OQNs and the Australian Nurses (ANs) with whom they work.

With the existing nursing vacancies, a need to fill a large number of nursing vacancies by the Nursing Hours Per Patient Day since 2010 has resulted in a strategic recruitment measure to recruit a total of 216 Overseas Qualified Nurses at a Local Health District, NSW during 2011-2012. OQNs from culturally and linguistically diverse backgrounds were the predominate group. A range of organisational support strategies, including socio-cultural support and targeted education and training were developed and implemented to support the successful transition of nurses so to develop confidence and competence in their nursing practice within a health service. An evaluation of organizational support reflected that organisational support was a key to transitioning.

CONCURRENT SESSION 3A - Friday 13 June 2014 - PLENARY ROOM

Home, but Not Alone! Angela Ng, Villa Maria, VIC

"I can't hear what people say in English, so I am deaf. I can't read English, so I am blind." This is how many elderly Chinese people describe their experience of living in an English speaking community. It's not surprising that many stay at home feeling isolated and depressed, unable or unwilling to step out into the community.

With language and cultural differences the primary barriers preventing Chinese people from accessing and engaging with support services, it's essential that organisations adapt their service model to meet their needs. Villa Maria's White Road Activity and Respite Centre introduced a socially inclusive Out & About group specifically tailored to the needs of Chinese people aged over 65 with dementia, disability, mental illness or frailty. Out & About is designed to ensure they are not left at home alone but instead are connected to each other and to the wider community.

Person centred approach deployed within the weekly Out & About group. It will look at the challenges faced and how these were overcome and give case study examples to illustrate the positive outcomes achieved for individuals through culturally appropriate support.

Speaking the Language of CALD Community Through the Evergreen College Amar Varsani, ILC MACS & Theresa Kwok, Chung Wah Association

The Independent Living Centre of WA Multicultural Aged Care Services (ILC MACS) in collaboration with the Chung Wah Association of WA engage with people with a CaLD background and their families in understanding the cultural barriers.

Chung Wah association has an in depth appreciation of these barriers. It identified that to ensure quality outcomes, a new approach would need to be understood and be in congruence with the values system of targeted communities. It also identified that Education is highly valued in the community and this underpins how the "Evergreen College" came into being. Evergreen College is described as an innovative model of wellness.

Evergreen College promotes the concept of Wellness without talking about Wellness. The importance of education, of learning, of becoming a true complete person is promoted through developing the Five Elements (intellectual, moral, physical, social and aesthetic).

The content of Evergreen College was developed as a result of a survey conducted amongst targeted customers. The community showed their support of the College through the high number of volunteers enrolled as College teachers. Evergreen College has proved to be a success in our Centre based setting. It has expanded into the community and soon it will be at the homes of CaLD people.

New Aged and Community Care for the Chinese Community Lara Calder, Calder Flower Architects

Communal living - which is largely what nursing homes are about are a new and unfamiliar lifestyle concept for most of us. Adjusting to communal living as an older and vulnerable person is challenging and stressful. This presentation outlines CASS - Chinese Australian Society Services (CASS) approach. On a daily basis CASS provide day care and activities for older Chinese citizens and for babies and young children, before and after school care for school going children, English classes to all, immigration assistance and help for new migrants with settling in Australia - like getting Medicare, filling in forms, legal advice etc.

The child day care centre and the adult aged day care centre operate adjacent to one another and share outdoor space and interaction. The connectivity that exists between the various services and age groups and their activities is lively and inclusive.

The new development is currently under construction and Stage 1 - the residential aged care component is due for completion at the end of 2014. The new 63-bed home will include a dementia specific wing located on the ground level.

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The gardens and outdoor spaces have been designed with Chinese themes, however the buildings are contemporary and modern. It is the Chinese people who use it who will occupy this development that will ultimately give this a uniquely Chinese character.

CONCURRENT SESSION 3B - Friday 13 June 2014 - ROOM 104

Engaging with Our People - Managing cultural diversity in emerging populations Michael Foley and Tamara Withanage, Baptistcare Westhaven Community, VIC

This presentation will showcase the transformative process Baptistcare undertook at Westhaven Community to become a more culturally inclusive aged care provider through the development of an ethno-specific wing.

We focused on developing a service that understands cultural requirements, recognises and celebrates differences, and meets cultural and spiritual needs. Our first step in this process was to consult with residents and their families to identify key issues and areas for improvement. We then expanded our relationships with relevant cultural community groups, with key staff establishing links between these groups and the predominantly facility management.

The result was the development of the Lotus Area, a care unit for people from East and South-East Asian backgrounds. This area integrates Asian languages, food and culture into the culturally diverse environment of Westhaven. Asian people within this facility have been noted as being more engaged with staff, each other, and the resident community as a whole. The feedback from existing residents and their families is strongly positive, and the waiting list for residents from these Asian communities is increasing. We are learning to translate our excellent aged care skills across to culturally and linguistically diverse communities.

Tiny but Innovative Leena Vuorinen, Australian Finnish Rest Home Association, QLD

Australian Finnish Rest Home Association (AFRHA) provides home and community care, residential care and managing a retirement and independent living villas for senior Australians, especially for those with a Finnish heritage. Facility of Finlandia Village comprises 45 beds, 15 of which are dedicated to the care of residents with dementia specific needs. In addition, Finncare, the home and community care service employs a range of allied health professionals and carers, to provide the highest quality in-home care.

AFRHA members living in the ACT also operate the 'Canberra Home Care Services'. This hard working voluntary team, provides social support for the ever growing population of elderly Finns in the ACT. Services are currently expanding. AFRHA has innovative pathways to provide culturally inclusive services for older Finns who often suffer from decreased English skills, social isolation and limited mobility. These pathways include:

1. Student internships in conjunction with universities and vocational institutes in Finland
2. Gym project to keep older Finns physically active
3. Social activities including centre based day respite
4. Service improvement through residents' meetings and other opportunities to have their say on
5. Culture specific dementia care

'Doing the right thing' but also 'doing things right': Shaping a culturally inclusive and integrated aged care service in Geelong Joy Leggo, Multicultural Aged Care Services Geelong, VIC

Multicultural Aged Care Services Geelong Inc (MACS) opened as a 'hostel' 20 years ago. It is now a highly-respected, leading, contemporary provider of culturally-inclusive residential and community aged care in Geelong. 'Doing the right thing' for and with ageing cultural communities has gone hand-in-hand with 'doing things right' at MACS. This has facilitated organisational growth and community respect for the organisation through addressing these key areas:

Diversity – how cultural inclusivity can transcend many traditional ethnic tensions whilst individual beliefs and values are respected; Continuity – how business modelling maximises financial viability, organisational sustainability and care and service options; Flexibility– harnessing ever-changing government directions and new technologies to increase and improve current and future care and service choices; Respect – ensuring the language, cultural knowledge and skills of migrants are harnessed to create a culturally diverse and sensitive workforce, embracing human rights and equal opportunity principles in practice; Expertise – visionary leadership developing a supportive team of managers and staff each encouraged to achieve his/her potential High professional standards – aiming beyond required standards to best practice care and services; Accessibility – providing care and services for all cultures irrespective of an individual's financial situation; Community connectedness – MACS and individual residents/clients retaining local community and cultural links; Knowledge – decision-making based on evidence-based research and national/international expertise.

CONCURRENT SESSION 3C - Friday 13 June 2014 - ROOM 103

Financial Planning in Aged Care: Getting the message across to diverse communities Marco Nazzaro, PFG Financial Service, VIC

This presentation will focus on the importance of assisting aged care clients and their families in understanding and undertaking financial planning. It will provide a brief overview of the implications of the upcoming legislative reforms and discuss ways of engaging older individuals in the process of financial planning. The Italian community will be given as a case study to demonstrate strategies which can be used to get the message across to clients and communities from culturally and linguistically diverse backgrounds

Delivering Culturally Appropriate Services and Value for Money Sam Renk, Care Connect, VIC

Client empowerment, inter-agency collaboration and culturally sensitive practice are critical to the success of any program for culturally and linguistically diverse communities.

With Consumer Directed Care (CDC) set to give aged care recipients more control over where and how funding is distributed, delivering value for money will become even more critical for service providers. So how do we shape our services to ensure that inclusivity and cultural sensitivity remain a high priority in a competitive market? Care Connect's Complex Case Support Management program provides specialised and intensive case management services to refugees and humanitarian entrants with complex and high needs – people who may already have experienced trauma and whose social isolation can make them particularly vulnerable. Care Connect's program strives to empower clients through education, and engage through culturally sensitive practice and inter-agency collaboration. Yet this government-funded program must also deliver these services efficiently in order to meet strict KPIs.

This presentation will use case studies to provide valuable insights into the strategies used to maximise Care Connect's reach to vulnerable and sometimes isolated members of the community; educate our staff to deliver culturally sensitive services; and empower our clients to advocate for their own needs.

Managing Workforce Diversity Rosa Colanero, Multicultural Aged Care Inc., SA

This presentation: explores workforce capacity building model; identifies needs for strategic planning in frameworks development for culturally inclusive workforce environments and outlines developing cultural competency knowledge, skills and strategies to better manage a diverse workforce by:

- Anticipating knowledge, skills and competencies to be effective in intercultural settings;
 - Acquiring cultural content knowledge, experiences and competencies;
 - Applying cultural content factors to knowledge and competencies; and
- Adjusting behaviours: checking assumptions and reflecting cultural diversity content.

In the aged and community aged care services sector service providers can attest to the great and ever increasing difficulty in meeting the market and consumer demands driven by the ageing population increase. This increase includes significant numbers of older people from CALD backgrounds requiring and receiving services and culturally diverse workers.

Developing workforce capacity to respond to and meet the increasing demands of an ageing multicultural society is core business for service providers. To build effective workforce capacity a better practice, culturally inclusive, employment model which incorporates CALD worker recruitment and retention is critical.

CONCURRENT SESSION 3D - Friday 13 June 2014- ROOM 102

Consumer Directed Care and Cultural Inclusiveness Mary Lyttle, Elder Rights Advocacy, VIC

The Aged Care Act affords people the right to continue their cultural and religious practices and to keep the language of their choice without discrimination. These rights are identified in the principles of the National Ageing and Aged Care Strategy for People from Culturally and Linguistically Diverse Backgrounds (CALD).

The model of Consumer Directed Care emphasises increased consumer choice and control, support for consumer decision making and being responsive to the consumer's customs, beliefs and background. This means that the beliefs, attitudes, culture, religion and language of each individual should inform aged care planning and provision, while supporting choice and control in the hands of the consumer and carer.

This presentation will be informed from the point of view of a specialist agency, Elder Rights Advocacy (ERA) that supports the concept of cultural diversity and inclusiveness in the broader context of appreciating the unique attributes and human rights of all individuals regardless of ethnicity. The presentation will cover: CDC & Cultural inclusiveness including the use of interpreter services; ensuring accurate information and understanding of the consumer's cultural identity, beliefs and needs; educating staff re cultural inclusiveness, and links to community as well as the role of advocacy in supporting consumers.

Connecting Isolated CALD Seniors and Building Social Inclusion Fiona York, Ethnic Communities Council of Victoria & Representative from Department of Health, VIC

The CALD Seniors Grants Program offers funds of up to \$10,000 to organisations to create or expand participation opportunities for socially isolated CALD seniors. Commencing in 2011, this Victorian Government initiative works in partnership with Ethnic Communities Council of Victoria (ECCV) to respond to the challenges of social inclusion posed by the diversity of our ageing population.

This presentation will:

- Provide a snapshot of the CALD Seniors Grants Program outcomes to date.
- Reveal how the partnership model between ECCV and government has helped many seniors groups and clubs, especially from new and emerging communities overcome barriers to access.
- Promote the innovative ways organisations and groups have engaged isolated CALD seniors and discuss how projects are continuing to deliver sustainable benefits.
- Highlight several case studies demonstrating how this program has built community capacity across Victoria to develop projects responding to locally determined needs and priorities that support CALD seniors.

Policy Advocacy to Improve Access for New and Emerging Communities to Aged Care Services Nikolaus Rittinghausen & Marion Lau OAM JP, Ethnic Communities' Council of Victoria

A growing proportion of new and emerging communities need culturally responsive aged care services. The Ethnic Communities' Council of Victoria (ECCV) will be presenting on how to improve their access to services.

ECCV as the peak body for ethnic and multicultural organisations in Victoria advocates on behalf of culturally diverse communities. A recent outcome of its advocacy work is an ECCV Discussion Paper titled Building New Bridges: Strategies for Healthy Ageing in New and Emerging Communities.

This presentation highlights ECCV's extensive community engagement process that informed the Discussion Paper. It included a series of Forums in Melbourne and Ballarat in which more than 130 people participated.

The forums showed that a concerted effort is important in improving access of new and emerging communities to aged care services. The paper outlines challenges in aged care for new and emerging communities, how to provide culturally appropriate care to those communities and makes recommendations to Government. Ageing new and emerging communities share common characteristics such as:

- Form a growing portion of the population of their community
- Have settled in Australia recently
- Generally lack community infrastructure and ethno specific services.

CONCURRENT SESSION 4A - Friday 13 June 2014 - PLENARY ROOM

Interpreters by Broadband - Videoconferencing CALD cognitive assessments

Betty Haralambous, National Ageing Research Institute (NARI), VIC

Social justice and equity of access to care can be compromised by the communication gaps which frequently occur during cognitive assessments of people from culturally and linguistically diverse backgrounds. In Australia there is a shortage of trained and accredited interpreters in many geographical areas. Access to interpreters may be improved through videoconferencing, though there has been little research in this area.

This project aimed to pilot the use of videoconferencing in interpreted cognitive assessments, with the interpreter located at a different site from the clinician, client and family carer. The project included: scoping of training and accreditation of interpreters; exploration of clinician, family member and interpreter perceptions of their experience of interpreted assessments; development of interpreter and clinician guidelines and a training DVD.

A key enabler of successful clinician/interpreter interactions is a pre-interview briefing for clarification of roles and expectations. This is equally important as a contributor to good communication in a remote interview.

Development of Technologies to Support Nurses in Improving the Health Literacy of Older Culturally Diverse People

Rosemarie Draper, RDNS, VIC

Background: RDNS (Royal District Nursing Service) provides a range of home nursing and healthcare services to over 40,000 people each year in Australia and New Zealand. 47% of RDNS clients are born overseas. Clients originate from 159 countries and speak 117 languages. Approximately 81% of clients are aged over 56.

Issue: Low health literacy is highly prevalent among older people from culturally and linguistically diverse (CALD) backgrounds, those that are financially disadvantaged and those with chronic disease. RDNS recognises the importance of working in collaboration with ethno specific and multicultural organisations and communities to shape inclusive services that support equity and access to nursing and healthcare services by CALD people.

Outcome: RDNS is using different technologies to develop a series of culturally appropriate interventions to help nurses to improve the low health literacy of older CALD people. These have been developed in direct consultation with a number of ethno specific and multicultural organisations and groups of older individuals from a variety of CALD backgrounds. Two examples of these inclusive services to be focused on in the oral presentation are the RDNS Language Line and Diabetes Talking Books.

A Journey into the World of Wisdom

Eva Hussain, Carol Yan and Voula Tomaras, Polaron Language Services, VIC

Interpreters have been fulfilling a very important role in Australian culturally and linguistically diverse society for decades. Yet their work often goes unrecognised and unappreciated, at least according to the interpreters themselves. This is of course not surprising given most interpreters are women from migrant backgrounds, trained to blend into the communication landscape. Part of their role is to maintain a low profile and unless something goes wrong, you'll never even notice them. They're there to be the voice of those that cannot speak English, they're there to be a conduit, a channel, a facilitator.

Today, you will have a rare opportunity to hear stories of three interpreters who regularly work with older Australians from diverse backgrounds, and about the difference they make to people's lives, every day. We'll talk about what it's like working as an interpreter in aged care and what are some of the things we could all do to ensure better communication. Our journeys are full of humour, honesty and hope and we promise you'll walk away uplifted.

CONCURRENT SESSION 4B - Friday 13 June 2014 - ROOM 104

Social Capital and Cultural Diversity Among Older Australians Dr Anita Frayman, Monash University, VIC

Among many groups of older people correlations can be found between social capital and country of birth of older people. Social capital influences people's personal conduct by shaping their social interactions, influencing the decisions they make, and creating the support relationships for the emotional and physical care people may receive in their old age. It is not static, and its capacity to support the older person is not guaranteed. It can change as people and their relationships inside their networks change, either because network members become too old to give appropriate support, or because the needs of the older person become too great for the networks members to support. Therefore the ability of the older person to obtain support and enhance their wellbeing through the utilisation of other forms of social capital may become important.

In this presentation, I refer to data collected by the Gen08 survey, the Australian Bureau of Statistics (ABS) in the 2006 census, as well as in-depth interviews with older people and people who work with them, in order to examine correlations between social capital and country of birth and their different experiences of ageing in Melbourne.

Issues and Innovation in Care Services for the Aged of Culturally and Linguistically Diverse Backgrounds in the Context of the Current Reform Angelika Tyrone, Ethnic Link Services, UnitingCare Wesley Port Adelaide, SA

Effective service responses will be presented, including essentials for developing effective service responses for older people of CALD background, focusing on those with limitations in English language proficiency as well as innovative service models - Ethnic Link Services - developed 28 years ago that employs bilingual bicultural staff who work with frail older people from 45 different cultural backgrounds across South Australia. The Service provides language assistance and advocacy to support access to services - works in coordination with service agencies.

Requirement for continual change will be explored - both internal and external including the need to continually change in respond to internal and external requirements and evidence resulting in the inclusion of new client groups and the development of new programs and services.

A proposed model for a Cultural Diversity Portal to the Gateway in the context of the aged care reforms will be presented.

Person-Centred Care: Challenges and Success in Providing Cultural, Linguistic and Religious Inclusive Services Urfi Mirza, Southern Cross Care, VIC

The aim of this presentation is to share the Southern Cross Care (Vic) experience in facing challenges and achieving success in providing person centred care to people from CALD/NESB background in their own homes (community setting) through Home Care Packages.

There is still a lack of awareness about aged care services amongst CALD communities despite the good work undertaken by organisations and individuals. Southern Cross Care (Vic) has established trust and working relationships with clients and their families, local communities, religious groups and CALD specific agencies, and by developing CALD service accessibility procedures to ensure a person centred approach.

We have been privileged to support people from various ethnic backgrounds including Afghan, Greek, Italian, Indian, Turkish, Greek, Sri-Lankan, Pakistani, Russian, Vietnamese, Chinese, Croatian, Bangladesh and Fijian. We have also been able to provide comprehensive case management to asylum seekers and achieved a high degree of success. This paper aims to contribute to the knowledge base across the sector, in the hope that by sharing our experiences, participants will gain further awareness and understanding to support these communities.

CONCURRENT SESSION 4C - Friday 13 June 2014 - ROOM 102

Self-Directed Community Aged Care for CALD, ATSI, and Rural Communities in Australia: A Summary of Working Group Outcomes Dr Goetz Ottmann, Uniting Care Community Options/Deakin University

The rollout of Consumer-Directed Care (CDC) programs to Culturally and Linguistically Diverse (CALD), Aboriginal and Torres Strait Islander (ATSI), and rural or remote communities poses significant challenges to policy makers and program managers. Cultural and geographical factors play an important role in shaping the needs and preferences associated with CDC of these communities. To date there is very limited research evidence available to could guide care professionals in the delivery of CDC to CALD, ATSI, and rural communities. Addressing this issue, this paper presents the outcomes of a six months long consultation process involving older people and carers from three community groups as well as case managers and care coordinators.

An action research process involving around 40 people in four fortnightly working group meetings over four months was employed to capture the cultural, socio-geographical and contextual factors that shape older people's needs and preferences regarding CDC delivery. The findings highlight important cultural and socio-geographical factors that have to be taken into account when delivering CDC programs to CALD, ATSI and rural communities. The paper provides an overview of the most important factors and describes solutions that have been developed with service providers to address them. CDC approaches have to be tailored to resonate with the needs and preferences of CALD, ATSI, and people living in rural and remote communities.

Western Australian Aboriginal and Torres Strait Islander Rural and Remote Aged Care Training Project Maureen Crowther and Fiona McBeath, Kimberley Training Institute, WA

The Kimberley Training Institute is proud to present its findings and experiences related to the Aboriginal and Torres Strait Islander Rural and Remote Aged Care Training Project. The project funded by the Commonwealth Department of Health and Ageing (DoHA) aims to provide training and skill development for ATSI workers across 25 remote WA communities. The project commenced on 1 November 2010 continuing through 2014.

Accredited training was delivered to 251 people (77% Indigenous) in three regions of WA, Kimberley (16), Pilbara (8) and Midwest Gascoyne (1). A team of dedicated aged care lecturers made 482 visits delivering 910 days of training that resulted 55 qualifications and 1199 Units of Competency in Certificate III & IV Aged Care and Home and Community Care.

According to DoHA 'KTI have achieved some remarkable outcomes delivering training to some of the most remote communities in Australia'. The presentation will provide the audience with a lecturer's experience. From 10 hour drives to swagging it on floors, to working with communities where numerous social and economic barriers exist. This is a heart-warming and courageous story to be told. In essence, our story is one where inclusive service delivery has been accelerated through the provision of relevant, contextualised and culturally sensitive training.

Updating the volunteering experience for seniors from multicultural backgrounds Caroline Romeo, Ethnic Communities Council of NSW

Volunteering in the care sector is premised, if not intended, as a one-way benefit (recipient) where volunteers are described as the "community's most valuable hidden asset" who "assist" with social visits, food shopping, transport, other services (MyAgedCare, 2013). How can we visualise other ways of being for a volunteer?

An intensive four-day training program for seniors from multicultural backgrounds, including participation in a one-off volunteer event, demonstrated that volunteering can be beyond "assisting"; that it can be new knowledge (disability and international sport), fun (group work), part of an active lifestyle (health & social benefits) and build on individual skills (self-care strategies; peer education). Capitalising on volunteers' strengths, the ECC is training a group of seniors to deliver a peer education model of volunteering as a personal benefit first, community benefit second.

How can centralised volunteer training benefit the sector? How can people participate in short-term or one-off activity? Can peer education in volunteering improve the participation rates of older people from multicultural backgrounds? How relevant are current volunteer programs for tomorrow? If you could design a program, what would it look like?

Abstracts

Poster Presentations

Celebration of Life Paul Brophy, Brotherhood of St Laurence – Sambell Lodge, VIC

My name is Paul Brophy and I manage Sambell Lodge, which is a low care facility in Clifton Hill. Residents come from Socially and financially disadvantaged backgrounds many residents in aged care lack social contact for a variety of reasons and so in October 2005, I contacted five facilities in the local area to organise the first Celebration of Life Seniors event, titled Seniors Olympics. Following the outstanding success of our initial event a further fifteen events have been staged, average attendance has been 300 people from twenty aged care facilities. The media response has been outstanding both in local press, national media and radio.

These events have provided opportunities for aged care residents to experience.

- Connection and engagement with the wider community.
- Social inclusion and psychosocial stimulation.
- Developed relationships with others outside their immediate community.
- Reminiscence of the past.
- Promotion of health, wellbeing and self esteem.

The next event is planned for June 25th at the Northcote Town Hall titled "Bollywood for Seniors". Our most recent event was at the Docklands in Melbourne for the Christmas Eve luncheon with Father Bob McGuire, where 350 people attended from a variety of culturally diverse backgrounds.

Designing a communication tool using health literacy principles Tanya Sofra, HealthWest Partnership, VIC

Context: HealthWest Partnership is a strategic alliance established to support and improve the planning, coordination and delivery of health and community services in Melbourne's west. This project was undertaken as part of HealthWest's Western Home and Community Care (HACC) Growth Project.

Objective: Develop and pilot a communication tool using health literacy principles to aid General Practices and service providers in accurately communicating the role of HACC services with the culturally and linguistically diverse population in Melbourne's west.

Method: A working group consisting of representatives from Medicare Locals and local HACC services was established to identify key messages in relation to HACC with a focus on person-centered and restorative care. A communication tool was designed using health literacy principles to communicate these key messages. Informal consultations were conducted with a Planned Activity Group, a Vietnamese group, intake officers, and managers of HACC and other services.

Results: Many revisions were made to the tool, particularly to the images. With additional time and resources it would be appropriate to engage a more culturally and linguistically diverse sample of consumers and trial the use of the 'teach back' method, whereby consumers are asked to explain what they have been told, to acquire a more accurate evaluation of whether the information is accessible and if it effectively communicates the role of HACC services.

Many HACC professionals consulted identified the need for such a resource. The tool has also generated interest from professionals engaged in health literacy. The tool will be distributed and evaluated further throughout 2014.

The effectiveness of a series of Cultural Briefing Sessions in enhancing capacity to deliver culturally-appropriate care in a dementia care organisation **Jeanette Van Luyn, Alzheimer's Australia (Qld)**

Currently, around 12% of people with dementia do not speak English at home. Prior research indicates that culturally and linguistically diverse (CALD) family carers of someone with dementia are less likely to access dementia care services, such as in-home care. Service access appears to depend on how services are delivered, as well as the familiarity, and relevance of the service to individual CALD communities.

The current project involves the evaluation of a series of Cultural Briefing Sessions that aim to improve our organisation's capacity to provide culturally appropriate care to CALD carers and people with dementia. Representatives from CALD-specific community organisations were invited to conduct a 90 minute session providing an overview of relevant aspects of their culture and/or religion. These sessions had a primary focus on perceptions of ageing, dementia and end-of-life care within the culture or religion, as well as beliefs relating to family caregivers and accessing external services. Staff attending these sessions were requested to complete self-report measures of their satisfaction with the session and relevance of the content to their daily work.

Results from initial Cultural Briefing Sessions indicate that staff who attended felt more confident delivering culturally-appropriate care to CALD clients, and perceived the information presented as relevant and valuable to their daily work. Feedback received from staff indicates that education on specific cultural or religious groups is a useful strategy in enhancing cultural competence and valuing of diversity within a dementia care organisation.

Meet Greet and Eat: Encouraging CALD communities' access to health and community services **Nicolina Lowe, Heather Kuzcer, Stephanie Cohen and Sue Fletcher, Latrobe Community Health Service, VIC**

Data suggests low levels of access to health services by CALD community members. In the Latrobe Valley (Gippsland) 30% of the ageing community are from CALD backgrounds. Latrobe Community Health Service (LCHS) identified the need to better engage with these communities. The aim of this project was to develop a Living Well forum framework that could be delivered to a range of local CALD communities.

A LCHS working party comprising members from our Carer, Chronic Disease Management and Gambler's Help programs developed a range of topics that included services from LCHS and other local agencies. Consultations were held with community leaders from the respective CALD communities. Groups were asked to arrange a culturally appropriate activity and menu for the forum. The first forum was held with the Filipino community in 2010. Between 2010 and 2013 a further six forums have been delivered.

Results from this project have included an increase in referrals to health and community services; the strengthening of relationships between the CALD communities and local providers; the adaption of this framework by other services (such as men's health and dementia care) and providers now have a better understanding and awareness of each other's services.

A lasting benefit of this project has been the development of linkages between local providers and their enhanced ability to access our CALD communities to deliver important information about local health and community services.

Diversity Conceptual Model: Supports thinking about cultural diversity and possible associations with disadvantage in policy, planning and practice **Jaklina Michael and Lawrence Walsh, RDNS, VIC**

In recognition of health inequity and the cultural diversity of the RDNS client population, in May 2012, the RDNS Diversity Framework Policy, Planning and Practice (2012-2017) (The Diversity Framework) was released.

Included within The Diversity Framework is the RDNS Diversity Conceptual Model to assist the organisation and its large geographically dispersed workforce to inform, educate, persuade and support thinking about diversity and possible associations with disadvantage in policy, planning and practice. The Diversity Conceptual Model encourages a focus on the whole person to better understand a person's overall physical, mental, cultural, religious and emotional well-being. The Diversity Conceptual Model was founded upon Kleinman's (1975) examination of how culture influences perceptions and experiences of illness. In light of Kleinman's perspective that culture shapes how all people interpret, communicate, and cope with health problems, cultural identity remains at the core of The Diversity

Conceptual Model, around which an emerging number of other factors that influence equity in care and outcomes are posited.

The Diversity Conceptual Model will be presented and some examples of how it is being used to influence policy, planning and practice at RDNS.

A lasting benefit of this project has been the development of linkages between local providers and their enhanced ability to access our CALD communities to deliver important information about local health and community services.

Dementia Care in the Community: Access for Culturally and Linguistically Diverse Communities Jordan King and Dr Di Goeman, RDNS, VIC

People from CALD backgrounds face numerous barriers accessing healthcare services, including difficulties with language and a lack of knowledge of service systems. The lack of culturally and linguistically appropriate services and culturally appropriate assessment is a major impediment to the accurate diagnosis and treatment for dementia. Diagnosis of Dementia in CALD communities often occurs in the later stages of the disease as first contact with health professionals most often happens at a crisis point.

We developed a new, inclusive model of community nursing care to facilitate healthcare access and improve the quality of life for culturally and linguistically diverse individuals living with dementia, their family and carers. The project addresses issues such as delayed diagnosis, misdiagnosis and inappropriate management of dementia, gaps in availability of dementia healthcare information, support services and difficulties navigating the system, inequities in access to dementia healthcare for culturally and linguistically diverse communities.

This pilot pioneers the utilisation of a Specialist Dementia Nurse, to support CALD clients with cognitive impairment, in their own homes. Access in the community and extensive clinical knowledge, make the role of a Specialist Dementia Nurse uniquely capable of filling a gap in current health system architecture by assisting people with cognitive impairment and their carers. The research will build evidence demonstrating that a specialist dementia nurse based in the community can substantially supplement physicians' care of older people with Dementia.

Acknowledgement: Funded by the Lord Mayor's Charitable Foundation.

Supporting professional carers from culturally and linguistically diverse backgrounds Julia Rothwell, Wesley Mission Brisbane, QLD

The purpose of this paper is to introduce and invite discussion of a pilot project initiated by Wesley Mission Brisbane (WMB), Australia. The aim of the project is to explore possible avenues of further individual and systemic support for aged care workers in the organisation, especially those who speak English as an additional language.

The work connects many of the suggested conference topics, in particular: effective communication, a focus on carers, and culturally and linguistically responsive initiatives. Of particular interest to WMB is the way the socio-cultural and linguistic barriers in an organisation can affect carers' workplace practices and relationships - with other carers, with those in their care and with their employers.

Drawing on a Bakhtinian understanding of workplace language as a complex reference-laden dialogue between many parties, the work is designed as a participatory action research study; the participants include administrative and nursing staff, representatives of senior management, researchers and, very importantly, the residential and community carers themselves.

The project is informed by a review of evidence-based international research and by more anecdotal reports of practice in the field. It is theorised using work on language, identity and culture from the field of critical applied linguistics and the paper will offer a qualitative analysis of preliminary interviews and discussions with those who organise and provide care. The analysis, in turn, provides the framework for future workplace initiatives, outlined and discussed briefly in the paper.

Remember to... Multilingual Medicines Reminder Cards to promote safe self-management of medicines in CALD communities Ann Johnson, RDNS, VIC

This paper describes the development and use of Medicines Reminder Cards in 8 different community languages at the Royal District Nursing Service (RDNS). The cards are a focussed method of an enablement strategy to promote safe, self administration of medicines in the home. This method is an example of RDNS's commitment to culturally sensitive, person-centred care.

The cards are designed to prompt people who need a simple, written, visual prompt to take their medicines. They can be used in conjunction with Dose Administration Aides (DAAs). They are not designed to stand alone or take the place of RDNS staff administration of medicines if people require further support. Use of the cards assumes literacy in a person's first language and understanding of the images used.

With respect and commitment to a diverse clientele, RDNS sought consultations with 8 different peak language groups in the production of the translated cards including testing images for cultural appropriateness.

The paper explains the design principles, implementation process and evaluation findings from quantitative and qualitative methodologies. The evaluation demonstrated that for appropriately selected people the cards serve as a useful reminder for self management of medicines, particularly when used in association with DAAs.

Assessing the Geriatric Depression Scale (GDS) and the Geriatric Anxiety Inventory (GAI) and education about depression and anxiety amongst the older Chinese community in Australia Clinical Associate Professor Briony Dow, Ms Betty Haralambous, Ms Xiaoping Lin, Dr Anita Goh, Professor Nancy A. Pachana, Dr Dina LoGiudice and Dr Christina Bryant, National Ageing Research Institute, VIC

There is some evidence that people from Culturally and Linguistically Diverse (CALD) backgrounds might be at greater risk of depression than the general community. This study targets older Chinese immigrants, one of the largest and fastest growing groups in the CALD population.

The study aims to (1) investigate the usefulness of the Geriatric Depression Scale and the Geriatric Anxiety Inventory in detecting late life depression and anxiety in amongst older Chinese people; (2) raise awareness and improve knowledge about older age depression and anxiety amongst older people, health and community care workers in this community.

Consultations were undertaken with community and health professionals to explore knowledge of depression and anxiety and obtain feedback about the tools. This information will be used to adapt the tools which will be tested with older Chinese people. Preliminary findings include:

- Chinese older people do not consider depression/anxiety to be an illness.
- They are more likely to express mental health problems through physical symptoms.
- Depression and anxiety among older Chinese immigrants are often related to their experience as immigrants in a new country in later life, which might include language difficulty and changed role and status within the family.
- There is strong stigma associated with mental health problems amongst older Chinese immigrants; such problems are often viewed as a personal weakness.
- Obtaining assistance is often hindered by their perception of depression and anxiety, language and cultural factors, and the availability of culturally appropriate services.

This study is funded by beyondblue.

Partnership between WELL PROGRAM TAFE SA and Regency Green Multicultural Aged Care Facility (RG) Cynthia Ofner, Matthew Wood, Bonnie Hart, Carmela Evans, Regency Green Multicultural Aged Care Facility (RG) and TAFESA, SA

The Well Program of TAFE SA and Regency Green Multicultural Aged Care Facility formed a partnership commencing 2008 to date. The purpose of the partnership was to provide functional English training and assist in basic computer training for staff whose English was their second language. The program content continued to evolve as staff needs were identified to focus on improvement of quality care, mentoring, work safety and better teamwork through surveys and interviews conducted by TAFE SA educators. The presentation will focus on the schematic model of the partnership and the expected / unexpected positive outcomes and improved staff practices linked to the training at RG.

Disseminating the Have A Try (HAT) exercise program and Healthy Ageing Quiz (HAQ) to older people from culturally and linguistically diverse backgrounds in Melbourne E. Cyarto; F. Vratsidis; E. McCarthy; B. Dow; F. Batchelor, National Ageing Research Institute, VIC

A pilot study, conducted by the National Ageing Research Institute and the City of Melbourne (CoM) in 2012 that aimed to improve physical activity and nutrition in a group of senior Spanish women by providing a culturally sensitive program, found many positive outcomes for participants. The 16-week program included: the Have A Try (HAT) strength and balance exercise program taught by a Spanish-speaking instructor (weekly group sessions; twice weekly at home); a home visit to ensure the exercises were being conducted correctly and safely; and guest speakers on healthy ageing topics. A member of the group, trained as a peer leader, now assists the instructor.

The HAT/Healthy Ageing Quiz (HAQ) program is now being disseminated to four other culturally and linguistically diverse (CALD) senior groups in the CoM area – Italian, Slavic, Chinese, and Eritrean - to see if the program is feasible and acceptable to other CALD groups. All but one group have completed phase one, the 6-month exercise program led, where possible, by a fitness instructor from the same or similar cultural background. The project is in phase two, a further 6 months with trained peer leaders and home-based HAT exercises.

This presentation will report participant feedback from focus groups and discuss barriers and facilitators encountered in setting up and maintaining the program. Findings include:

- Reports of health and social benefits (feeling happier and more energetic) ;
- Preference for instructor-led exercises;
- Facilitators: having a committed bilingual contact person and a bilingual instructor; and
- Barriers: literacy levels and group dynamics.

Responding to Diversity in Residential Care Felicity Sivasudasan, Southern Migrant and Refugee Centre, VIC

The poster presentation by Southern Migrant and Refugee Centre (SMRC) will showcase how the implementation of a Cultural and Spiritual Policies and Practices Review Tool has enabled them to work effectively with two aged care facilities to improve the responsiveness of their care. The review tool is a document designed for aged care facilities to review relevant culturally inclusive practices in place and identify improvements that would assist them to increase their level of culturally inclusive care. The tool is aligned with Residential Aged Care Accreditation Standards.

The review process involves a collaborative approach, that moves away from mere compliance to regulation, and aims to assist service providers to identify and value quality improvement pathways.

This presentation will explain how the review tool was applied, with both facility staff and SMRC being involved. It will describe how the process then enabled with assistance from SMRC, the development of a Cultural Action Plan that responded to areas identified as their priorities.

The review tool can be instrumental in improving the responsiveness of care for any migrant resident. In the work highlighted, the focus was on two small and emerging communities, Sri Lankans and Cambodians. The tool was developed through the Southern CALD Healthy Ageing Project, with support from the Australian Government.

Entertainment

The Eamon and Dudi Project

The Eamon and Dudi Project are a Melbourne-based guitar duo inspired by the musical culture of South America. Together they play because they love the music, and their goal; to share the passion. The Project embraces traditions of Brazilian guitar repertoire such as Choro, Afro-Samba and Forró, and creates unique collaborations between musicians, cultures, and people who share their respect for the promotion of live music.

The Eamon and Dudi Project will be performing at the social function following the Conference proceedings on Thursday.



Yannis Katsianas

Yannis grew up in Thessaloniki and has played music in Greece, Germany and Norway. Yannis plays bouzouki and sings, and has performed at many of Melbourne's Greek restaurants.

Yannis will be providing lunchtime entertainment on the first day of the Conference.



Jali Buba Kuyateh

Jali Buba Kuyateh has the ability to captivate an audience. He sings like Youssou N'dour and plays kora like Toumani Diabate.

He's a brilliant entertainer and to watch him play as he gets lost in his music is an absolute delight.

He has many fans right throughout Senegal, Gambia, and now Australia, and he is recognised and greeted everywhere he goes by people in the street. The kora is very melodic and has a beautiful unique sound.

Catch Jali Buba Kuyateh during lunchtime on day two.





**Centre for
Cultural Diversity
in Ageing**

Service Provider Support

Delivery of culturally inclusive services is supported through our:

- Consultancy service
- Project management
- Community consultations
- Tailored professional development

Partners in Culturally Appropriate Care (PICAC)

With funding from the Australian Government Department of Social Services we provide:

- Research, policy and service development advisory service
- Training
- Online multilingual and other resources
- Facilitation of partnerships and collaborative initiatives

Register

Join the Centre for Cultural Diversity in Ageing by registering online and receive updates on culturally inclusive initiatives, events, training and networking opportunities.

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