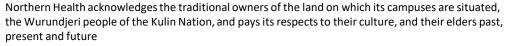
## Diversity & Inclusion @ Northern Health











## Our Approach to Diversity & Inclusion

Northern Health is committed to being an inclusive and welcoming organisation that embraces the diversity of our staff and the community we serve

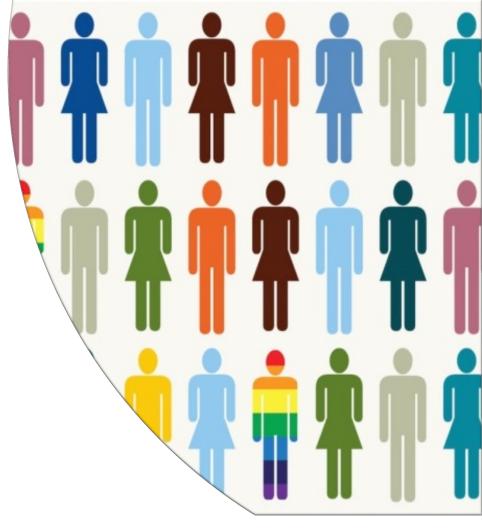
#### We

- Promote a culturally safe and respectful environment for all members of the community
- Consult and partner with our diverse community in service planning, operations and policy development and evaluation
- Strive to continually improve and demonstrate our responsiveness to diversity and promote inclusive practice

### **Diversity & Inclusion**

We actively promote respect and inclusion, and we recognise and appreciate individual differences

- Diversity can be with respect to age, disability, gender, sexual identity, sexual orientation, socioeconomic status, cultural and linguistic background, ethnicity, religious or spiritual beliefs
- Inclusion occurs when a range of people from diverse backgrounds feel valued and respected, have access to opportunities and resources and can contribute their perspectives and talents to improve an organisation

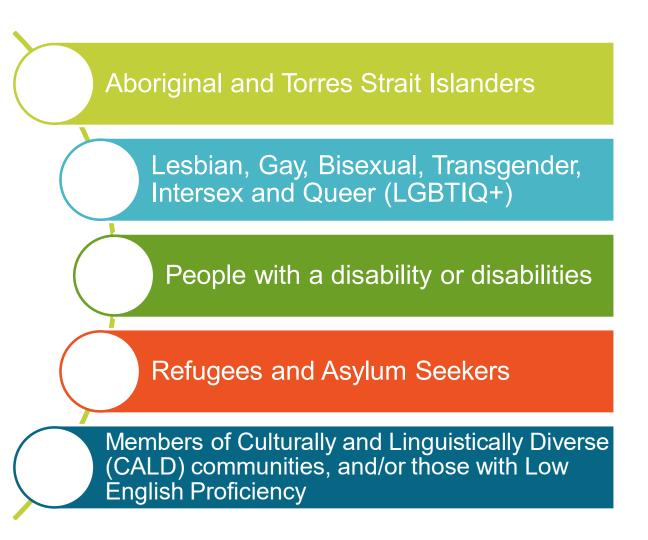


## **Diversity & Inclusion at Northern Health**

Northern Health promotes equity for all

Everyone needs to feel safe and included

We recognise some groups are more vulnerable than others



## **Our Community at Northern Health**

50%

of patients were born in non-English speaking countries

1 in 5

Health service interactions use an interpreter

70%



of patients record a religious faith

30



Over 30 different belief systems are represented

4%

of staff identify as lesbian gay or bisexual

0.5%

of staff have
Aboriginal or Torres
Strait Islander
backgrounds

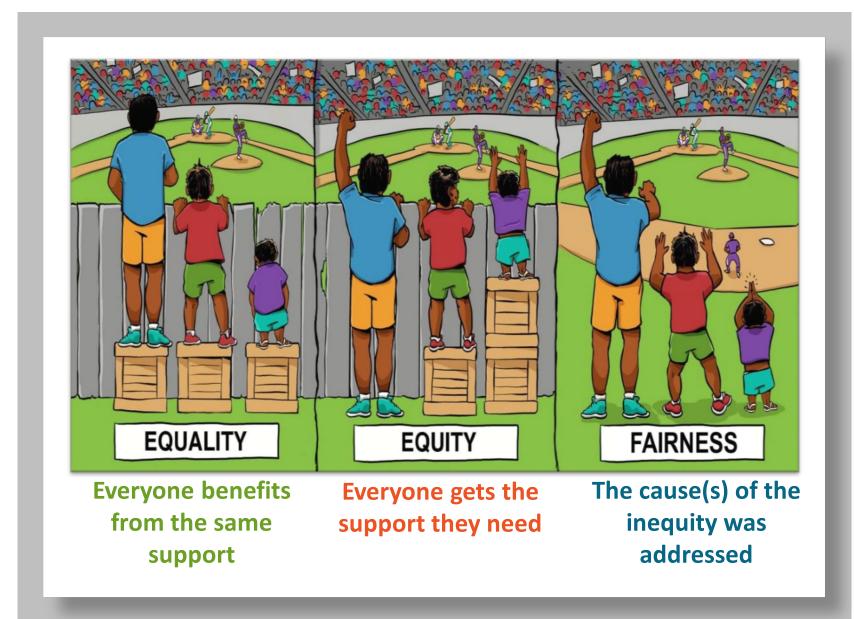
We have staff with a range of disabilities – we reflect our community

Our staff come from over 40 countries and speak over 50 languages

## **Equality, Equity and Fairness**

Northern Health understands that treating everyone equally does suit everyone

We aim for equity in our service delivery and in the way we support our staff



## **Cultural Competence**

Cultural competence is a set of behaviors, attitudes and policies that come together in a system that enables effective work in cross cultural situations

It applies to all of us - all patients, their families and friends, all staff and volunteers

Benefits of cultural competence

- Increases mutual respect, trust and understanding between patients, their families and friends and Northern Health
- Assists patients and families in their care
- Increases health literacy and promotes wellness
- Reduces the number of missed medical visits and adverse events
- Increases community participation and involvement in broader health issues

We're going to have to operate to remove your language barrier and possibly parts of our cultural identity so we can all understand each other and treat your symptoms more effectively.....





#### Our leaders model inclusive behaviours

We are responding to the needs of our patients and staff by

Using specialist dedicated staff to help people navigate the system

 We have Aboriginal health liaison officers, interpreters, bilingual staff and care coordinators

Being culturally competent in the way we work

 Cultural awareness, safety, inclusion and competency are embedded in our policies, frameworks and planning

Building a more representative workforce

• Through recruitment, position descriptions, employment advertisements, supervision and appraisal processes

## Aboriginal and Torres Strait Islander Peoples

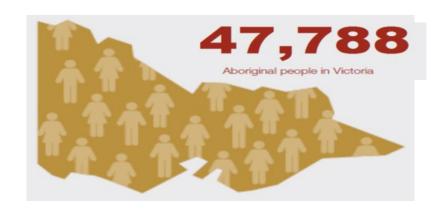
### Aboriginal and Torres Strait Islander population

**0.9%** of the Victorian population is of Aboriginal and/or Torres Strait Islander background

In the Northern Health catchment **1.5 to 2%** of the population are of Aboriginal and/or Torres Strait Islander heritage

0.5% of Northern Health staff have Aboriginal or Torres Strait Islander backgrounds

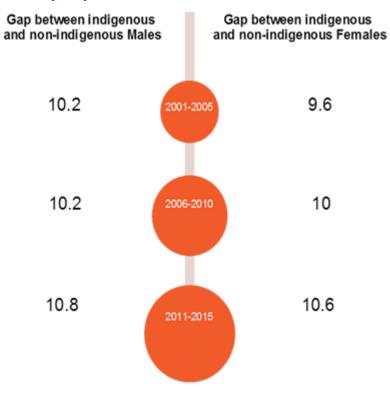




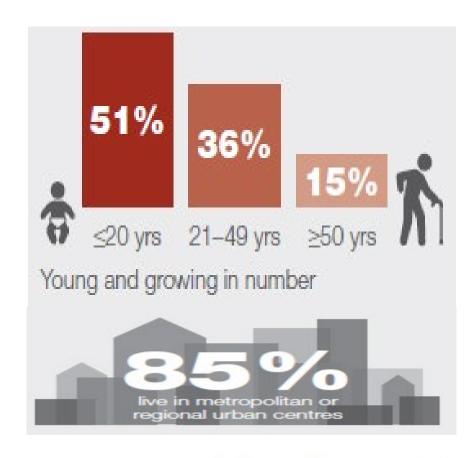
#### Did you know?

## The Gap - Indigenous and non Indigenous life expectancy

#### **Close the Gap report 2018**



## Age cohorts - Victorian Aboriginal Families & Elders





#### Did you know?





www.nationalfvpls.org.au



## Closing the Gap!

11% fall in the Indigenous smoking rate from 51% in 2002 to 42% in 2014–15

15% fall in the mortality rate for Indigenous Australians was recorded between 1998 and 2015

39% of the gap between Indigenous and non-Indigenous Australians health outcomes can be explained by social determinants

64% of total burden of disease among Indigenous Australians is due to chronic diseases such as heart disease, diabetes, respiratory disease and cancer

## LGBTIQ+

#### **LGBTIQ+**

is an acronym for Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and Others

#### What is trans and transgender?

- Currently in Australia, babies are classified at birth as female, male or undetermined
- A female-classified person who identifies as a boy or man may describe himself as a trans man or simply as a man
- A male- classified person who identifies as a girl or woman may describe herself as a trans woman or simply as a woman
- Some trans people identify trans as their gender
- Cisgender refers to people whose gender identity (not sexuality) is consistent with their sex assigned at birth

#### What is gender diversity and non-binary?

- In the same way that sexual orientation and gender expression are not binaries, gender identity is not a binary either
- Some people may identify as:
  - agender (having no gender)
  - bigender (both a woman and a man)
  - non-binary (neither woman nor man)

#### What is Intersex?

- Intersex is a description of biological diversity and may or may not be the identity used by an intersex person
- Intersex people have reproductive organs, chromosomes or other physical sex characteristics that are neither wholly female nor wholly male



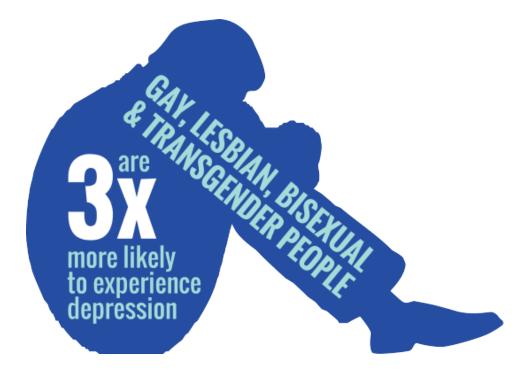
## Did you know?

PERCENTAGE OF LGBTI PEOPLE WHO HIDE THEIR SEXUALITY OR GENDER IDENTITY AT CERTAIN EVENTS

ACCESSING SERVICES 34%

SOCIAL AND COMMUNITY EVENTS 42%

WORK 39%





## People with a disability or disabilities

#### **Disabilities**

## There are many different kinds of disability and they can result from accidents, illness, ageing or genetic disorders

- A disability may affect mobility, ability to learn, ability to communicate easily
- Disabilities may be visible or hidden, temporary or permanent and may have minimal or substantial impact on a person's abilities

#### Common disabilities:

- Physical and sensory
- Mental health related
- Intellectual disability



## Refugees and Asylum Seekers

## Refugees and Asylum Seekers

#### What is the definition of a refugee?

 A refugee (as defined by The United Nations 1951 Convention Relating to the Status of Refugees) is: someone who has left their country and cannot return because of a well-founded fear of being persecuted for reasons of race, religion, nationality, or membership of a particular social group or political opinion

#### What is the definition of an asylum seeker?

 An asylum seeker is outside his or her country, has sought protection as a refugee, but whose claim for refugee status has not yet been assessed

Seeking asylum in Australia is not illegal. In fact, it is a basic human right. All people are entitled to protection of their human rights, including the right to seek asylum, regardless of how or where they arrive in Australia



## Supporting Refugees and Asylum Seekers

Refugees and Asylum Seekers are highly likely to have experienced significant trauma impacting both physical and mental health

There are approximately 15,000 refugees and 4,000 asylum seekers in Hume and Whittlesea combined



(Department of Home Affairs)

We offer free access to services including free professional interpreters. Medical services and pharmacy are covered for some people without Medicare cards

Northern Health

## Key issues for asylum seekers and refugees

- Prolonged detention can have a devastating and longlasting impact on the mental health of asylum seekers, especially children
- There are high rates of self-harm in the immigration detention system
- Asylum seekers arriving in Australia by boat who have been granted bridging visas are not allowed to work
- This restriction on working and earning an income can have serious effects on a person's well-being and contribute to problems with physical health, mental health, social isolation and family breakdown

# Culturally and Linguistically Diversity (CALD)

## Did you know?

- 28% of Victorians were born overseas in more than 200 countries
- 49% of Victorians have at least one parent born overseas
- 23% of Victorians speak a language other than English at home
- 68% of Victorians follow 135 faiths
- At Northern Health almost 50% of our patients were born in non-English speaking countries
- NH has over 40 in-house interpreters: Arabic, Turkish, Italian, Greek, Assyrian, Chaldean, Macedonian, Persian, Serbian, Croatian, Bosnian, Mandarin, Cantonese, Vietnamese, Hindi, Punjabi and Nepali
- Northern Health's Transcultural and Language Services (TALS) delivers over 70,000 interpreting occasions of services in more than 100 languages

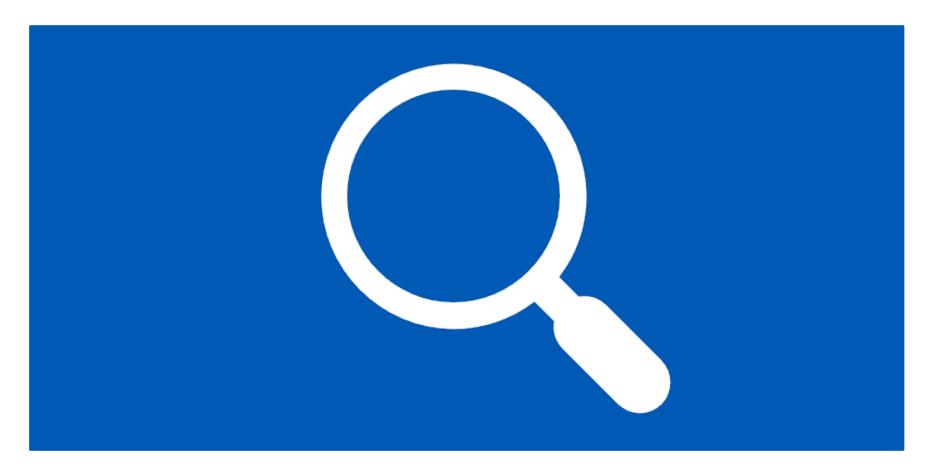
#### **Pastoral Care**

Northern Health provides pastoral care to patients, their relatives, friends and staff to promote spiritual health and wellbeing

Pastoral Services offer an attentive, listening presence that enables people to give expression to their struggles, questions, grief, loss, reactions and emotions



#### **Information and resources**





#### Resources

Please go to the NH Intranet Diversity web page for

information, videos and links to community organisations

https://intranet.nh.org.au/departments-and-services/diversity/about-us/

**Diversity Enquiries** 

NH-DiversityEnquiries@nh.org.au

## Transcultural and Language Services (TALS)

Interpreters should be provided when a patient has difficulty communicating in English or upon request. For interpreter bookings, please book via iPM, IMS or phone the TALS Office on #58188

Interpreters should be used

- During assessments or taking medical histories
- On admission or when explaining rights and responsibilities
- When obtaining informed consent
- When explaining treatment and/or care plans
- During discharge planning
- When the patient wishes to make a complaint
- At any formal interview

Please note, it is against NH and DHHS policy to use family members instead of professional interpreters

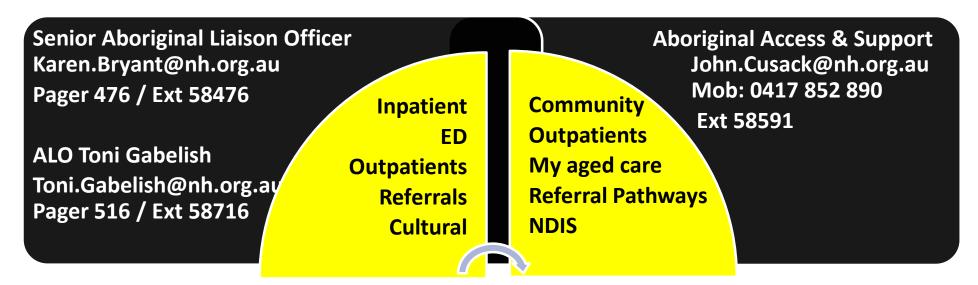








## **Aboriginal Support Unit (ASU)**





#### **Pastoral Care**

#### The following Pastoral Services are available for staff and patients

- Pastoral care and bereavement information brochures (in 8 languages)
- Conversations around death and dying, end of life care, grief and loss
- Advocacy, family meetings
- Education on the role pastoral care plays in a holistic healthcare setting
- Memorial services

Referrals by phone #58005 or pager 012

