Children and Family Intensive Support (CaFIS)

1. Cultural Competency



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| In this tool, you will find:   * Guidance on the indicators, mechanisms and actions that will help your progress toward cultural competency and embedded cultural governance * How to deliver a service effectively with demonstrated cultural competence * The six stages of the continuum of cultural competency. |

Key guidance

CaFIS providers should have deeply embedded links with Aboriginal communities, demonstrated cultural competency, and of importance to the delivery of the CaFIS program the ability to bring cultural authority and embedded governance to the design and delivery of the service. Cultural competency and cultural governance is sometimes referred to as a continuum as shown in Figure 1. There are clear indicators for each stage that a service or organisation might travel through toward cultural competency and embedded cultural governance.

Figure 1: Cultural competency and cultural governance continuum

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|  |  | Towards cultural competence | | | |
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| Culturally destructive | Cultural incapacity | Cultural blindness | Cultural pre-competence | Cultural competency | Embedded cultural governance |
| Attitudes, policies, and practices that are destructive to Aboriginal cultures (e.g. through assumptions of superiority or racist behaviour). | Organisation lacks the capacity to work with and for Aboriginal people, for example through ignorance or fear. | All clients are treated in the same way with no recognition or understanding of culture. | Staff and organisation recognise gaps and are progressing through cycle of cultural awareness > safety > security > responsiveness. | Staff and organisation become culturally safe, clients receive cultural engagement and good service, Aboriginal representation and consultation taking place in the organisation. | Principles for cultural governance are embedded throughout all levels of the organisation and service delivery. |
| Indicators | | | | | |

Adapted from: VACCA, 2010, Building respectful partnerships: The commitment to Aboriginal cultural competence in child and family services, Northcote, VIC: VACCA; National Aboriginal Community Controlled Health Organisation, 2011, NACCHO Cultural safety training standards: A background paper. http://www.csheitc.org.au/wp-content/uploads/2015/11/CSTStandardsBackgroundPaper-NACCHO.pdf, p. 14.

You can read more about cultural mechanisms in the Cultural Safety tool.

Actions to improve cultural competency

It is important for Aboriginal and Torres Strait Islander families to feel comfortable to engage with and receive CaFIS services. To achieve this, CaFIS providers can make sure that their service operates in a supportive, safe and respectful environment and that the service is delivered by a culturally safe workforce.

Cultural competency operates at different levels of the CaFIS service. These include:

* Individual level: knowledge, attitudes and behaviours of service providers
* Professional level: education and professional development to guide the working lives of service providers
* Organisational level: skills, resources, values and evaluation of progress
* Service and systemic level: policies, procedures, monitoring mechanisms and resources.

Source: National Aboriginal Community Controlled Health Organisation, 2011.

Table 1: Actions that you can take to improve cultural competency across these levels

| Levels within CaFIS service | Actions |
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| Individual level | Encourage a culture of learning by sharing experiences at team meetings, networks and other forums. |
| Professional level | Provide training and support to increase staff skills in the design and delivery of culturally safe services.  Establish formal, culturally appropriate and effective mechanisms for obtaining and using feedback from Aboriginal and Torres Strait Islander families and communities. Feedback about the quality of the service will inform and improve CaFIS service delivery. |
| Organisational level | Support the continuous improvement of the CaFIS service in its cultural competency by investing in data analysis and interpretation, tools and resources, and workforce.  Establish and maintain partnerships with Aboriginal and Torres Strait Islander communities and organisations to ensure the service is responsive to their needs and aspirations.  Make sure that governance structures within your organisation are inclusive of Aboriginal and Torres Strait Islander people.  Embed actions aimed at improving services for Aboriginal and Torres Strait Islander people in organisational governance, staff and teams’ roles and responsibilities, indicators, data, and the information you keep on service recipients. |
| Service and system level | Ensure that Aboriginal and Torres Strait Islander people, communities and services are actively engaged in identifying priorities and developing policies and programs that lead to improved access, high-quality service, positive experiences and better outcomes for children and families.  Prioritise the improvement of services for Aboriginal and Torres Strait Islander people within an accountable, systematic and integrated approach to improving safety and quality, and managing risk and performance in service delivery. |

Source: National Aboriginal Community Controlled Health Organisation 2018, pp. 7-15.

Where to go for more information on this topic

* National Framework for Continuous Quality Improvement in Primary Health Care for Aboriginal and Torres Strait Islander People 2018-2023 (National Aboriginal Community Controlled Health Organisation). This resource, though primarily aimed at health providers, provides a framework through which the capability of organisations can be built so they can better deliver high quality, responsive and culturally appropriate health services to meet the specific needs of Aboriginal and Torres Strait Islander people. It’s available here: <https://ahcsa.org.au/app/uploads/mp/files/resources/files/naccho0042-cqi-framework-final-accessible.pdf>
* Bicultural practice in the Northern Territory children and families sector: Practitioners' reflections of working two-ways (McGuinness and Leckning, 2013). This paper presents the results of a research project aimed to better understand the key elements of promising bicultural practice in the Northern Territory children and families sector. Findings were used to inform the development of a two-way practice framework that can be used by a range of government and non-government organisations. Available here: <https://www.menzies.edu.au/icms_docs/312410_Bicultural_Practice_in_the_Northern_Territory_Children_and_Families_Sector.pdf>

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| References used in the creation of this document  Kate McGuinness and Bernard Leckning 2013, ‘Bicultural practice in the Northern Territory children and families sector: Practitioners' reflections of working two-ways’, Menzies School of Health Research, Centre for Child Development and Education and Strong Aboriginal Families, Together (SAF,T), Darwin, Northern Territory.  National Aboriginal Community Controlled Health Organisation (NACCHO) 2011, ‘Cultural Safety Training Standards: A background paper’, NACCHO, <http://www.csheitc.org.au/wp-content/uploads/2015/11/CSTStandardsBackgroundPaper-NACCHO.pdf>.  National Aboriginal Community Controlled Health Organisation (NACCHO) 2018, ‘National framework for continuous quality improvement in primary health care for Aboriginal and Torres Strait Islander People 2018-2023’, NACCHO, Canberra, pp. 7-15. |