

**ACCESS TO
MAINSTREAM
SERVICES
BY CULTURALLY
AND
LINGUISTICALLY
DIVERSE
COMMUNITIES
IN
MANNINGHAM,
WHITEHORSE
& KNOX**



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ABBREVIATIONS & DEFINITIONS

ABS	Australian Bureau of Statistics
CALD	Culturally and linguistically diverse. May also be referred as C&LD or CLD. Generally defined as individuals who “identify as having particular cultural or linguistic affiliations by virtue of their place of birth, ancestry/ethnic origin, religion, preferred language or languages spoken at home; or because of their parents’ identification on a similar basis” (DHS 2003b:34). The term usually includes indigenous Australians but not in the case of this report.
DHS	Department of Human Services (Victoria)
DIMIA	Department of Immigration and Multicultural and Indigenous Affairs
DOI	Department of Infrastructure
DPC	Department of Premier and Cabinet
ESB	English Speaking Background
Ethno-specific services	“Specialist providers which are focused predominantly on providing services to, or advocating on behalf of, the members of a particular ethnic group” (DHS 2003b:29), for example, Australian Greek Welfare Society or the Indo-China Refugee Association.
HACC	Home and Community Care
LGA	Local Government Area
MIC	Migrant Information Centre (Eastern Melbourne)
MRC	Migrant Resource Centre
MSA	Migrant Service Agency
NDCA	National Data Collection Agency
NES	Non-English Speaking
NESB	Non-English Speaking Background
NESC	Non-English Speaking Country
SAAP	Supported Accommodation Assistance Program
SLA	Statistical Local Area
VOMA	Victorian Office of Multicultural Affairs

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EXECUTIVE SUMMARY

This project was initiated in response to concerns by the Migrant Information Centre (Eastern Melbourne) that people from culturally and linguistically diverse (CALD) backgrounds in the Eastern Region of Melbourne are not accessing mainstream services.

The project aimed to assess the level of usage by CALD communities of mainstream services, identify what barriers exist that inhibit CALD communities from utilising mainstream services, and investigate ways of addressing those barriers. The project was focused on a range of family and youth services provided to populations in the local government areas of Manningham, Whitehorse, and Knox in the Eastern Region of Melbourne. HACC services were not considered.

BACKGROUND

The impetus for the project came from four sources:

1. Anecdotal evidence collected by the MIC regarding low service use of mainstream services by CALD communities in the Eastern Region of Melbourne. One of the roles of the MIC is to promote access for migrants to all services provided in the community (MIC 2003b) including promotion of the availability of these services and encouraging agencies to develop culturally sensitive services.
2. Recognition that a significant proportion of the population in the Eastern Region of Melbourne were born in non-English speaking countries (18%) and speak a language other than English at home (20%). More specifically, 27% of the Manningham population was born in non-English speaking countries and 35% speak a language other than English at home. These percentages are 20% and 22% for Whitehorse and 15.5% and 16% for Knox (Ashby 2003).
3. A continued emphasis by government on minimal specific intervention for migrants and the provision of services to migrants via the mainstream. Most recently espoused through the 2003 Coalition Government's policy statement *Multicultural Australia: united in diversity* (Commonwealth of Australia 2003) and supported by the 1998 *Charter of Public Service in a Culturally Diverse Society* (DIMIA 1998). More recently the DIMIA 2003 *Review of Settlement Services* recommended that specific settlement services for migrants be focused on humanitarian and refugee entrants who have been here for less than five years and on family entrants with low English proficiency. All other members of CALD communities, including newly arrived skilled migrants, are expected to access services via mainstream agencies (DIMIA 2003c).

In addition, the Victorian Government, responsible for many of the mainstream services considered in this project, has endorsed the *Charter* and emphasises a "whole of government" approach to diversity (VOMA 2002).

4. A review of Australian research from the last ten years regarding service use by CALD communities, factors that affect access to services and strategies to make services more accessible. Half of the reports considered service use by CALD communities and all of these found that service use by non-English speaking people was lower than for English speaking people. Issues raised included the need for reliable ethnicity data, assumptions made about the level of need for services, and the quality of service provision.

Nearly all of the reports consulted with service providers, CALD communities or both to identify factors and strategies that affect access to services with similar results to this research (see below). The past research also identified factors and strategies regarding the policy and planning of services such as the existence of access and equity policies, type of data collected, and level of understanding of community needs.

The review of past research highlighted the need for more local data about service use and strategies to improve access to services in the Eastern Region of Melbourne.

METHODOLOGY AND FINDINGS

The project was undertaken within an action research philosophy and collected quantitative and qualitative data. Stage one of the project aimed to determine the level of usage of services by CALD communities. It involved the collection of country of birth and language data about clients who used services in Manningham, Whitehorse and Knox in 2002/2003. Quantitative data was obtained from individual agencies or from the Victorian Department of Human Services. The percentage of clients from CALD backgrounds using services was compared with the percentage of people in the population from CALD backgrounds and deemed to have a satisfactory outcome if the difference was no more than 5% either way.

The overall finding from Stage one was that people from CALD backgrounds did not access mainstream services as well as they should. Only 26% of data groups analysed for country of birth data had a satisfactory result, and 19% of data groups analysed for language data had a satisfactory result. In addition:

- 61% of data groups for country of birth data had unsatisfactory results with a percentage difference of between minus 5% and minus 20%. Only 13% of these data groups had unsatisfactory results where the percentage of CALD clients was actually higher than the percentage in the population statistics.
- 78% of data groups for language data had unsatisfactory results with a percentage difference of between minus 5% and minus 20%. Only 3% of these data groups had unsatisfactory results where the percentage of CALD clients was actually higher than the percentage in the population statistics.
- While Manningham has the highest percentage of people born in a non-English speaking country out of the three LGA's considered, it had the lowest percentage of data groups (7%) with a satisfactory result for country of birth data. Alternatively, it had the highest percentage of data groups (25%) with satisfactory results for language data.
- 3 of the 10 satisfactory data groups for country of birth data were made up from Enhanced Maternal and Child Health services, 2 from Clinical Mental Health services and 2 from Community Health services. 2 of the 6 satisfactory data groups for language data were made up from Enhanced Maternal and Child Health services and 3 from Problem Gambling services.

Stage two of the project collected information about factors that affect access to services and strategies to address those factors. It involved interviews with satisfactory and unsatisfactory mainstream agencies and ethno-specific agencies, and analysis of previous consultations conducted by the MIC with CALD communities. A Reference Group of representatives from mainstream and ethno-specific agencies was established to provide advice and support about the consultation and

development of recommendations. Results from Stage two indicated that there are a number of factors that affect access to services by CALD communities and a number of strategies that could address those factors. There were no clear differences between satisfactory and unsatisfactory agencies. The factors and strategies identified can be classified into three main groups:

- Language and communication – such as English proficiency, availability and use of interpreters, bilingual workers and translated material;
- Information and knowledge about services – such as knowledge about the existence of services, what they do, and how this is targeted and distributed;
- Cultural understanding – such as level of knowledge and respect for cultural differences, being welcoming to people from other cultures, cultural sensitivity in service provision, availability of cross-cultural training, and outreach to CALD communities.

Mainstream agencies identified the need for more resources and organisational change to implement the strategies identified.

A fourth group of factors and strategies concerned with the policies and planning of services was also identified through analysis of recent research. These areas were discussed in the interviews with varying results highlighting the need for more research about access and equity policies and their implementation, the collection of ethnicity data about clients, and whether demographic data is used in the planning and evaluation of programs and services.

FUTURE DIRECTIONS

The analysis of stage one and two results, together with information gained in the literature review and advice from the Reference Group, point to a number of ways to address these issues in the future:

- That the MIC continue to widely promote the availability of resources to assist with access to services for people from CALD communities for example the cultural resource kit available on the MIC's web page, cultural fact sheets and cultural awareness training.
- That the MIC seek a meeting with the Eastern Regional Manager of the Department of Human Services to discuss the findings of this report and opportunities to address its findings, in particular:
 - agencies' collection of data regarding ethnicity;
 - agencies' provision of services and communication about services in the client's own language through appropriate use of interpreters, employment of bilingual staff and translated materials;
 - agencies' provision of information about services through a range of avenues that take into consideration the whole target group;
 - agencies' acknowledgment of the cultural differences within their target group through the provision of culturally appropriate services;
 - the role of the Department of Human Services in ensuring that access and equity policies are developed, implemented and reviewed in funded agencies.

- That the MIC discuss the findings of this report with the MIC Youth and Family Support Working Group with the view to the working group identifying and implementing actions that will address the findings of the report. In particular:
 - development and delivery of services that recognise the cultural diversity of the catchment;
 - use of interpreters and translated information;
 - promotion of services to CALD communities;
 - data collection.
- That the MIC provides culturally specific training to support the development and implementation of culturally sensitive services.

1. INTRODUCTION

In August 2003 the Migrant Information Centre (Eastern Melbourne) (MIC) sought to investigate whether culturally and linguistically diverse (CALD) communities were accessing mainstream services in the local government areas (LGA'S) of Manningham, Whitehorse and Knox (see *Section 2, pgs. 12 and 13* for more information about these LGA's).

The impetus for this project was drawn from three sources. Firstly, evidence collected by the Migrant Information Centre, through their 1999 Needs Analysis and via individual client contacts and feedback from migrant communities and services, suggests that the proportion of CALD clients that use such services is low compared with the proportion of CALD members in the region's population. Secondly, since the late 1970's, government policy has indicated that services for CALD communities should mainly be provided by mainstream agencies. And, thirdly, findings from current research about the service utilisation patterns of culturally and linguistically diverse communities suggest that these communities are not accessing mainstream services.

Purpose of project

The purpose of this project was to increase the accessibility of mainstream services to culturally and linguistically diverse communities in the local government areas of Manningham, Whitehorse and Knox in order to produce better outcomes for members of those communities.

This project aimed to:

- assess the level of usage by CALD communities of mainstream services in these areas;
- identify what barriers, if any, exist that inhibit CALD communities from utilising mainstream services;
- investigate ways of addressing those barriers and improving access to services;
- develop an action plan to implement and evaluate strategies for improving access to mainstream services.

Scope of project

The project was concerned with three local government areas in the Eastern Region of Melbourne: Manningham, Whitehorse and Knox. The varying demographic makeup of each of these areas gave a reasonable cross section of the types of issues that may be relevant across the region with varying numbers of people from CALD backgrounds, ranging from new arrivals to longer term migrant populations (see *Section 2, pgs. 12 and 13*).

In addition, the project focused on family and youth services including counselling, community health, disability services, drug and alcohol support, problem gambling services, housing services, family support, financial counselling, mental health and youth services. The project did not specifically consider services funded through the Home and Community Care (HACC) program such as aged services, or employment or domestic violence services, although some of these were also provided by agencies looked at in the project.

The project worker, Sharon Porteous, completed the project as part of a Masters Degree in Social Policy and Planning at Charles Sturt University, Wagga Wagga, New South Wales.

2. BACKGROUND

Migrant Information Centre – Eastern Melbourne

The Migrant Information Centre (Eastern Melbourne) (MIC) was established in 1999 to “take a lead role in the coordination of current, relevant information and the provision of services that will strengthen and stimulate opportunities to enhance the lives of new and existing migrant populations in the Eastern Region” of Melbourne (MIC 2003a:1). The Eastern Region includes the local government areas of Boroondara, Knox, Manningham, Maroondah, Whitehorse, Yarra Ranges and parts of Monash (MIC 2003a). The MIC is part of a network of over 30 Migrant Resource Centres (MRC’s) and Migrant Service Agencies (MSA’s) across Australia. The range of services offered by the MIC include: specific settlement assistance; information, advice and referral; organization of community forums; information and support to other agencies; development of resource kits; support to migrant community groups; consultancy; participation in advisory groups; as well as work on specific community development or service development projects.

A Board of Directors oversees the MIC with core funding from the Department of Immigration and Multicultural and Indigenous Affairs (DIMIA) for basic staff and operational costs. Other funding comes from the Victorian Department of Human Services, the Victorian Multicultural Commission, the Community Support Fund, Vic Health and local government for various projects undertaken (MIC 2003a). The mix and source of funding varies from year to year.

The MIC views one of its key roles as promoting “equity of access for migrants to all services provided in the community” (MIC 2003b). The recent DIMIA *Review of Settlement Services* highlights the complexity of this role. It suggests that mainstream agencies could become over-reliant on the expertise offered by MRC’s and MSA’s and may even avoid taking responsibility for the provision of services that are appropriate for a culturally and linguistically diverse population (DIMIA 2003c). Thus, MRC’s and MSA’s need to focus on promoting the services available through mainstream agencies and encouraging those agencies to develop culturally sensitive and appropriate services which address the needs of their diverse target group (DIMIA 2003c).

Regional Demographic Profile

The Migrant Information Centre's target area of the Eastern Region of Melbourne has a total population of 938,592 (ABS 2001), drawn from over 190 countries. 20% (186,963) of this population speaks a language other than English at home in comparison with 25.6% in the Melbourne Metropolitan Region and almost 20% in Victoria (see *Table 1* over page). Over 150 languages are spoken in the Eastern Region with the top seven languages spoken, apart from English, being Greek, Cantonese, Italian, Mandarin, German, Vietnamese and Arabic (MIC 2002a). The largest population groups in the Eastern Region born outside Australia or England are China (15742), Italy (15516), Greece (14444), Malaysia (12661), Hong Kong (9217) and India (8739) (MIC 2002 Stats).

The project was concerned with three local government areas within the Eastern Region: Knox, Manningham and Whitehorse. The proportions of the population in these areas that speak a language other than English at home are: 35% in Manningham, 22% in Whitehorse and 16% in Knox (see *Table 1* overpage). Figures 1 and 2, below, indicate the location of these local government areas in Melbourne and Victoria. See *Table 2* on *pg. 13* for an overview of their characteristics.

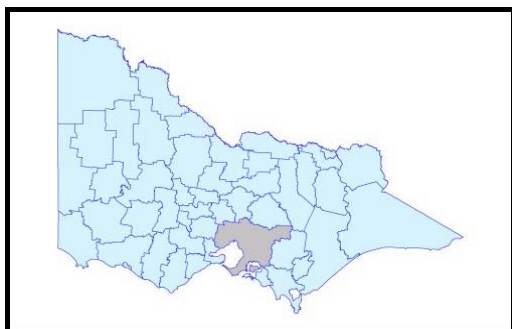


FIGURE 1 (left): Map of Victoria. Dark grey shaded area indicates Melbourne Metropolitan Region (DOI 2003).

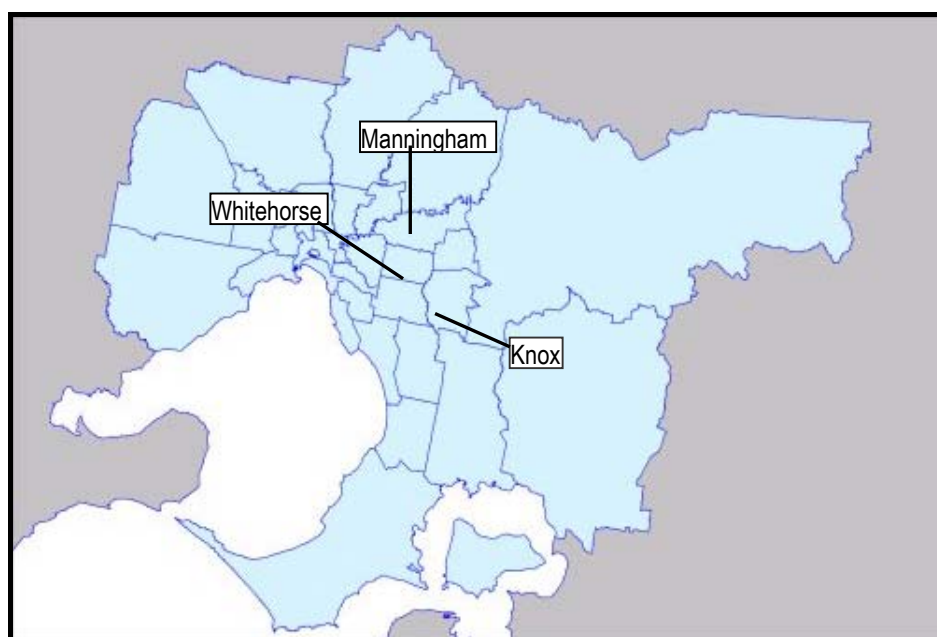


FIGURE 2 (above): Local government boundaries in the Melbourne Metropolitan Region indicating Manningham, Whitehorse and Knox (DOI 2003).

TABLE 1 (below): Comparison of overseas born populations, overseas born populations from non-English speaking countries, and proportion of population that speak a language other than English at home, for Eastern Region, Melbourne Metro Region and Victoria (Figures based on analysis of ABS 2001 Census of Population and Housing tables conducted by Ashby, 2003)

	Total Population	%	Overseas Born*	%*	Overseas born in non-English speaking country*	%*	Speak language other than English at home	%
Eastern Region LGA's:								
Manningham	108887	100.0	36389	33.4	29316	26.9	37927	34.8
Monash	156480	100.0	56511	36.1	46215	29.5	52944	33.8
Whitehorse	141830	100.0	38362	27.0	28382	20.0	31700	22.4
Boroondara	151309	100.0	36768	24.3	25608	16.9	27412	18.1
Knox	143276	100.0	35320	24.7	22198	15.5	23293	16.3
Maroondah	97737	100.0	18489	18.9	9044	9.3	8393	8.6
Yarra Ranges	139200	100.0	23574	16.9	9690	7.0	7795	5.6
TOTAL EASTERN REGION	938719	100.0	245413	26.1	170453	18.2	189464	20.2
MELBOURNE METRO REGION	3367169	100.0	960145	28.5	715853	21.3	863448	25.6
VICTORIA	4653175	100.0	1087127	23.4	779357	16.7	922822	19.8

*NOTE: It is likely that these figures would be higher because 4 to 5% of the data has birthplace as "not stated". For example, this amounts to 5968 or 4.2% of the population in Knox.

TABLE 2 (below): Characteristics of Manningham, Whitehorse and Knox.

MANNINGHAM	WHITEHORSE	KNOX
<ul style="list-style-type: none"> • 12 km east of the CBD; • Covers 114 square kms including the suburbs of Bulleen, Doncaster, Doncaster East, Donvale, Lower Templestowe, Park Orchards, Templestowe, Warrandyte, Wonga Park, parts of Mitcham and North Ringwood; • Approximate population of 109,000; • Mostly residential with settlement in the 1850's and major growth from the 1940's to the 1980's; • 65% of population aged 18 to 64 years and 12.5% over 64 years; • 33% of population born overseas with 27% born in non-English speaking countries; top 5 overseas birthplaces apart from England are Italy, Greece, China, Hong Kong and Malaysia; • 35% of population aged over 5 years speak a language other than English at home; top 5 languages other than English are, Greek, Cantonese, Italian, Mandarin and Arabic; • 4.6% of the population are unemployed; • 7.3% of household incomes are less than \$300 per week and 30% greater than \$1500 per week; 	<ul style="list-style-type: none"> • 15 km east of the CBD; • Covers 64.34 square kms and includes the suburbs of Blackburn, Blackburn North, Blackburn South, Box Hill, Box Hill North, Box Hill South, Burwood, Burwood East, Forest Hill, Mitcham, Mont Albert, Mont Albert North, Nunawading, Surrey Hills, Vermont and Vermont South; • Approximate population of 142,000; • Settled in Box Hill in 1850's, now predominantly residential with significant growth in the 1940's; • 63% of population aged 18 to 64 years and 14% over 64 years; • 27% of population born overseas, 20% in non-English speaking countries; top 5 overseas birthplaces apart from England are China, Greece, Italy, Malaysia and Vietnam; • 22% of population aged over 5 years speak a language other than English at home; top 5 languages other than English are Cantonese, Greek, Mandarin, Italian, Vietnamese; • 5% of the population are unemployed; • 11% of household incomes are less than \$300 per week and 23.7% greater than \$1500 per week; 	<ul style="list-style-type: none"> • 20 – 25 km south east of the Melbourne CBD; • Covers 114 square kms and includes the suburbs of Bayswater, Boronia, Ferntree Gully, Knoxfield, Lysterfield (part), Rowville, Scoresby, The Basin, Upper Ferntree Gully, Wantirna and Wantirna South; • Approximate population of 143,500; • Settled since the 1830's with major development from the 1960's to the 1970's; • 64% of population aged 18 to 64 years and 9 % over 64 years; • 25% of population born overseas, 15.5% in non-English speaking countries; top 5 overseas birthplaces apart from England are Malaysia, New Zealand, Sri Lanka, Germany and India; • 16% of population aged over 5 years speak a language other than English at home; top 5 languages other than English are Cantonese, Italian, Greek, German and Mandarin; • 5% of the population are unemployed; • 7.6% of household incomes are less than \$300 per week and 22% greater than \$1500 per week;

Government Policy: Service provision to CALD communities

The influx of migrants to Australia since 1945 has led to ongoing debate about the types and level of services governments should provide to migrants and CALD communities. There has been a continued emphasis on minimal government intervention and self-help, with private and community organisations always maintaining a role in service provision (Wong 2003).

From 1901 to the 1960's the White Australia Policy and assimilation dominated the direction of immigration and welfare assistance. In 1947 only 9.8% of Australia's population was born overseas but the combination of a low birth rate and high demand for labour after World War II led to a concerted effort by Australian governments to attract migrants to settle here (DIMIA 2003c). Non-European migrants were excluded and non-Anglo migrants were expected to give up their own culture and language and adopt that of Australia (DIMIA 2003a). Welfare services were available to British migrants but not to others (DIMIA 2003c).

From the mid-1960's it was clear that the policy direction of immigration needed to change as migrants were not taking up citizenship and many were leaving Australia to return home, often because of a lack of support (DIMIA 2003c). A 'tolerance of difference' developed as it was realised that migrants were useful, working in manual jobs that others did not want, and contributing to the economy (Jupp 2000). The influence of the White Australia Policy diminished as select non-European migration commenced and discrepancies between the treatment of Anglo and non-Anglo migrants were removed (DIMIA 2003c). Expenditure on specific services for migrants began to rise. The Whitlam Government finally abolished the White Australia Policy and the term 'multiculturalism' came into use. CALD communities were encouraged to maintain their culture, ethnicity and language. The Racial Discrimination Act was passed in 1975 to legislate for equal treatment for all, regardless of their background.

The Fraser Government review into services and programs for migrants in 1978 resulted in the adoption of 'multiculturalism' as official government policy and the development of access and equity policies for the provision of services to migrants. The Galbally Review found that specific settlement services would only provide for some of the migrants' needs while most assistance would need to come from mainstream agencies at federal, state and local levels. The Galbally Review also recognised the role of ethno-specific services in supporting migrants (Birrell & Jupp 2000). The review highlighted the lack of planning and coordination in the development of services for migrants and recommended that DIMIA be responsible for monitoring whether Commonwealth funded services were effective (DIMIA 2003c). Specific services for migrants increased significantly over the next eight years, including settlement assistance, the development of Migrant Resource Centres and Migrant Service Agencies, increased access to English programs, the establishment of advisory bodies and ethnic councils, and the expansion of bureaucratic structures (DIMIA 2003c). Critics of the Galbally Review and its outcomes were concerned about the increasing dollars being spent on 'special' services for migrants when migrants were meant to contribute to rather than cost the economy (Birrell & Jupp 2000).

While the Federal Labor Government of 1983-1996 was committed to multiculturalism and immigration, these years saw significant changes in the support provided to migrants. A specific access and equity strategy for the provision of services to migrants was introduced in 1985 but an evaluation of this strategy in 1992 found that while the principles espoused were more visible they did not "permeate the core cultures and practices of government departments" (DIMIA 2003c:109). The government-commissioned Fitzgerald Report of 1988 highlighted a number of concerns that led to the shaping of current policy regarding support for migrants. These included increasing unemployment, globalisation, a slowing economy, increasing government expenditure and greater

hostility to the idea of immigration (Jupp 2000; Wong 2003,). By the early 1990's the perceived 'costs' of immigration and environment of economic rationalism led to cuts in specific settlement services available and a market-approach to service provision such as 'cost recovery' mechanisms and 'contracting out' of services (Birrell & Jupp 2000; Wong 2003). Migration became more difficult and more expensive, with limited specific support putting a greater load on mainstream services.

Since 1996 the Coalition Government has continued and expanded the market-led philosophy towards services for migrants by increasing privatisation, competitive tendering and cost-recovery (Wong 2003). In 1996 the Coalition Government updated the 1985 Access and Equity Strategy by introducing *A Charter of Public Service in a Culturally Diverse Society*, reiterating the government's commitment to equitable access to services for all Australians (DIMIA 1998). The *Charter* is "aimed at ensuring government services meet the particular needs of users and achieve intended outcomes for them" by "making services culturally appropriate, accessible, consumer-oriented and effective" (DIMIA 1998:1). The *Charter* is based on seven principles: "access, equity, communication, responsiveness, effectiveness, efficiency and accountability" (DIMIA 1998:2). It aims to place access and equity issues at the forefront of government policy on service provision, rather than as an 'add-on' (DIMIA 2003c). Jupp (2000) suggests that the *Charter* is actually more limited than the 1985 strategy as it devolves responsibility for access and equity concerns. Wong (2003) comments that such policies are "access and equity rhetoric" with inequality and gaps recognised but not acted upon.

Current Commonwealth Government policy indicates that the needs of migrants should be met by a mix of specific settlement services and mainstream services. The increasing diversity of our population suggests that the Government will not be able to fund ethno-specific services for all cultural groups. In its most recent policy statement *Multicultural Australia: United in Diversity*, the Coalition Government supports the 1998 *Charter* as a national approach to service delivery (Commonwealth of Australia 2003). Unfortunately, the 2003 *Review of Settlement Services* conducted by DIMIA highlights the cynicism of stakeholders about the government's commitment to the principles of the *Charter* (DIMIA 2003c). While the Commonwealth Government does require its departments and agencies to be accountable for their responsibilities outlined in the *Charter* via annual Access and Equity reports, it is questionable whether self-assessed responses are satisfactory (DIMIA 2003c). The recommendations of the DIMIA 2003 *Review of Settlement Services* with respect to service provision for migrants include focusing specific settlement services on humanitarian and refugee entrants who have been here less than five years, and on family entrants with low English proficiency. All other members of CALD communities, including newly arrived skilled migrants, are expected to access services via mainstream agencies (DIMIA 2003c). Secondly, it makes a number of recommendations to improve the provision, planning and coordination of services for migrants such as determining how much mainstream agencies are budgeting for the provision of services to meet the needs of clients from diverse backgrounds; auditing the implementation of the *Charter's* principles; improving data collection and reporting from agencies; and increasing research on the settlement experiences of new arrivals (DIMIA 2003c).

STATE GOVERNMENT CONTEXT

Many of the mainstream services considered by this project are funded by the Victorian Government through the Department of Human Services (DHS). The *Charter of Public Service in a culturally Diverse Society* (DIMIA 1998) has been endorsed by State and Territory governments as well as the Commonwealth and therefore assists to guide service provision at the State level (DHS 2003b). In addition, in 2001 the Victorian Government released its vision for the next decade through *Growing Victoria Together* (DPC 2001). In this document, the Victorian Government recognises the diversity of Victoria's population and the advantage that diversity can bring. Three of the eleven issues highlighted are particularly relevant in providing a context for service provision to CALD communities:

- *High quality, accessible health and community services.*
- *Building cohesive communities and reducing inequalities.*
- *Promoting rights and respecting diversity* (DPC 2001:6).

To support this, the Victorian Government's *Valuing Cultural Diversity* strategy promotes four key principles: valuing diversity; reducing inequality; encouraging participation; and promoting the social, cultural and economic benefits of cultural diversity for all Victorians (VOMA 2002). Importantly, this strategy represents a 'whole-of-government' approach to diversity, with one of the aims being to bring about systemic change in the way government departments approach diversity issues. All Victorian government departments are held accountable for their service provision to CALD communities through annual reporting of their cultural diversity performance and future plans (DHS 2003b).

In this context, DHS is developing *A guide to the planning and delivery of culturally appropriate human services* as an access and equity framework for the provision of services to CALD communities (DHS 2003b). The emphasis of the DHS *framework* is on the second *Growing Victoria Together* principle of reducing inequality. It outlines the way the seven principles of the DIMIA *Charter* (access, equity, communication, responsiveness, effectiveness, efficiency and accountability) apply within DHS and DHS funded services. It is envisaged that the draft will be finalised and distributed in 2004. The DHS framework highlights the importance now being placed on the provision of culturally appropriate and sensitive services to CALD communities. The performance of individual agencies, DHS and the Victorian Government should be evaluated regularly to assess whether they are meeting the needs of 17% (and more, if you count the second generation) of the Victorian population.

LOCAL GOVERNMENT CONTEXT

Most of the services considered in this project are funded through either Commonwealth or State government sources and function within policy frameworks provided by these two tiers of government. Nevertheless, the collection of data and reported findings was based on local government boundaries to provide a context for the comparison of population statistics, and to limit the scope of the project.

Current Literature

To gain an understanding about service use and access by CALD communities, a review of Australian research from the last ten years was conducted. A variety of research in this field was found with 13 reports considered here. Nearly all of the research had a specific focus such as a human services program area (for example, drug and alcohol services), a particular cultural group (for example, the Chinese community), or a geographical area (for example, Sydney's inner west). These were often combined in a number of ways – such as the 1994 research undertaken by Hughes and Gatbonton which considered youth services in Brisbane. The aims of the research considered were mostly related to community needs or access and equity concerns. A variety of methodologies were used with an expected predominance of qualitative methods involving interviews, focus groups and community consultation, particularly in the area of discovering barriers to services and strategies for overcoming them. The methodologies focused on CALD communities or service providers or both. Six of the 13 reports were related to health services and 3 to mental health services.

SERVICE USE BY CALD COMMUNITIES

About half of the reports considered service use by CALD communities with all of these indicating that service use by non-English speaking people was lower than for English speaking people. Some examples of findings regarding service use were:

- “young people of non-English speaking backgrounds were rarely using youth, generalist, or ethno-specific services” (Hughes & Gatbonton 1994:1);
- there were lower rates of utilisation of outpatient and community based mental health services for non-English speaking clients, as well as shorter consultations, greater potential for under-diagnosis, and more limited treatment options (Klimidis et al. 1999);
- it was estimated that two thirds of the humanitarian and refugee population in Victoria were not using available services (Renzaho 2002);
- “generally, carers undertilised available services” (Plunkett & Quine 1996:29).

In discussions about service use a number of other issues were also raised. One concern was regarding the collection of data regarding measures of ethnicity, including the difficulty of using country of birth as a guide for ethnicity (Beyer & Reid 2000; Velanovski & Torrico 1999). Hughes and Gatbonton (1994) suggested that reliable ethnicity data was required for appropriate service planning and delivery. Another concern related to whether assumptions could be made about the level of need for services. For example, the level of need for mental health services for humanitarian and refugee entrants is more likely to be higher than for the general community because of their past experiences (Petrovic 1999; Velanovski & Torrico 1999). Plunkett and Quine (1996) found that low service use by carers from CALD communities was assumed to be a reflection of better extended family support and therefore lower need, which was not the case. Finally, concerns were raised that the quality of the contact between non-English speaking people and services was also an important consideration in assessing service use (Klimidis et al. 1999; Velanovski & Torrico 1999).

ACCESS TO SERVICES

Nearly all of the 13 studies considered identified factors which affect access to mainstream services by CALD communities and strategies that could be used to make services more accessible. Similar

conclusions were drawn by consultation with both service providers and CALD communities. Some additional factors were also identified by CALD communities, such as service confidentiality (Dolman et al. 1996; Luntz 1998; Plunkett & Quine 1996), waiting times and costs of services (Waddell 1998), admitting there is a problem (Beyer & Reid 2000), the stigma of asking for help (Luntz 1998), feeling they may be excluded from the service and uncertainty about whether it will be effective (Beyer & Reid 2000), and understanding the nature of the problems, for example, the causes of drug and alcohol problems (Luntz 1998). A summary of the main factors and strategies identified by the research is listed below.

FACTORS THAT AFFECT ACCESS TO MAINSTREAM SERVICES	STRATEGIES TO ADDRESS FACTORS THAT AFFECT ACCESS
<p>Language and communication:</p> <ul style="list-style-type: none"> • Low English proficiency affects access by limiting the client’s ability to communicate their needs and understand the service system (Dolman et al. 1996; Hughes & Gatbonton 1994; Petrovic 1999; Plunkett & Quine 1996); • Access to interpreters – whether they are available, complexity of the procedures to access them and whether problems are encountered in their use (Dolman et al. 1996; MacIntyre & Dennerstein 1995; Petrovic 1999; Waddell 1998); • Access to translated material – whether it is available and accessible (Dolman et al. 1996, Hughes & Gatbonton 1994, Petrovic 1999; Waddell 1998); • Whether bicultural and/or bilingual staff are employed by the service provider (Dolman et al. 1996, Klimidis et al. 1999; Petrovic 1999). 	<ul style="list-style-type: none"> • Access to interpreters: <ul style="list-style-type: none"> - review policies and procedures for the use of interpreters (MacIntyre & Dennerstein 1995); - ensure that interpreters are available and staff are trained in assessing whether they are required and how to access them (Velanovski & Torrico 1999); • Translated material - need “translated, consistent, coordinated information packages” for new arrivals (Petrovic 1999); • Employ bilingual and bicultural staff (Hughes & Gatbonton 1994, MacIntyre & Dennerstein 1995, Petrovic 1999; Plunkett & Quine 1996; Renzaho 2002, Velanovski & Torrico 1999;) <ul style="list-style-type: none"> - encourage staff to become bilingual (MacIntyre & Dennerstein 1995).
<p>Cultural knowledge and sensitivity:</p> <ul style="list-style-type: none"> • The level of understanding the service provider has about the culture and language of the community concerned (Klimidis et al. 1999; Plunkett & Quine 1996); • Whether services are culturally appropriate and sensitive (Dolman et al. 1996; Luntz 1998; MacIntyre & Dennerstein 1995; Plunkett & Quine 1996; Renzaho 2002); • Acknowledgement of the client’s culture (Dolman et al 1996); • Cultural conflict and intolerance either directly or indirectly within the structure of the service (Hughes & Gatbonton 1994). 	<ul style="list-style-type: none"> • Level of understanding of culture/cultural sensitivity: <ul style="list-style-type: none"> - Provide ongoing cross-cultural training (Hughes & Gatbonton 1994, Luntz 1998, MacIntyre & Dennerstein 1995, Velanovski & Torrico 1999;); - Workers need to have basic knowledge of cultures of people they are working with (Plunkett & Quine 1996). • Cultural conflict and intolerance: <ul style="list-style-type: none"> - Examine the underlying culture of the organisation (Renzaho 2002).

FACTORS THAT AFFECT ACCESS TO MAINSTREAM SERVICES	STRATEGIES TO ADDRESS FACTORS THAT AFFECT ACCESS
<p>Cultural knowledge and sensitivity(cont):</p> <ul style="list-style-type: none"> • Unresponsiveness of service to the needs of NESB people (Petrovic 1999); 	<ul style="list-style-type: none"> • Responsiveness to needs: <ul style="list-style-type: none"> - Analyse and review theory and practice issues to ensure they are culturally sensitive (Luntz 1998, Beyer & Reid 2000, Renzaho 2002, Velanovski & Torrico 1999); - Develop creative, flexible and multiple approaches to practice (Beyer & Reid 2000);
<p>Policy and planning</p> <ul style="list-style-type: none"> • Whether the service has access and equity policies and whether they are considered in service planning and programming (Hughes & Gatbonton 1994); • Whether the data collected identifies ethnicity appropriately (Hughes & Gatbonton 1994, Klimidis et al. 1999); • Willingness of service to reach out to communities, find out about them and address their needs (Hughes & Gatbonton 1994); 	<ul style="list-style-type: none"> • Review access and equity policies for their appropriateness (Hughes & Gatbonton 1994, MacIntyre & Dennerstein 1995, Renzaho 2002, Velanovsky & Torrico 1999); • Improve the collection of reliable ethnicity data (Beyer & Reid 2000, Luntz 1998) • Understanding community & needs: <ul style="list-style-type: none"> - Understand the demographics of the target area including countries of birth, languages spoken and cultural values of communities (MacIntyre & Dennerstein 1995); - Improve community development, outreach, networking and collaboration with CALD communities, mainstream agencies, and ethno-specific agencies to inform practice, share information and open communication (Beyer & Reid 2000, Dolman et al. 1996; Hughes & Gatbonton 1994, Luntz 1998, Velanovski & Torrico 1999). - Undertake more academic research with improved methodologies (Beyer & Reid 2000, Dolman et al. 1996);

It is evident that while only 13 reports were considered in the literature review here, there is a breadth of existing information about factors that affect service access by CALD communities and strategies to address those. On the other hand, less research has been conducted about service use. This project was undertaken to ascertain more concrete local data about service use with a view to developing some realistic recommendations that may improve the accessibility of services to CALD communities in Manningham, Whitehorse and Knox.

3. METHODOLOGY

The project was organised into three stages which corresponded closely with the aims of the project:

PROJECT AIMS	STAGE OF PROJECT
Assess the level of usage by CALD communities of mainstream services in Manningham, Whitehorse and Knox.	Stage 1 – Service Use - quantitative
Identify what barriers, if any, exist that inhibit CALD communities from utilising mainstream services.	Stage 2 – Consultation - qualitative
Investigate ways of addressing those barriers and improving access to services.	Stage 2 – Consultation - qualitative
Develop an action plan to implement and evaluate strategies for improving access to mainstream services.	Stage 3 – Development of Action Plan

The project was undertaken within an action research philosophy which can incorporate a wide range of methodologies, involving “those who are fundamental to the issue being researched” (Alston & Bowles 2003:160). The two key requirements of action research are change/improvement and participation/involvement (Alston & bowels 2003; Carr & Kemmis 1986 cited in Hart & Bond 1995). Action research has a characteristic cycle of reflection and action which may be proactive or responsive (Schmuck 1998 cited in Alston & Bowles 2003). This project followed the cycle in a responsive manner where data was collected to “diagnose” a situation, analysed to understand that situation, and distributed with recommended changes. The cycle continues with the development and implementation of new practices, reflection on the changes and further data collection etc. (Schmuck 1998 cited in Alston & Bowles 2003). These final steps in the cycle were not undertaken in this project as it was time limited, but may be taken up by the MIC and agencies.

In keeping with the principle of triangulation in research, a number of methods were used to collect data for the project to “diagnose” the problem and develop a plan for change. Initially quantitative data was collected from mainstream agencies to determine whether CALD communities were accessing services. After the quantitative data was analysed, qualitative data was sought from CALD communities, mainstream agencies and ethno-specific agencies and further ratified by current literature sources and consultation with the Reference group. The quantitative data collection was identified as Stage one and the qualitative data collection as Stage two of the project. *Appendix A (see pg. 50)* lists all agencies involved in Stage one and two of the project.

Stage One – Service Use

Stage one of the project involved the collection of quantitative data from agencies to assess the level of usage by CALD communities of mainstream services in Manningham, Whitehorse and Knox.

Approximately 60 agencies within the scope of the project were contacted to provide data about the **country of birth** and **main language spoken at home** for all clients seen in the **2002/03** financial year. Where possible the data were sought from funding bodies like the Department of Human Services Victoria (DHS). In order to compare the three LGA’s - Manningham, Whitehorse and Knox – the data were requested in a format that grouped clients according to the LGA in which they lived. This request excluded many of the 60 individual agencies contacted from the analysis but data for some of these agencies were included in data provided by DHS for various program areas.

It should be noted that while DHS funds and provided data to the project about various program areas (such as problem gambling, family support, financial counselling and mental health services), the services are actually provided by individual agencies across the Eastern Region of Melbourne. For example, the majority of financial counselling services in Whitehorse are provided by two agencies - Reach out for Kids and Anglicare. The project received data from DHS about financial counselling services provided in Whitehorse, amalgamating the data from both of these agencies. This is a similar scenario for other data provided about DHS program areas.

The use of secondary data sources for the project had both positive and negative aspects. On the positive side, agencies that collected this type of data had it readily available or accessible without the need for much additional work to extract the data. On the negative side, the scope of the project was limited as it was dependent on agencies collecting particular types of data in particular formats for comparison purposes (Soriano 1995). As a result, there is the possibility of some overlap with the data collected, particularly family support data. Many agencies did not collect the type of data required for Stage one, or were unable to access that data easily from manual formats or inflexible computerized systems. These data collection issues are one outcome of the project that will be discussed later in the report.

DATA GROUPS

The term **data group** was used to denote data given for either one program area or one individual agency in one local government area (LGA). For example, DHS provided data about the country of birth of clients who used family support services for each of the LGA's considered in this project - Manningham, Whitehorse and Knox - thus forming 3 separate **data groups**. It should be noted that some data groups from the individual agencies had such small total client numbers that they were excluded from the analysis.

There were **38 data groups** (21 DHS and 17 individual agencies) analysed for **country of birth** information and **32 data groups** (21 DHS and 11 individual agencies) analysed for **main language spoken at home** information.

DATA ANALYSIS

The two types of information (country of birth and main language spoken at home) for each data group were entered into Excel. Analysis of the data was focused on percentages of clients born in **non-English speaking countries** (born NESC) in the case of country of birth data and percentages of clients who were **non-English speaking** (NES) for language data. Percentages of these client groups were calculated and compared with the respective local government population percentages using ABS Census 2001 data (ABS 2001). The percentage in the population was then subtracted from the percentage in the data group to calculate a "**difference**". *If the difference was negative then less clients from that group were using the service than expected, based on the percentage of that group in the population. Alternatively, if the "difference" was positive, more clients from that group were using the service than expected.* These calculations assume a similar level of need for the services between various groups in the community.

SATISFACTORY RESULTS

In order to determine whether CALD communities were utilising mainstream services or not it was necessary to define what "**difference**" between the percentage of CALD members using the service and the percentage of CALD members in the population would be acceptable. This question was discussed at the first Reference Group meeting. A representative from the Eastern Region Office of the Department of Human Services advised that their analysis considered a difference within the

range of minus 5% to positive 5% to be acceptable. The Reference Group was happy to accept this definition for this project.

The Reference Group agreed that if the **difference** between the percentage of CALD clients and percentage of CALD people in the population was between **minus 5% and positive 5%** then the result was **SATISFACTORY**. Any differences outside this range (above or below) were deemed **unsatisfactory**.

Stage Two – Consultation

Stage two of the project involved the collection of qualitative data related to two key questions:

- ❖ *What are the factors that affect access to services by CALD communities?*
- ❖ *What strategies could be used to address these factors?*

Mainstream and ethno-specific agencies were consulted in Stage two as well as CALD communities.

REFERENCE GROUP

A Reference Group was established at the beginning of Stage two to review the progress of the project and provide advice about the direction of the consultation phase and implementation of the project's outcomes. The Reference Group was made up of 21 representatives of mainstream agencies who had provided data to the project, including agencies whose data was obtained from DHS and 7 representatives from ethno-specific agencies. Although it would have been ideal to include representatives of CALD communities on the Reference Group, the MIC advised that in the past the combination of agency representatives with CALD community representatives in such forums had not been successful.

The Reference Group met twice. Firstly, after analysis of Stage one data to discuss what steps should be taken to identify the factors that explain the results for service use by CALD communities. The Reference Group highlighted the need for consultation with mainstream agencies, ethno-specific agencies and CALD communities, with interviews and/or focus groups considered the most appropriate methods. The Reference Group met a second time to consider the results of the consultations and discuss their views on the direction of the recommendations of the project.

INTERVIEWS WITH MAINSTREAM & ETHNO-SPECIFIC AGENCIES

Mainstream and ethno-specific agencies were interviewed using the key informant approach where managers were asked to advise of the most appropriate staff members to be interviewed. In many cases more than one person was interviewed, usually the manager along with the team leader/s of direct service areas. Questions were based on the key questions for Stage Two and were mostly open-ended. The interview guides for mainstream agencies and ethno-specific agencies are attached in *Appendices D and E (see pgs. 54 and 56)*.

The sample of mainstream agencies interviewed was based on the data results from Stage one. It was decided to compare agencies with satisfactory results to agencies with unsatisfactory results to achieve the clearest understanding of the differences between the two. While the Reference Group also recommended considering service types, sizes, referral sources and agencies with inconclusive

results, it was not possible to consider all these variables in detail due to time constraints. 11 mainstream agencies were interviewed for approximately an hour each (5 satisfactory and 6 unsatisfactory according to Stage One results). A sample of three ethno-specific agencies was interviewed based on smaller and larger population groups in the three LGA's and the availability of ethno-specific workers. All interview participants were provided with an information sheet and were required to complete a consent form prior to the interview (*see Appendices B and C, pgs. 51 and 52*).

Interviews were audio taped with additional notes taken for reference. Tapes were transcribed into a word document and summarised for each group of agencies (satisfactory, unsatisfactory and ethno-specific) based on the interview schedule. The summaries of each group were compared to determine any similarities or differences between the groups, any trends or themes, and any points of interest.

CALD COMMUNITIES

At the commencement of the project it was envisaged that a number of focus groups drawn from CALD communities would be held to discuss their experiences of services. These focus groups did not proceed for two reasons: it took longer than expected to collect data for Stage one of the project resulting in less time available to conduct Stage two; and the Migrant Information Centre raised concerns that CALD communities had already been consulted about similar issues in the recent past, and that no significant changes had occurred that would affect the outcomes of such consultations for this project. Therefore, it was determined that data collected from consultations conducted by the MIC between 1999 and 2003 would be satisfactory for this project. The projects were:

- 1999 - Initial needs analysis - consultation with all interested residents (MIC 1999);
- 2002 – Investigation into provision of family support services for Vietnamese families in Whitehorse - consultation with Vietnamese community in Whitehorse (MIC 2002b);
- 2003 – Identification of service needs of new arrivals to promote wellbeing and healthy families (conducted in conjunction with Women's Health East) - consultation with newly arrived communities in Manningham (Bollhorst & O'Hara 2003);
- 2003 – Development of a framework for youth services and clubs measuring youth friendliness and cultural appropriateness - consultation with CALD youth in Manningham (MIC 2003c);
- 2003 – Needs analysis of the Muslim community in the Rowville and Lysterfield Area - consultation with the Muslim community in Knox (MIC 2003d).

Stage Three – Development of an Action Plan

Stage three of the project aims to develop an action plan to implement and evaluate strategies for improving access to mainstream services. This stage of the project has not been conducted at the time of writing this report although the recommendations of this report would form the basis of the action plan. It is hoped that publication and distribution of this report and its recommendations will provide a source of information for agencies to consider what strategies they are able to implement and ways of evaluating those. If agencies are concerned about providing an accessible service to CALD communities there is a considerable amount of resources to assist them in this endeavor. The MIC will also use the results of this project to assist current and future projects regarding access to services by CALD communities.

4. USE OF MAINSTREAM SERVICES

Overwhelmingly the analysis of the data provided by individual agencies and DHS program areas indicated that CALD communities were generally not accessing the mainstream services considered in this project. The results regarding use of mainstream services by CALD communities are summarised in *Table 3* below and represented graphically in *Figures 3* and *4* on *pgs. 28* and *29*.

TABLE 3:(below) Summary of data analysed and data results with local government breakdowns.

COUNTRY OF BIRTH DATA							
LOCAL GOVT AREA:	Number of data groups* analysed			No. of satisfactory data groups#			
	DHS program areas	Individual agencies	TOTAL	DHS program areas	Individual agencies	TOTAL	% of data groups
Manningham	7	7	14	1	-	1	7%
Whitehorse	7	4	11	4	2	6	55%
Knox	7	6	13	2	1	3	23%
TOTAL	21	17	38	7 (33%)	3 (18%)	10	26%
MAIN LANGUAGE SPOKEN AT HOME DATA							
LOCAL GOVT AREA:	Number of data groups* analysed			No. of satisfactory data groups#			
	DHS	Ind agencies	TOTAL	DHS	Ind agencies	TOTAL	% of data groups
Manningham	7	5	12	2	1	3	25%
Whitehorse	7	3	10	2	-	2	20%
Knox	7	3	10	1	-	1	10%
TOTAL	21	11	32	5 (23%)	1 (9%)	6	19%

*The term **data group** was used to denote data given for either one program area or one individual agency in one local government area (LGA). For example, DHS provided data about the country of birth of clients who used family support services for each of the LGA's considered in this project - Manningham, Whitehorse and Knox, thus forming 3 separate **data groups**.

#A data group is deemed to have a **satisfactory** result if the difference between the percentage of CALD clients using that service and the percentage of CALD members in the population of the respective LGA is no more than 5% either way (positive or negative).

Key findings

- Only 26% of data groups had a similar percentage of clients born in non-English speaking countries compared to the percentage of the population in the respective LGA's who were born in non-English speaking countries.
- Only 19% of data groups had a similar percentage of clients who were non-English speaking compared to the percentage of the population in the respective LGA's who were non-English speaking.

In general it would be expected that the percentage of data groups that had satisfactory results would be higher for country of birth information than for language information as the collection of

data about country of birth is more straightforward than for language spoken at home. Information collected about a client’s language is more variable. For example, some agencies collected “main language spoken at home”, others collected “preferred language” or “language other than English”. In some of these cases, if a client has good English proficiency then another language may not be recorded. Thus, it cannot be assumed that these data results indicate an inaccessibility of services for people with low English proficiency, although that may be the case. Further research about specific communities and their English proficiency levels would assist in determining this.

- To further support the overall finding that CALD communities are not utilising mainstream services it was found that the majority of data groups for both country of birth and language information had **less** CALD clients than expected based on population statistics (see *Table 4* below):
 - For country of birth information, 23 data groups or 61% had unsatisfactory results with a percentage difference of between minus 5% and minus 20%.
 - For language information, 19 data groups or 59% had unsatisfactory results with a percentage difference of between minus 5% and minus 20% while a further 6 data groups, or 19% had a percentage difference of more than 20% - making a total of 78% with negative results.

TABLE 4: (below): Number and percentage of data groups and corresponding percentage differences between CALD service users and CALD members of the population.

% Difference	COUNTRY OF BIRTH		MAIN LANGUAGE	
	No. data groups	% of data groups	No. data groups	% of data groups
Greater than – 20%	0	0%	6	19%
-15% to –20%	4	11%	4	12.5%
-10% to –15%	6	16%	11	34%
-5% to –10%	13	34%	4	12.5%
-5% to +5% (satisfact)	10	26%	6	19%
+5% to +10%	2	5%	0	0%
+10% to +15%	1	3%	1	3%
+15% to +20%	2	5%	0	0%
TOTAL	38	100%	32	100%

Only 13% of data groups for country of birth information and 3% of data groups for language information had unsatisfactory results where the percentage of CALD clients was actually higher than the percentage in the population statistics. See also *Figures 3* and *4* on *pgs. 28* and *29* for a graphical representation of these findings.

Other findings

LOCAL GOVERNMENT AREA RESULTS

There was a huge variation between the country of birth results for each local government area with only 7% (one data group) of Manningham data groups having a satisfactory result, 23% (3 data

groups) of Knox data groups and 55% (6 data groups) of Whitehorse data groups (see *Table 3, pg. 24*). Alternatively, the percentage of satisfactory data groups for Knox and Whitehorse based on language information was more than halved compared to country of birth information with 10% (one data group) of Knox data groups having a satisfactory result and 20% (2 data groups) of Whitehorse data groups.

In comparison, the percentage of satisfactory data groups based on language information increased 3.5 times for Manningham from 7% (one data group) for country of birth information to 25% (3 data groups) for language information (see *Table 3, pg. 24*). This is a particularly interesting result and was not expected as the pattern overall and for Knox and Whitehorse seemed to be the opposite, i.e. more satisfactory data groups for country of birth information than for language information. One explanation discussed by the Reference Group was that there may have been a higher number of service users for Manningham services who were born in Australia but, as second generation Australians, spoke a language other than English at home, which was consequently recorded on client records. It should also be noted that when the results are broken down into LGA's the number of data groups becomes quite small and may not be as significant as they look.

Given the population statistics for Manningham, Whitehorse and Knox, it could also be expected that the results for Manningham would be better than for either Whitehorse or Knox. Manningham has the highest percentage of people born in a non-English speaking country (27%) and the highest percentage of non-English speaking people (34%) based on the 2001 Census data (ABS 2001). Whitehorse has the next highest and Knox has the lowest percentage out of the three LGA's. Therefore, if Manningham has the highest percentages of CALD populations, it could be argued that services in Manningham would be more aware of being accessible to CALD communities. The results for this project were mixed. For country of birth data, Manningham had the lowest percentage of satisfactory data groups compared to Knox and Whitehorse. For language data, Manningham did have the highest percentage of satisfactory data groups, but only 5% higher than Whitehorse, which has a lower percentage of non-English speaking people in its population than Manningham (22% compared to 34%). Thus, whether services are accessible to CALD communities or not, doesn't appear to be necessarily related to the proportion of the population from non-English speaking countries, or the proportion of the population who are non-English speaking.

It should also be noted that while the project was focused on Manningham, Whitehorse and Knox, the program areas and agencies that provided services in those areas were most often targeted at the whole Eastern region of Melbourne, with a few exceptions. Thus, the LGA results may not necessarily reflect the "whole picture" for an agency if there are variations between their results from one LGA to another. For example, one agency may have had a satisfactory result in one LGA but not in another. Whether this is acceptable also needs to be considered.

DHS PROGRAM AREAS AND INDIVIDUAL AGENCIES

DHS data groups had almost double the percentage of satisfactory data groups compared with individual agency's data groups (33% compared with 18% for country of birth information and 23% compared with 9% for language information). This is most likely a reflection of better data collection by these program areas, given the source of the data.

OTHER DATA PROVIDED

A further nine agencies in the Eastern Region who offer services in the LGA's being considered were able to provide some data about the background of their clients. This data was not used in the main analysis because it lacked LGA details or specific country and language details. Nevertheless, what was provided was analysed using the ABS 2001 Census population data (ABS 2001). It was

found that three of these agencies had a satisfactory result for the data provided while six had an unsatisfactory result, further supporting the key findings of Stage One that CALD communities are generally not utilising the majority of services analysed to the level you would expect.

SERVICE TYPE PATTERNS FOR SATISFACTORY DATA GROUPS

Table 5 (below) lists the 16 data groups from DHS program areas or individual agencies that had satisfactory results in Stage one (10 for country of birth and 6 for language information). It is interesting to note that nine of these satisfactory data groups are covered by only two DHS program areas – Problem gambling (4 data groups) and Enhanced maternal and child health services (5 data groups).

Each of these program areas has certain characteristics that may have influenced these outcomes. In the case of maternal and child health services, hospitals are required by law to provide notification of any births to the relevant maternal and child health service provider and that provider is required by law to make at least one contact with the new mother to offer the service. Thus, there is a high take up rate of the generic maternal and child health service. The data provided to this project was for the Enhanced maternal and child health service, a more intensive program provided to families with more complex problems, after the generic service has made an assessment. Thus, there is a link between the generic service and the enhanced service which does not appear to differentiate between clients from different backgrounds.

In the case of problem gambling services, the results of the interviews suggested that this program area seems to be in a unique situation where it has adequate funding to conduct a range of activities including community development and outreach work. It is also required by its service agreement to employ two bilingual workers (part-time). In addition, it is a relatively new area of service that has existed for approximately 12 years and is not necessarily confined by traditional practices. These factors in conjunction may contribute to its accessibility for CALD communities.

TABLE 5:(below) List of DHS program areas or individual agencies that had satisfactory results.

LGA	COUNTRY OF BIRTH	MAIN LANGUAGE
Knox	<ul style="list-style-type: none"> • Clinical Mental Health • Enhanced Maternal & Child Health • Knox Community Health Service 	<ul style="list-style-type: none"> • Problem Gambling
Manningham	<ul style="list-style-type: none"> • Enhanced Maternal & Child Health 	<ul style="list-style-type: none"> • Enhanced Maternal & Child Health • Manningham Youth & Family Service • Problem Gambling
Whitehorse	<ul style="list-style-type: none"> • Clinical Mental Health • Enhanced Maternal & Child Health • Financial Counselling • Melbourne City Mission Acquired Brain Injury Program • Problem Gambling • Whitehorse Community Health Service 	<ul style="list-style-type: none"> • Enhanced Maternal & Child Health • Problem Gambling

FIGURE 3: Differences between percentage of clients and percentage of population born in non-English speaking countries for each data group.

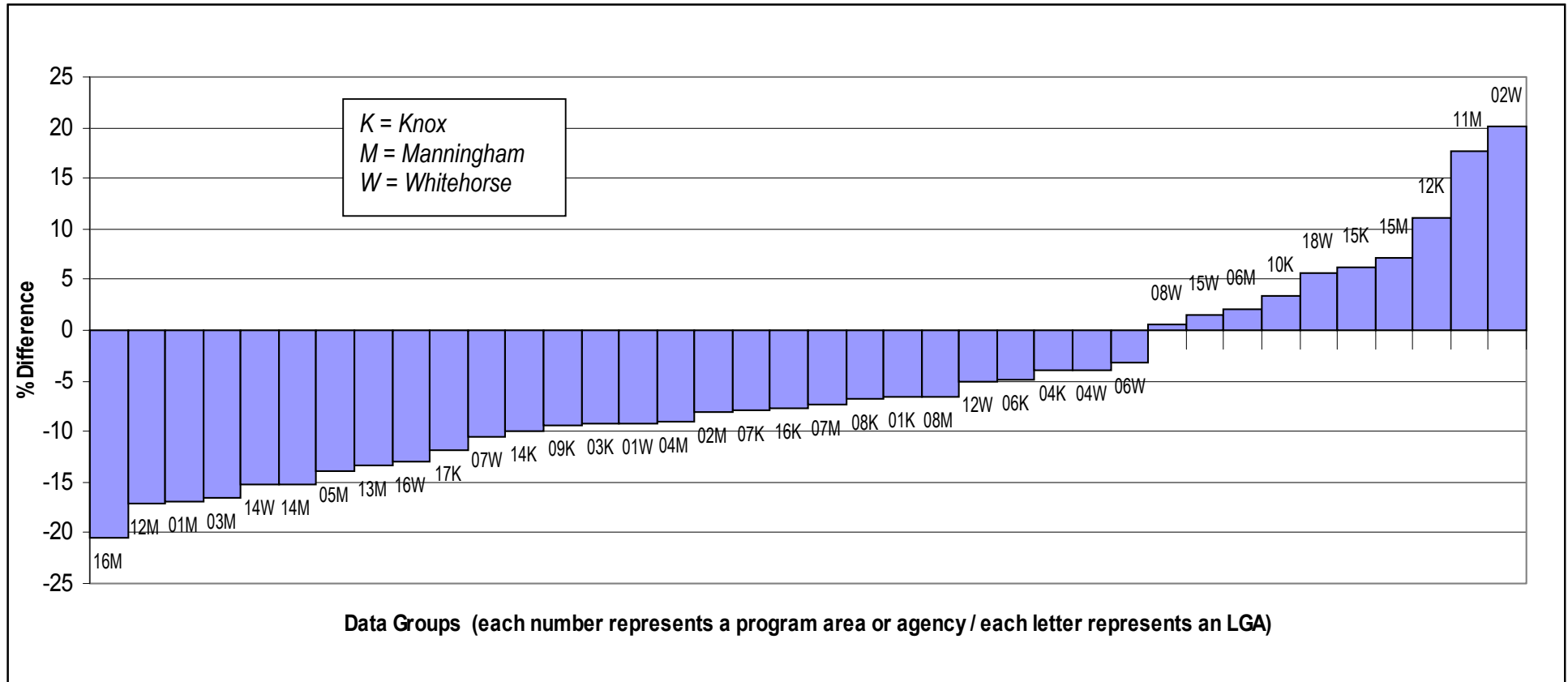
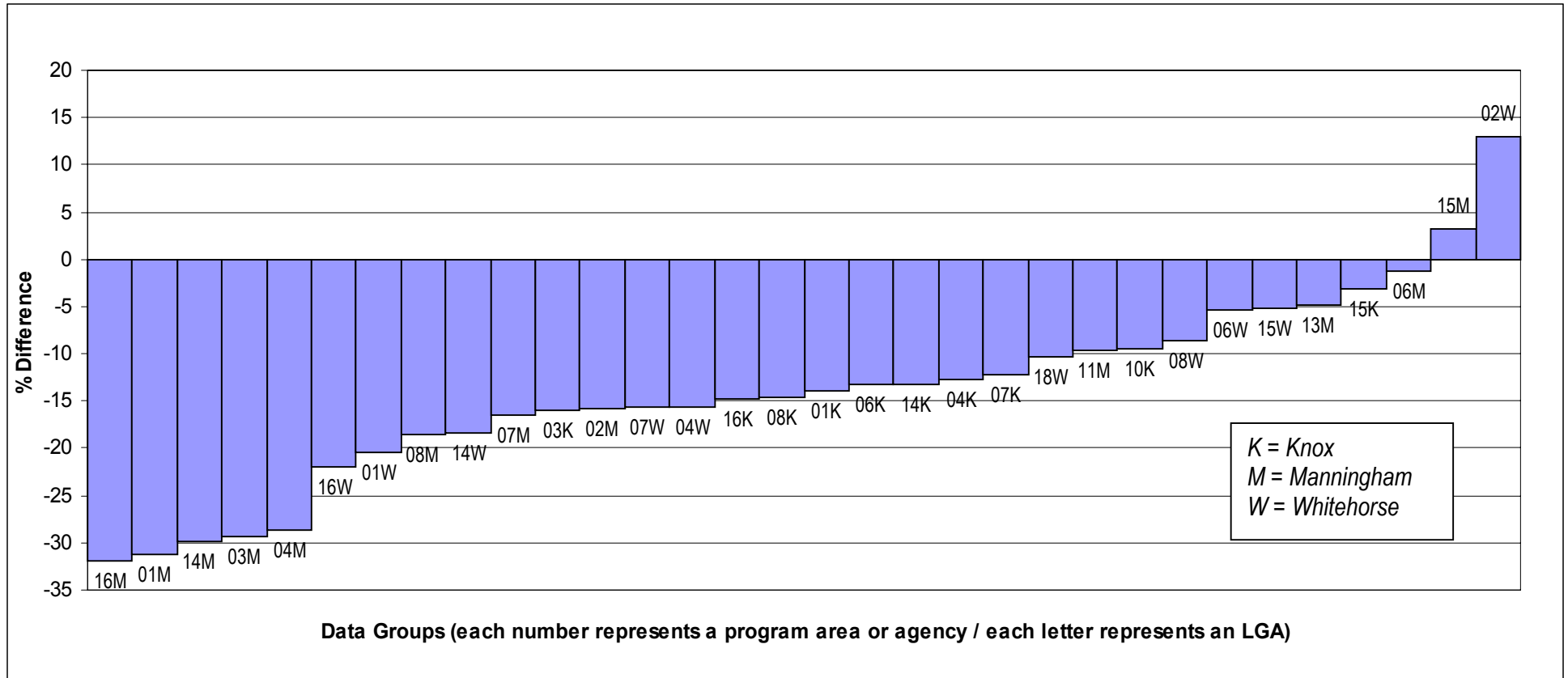


FIGURE 4: Differences between percentage of clients and percentage of population who are non-English speaking for each data group.



5. ACCESS TO SERVICES

The consultation stage of the project resulted in the identification of a number of factors that affect CALD access to mainstream services and corresponding strategies to address those factors. In general, the three avenues of consultation – mainstream agencies, ethno-specific agencies and CALD communities – resulted in similar ideas about CALD access to services. Most of the factors and strategies identified can be classified into the following groups:

- (a) Language and communication;
- (b) Information and knowledge about services;
- (c) Cultural understanding.

Some factors and strategies overlap between these groups. For example, the availability of translated information could be located in group (a) or (b). The following list is a combined summary of the factors and strategies determined by the consultation.

Language and communication

FACTORS

Language barriers and the ability to communicate affect access to services, including:

- Level of English proficiency or confidence in English proficiency;
- Access to and availability of interpreters who provide a confidential service;
- Access to and availability of appropriately skilled bilingual workers;
- Access to and availability of a range of translated material in numerous languages.

STRATEGIES

Provide services and communication about services in client's own language.

- Access and promote use of accredited interpreters;
- Ensure funds are available to provide interpreters;
- Work with clients to overcome confidentiality issues;
- Recruit and promote availability of bilingual workers reflecting key communities;
- Train more bilingual workers;
- Make more translated information available and distribute, particularly to referring agencies;
- Ensure translated information is available in "simple, concise and clear language" (MIC 1999).

Information and knowledge about services

FACTORS

- Variable knowledge about the existence of services.
- Lack of knowledge about what some services do and why they are important, for example, preventative assistance;
- Whether information about services is appropriate for individual communities and is distributed to those communities;
- Level of involvement in networks;
- Lack of multilingual signs displayed at front of service;
- Whether referral sources are referring CALD clients on to service.

STRATEGIES

- Provide written and verbal information about services in different languages;
- Promote the service more;
- Distribute multilingual information through a variety of avenues, particularly the ethnic media, general media, community forums, websites, newsletters and volunteer visits from community members;
- Provide visits to services or tours of services for CALD communities;
- Meet with clients to discuss the service;
- Consider the needs and characteristics of the specific target group, how they receive information and the best way to get the message across, when distributing information;
- Proactively go out to communities to promote the service, with help from bilingual workers and community leaders;
- Form partnerships with ethno-specific agencies to promote the services to CALD communities;
- Find out about and network with established groups and other service providers to improve their understanding of the service;
- Display multilingual signs;
- Look at referral sources and how clients are finding out about the service;
- Make contact with and distribute information to referral sources.

Cultural understanding

FACTORS

Level of knowledge about and respect for cultural differences affects access to services, including:

- Level of cultural sensitivity;
- Understanding of the values and background of clients;
- Understanding the particular problems of different communities, their needs, how they view those problems and the solutions to them such as philosophies of treatment;
- Level of acceptance of help or receptivity to the service is affected by cultural differences;
- Access to and availability of cross-cultural training, including how to use interpreters;
- Whether services are aware of how to make CALD communities feel welcome;
- Whether specific services are provided for specific CALD communities.

STRATEGIES

- Be informed about, understand and respect the cultural background, values and traditions of clients;
- Create partnerships with groups and communities, proactively work with communities and community leaders to find out about that community – how they arrived, settlement process, supports already available, needs;
- Recognise that each CALD community is different;
- Understand and be sensitive to the individual's needs in service planning and provision;
- Provide opportunities for CALD communities to contribute to service planning and programs;
- Work with ethno-specific agencies;
- Access workers in the organisation or region for secondary consultation;
- Look at population demographics and which communities are using or not using the service;
- Be flexible about what is provided and how it is provided – find alternative ways for individual communities to access the service;
- Provide accessible cross cultural training for all levels of employees;
- Encourage workers to share information and discuss cases about provision of services to CALD communities;
- Agencies should be aware of their own cultural bias;
- Provide a welcoming environment that includes multilingual signs and multicultural posters and displays;
- Develop specific services to offer communities that meet their needs.

The consultation also identified a number of common general factors that affect access to services, including availability of appointment times, confidentiality of the service, and access to public transport. These factors are not necessarily particular to CALD communities, although their effects may be magnified. These general factors were also identified by recent research reviewed in *Section 2 (see pg. 17)* of this report.

Consultation with the ethno-specific agencies and CALD communities revealed some differences in the strategies recommended, compared with mainstream agencies. Both ethno-specific agencies and CALD communities highlighted the importance of using the ethnic media, particularly radio, as a way of providing information to specific communities. Mainstream agencies could look at this option as a low cost way of providing information. CALD communities also indicated a number of other ways to distribute information such as arranging tours of services or accessing volunteer visiting programs to new arrivals. They also suggested that CALD communities have opportunities to contribute to the planning of services and programs.

There were also some differences between satisfactory and unsatisfactory mainstream agencies interviewed with regard to the factors and strategies identified. Firstly, unsatisfactory agencies identified more factors and strategies than satisfactory agencies (34 factors compared to 28, and 34 strategies compared to 15), a result that was not necessarily expected. Of the 15 strategies identified by satisfactory agencies, 9 were mentioned by the one agency. Secondly, three factors were identified by several unsatisfactory agencies but only 1 satisfactory agency. These were – lack of bilingual staff, reluctance to accept help, and cultural differences in philosophies of treatment. Five strategies were identified by several unsatisfactory agencies but only by one or none of the satisfactory agencies. These were – employment of bilingual workers, promoting services in communities using bilingual workers or community leaders, more accessible cross-cultural training, inviting community leaders to network, and finding alternative ways for communities to access services. Both satisfactory and unsatisfactory agencies agreed on the need for more translated information, with several agencies in each group suggesting this strategy.

Although there were differences between the interview results for satisfactory and unsatisfactory agencies, they did not appear significant enough to draw any conclusions about why some agencies were being accessed by CALD communities and others were not. This was partly because the results from the interviews were based on the opinions of the agencies about factors and strategies, rather than what the agency actually does. Further research that focuses on actual service provision and the experiences of clients would be required to determine differences between satisfactory and unsatisfactory agencies and the reasons for those differences.

Implementation of strategies

The majority of mainstream agencies interviewed said that more resources were needed to implement the strategies suggested, including funding, time and staff. Three mainstream agencies also suggested the need for organisational change to make a priority of and support these issues, keeping them on the agenda, for example, by incorporating strategies and actions into the business plan. The need for structural and systematic change was also identified by ethno-specific agencies and at the second Reference Group meeting.

In the short to medium term, it is unlikely that agencies will receive more funding for addressing the needs of CALD communities. There are many other resources available to agencies who are concerned about this issue, including the information highlighted by this project. One ethno-specific agency suggested that the way forward for mainstream agencies would be to start with a small, achievable project.

Level of need

The project was conducted based on the assumption that the level of need for CALD communities was similar to that for the general community, but the foundation of this assumption could be questioned. Past research indicates that the level of service use by CALD communities does not necessarily reflect the prevalence of problems in those communities (Petrovic 1999; Plunkett &

Quine 1996; Velanovski and Torrico 1999). Nevertheless, some mainstream agencies believed that low use by CALD communities was a reflection of low need where the families were managing without the need for intervention. Other agencies suggested there were variations in the need for services, depending on the incidence of problems in particular communities. It was apparent that mainstream agencies were not necessarily aware of the level of need for various services by particular communities, making it more complex to assess service utilisation rates at the agency level. One agency contacted early in Stage one of the project highlighted the lack of demographic information about the target group for their service which was children with disabilities. They commented that such data was not collected in the Census so it was difficult to find out the “real” need for their service. Ethno-specific agencies interviewed confirmed that in general, CALD communities, particularly refugee and humanitarian entrants, were vulnerable because of their past experiences, and therefore may need services more than the general population. Two mainstream agencies interviewed also commented that migrants were open to exploitation because of their vulnerability and isolation. Research that has already been conducted with regard to the level of need for services could be analysed to determine whether agencies’ assumptions about need are correct and to assist with service use analysis in the future.

Over loaded services

Some mainstream agencies responded to the idea of improving access for CALD communities to their services by commenting that services were already fully utilised and would not have enough resources to cater for more clients. Ethno-specific agencies interviewed had also had this response from some mainstream agencies when they tried to refer clients to those agencies. In addition, some agencies interviewed were worried that if they encouraged CALD clients to use their service they would create an expectation for services that may not be able to be met, or would have nothing to offer that catered for those clients needs. Ethno-specific agencies interviewed said some mainstream agencies were reluctant to take on CALD clients, citing lack of interpreting funds, complex needs and the higher cost of providing services to those clients.

This type of response from mainstream agencies regarding access to their services by CALD communities requires some comment. Government policy stipulates that services for CALD communities are to be provided, on the whole, by mainstream agencies. None of the services analysed had eligibility criteria which excluded a particular cultural or linguistic background from using that service. Thus CALD communities are part of the target group of mainstream agencies. Nevertheless, in the case of Manningham for example, the data indicates that 100% of some agencies’ resources are being utilised by the 73% of the population that was not born in a non-English speaking country. This highlights a lack of accountability measures that assess whether all eligible groups in the target area are accessing services, either internally or externally.

The findings from this project regarding access to services varied slightly to those of recent research considered in *Section 2 (see pg. 17)* of this report. A number of factors and strategies were identified by this project that related to information and knowledge about services, but not by recent research. The findings from this project indicated that access to services is as basic as knowing about the existence of services, understanding what they do and how they do it. Recent research identified two factors and strategies related to policy and planning issues including the need for access and equity policies (Hughes & Gathbonton 1994), and appropriate data collection (Hughes & Gathbonton 1994; Klimidis et al. 1999), which were not part of the factors or strategies identified in this project. Policy and planning questions were discussed separately in the interviews with mainstream agencies with the results outlined in the next section.

6. POLICY, PLANNING AND EVALUATION

In addition to determining factors and strategies regarding access to services by CALD communities, the interviews with mainstream agencies aimed to ascertain the amount of consideration given to the cultural and linguistic diversity of target groups in the services' policies, and in the planning and evaluation of services. The information gained from the interviews about policy and planning issues was variable, depending on the role and knowledge of the interviewee.

Access and Equity

Eight of the agencies interviewed said they had an access and equity policy that made reference to access and equity for CALD communities, with no apparent differences between satisfactory and unsatisfactory agencies. Some of the interviewees were not sure whether there was such a policy and some were not aware of the details of the policy. Only one interviewee indicated a specific policy for the specific service they were responsible for (maternal & child health services in Whitehorse), suggesting that they did not just rely on the overall organisational policy. It was difficult to ascertain how the access and equity policies were actually implemented as this question was not always specifically asked, depending on the response of interviewees regarding the existence of the policy. When implementation was discussed, responses included:

- Assessing the need for an interpreter;
- Recording cultural background and taking this into consideration in planning of services;
- Sensitivity to people's needs;
- Availability of reference material, protocols and training for staff;
- Working respectfully with clients and an awareness of cultural differences in the provision of services;
- Being aware of the demographics of the target group and putting service plans in place to reflect that.

Agencies were also asked about access and equity considerations in the service agreements with funding bodies. All of the agencies interviewed received some funding from DHS, while some also received funding from local government or the Commonwealth Government. Only two of the agencies had specific requirements in their service agreement – one to employ some bilingual workers (DHS requirement) and the other to consider the demographics of their target area (local government requirement). Both of these agencies were in the satisfactory group. In the case of the employment of bilingual staff, accountability for meeting this requirement was quite clear. Accountability for considering the demographics of the target area was not as straightforward. Four agencies said there were no specific requirements but they were aware of service guidelines, planning tools or had regular contact with DHS regarding access and equity issues. Four agencies were not sure of the details of their service agreements. Discussion with a representative from the Eastern Regional Office of DHS indicated that it would be unusual for service agreements to have specific access and equity considerations, as they were more legal documents. The agreement would normally refer to a number of service standards and guidelines documents that the agency would be expected to be aware of and use in its provision of services.

Data Collection

Collection of data about clients and target groups forms an important part of the process for planning and evaluation of services. The interviews with mainstream agencies and contact with

agencies for Stage one of the project highlighted a number of issues regarding the collection of data about clients and their cultural and linguistic backgrounds.

There were no apparent differences between data collected for satisfactory and unsatisfactory agencies interviewed. All agencies interviewed collected data about the country of birth and language of their clients (skewed by the selection of interviewees based on the collection of country of birth and language data for Stage one of the project). Most agencies also collected data about English proficiency and interpreting requirements. Three agencies explicitly recorded cultural backgrounds, while most of the others did this implicitly through intake and assessment processes. Despite this, the data was not always collated and reported on, either internally or externally to funding bodies, excluding a valuable source of information for agencies to inform decisions about service provision. In the interviews, it was commented that there was a lack of regular, timely reporting back to the agencies about data submitted to funding bodies, and an inability of those data systems to meet the individual agency's data collection needs.

Contact with agencies for Stage one of the project indicated two reasons why agencies could not provide data to the project. Firstly, some agencies did not collect country of birth or language information about clients at all, and many agencies did not collect language information. For example, Youth services were only required by the Office for Youth to note whether a client was from a CALD background or not. Alternatively, some systems for services provided to children, only recorded the country of birth of the child and not the parents, missing key data about the cultural background of the family.

The second reason why agencies could not provide data for the project related to the accessibility of that data. In some cases, the agency was still operating a manual system for this type of data, requiring a laborious process to extract the required information. In other cases, the electronic system was too inflexible to report on the data in the format required. For example, the National Data Collection Agency (NDCA) in Canberra collects and aggregates data regarding the supported accommodation assistance program (SAAP) into large groupings of countries or languages based on Statistical Local Areas (SLA's). Thus, specific country and language data cannot be identified for an LGA. Even individual agencies that provide SAAP services cannot access this detail or export the data that they provide to the NDCA to their own systems for analysis, necessitating the use of a duplicate data system for their own purposes. Agencies also reiterated concerns about lack of timely, regular reporting back to them from funding bodies about the data they had provided. Thus, service use data about youth services or housing services was not provided to the project, highlighting a gap in agencies' data collection and in the results of the project.

Demographics of the target area

Five of the agencies interviewed (3 satisfactory and 2 unsatisfactory) said they did consider the cultural and linguistic characteristics of their target group in service planning and evaluation processes. Out of the remainder, two said they did not know and four said they either did not or believed they were not doing well enough. One interviewee raised concerns about the flexibility of funding to follow up these issues while another said it was more difficult to be aware of the diversity of the target group in the Eastern Region as the numbers were much lower than in some other parts of Melbourne. On the whole, it was difficult for agencies interviewed to answer this question, possibly because of its general nature and the role of the interviewee within the agency.

Allocation of Resources

Very few of the agencies interviewed allocated their own funds to encourage access to their services by CALD communities. All of the agencies interviewed accessed interpreters but in varying ways –

some were linked into DHS funding sources to provide interpreters, others allocated part of their own budget to access interpreters, and one other used part of the brokerage funds for a client to access interpreters. In addition, all agencies interviewed had some multilingual information available for clients, although only two indicated that they had used their own resources to prepare the information. Three of the satisfactory agencies employed bilingual staff. Other resources allocated included funding for workers to attend cross-cultural training or conduct outreach and networking activities (mentioned by three agencies each). One agency had developed a cultural plan and another agency a cultural assessment tool.

Overall, responses from agencies to questions about policies, planning and evaluation of services were limited. As stated earlier, this may have been a reflection of the knowledge of interviewees and their role within the agency they represented, or perhaps it reflects a lack of commitment by agencies to consider policy, planning and evaluation as important as service provision. The existence of access and equity policies and their implementation, understanding the demographics of the target area, relevant data collection about clients and analysis of that data are all important for the provision of accessible services to CALD communities. The project highlighted some gaps in policy, planning and evaluation areas.

- Firstly, more work could be done to ascertain whether the policy frameworks do exist at an agency level to provide access to services, and more importantly, whether the policies are actually implemented at the “front-line” of service delivery. This was also a finding of recent research considered in *Section 2 (see pg. 17)* of this report (Hughes & Gatbonton 1994, Macintyre & Dennerstein 1995, Renzaho 2002, Velanovsky & Torrico 1999). In addition, it would be useful to find out how aware agencies are (management and workers) of funding body guidelines and frameworks for the delivery of services, as for example, exists in service agreements between DHS and agencies, how these are implemented, and how agencies are held accountable.
- Secondly, in order to be accessible, services should also be aware of and understand the demographics of their target area, also a finding of recent research (MacIntyre & Dennerstein 1995). This could be investigated more thoroughly, possibly via a questionnaire, to more specifically ascertain how agencies are taking into account the cultural and linguistic characteristics of their target areas in the planning and evaluation of services.
- Finally, there seems to be a lack of suitable data collected by some agencies about the cultural and linguistic background of their clients, and/or a lack of access to and analysis of that data, confounded by agency concerns about breaching privacy laws. There seems to be little consistency in data collection between agencies and government departments, affecting the ability of agencies to understand their client group, compare their client group with their target group, and plan appropriate services to meet the needs of both. Recent research considered in *Section 2 (see pg. 17)* of this report also indicated the need for reliable ethnicity data measures and collection (Beyer & Reid 2000; Hughes & Gatbonton 1994; Velanovski & Torrico 1999). Further research about the most suitable type of data to collect to inform agencies about the cultural and linguistic backgrounds of their clients could assist in the development of a data collection “standard” across government departments and individual agencies, which could provide a tool for analysis of service use in the future.

CONCLUSION & FUTURE DIRECTIONS

This project has provided concrete data about service use by CALD communities in Manningham, Whitehorse and Knox. These findings give credence to the anecdotal claims that CALD communities are not accessing mainstream services in those areas, and reinforce similar results from previous research. The project has also outlined factors that affect access to services by CALD communities and strategies to address those factors. A limitation of the project was the breadth of services considered. The complexity of the service system makes it difficult to research service use statistics in a clear and unambiguous way. Nevertheless, the results of this project highlight the need for a continuing focus on the lack of access CALD communities have to mainstream services.

Future Directions

The analysis of stage one and two results, together with information gained in the literature review and advice from the Reference Group, point to a number of ways to address these issues in the future:

- That the MIC continue to widely promote the availability of resources to assist with access to services for people from CALD communities for example the cultural resource kit available on the MIC's web page, cultural fact sheets and cultural awareness training.
- That the MIC seek a meeting with the Eastern Regional Manager of the Department of Human Services to discuss the findings of this report and opportunities to address its findings, in particular:
 - agencies' collection of data regarding ethnicity;
 - agencies' provision of services and communication about services in the client's own language through appropriate use of interpreters, employment of bilingual staff and translated materials;
 - agencies' provision of information about services through a range of avenues that take into consideration the whole target group;
 - agencies' acknowledgment of the cultural differences within their target group through the provision of culturally appropriate services;
 - the role of the Department of Human Services in ensuring that access and equity policies are developed, implemented and reviewed in funded agencies.
- That the MIC discuss the findings of this report with the MIC Youth and Family Support Working Group with the view to the working group identifying and implementing actions that will address the findings of the report. In particular:
 - development and delivery of services that recognise the cultural diversity of the catchment;
 - use of interpreters and translated information;
 - promotion of services to CALD communities;
 - data collection.
- That the MIC provides culturally specific training to support the development and implementation of culturally sensitive services.

Factors and Strategies – a consolidated list

The following list summarises the findings of this project regarding factors that affect access to services and strategies to address those factors. It is drawn from a number of sources – the review of current literature in *Section 2 (see pg. 17)*, interviews with mainstream and ethno-specific agencies, and consultation with CALD communities conducted by the MIC. It is hoped that it will provide a useful reference for agencies to draw from in the future.

(A) LANGUAGE AND COMMUNICATION

Factors

Language barriers and the ability to communicate affect access to services, including:

- Level of English proficiency or confidence in English proficiency;
- Access to and availability of interpreters who provide a confidential service, including complexity of procedures to access them;
- Access to and availability of appropriately skilled bilingual workers;
- Access to and availability of a range of translated material in numerous languages.

Strategies

Provide services and communication about services in client's own language.

- Access and promote use of accredited interpreters;
- Ensure funds are available to provide interpreters;
- Work with clients to overcome confidentiality issues;
- Review policies and procedures for use of interpreters;
- Ensure staff are trained in assessment of the need for and access to interpreters;
- Recruit and promote availability of bilingual workers reflecting key communities;
- Train more bilingual workers;
- Encourage staff to become bilingual;
- Make more translated information available and distribute, particularly to referring agencies;
- Ensure translated information is available in "simple, concise and clear language" (MIC 1999);
- Need for consistent and coordinated information packages for new arrivals.

(B) INFORMATION AND KNOWLEDGE ABOUT SERVICES

Factors

- Variable knowledge about the existence of services.
- Lack of knowledge about what some services do and why they are important, for example, preventative assistance;
- Whether information about services is appropriate for individual communities and is distributed to those communities;
- Level of involvement in networks;
- Lack of multilingual signs displayed at front of service;
- Whether referral sources are referring CALD clients on to service.

Strategies

- Provide written and verbal information about services in different languages;
- Promote the service more;
- Distribute multilingual information through a variety of avenues, particularly the ethnic media, general media, community forums, websites, newsletters and volunteer visits from community members;
- Provide visits to services or tours of services for CALD communities;
- Meet with clients to discuss the service;
- Consider the needs and characteristics of the specific target group, how they receive information and the best way to get the message across, when distributing information;
- Proactively go out to communities to promote the service, with help from bilingual workers and community leaders;
- Form partnerships with ethno-specific agencies to promote the services to CALD communities;
- Find out about and network with established groups and other service providers to improve their understanding of the service;
- Display multilingual signs;
- Look at referral sources and how clients are finding out about the service;
- Make contact with and distribute information to referral sources.

(C) CULTURAL UNDERSTANDING

Factors

Level of knowledge about and respect for various cultures and languages affects access to services, including:

- Level of cultural sensitivity;
- Understanding of the values and background of clients;
- Understanding the particular problems of different communities, their needs, how they view those problems and the solutions to them such as philosophies of treatment;

- Level of acceptance of help or receptivity to the service is affected by cultural differences;
- Whether specific services are responsive to the needs of specific CALD communities;
- Access to and availability of cross-cultural training, including how to use interpreters;

- Whether services are aware of how to make CALD communities feel welcome;

- Cultural conflict and intolerance affects access.

Strategies

- Be informed about, understand and respect the cultural background, values and traditions of clients;
- Create partnerships with groups and communities, proactively work with communities and community leaders to find out about that community – how they arrived, settlement process, supports already available, needs;
- Recognise that each CALD community is different;
- Understand and be sensitive to the individual's needs in service planning and provision;
- Provide opportunities for CALD communities to contribute to service planning and programs;
- Work with ethno-specific agencies;
- Access workers in the organisation or region for secondary consultation;
- Look at population demographics and which communities are using or not using the service;
- Be creative and flexible about what is provided and how it is provided – find alternative ways for individual communities to access the service;
- Develop specific services to meet specific communities' needs;
- Provide accessible cross cultural training for all levels of employees;
- Encourage workers to share information and discuss cases about provision of services to CALD communities;
- Agencies should be aware of their own cultural bias;
- Provide a welcoming environment that includes multilingual signs and multicultural posters and displays;
- Examine and be aware of the underlying culture of the organisation.

(D) POLICY & PLANNING

Factors

- Whether the agency has access and equity policies, how they are implemented and whether they are considered in planning, service provision and evaluation;
- Whether client data identifies ethnicity appropriately;
- Level of willingness of agencies to reach out to communities, find out about them and address their needs.

Strategies

- Review appropriateness and implementation of access and equity policies;
- Review data collection and ensure it includes reliable ethnicity data;
- Reach out to and understand community needs by:
 - Developing an understanding of the demographics of the target area;
 - Networking and collaborating with CALD communities, other agencies and ethno-specific agencies.

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APPENDIX A: Agencies involved in the project

DHS PROGRAM AREAS:

- Alcohol & Drug Support
- Family Support
- Financial Counselling
- Problem Gambling
- Clinical Mental Health Services
- Enhanced Maternal & Child Health Program
- Psychiatric Disability Rehabilitation Support Services

INDIVIDUAL AGENCIES:

- ACCESS
- Anglicare Inner East
- Biala Box Hill
- CareConnect
- Centacare
- City of Whitehorse
- Doncare
- East Burwood Centre
- Family Access Network
- Gambler's Help East
- Interchange Inner East
- Interchange Outer East
- Knox City Council
- Koonung Centre
- Reach out for Kids
- Villa Maria
- Australia Greek Welfare Society
- Cambodian Community Welfare Centre
- Consumer Affairs Inner East
- Consumer and Tenant Resource Centre Outer East
- Eastern Community Legal Centre
- Knox Community Health Service
- Manningham City Council
- Manningham Community Health Service
- Manningham Youth & Family Services
- Melbourne City Mission - Acquired Brain Injury Programs
- Royal Victorian Institute for the Blind
- Tunstall Counselling and Resource Centre
- Uniting Care Connections
- Whitehorse Community Health Service
- Victorian Multi-Ethnic Slavic Welfare Association

APPENDIX B: Consent form for interview participants

(included logos of MIC and Charles Sturt University)

Access to mainstream services by CALD communities in Knox, Manningham and Whitehorse

Name of Project: Access to mainstream services by CALD communities in Knox, Manningham and Whitehorse.

Principal investigator & supervisors:

- Project Worker: Sharon Porteous,
porteous1@iprimus.com.au
- Migrant Information Centre Supervisor: Manager, Sue Herbst,
sherbst@miceastmelb.com.au
Phone: 9873 1666
- Charles Sturt University Supervisor: Wendy Bowles
Humanities & Social Sciences
wbowles@csu.edu.au
02-6933 2695

Consent Details:

PLEASE READ CAREFULLY AND COMPELTE DETAILS AT THE END.

1. *The purpose of the project has been explained to me and I have read and understood the information sheet given to me.*
2. I understand that I am free to withdraw my participation in the project at any time.
3. I permit the investigator to tape record my interview as part of this project.
4. I understand that any personal details or individual client details gathered in the course of the project are confidential and that neither my name, client's names nor any other identifying information will be used or published without my written permission. General information about the agency or examples discussed may be used to illustrate results, with prior approval.
5. Charles Sturt University's Humanities and Social Sciences Ethics Committee has approved this project. I understand that if I have any complaints or concerns about this research I can contact:

Associate Professor Michael Collingridge
Head of School, Humanities and Social Sciences, CSU
Phone: 02- 6933 2471

Please complete:

Name:.....
Organisation:.....Signed:.....
Date:.....

APPENDIX C: Information sheet for interview participants

(included logos of MIC and Charles Sturt University)

Access to mainstream services by CALD communities in Knox, Manningham and Whitehorse

Name of Project: Access to mainstream services by CALD communities in Knox, Manningham and Whitehorse.

Purpose of Project:

The Migrant Information Centre (Eastern Melbourne) (MIC) is investigating whether culturally and linguistically diverse (CALD) communities are accessing services in the local government areas of Knox, Manningham and Whitehorse. The project aims to identify the factors that affect access to services and determine strategies that improve access to services by CALD communities.

Project contacts:

The project worker is Sharon Porteous who is completing the project as part of a Masters Degree in Social Policy and Planning. Sue Herbst, Manager of the MIC and Wendy Bowles from Charles Sturt University are providing supervision. A Reference Group drawn from service representatives has also been established to review the progress of the project and provide advice about the direction of the project.

CONTACT DETAILS:

Sharon Porteous porteous1@iprimus.com.au

Sue Herbst sherbst@miceastmelb.com.au
Migrant Information Centre
333 Mitcham Road, Mitcham 3132
Phone: 9873 1666

Wendy Bowles wbowles@csu.edu.au
School of Humanities and Social Sciences
Charles Sturt University
Phone: 02 – 6933 2695

Outline of Project

The project involves two stages of collecting data and information.

Stage One has been completed. Services in Knox, Manningham and Whitehorse were contacted to provide information about the country of birth and main language spoken at home of clients they had seen in 2002/03. Data from the services was collated and compared with population data from the Australian Bureau of Statistics 2001 Census. The results from Stage One showed that, compared with the population statistics, people from CALD backgrounds, particularly those who do not speak English at home, are not utilising services as well as they could.

Stage two of the project is concerned with collecting information from services about why people from CALD backgrounds do use some services and not others. It is also aimed at finding out what

steps could be taken to encourage more people from CALD communities to use the services available. Representatives from 10 services who provided data for Stage One will be interviewed, comparing those that had satisfactory results with those who did not. In addition, 4 representatives from ethno-specific agencies will be interviewed to gain a better understanding of the perspective of CALD communities. Finally, small groups from 6 CALD communities will be organised to find out their opinions about why they do or do not use services.

Stage Two should be completed by May 2004 and a final project report will be prepared and distributed widely after June 2004.

Requirements of interview participants:

The project worker, Sharon Porteous, will conduct the interview. The interview is concerned with two key questions:

- ❖ What are the factors that affect access to services by CALD communities?
- ❖ What strategies could be used to address these factors?

The interview will take approximately 40 – 60 minutes. If participants are agreeable, the interview will be audio taped. The interview questions will be mostly open-ended. Information collected will be collated and analysed considering similarities and differences and themes that can be highlighted.

Confidentiality

Any personal details or individual client details gathered in the course of the interview will be kept confidential and no individual or clients names will be identified or published without written permission from the individual concerned. It should be noted that general information about the agency or examples discussed may be used to illustrate the results. Prior approval will be sought to use this type of information.

Participants should note that they are free to withdraw their participation from the project at any time.

NOTE: Charles Sturt University's Humanities and Social Sciences Ethics Committee has approved this project. If you have any complaints or reservations about the ethical conduct of this project, you may contact:

**Associate Professor Michael Collingridge
Head of School, Humanities and Social Sciences, CSU
Phone: 02- 6933 2471**

Any issues you raise will be treated in confidence and investigated fully and you will be informed of the outcome.

Please retain a copy of this information sheet for your reference.

APPENDIX D: Interview guide – mainstream agencies

Access to mainstream services by CALD communities in Knox, Manningham and Whitehorse

INTRODUCTION

Provide information sheet of project and consent forms – sign all participants.

Briefly explain info sheet and reason for the interview – representative of agency as key informant to collect qualitative information about the key questions for the consultation stage of the project.

KEY QUESTIONS:

- ❖ What are the factors that affect access to services by CALD communities?
- ❖ What strategies could be used to address these factors?

GENERAL INFORMATION

1. Clarify services offered by agency, services being discussed at interview, and role/s of interviewees.
2. How many clients do you cater for at any one time with the service being discussed?
3. What is the target area of this service?
4. How are people referred to this service?
5. How do you provide information to your target area about your service?

POLICY AND PLANNING

6. What information about clients do you collect that identifies their cultural and linguistic background?
7. Does your agency's service planning and evaluation process consider the cultural and linguistic characteristics of your target group? How do you go about doing this?
8. What resources are allocated to encourage access to services by CALD communities? (eg. is there money allocated for interpreters)

Are these resource allocations built into your service planning processes?

9. Do you have an access and equity policy? Does it include access and equity for CALD communities? How is it implemented?
10. What access & equity considerations exist in your service agreements with major funding bodies?

How is the agency held accountable for these?

SERVICE USE BY CALD COMMUNITIES

11. How well do you think people from culturally and linguistically diverse (CALD) backgrounds utilise the services this agency offers?
12. What factors can you identify that encourages people from CALD backgrounds using this service?
13. What factors can you identify that inhibits people from CALD backgrounds using this service?

STRATEGIES TO ADDRESS FACTORS

14. What strategies could be used to address factors that affect access to and use of services by CALD communities? Give examples.
Does your agency use these strategies?
15. What would make it possible for the agency to implement these strategies?

Thank you for your assistance – further comments to porteous1@iprimus.com.au.

APPENDIX E: Interview guide - ethno-specific agencies

Access to mainstream services by CALD communities in Knox, Manningham and Whitehorse

INTRODUCTION

Provide information sheet of project and consent forms – sign all participants.

Briefly explain info sheet and reason for the interview – representative of agency as key informant to collect qualitative information about the key questions for the consultation stage of the project.

KEY QUESTIONS:

- ❖ What are the factors that affect access to services by CALD communities?
- ❖ What strategies could be used to address these factors?

GENERAL INFORMATION

1. What services does your agency offer and what is your role here?
2. How many clients do you cater for at any one time with this service?
3. What is the target area of this service?
4. How are people referred to this service?
5. How do you provide information to your target area about your service?

USE OF MAINSTREAM SERVICES BY CALD COMMUNITIES

6. How well do you think people from culturally and linguistically diverse backgrounds utilise mainstream services in Knox, Manningham and Whitehorse?
7. What factors can you identify that encourage people from CALD backgrounds to use mainstream services? Give eg.s
8. What factors can you identify that inhibit people from CALD backgrounds to use mainstream services? Give eg.s
9. How would you describe the referral processes/pathways to mainstream services – are they adequate? Why or why not?

STRATEGIES TO ADDRESS FACTORS

10. What strategies do you use to make your agency accessible for your target group?
11. What strategies could be used by mainstream agencies to address the factors that affect access to and use of services by CALD communities? Give examples.

Thanks for your assistance - further comments to porteous1@iprimus.com.au