

Response to CHSP Good Practice Guide for Restorative Care Approaches (incorporating Wellness, and Reablement) from the CALD Ageing Alliance: Multicultural Communities Council of SA

This response was developed with the assistance of workers from the following CALD service providers:

- Bene
- Greek Orthodox Community of SA (GOCSA)
- Greek Welfare Centre
- Dutch Aged Care NAASA
- German speaking Aged Services Association Inc
- Croatian Care for the Aged Association Inc
- Association of Ukrainian of SA Inc Ukrainian Social Services
- Chinese Welfare Services of SA Inc.
- Vietnamese Community in Australia (SA Chapter)
- St Basil
- St Hillarion

These community organisations are the larger CALD communities in SA. They participated in one or more of the following: attending the workshop, providing written input, distributing the survey and/or distributing the petition to elderly community members. Survey questions are in Appendix 1 and the petition is in Appendix 2. 538 survey responses were received and 470 signed the petition. Originals can be supplied on request.

The author Kristin Johansson and the President of the MCCSA Helena

Kyriazopoulos have also previously surveyed over 2000 CALD people as part of five

Emerging Needs Scoping Studies reports commissioned by the Government and

based on the surveys and consultations with over 1000 CALD people believe that

the concerns outlined below can also be extrapolated to other CALD communities.

There were just over 38,000 South Australians aged 65 and over who spoke a language other than English at home at the 2011 Census. Many of these communities have a number of their members who speak little or no English and are heavily reliant on community workers and/or family members to access services. In addition there are also clients from these countries who do speak English at home but want a culturally appropriate service. MDS 2012/2013 data indicated that there were 19059 CALD clients. The total number of South Australian clients was 81201. All groups participating in this report were in the top 14 groups of CALD HACC clients in the 20112/13 MDS data:

Country of birth	Number of clients
Italy	5213
Greece	2876
Germany	1756
Netherlands	1018
Poland	897
Croatia	633
Ukraine	436
Vietnam	412
China excludes SARS and Taiwan	299
Province	

 Data Source: HACC Minimum Data Set, Extract 1 2012/13 (July 2012-June2013), SA,96% participation rate

From these figures it can be seen that this paper and the survey results contained within represents the view of key CALD service providers and

the feedback contained within it is pertinent for the majority (i.e. 71%) of current CALD HACC clients in South Australia.

The South Australian system which is not replicated across Australia has helped many CALD clients who would not have otherwise accessed services to do so and has played a key role in capacity building. SA has a higher aged profile than other States and the CALD community (due primarily to a large scale postwar migration) is ageing faster than the community overall.

South Australians speaking a language other than English at home represent 18.5% of those aged 65 and over in SA at the 2011 Census.

This does not take into account those who do speak English at home but who need and want a culturally appropriate service and who may revert to their native tongue with the onset of dementia. 23% of South Australia's current HACC users are from a CALD background

Our response to this paper needs to be taken in context of the above information and there are 3 points which we would like to make.

1 A key component of wellness is social connection and being able to engage with the wider community. For many older people from a CALD background participating in asocial support group where they can meet other members of their own community, speak their native language and undertake activities and religious festivals of cultural significance to them contributes substantially to their wellbeing.

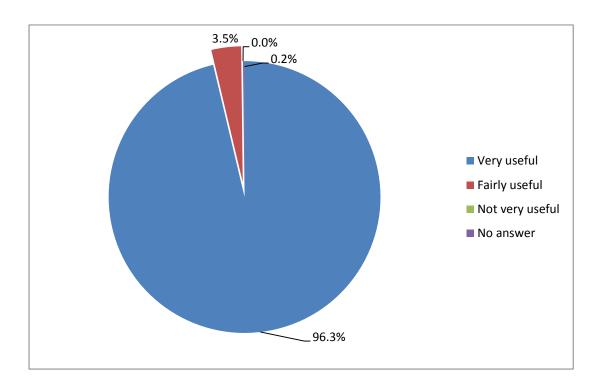
We would like this recognised and affordable social programs made a priority as an essential plank of a wellness approach. Attending a social support group should be available in

addition to other services and not counted as part of the hourly quota.

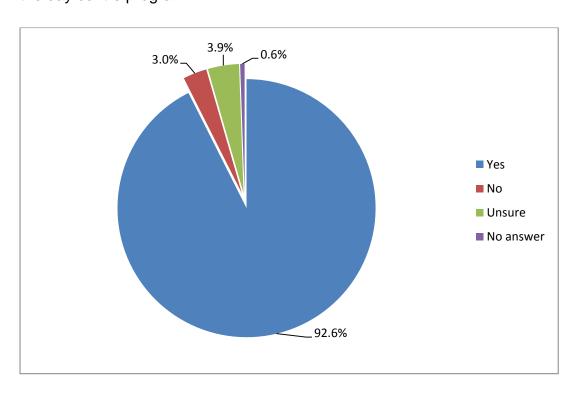
538 people from the following backgrounds responded to MCCSA's survey: Italian, Greek, Dutch, German, Croatian, Ukrainian, Chinese and Vietnamese

The survey surveyed what are now called daycentre programs and will become social support group after July 1st 2015. This survey found that:

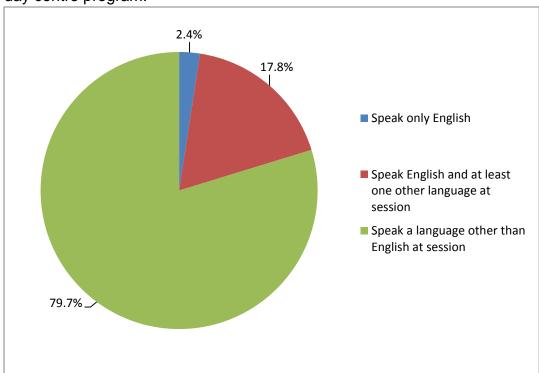
96.3 % of those surveyed said that their day centre program was very useful in helping them keep in touch with members of their community.



92,6% of those surveyed said that they would be lonely if they did not attend the day centre program.



79.7 % of those surveyed spoke only a language other than English at their day centre program.



2 This is a changed approach in service delivery. MCCSA supports the shift to wellness and reablement as we believe that any initiative which enhances the wellbeing of our community members and enables them to remain at home longer, if they so choose, is worth implementing. However the increased focus on this will require staff training and a re-education of client expectations. Both of these will require time and will incur expense.

It is both reasonable and fair for the Commonwealth to reimburse organisations for the additional training costs incurred during the transition and to allocate funds for educating current and future clients about expectations under the new system.

3 The example of clients helping with domestic chores as an illustration of reenablement has been used. Our concern would be that in situations where one partner has severe dementia, or a client has chronic pain and/ or lives alone without a support structure having their domestic tasks done for them rather than assisting in completing them may give them a form of respite and enhance their wellbeing to a greater extent than participating in these tasks.

We would like to see some research in this area as we want the most beneficial outcome form this new approach.

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Appendix 1 Survey form on Home and Community Care services

Please write community name and date information collected

1	Is the day centre program important to help you keep in touch with members of your community?
	☐ Very useful
	☐ Fairly useful
	☐ Not very useful
2	Would you be lonely if you did not attend this program
	☐ Yes
	□ No
	☐ Unsure
3	What language do you speak at the day centre program
	☐ English
	☐ Another language
	(Hi can you please insert your language(s) here)

4	How much do you rely on your community workers for help accessing information and helping you deal with the Government and other matters?
	☐ A lot
	☐ A little bit
	☐ Not at all

Appendix 2

Petition to have the proposed fees for the Commonwealth Home Support

Programme reduced and fair and reasonable fees set

The fees proposed in the Commonwealth Home Support Programme – National Fees Policy

Consultation Paper are too expensive and will destroy community programs in South Australia's

culturally and linguistically diverse communities because people will be unable to meet these

costs. These programs reduce social isolation, help us maintain our own culture and help reduce

depression and mental problems in our community.

At present under the fee paper for a 3 hours day centre program (social support group) with a meal if we are on a full pension we would be asked to pay:

- 3 hours of social support at \$9 an hour = \$27
- 2 one way transport trips for under 20 kilometres at \$5 each way = \$10
- One meal at \$9 plus the cost of ingredients

This would be over \$46 for one group session.

Action petitioned

We, the undersigned are concerned Australian citizens from culturally and linguistically diverse backgrounds. We ask you to amend the proposed fees so that they are fair and reasonable and our community programs are not destroyed. We need to access services for our health and wellbeing as we age so that we can stay at home as long as possible. We urge you to take into account the work of our volunteers. We ask you to work with the Multicultural Communities Council of SA and other CALD peak groups in other States to set fees which will enable our culturally and linguistically diverse services to survive.