

Northern Territory Health

Aboriginal Cultural Security Policy

Acknowledgment

The artwork that appears on the cover and throughout this document has been taken from Alan Kerinauia's painting Ampiji (Snake), ochres on canvas. Mr Kerinauria has given permission for the use of his work for this purpose.

Photos throughout this document are courtesy of NT Tourism.

Policy statement

Aboriginal and Torres Strait Islander peoples (Aboriginal people) are almost one third of the Northern Territory's (NT) population and make up the majority of the NT's public hospital health consumers.

Culture is central to how Aboriginal people view individual, family and community health and wellbeing. Culture can influence decisions about when and why Aboriginal people seek health services, acceptance or rejection of treatment, the likelihood of adherence to treatment and follow up, as well as the likely success of prevention and health promotion strategies. Culture also shapes assessments of the quality of care and views about the service and staff.

Recognising the centrality of culture to health and respecting Aboriginal people and cultures is necessary to enhance service access, equity and effectiveness.

The Department of Health, Central Australian Health Service and Top End Health Service (referred to as NT Health) are committed to the development and provision of health services that sensitively recognise and support Aboriginal cultural rights, views and values and will focus on key priority areas in order to strengthen cultural security including:

- Workforce
- Communication
- Whole of organisation approach
- Leadership
- Consumer and community participation
- Quality improvement, planning, research and evaluation.

By focussing on these areas and ensuring that activities, behaviours, policies and standards promote the highest level of cultural responsiveness in individuals, services and organisations, NT Health will work towards a culturally secure health system.



Scope

This policy applies to all employees working in public health services in the NT, not only those working in Aboriginal health, including:

- all employees (including ongoing, fixed term, casual, interagency and intra-agency transferees, secondees, redeployees)
- visiting Medical Officers/ Specialist Medical Officers
- employment agency referrals
- contractors and consultants
- voluntary workers
- students on placements
- persons engaged in a capacity that requires access to health consumers (e.g. pastoral and official visitors).

Rationale

The NT is a large jurisdiction with a small but culturally diverse population. Aboriginal people make up almost one third of the NT population and just over half live in very remote areas compared with less than ten per cent of the NT non-Aboriginal population.¹ Additionally, there are over 100 Aboriginal languages spoken across the NT and many Aboriginal people speak English as a second, third or fourth language.²

The legacy of colonisation as well as racism and discrimination continue to contribute to poor health outcomes for Aboriginal people. These factors mean that Aboriginal people are less likely to seek out health services when necessary.

The health and community service sector increasingly recognises that culture and language can be powerful influences in supporting positive identity, self-determination and wellness.

The importance of culture is also enshrined in NT and Commonwealth legislation. The NT's *Anti-Discrimination Act*³ promotes 'recognition and acceptance within community of the principle of the right to equality of opportunity of persons'. Commonwealth legislation (*Racial Discrimination Act 1975*⁴) also upholds the enjoyment, recognition or exercise of fundamental rights and freedoms in cultural, social and public life.

Internationally, culture has emerged as a critical element of the civic and social structure of nations. This has been reinforced through the *UN Declaration on the Rights of Indigenous Peoples*⁵, which Australia signed in 2009. Naming culture in this way recognises that people have a right to be different and that the institutions of our society should ensure that service to the community is not skewed by assumptions about the predominance of any one cultural outlook. To do otherwise marginalises sections of the community.

NT Health can support increased access to services and equity of outcomes for Aboriginal people by considering the centrality of culture in optimising health care, by enabling effective communication, supporting consumer engagement, and supporting consumer empowerment and self-management.

Objective

The *Aboriginal Cultural Security Policy* aims to strengthen Aboriginal Territorians' access to and benefits of health services by ensuring that the health system recognises the centrality of culture in delivering successful health outcomes.

The *Aboriginal Cultural Security Policy* aims to ensure that the health system provides services to Territorians that are free from discriminatory practices. It also ensures that the health system recognises the legitimate cultural rights of Aboriginal people, initiates remedial actions where required and monitors activities to ensure on-going compliance with cultural standards and practices. Overall, this policy recognises that cultural security is necessary to closing the gap in health outcomes for Aboriginal Territorians.

The NT Health *Aboriginal Cultural Security Framework 2016-2026* provides further information, detail and advice on how to implement this policy directive. This framework outlines priority actions to ensure that cultural security is addressed across the NT health system.

The priorities of the framework are summarised below.

1. NT Health will increase the diversity of the health **workforce** to ensure it is representative of the NT. NT Health employees will undertake ongoing professional development to strengthen skills in cultural safety and responsiveness.
2. NT Health will enhance effective **communication** between Aboriginal health consumers and health professionals to ensure ethical, safe and high quality care.
3. NT Health will take a **whole of organisation approach** to embed considerations of Aboriginal cultural security in all parts of the health system.
4. NT Health recognises the importance of **leadership** in driving improvements in cultural security.
5. NT Health values **consumer and community participation** to ensure Aboriginal people and communities work in partnership with health services to make informed choices, and provide feedback in service planning, implementation and evaluation.
6. NT Health will undertake **quality improvement, planning, research and evaluation** processes to consider and reflect on how the health system addresses cultural security. This supports ongoing learning and improvement.

Definitions

Aboriginal and Torres Strait Islander peoples: A term that describes Aboriginal and Torres Strait Islander peoples of Australia as 'belonging naturally to a place', acknowledging Aboriginal and Torres Strait Islander peoples as the first peoples and original custodians of Australia and recognising the great diversity of nations within Australia.

NT Health recognises that Aboriginal peoples and Torres Strait Islander peoples have a great diversity of cultures, histories and values. For the sake of readability, and in recognition that the term Indigenous may be a sensitive one for many Aboriginal and/or Torres Strait Islander people, this document will use the term Aboriginal, which should be taken to include Torres Strait Islander people.

Cultural Security: Is a commitment to the principle that the construct and provision of services offered by the health system will not compromise the legitimate cultural rights, values and expectations of Aboriginal people. It is achieved by developing accessible and effective health care systems for Aboriginal people based on acknowledgement of Aboriginal peoples right to self-determination, empowerment and healthcare and as such, an understanding and responsiveness to cultural views, beliefs and knowledge systems which play an integral role in adherence to health care.

NT Health: For the purposes of this document, NT Health refers to those functions and services that are part of the NT public health system, inclusive of policy, planning, financing, direct service delivery, service development, leadership/governance and other functions. This includes staff who are employed by Department of Health (System Manager); Top End Health Service, and Central Australia Health Service. This document recognises that NT Health is not an official term but has been used for readability and clarity.

Legislative basis and related policy documents

This policy is linked to a number of documents.

Related legislation

- *The Racial Discrimination Act 1975* (Commonwealth), the *Northern Territory Anti-Discrimination Act 1996* and the *Health and Community Services Complaints Act (NT)* and *Health and Community Services Complaints Regulations (NT)* : These Acts require that:
 - All agency programs and funded services provide equitable access to services to people from culturally and linguistically diverse backgrounds, including people with disabilities.
 - Agencies must not directly or indirectly discriminate against people on the basis of their language ability.

National Policy Frameworks and Agreements

- *Closing the Gap on Indigenous Health Disadvantage*, Council of Australian Governments (2008)
- *National Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2004-2009* (AHMAC)
- *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*

NT Strategic Policy and Agreements

- *Northern Territory Health Aboriginal Cultural Security Framework 2016-2026*
- *Northern Territory Aboriginal Health Plan 2015-2018*
- *Northern Territory Aboriginal Health Forum: Pathways to Community Control: An agenda to further promote Aboriginal community control in the provision of primary health care* (November 2009)

NT Health Operational Policy and Procedures

- Aboriginal Interpreter Policy and Guidelines (July 2014)
- Aboriginal Lands Permit Policy and Guidelines (July 2015)
- Aboriginal People and Communities Preferred Terminology Policy (July 2014)
- Acknowledgment of Country and Welcome to Country Policy and Guidelines (July 2014)
- Consent to Treatment Health Services Policy and Guideline (July 2012)
- Consumer and Community Participation Guidelines
- Consumer Feedback – Complaints, Compliments, Consumer Experience Surveys and Suggestions Policy (Dec 2014)
- Cultural Security in Practice – A Guide for Managers and Staff (September 2015)
- Guidelines for Patient Assistance Travel Scheme (December 2014)
- Partnering with Consumers for Success – Staff Toolkit (2015)
- Territorians as Partners in Healthcare Consumer Participation Policy (May 2014)
- Strong Voices – Strengthening and Supporting Consumer Representation Toolkit (2015)

Document details

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¹ Australian Health Ministers' Advisory Council, 2015, *Aboriginal and Torres Strait Islanders Health Performance Framework 2014 Report*; Northern Territory, AHMAC, Canberra.

² NT Department of Local Government and Community Services, Aboriginal Interpreter Service Website, viewed 16 Feb 2016, <http://www.ais.nt.gov.au/>

³ *NT Anti-Discrimination Act*, in force 6 October 2015, <http://notes.nt.gov.au/dcm/legislat/legislat.nsf/linkreference/ANTI-DISCRIMINATION%20ACT?opendocument>

⁴ *Racial Discrimination Act 1975*, <https://www.legislation.gov.au/Series/C2004A00274>

⁵ *UN Declaration on the Rights of Indigenous Peoples*, <https://www.humanrights.gov.au/publications/un-declaration-rights-indigenous-peoples-1>

⁶ *Health and Community Services Complaints Act (NT) and Health and Community Services Complaints Regulations (NT)*: <http://www.hcsc.nt.gov.au/resources/legislation-code/>

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