



## **Mental Health in Multicultural Australia's submission to:**

### **Governments seeking feedback re the development of the National Disability Insurance Scheme (NDIS)**

MHiMA is a national project currently funded by the Commonwealth Department of Health and Ageing until June 2014. MHiMA's mission is to build capacity and to support inclusion. Underpinning this mission is MHiMA's vision of an open and inclusive society committed to human rights and diversity in which everyone requiring mental health services is able to access culturally responsive services equitably regardless of CALD background.

MHiMA's mission expresses our intent for communities and health service providers to address the mental health needs of Australia's immigrant and refugee population in a culturally inclusive and responsive manner. MHiMA is committed to achieve this mission by:

Providing a national focus on issues relevant to mental health and suicide prevention for people from CALD backgrounds by offering advice and support to government and non-government providers and service users.

Supporting primary health care professionals, including general practitioners and allied health practitioners, to address the mental health needs of consumers from CALD backgrounds and their carers.

Supporting development of mental health services that are culturally responsive, evidence-based and recovery-oriented.

Working to promote effective and culturally responsive services that are capable of meeting the diverse needs of the Australian population across the lifespan.

Engaging with relevant stakeholders in every state and territory by developing effective and respectful collaborations that are of mutual benefit and that advance our common objectives by adopting a flexible approach that is responsive to issues arising in a rapidly changing environment

MHiMA welcomes the National Disability Insurance Scheme and the opportunity to provide feedback.

## Eligibility

### **Question 1: Does this description of eligibility cover all things you think a National Disability Insurance Scheme would need to know about you to determine whether you should be eligible to receive support under and NDIS?**

Yes. In this context we would like to make the following comments from a MHiMA perspective which supports the improvement of health services to facilitate equitable access and outcomes for migrants, refugees and their families.

In relation to the process of needs assessments MHiMA believes that it is important to be able to conduct a quality comprehensive needs assessment with people from CALD backgrounds. The importance of using professional interpreters, bicultural workers and culturally competent<sup>1</sup> staff using a culturally and diversity sensitive and responsive approach can not be stressed enough.

MHiMA is concerned that in particular for the vulnerable client group of CALD clients with psychiatric impairments it will be extremely difficult to receive an appropriate assessment, due to under funding of the sector as well as the lack of culturally appropriate options.

For example in Queensland people with disability in need of an assessment by Disability Services Queensland (DSQ) have encountered numerous barriers. In order to be eligible for DSQ support a consumer will be required to undergo an assessment which is based on standardised questions and tests

i.e. language vocabulary and general knowledge questions from a Western perspective and therefore unsuited to be used on people from non-Western backgrounds.

Psychologists using this WAIS IV test encounter ethical dilemmas according to their professional organisation Australian Psychological Society's ethical standards, and would therefore need to decline to test people from CALD backgrounds using this unsuitable test, leaving a large group of people without any method of being able to be assessed at all. We strongly advocate for the development of new culturally appropriate and flexible non-standardised tools to assist all CALD consumers with disability currently falling through the cracks.

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<sup>1</sup> We acknowledge that the concept of cultural competence is difficult to define and refer to Kleinman and Benson (2006) which further explains the concept of culture and the importance of the use of the explanatory model in working with CALD mental health consumers. The definition of culturally competent used here refers to the definition used by G. Turner in article Moving from Cultural Competency in Multicultural mental health To Contextual Competency 2006: Synergy which states: "The ability and willingness to strive forward providing an equivalent level of professional care, with equivalent positive outcomes, to all individuals presenting for care ... no matter what the cultural, ethnic and/ or language background they are from.

It is also important to raise awareness of the situation of temporary residents with disability living in Australia who are being discriminated against under the current arrangements, as they are not eligible for the Disability Support Pension (except for those on humanitarian visas) for the first 10 years after their visa was granted<sup>2</sup>.

We would also like to raise awareness of the situation of asylum seekers and other migrants waiting on a determination of their visa application. What happens to this category?

What safeguards or mechanisms will there be to complement the NDIS arrangements, given that eligibility is limited to citizens and permanent residents only?

**Question 2: Are there additional questions that an NDIS should ask people before deciding if they are eligible to receive support?**

A strong cultural framework needs to underpin the whole eligibility assessment as people have diverse views and understanding of disability across cultures. For example, questions could relate to cultural background, language and dietary needs. This would not only ensure that NDIS funds individually tailored packages to meet the needs of diverse consumers, it would also provide valuable data about the diversity of people needing these services. This data would be useful for service development and improvement as well as for future planning and policy development.

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<sup>2</sup> NEDA Response to the Consolidation of Commonwealth Anti-discrimination Laws Discussion Paper. Feb 2012: National Ethnic Disability Alliance

## **Reasonable and Necessary Support**

### **Question 1: Are there supports that you think are important to include in an NDIS that would be excluded by this description?**

From a MHiMA perspective which values, diversity, multiculturalism, access and equity, social inclusion and anti-discriminatory principles for all Australians including CALD people with disabilities, it would be important to note that support provided under the NDIS would need to be culturally inclusive and responsive resulting in equal access to suitable services for disabled immigrants, refugees and their families.

This would include access to professional interpreters and multilingual resources explaining their rights and responsibilities as well as the service options available to them, thereby empowering CALD consumers, carers and their communities to make well informed decisions and choices. The use of pictorial resources and use of easy to understand English language in written resources would also be helpful to be able to reach clients who are still developing their English language proficiency and literacy skills. Additionally the use of audiovisual materials and radio as medium to reach diverse ethnic communities can also be very effective.

To ensure access to quality support services, these would need to be provided by workers with appropriate training and skills to be able to provide culturally sensitive, responsive and competent services using a strong cultural framework. It is equally important that the interpreters involved are at a professional level to ensure confidentiality, impartiality and quality services and to be able to explain this to the client. We would also encourage the involvement of bilingual workers who have been provided with the necessary professional training.

There is also the issue of health literacy, which is used to describe the knowledge that people need in order to look after their health and make good use of health care services<sup>3</sup>. Migrants and refugees from non-Western cultures often have a different perspective on health related matters and what is needed is more dialogue.

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<sup>3</sup> Ingleby, D (2012) Acquiring health literacy as a moral task, International Journal of Migration, Health and Social Care, Vol. 8 Iss: 1pp 22 -31

It is well documented<sup>4</sup> that:

Language and cultural barriers present significant obstacles for CALD people in gaining access to mental health services

People of CALD backgrounds often miss out on generic and psychiatric support services

People of CALD backgrounds are often unaware of the range of services and supports available and lack the knowledge necessary to access appropriate services

People of CALD backgrounds often misunderstand how services operate and are often misunderstood by health professionals

Family members and caregivers of CALD people do not have the opportunity to express their problems, frustrations and views about care-giving within a structured and appropriate environment

Another issue relates to the importance of the allocation of resources into ensuring community engagement and development with strategic CALD sector bodies will take place and mechanisms are being set up to provide for the input of CALD consumers and carers at all levels of services within the NDIS.

**Question 2: Are there additional points that are needed to make sure that the support provided under an NDIS meets the reasonable and necessary support needs of people with disability?**

In relation to reasonable and necessary supports under e. we would like to suggest: reflect community including cultural and language expectations.

It is also important that service provision will be appropriately and effectively coordinated, for example between disability services provided by Community Departments and state Health Departments to ensure that people do not fall through the cracks. This issue is usually further amplified when there are language barriers and cultural differences.

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<sup>4</sup> A relevant overview of issues experienced by CALD people with mental illness and mental health problems is provided in Reality Check. Culturally diverse mental health consumers speak out 2004: Department of Health and Ageing's Australian Transcultural Mental health Network.

**Question 3: Does this description of reasonable and necessary supports, combined with the eligibility statement, help you to understand who will be supported in an NDIS and what supports might be provided to them? If not, how do you suggest that the description be made clearer?**

Yes we believe it does and we look forward to obtaining the summary of the engagement outcomes and seeing the National Disability Insurance Scheme being made a reality that is accessible to all communities residing in Australia.

Thank you.

### MHiMA Contact Details

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