Queensland **Family & Child** Commission

Culturally safe places

Culturally safe places through innovative workforce development*

May 2017

FAST FACTS

- Aboriginal and Torres Strait Islander children were 7 times more likely than non-Indigenous children to be in out-of-home care (AIFS, 2016)
- Aboriginal and Torres
 Strait Islander children
 are over-represented
 across all stages of the
 child protection system
 (AIFS, 2016)
- Only 3.65% of the Child Safety workforce identify as being of Aboriginal and Torres Islander descent (DCCSDS, 2016)
- Culturally safe practice is any "action which recognises, respects and nurtures the unique identity of any individual and safely meets their needs, expectations and rights" (Nursing Council of New Zealand, 2005)
- Culturally unsafe places for Aboriginal and Torres Strait Islander children and families is any action "which diminishes, demeans, or disempowers the cultural identity and wellbeing of an individual" (Nursing Council of New Zealand, 2005)

Culturally safe places are paramount for Aboriginal and Torres Strait Islander children, young people and their families to thrive. Culturally unsafe places however, can be common for many Aboriginal and Torres Strait Islander children in the child protection system. Policy makers and practitioners need to be aware of the factors that contribute to culturally unsafe places and the vital role of the Aboriginal and Torres Strait Islander workforce as well as a culturally capable non-indigenous workforce in facilitating culturally safe places.

1. Rates of out-of-home care in Queensland for Aboriginal and Torres Strait Islander children

- Aboriginal and Torres Strait Islander children were 7 times more likely than non-Indigenous children to be in out-of-home care (Australian Institute of Family Studies [AIFS], 2016).
- Queensland Department of Communities, Child Safety and Disabilities states that Aboriginal and Torres Strait Islander children are over-represented across all stages of the child protection system (Department of Communities, Child Safety and Disabilities Services [DCCSDS], 2016).

Indigenous Workforce

- Critical to reducing the over representation of Aboriginal and Torres Strait Islander children across all stages of the child protection system is an Aboriginal and Torres Strait Islander workforce.
- However, only 3.65% of the Child Safety workforce identify as being of Aboriginal and Torres Islander descent with an aspirational target of 7.5% (DCCSDS, 2016)

Non-Indigenous Workforce

 Parallel to increasing an Aboriginal and Torres Strait Islander workforce is increasing the cultural capability of the nonindigenous workforce across all levels of the child protection system.

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- Cultural safety is practice determined by the recipient of care not the care giver (Nursing Council of New Zealand, 2005)
- Cultural capability is the demonstrated capacity to act on cultural knowledge and awareness through a suite of core attributes that are acquired through a dynamic lifelong-learning process. (Duignan, 2006; Stephenson, 2000).
- Cultural capabilities are holistic, transferable and responsive, and can be adapted to new and changing contexts (Duignan 2006; Stephenson 2000)

2. Why are culturally safe places important?

- Culturally safe practice is any "action which recognises, respects and nurtures the unique identity of any individual and safely meets their needs, expectations and rights" (Nursing Council of New Zealand, 2005).
- Aboriginal and Torres Strait Islander leaders, peaks and researchers have established that culturally safe places are important for Aboriginal and Torres Strait Islander children, young people and their families through the development of the Aboriginal and Torres Strait Islander Child Placement Principle developed 30 years ago (AIFS, 2015).
- The Principle prioritises options that should be explored when an Aboriginal or Torres Strait Islander child is placed in care so that family, cultural and community connections can remain strong (AIFS, 2015).
- It is well recognised that much more needs to be done to overcome both the broader issues of social and economic disadvantage underpinning the severe overrepresentation of Aboriginal and Torres Strait Islander children in the statutory child protection system (DCCSDS, 2016). Referred to as the social determinants of health.
- In addition to consideration of these social determinants are cultural determinants, which originate from and promote a strength-based perspective. Importantly the cultural determinants of health acknowledge that stronger connections to culture and country build stronger individual and collective identities, a sense of self-esteem, resilience, and improved outcomes across the other determinants of health (social determinants) including education, economic stability and community safety" Professor Ngiare Brown (Lowitja, 2014, p.2).
- Contrary to this culturally unsafe places for Aboriginal and Torres Strait Islander children and families is any "action which diminishes, demeans, or disempowers the cultural identity and wellbeing of an individual.
- Culturally unsafe care is associated with a range of negative outcomes for Aboriginal and Torres Strait Islander peoples including reduced and unequal access to the societal resources required for health and well-being (e.g. employment, education, housing, medical care, social support); stress and negative emotion reactions that contribute to mental ill health (Cooperative Research Centre for Aboriginal Health, 2008).

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IMPLICATIONS FOR POLICY & PRACTICE

- Indigenous knowledge is not possible without Indigenous peoples (West, 2014)
- Aboriginal and Torres
 Strait Islander people
 have the knowledge and
 experience to make the
 best decisions
 concerning their children
 (Tilbury et al., 2013)
- The role of Indigenous knowledge in policy and practice is paramount (West, 2014, Tilbury et al., 2013)
- Best practice policy and program design and implementation in any field – to involve the people affected most so as to maximise the outcomes (West, 2014).

3. Factors that contribute to culturally unsafe places

- Cultural awareness training is not enough in itself
- Program transfer and implementation without culturaltailoring are ineffective
- Programs need to be developed and delivered in partnership with and input from local Indigenous people (Bainbridge et al., 2015)

4. Strategies for building culturally safe places

- Fundamental to "the Principle" and relevant in the context of cultural safety is the recognition that Aboriginal and Torres Strait Islander people have the knowledge and experience to make the best decisions concerning their children (Tilbury et al., 2013).
- The Department is implementing a number of strategies to improve culturally safety. Strategies include:-
 - Aboriginal and Torres Strait Islander Child Placement Principle
 - Cultural Support Plan
 - Aboriginal and Torres Strait Islander Cultural Capability Action Plan
 - Aboriginal and Torres Strait Islander Workforce Strategy
 - (i) Embedding cultural capability within the organisational culture, governance, policies and programs (Bainbridge et al., 2015).
- Targeted Aboriginal and Torres Strait Islander Children,
 Families and Communities Strategic Plan
- Aboriginal and Torres Strait Islander children, families and communities priority areas embedded in broader strategic plans
- High level strategic and co-ordinated approach

(ii) Indigenous Workforce

- Commitment to increasing Aboriginal and Torres Strait Islander workforce at all levels
- Commitment to increasing Executive Level Indigenous Leadership

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What we know

- 100%% increase in the number of Aboriginal and Torres Strait Islander peoples becoming Psychologists (1996-2011)
- 70% increase in the number of Aboriginal and Torres Strait Islander peoples becoming Social Workers (1996-2011) However,
 - Only 0.46% of the Psychology workforce identify as being of Aboriginal and Torres Strait Islander descent
 - Only 2.73% of the Social Work workforce identify as being of Aboriginal and Torres Strait Islander descent (Department of Health 2013)

(iii) Non-Indigenous Workforce

Cultural Capability Development

- Cultural Awareness on its own isn't enough (Bainbridge et al., 2015)
- Culturally capability is as important as clinical capability. (Department of Health, 2015).
- The Department of Health led the development of a National Aboriginal and Torres Strait Islander Health Curriculum Framework (Department of Health, 2015).
- Despite the importance, few validated evaluation instruments have been developed to assess changes in student knowledge, perceptions, values and experiences (Department of Health, 2015).
- West et al, (2017) developed and validated a Cultural Capability Measurement Tool (West et al., 2017) to assess cultural capability development of health professional students undertaking a discrete First Peoples Health and Practice course.
- The Framework uses the notion of 'cultural capability' as its foundational concept. Cultural capability implies the demonstrated capacity to act on cultural knowledge and awareness through a suite of core attributes that are acquired through a dynamic lifelong-learning process. Capabilities are holistic, transferable and responsive, and can be adapted to new and changing contexts (Duignan, 2006; Stephenson, 2000).
 - (iv) Aboriginal and Torres Strait Islander led Research Agenda

^{*} This paper was prepared by Professor Roianne West, Director of the First Peoples Health Unit, Griffith University.

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