CANBERRA MULTICULTURAL WOMEN'S FORUM CONSULTATION INITIATIVE FOR FAMILY AND DOMESTIC VIOLENCE

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SUPPORTED BY ACT GOVERNMENT OFFICE FOR WOMEN PREPARED BY DR NELIA HYNDMAN-RIZK

> CANBERRA MULTICULTURAL WOMEN'S FORUM

Canberra Multicultural Women's Forum (CMWF) acknowledges and celebrates the Ngunnawal people as the traditional custodians of the land where CMWF operates. We pay our respects to Ngunnawal Elders past, present and emerging and recognise their continuing culture and contributions they make to the Canberra community and the ACT region.

CMWF, under the auspices of Canberra Multicultural Community Forum (CMCF), was successful in receiving a grant¹ from the ACT Government Office for Women in 2017-18.

The aim of the activity was to develop best practice in communicating with women from culturally and linguistically diverse (CALD) backgrounds and hear their experiences regarding the accessibility, effectiveness and cultural competency of ACT Government services.

This report outlines the consultation findings.

Acknowledgements

Canberra Multicultural Women's Forum (CMWF) wishes to thank all consultation participants for their contributions and members of the CMWF Committee who facilitated the consultations, volunteered their time and contributed to this Report. These Committee members include: Laura Aoun, Saba Awan, Wafa Ben Slimen, Zainab Farouk, Yelin Hung, Rita Kritikos, Mandy Liang and Brigitte O'Keeffe. CMWF also thanks Canberra Multicultural Community Forum for their support in particular, Diana Abdel-Rahman and Chin Wong, as well as the ACT Government for their generous funding.

CMWF acknowledges the immense diversity of the women who trusted us to share their stories in this Report. Any acronyms or shorthand used to describe these women or communities are not intended to diminish the fullness of their identities or experiences but rather are used for ease of reading the report.

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Executive summary

The Culturally and Linguistically Diverse (CALD) Women's Consultation Initiative (Consultation), conducted by the Canberra Multicultural Women's Forum (CMWF), considered the accessibility, effectiveness and cultural competency of Australian Capital Territory (ACT) Government services particularly those related to family and domestic violence² (FDV). This Consultation focussed on women from the following seven communities in Canberra: Arabic, Spanish, Chinese, African continent, South East Asian, South Asian and Pacific Islander. It is important to note that these women represent a cross-section of the communities they are part of and not the whole community itself. These discussions took place between November 2017 and May 2018 in Canberra. This Consultation culminated in a CALD Women's Expo held on 2 June 2018 at the Hellenic Club in Canberra's city centre³.

The Consultation piloted culturally appropriate and safe engagement strategies through which women from CALD backgrounds were able to share their experiences with CMWF representatives. The outcome was the development of a best practice methodology for community consultations with women from CALD backgrounds. This Consultation Report presents the findings of the consultations and provides guidance to ACT Government and service providers on how to improve their engagement with women from CALD communities. This Consultation also identifies gaps in ACT Government services for women from CALD backgrounds in regards to FDV; translation; health; and community services. Insights on these issues have informed the following fourteen recommendations CMWF is proposing:

Key Recommendations:

- 1. Develop a culturally appropriate engagement strategy for ACT Government services, co-designed with CALD communities, to improve service delivery.
- 2. Additionally, co-develop a culturally appropriate engagement strategy with youth from CALD communities to ensure the ACT Government can support their diverse interests and needs.
- 3. Support community-based initiatives focussed on men from CALD backgrounds working with other men on FDV-related issues in terms of prevention education and intervention.

- 4. Establish a fully accessible refuge with wraparound services for women and children from CALD backgrounds in the ACT staffed by culturally competent staff able to support women escaping violence.
- 5. Provide funding for more interpreters with specialist knowledge across health, legal, and education sectors.
- 6. Provide funding for more interpreters with knowledge of the cultural, religious and geographic diversity within different language communities.
- 7. Ensure interpreters receive trauma-informed training to better support CALD communities.
- 8. Deliver face-to-face cultural awareness training across all ACT Government departments and services to increase knowledge of the diversity of experiences and identities in CALD communities and to address personal and institutional racism.
- 9. Provide multilingual information on the Access Canberra website.
- 10. Make available after-hours services for Access Canberra.
- 11. Appoint multicultural liaison officers (MLOs) within Access Canberra as well as mandate the appointment of MLOs in all ACT Government services.
- 12. Increase representation of women from CALD backgrounds in ACT Government Advisory Councils.
- 13. Provide a multi-faith prayer room in ACT Government service locations including hospitals.
- 14. Undertake further consultations regarding specific forms of violence, which may manifest in some CALD communities in the ACT, as well as consult with communities not represented as part of this initiative. Any new findings or further best-practice methodology should be incorporated into a subsequent report.

Introduction

The Canberra Multicultural Women's Forum (CMWF) undertook the Culturally and Linguistically Diverse (CALD) Women's Consultation Initiative (Consultation) to consider the accessibility, effectiveness and cultural appropriateness of Australian Capital Territory (ACT) Government services, particularly regarding family and domestic violence (FDV) services. Discussions also focussed on translation; health; and community services depending on the issues and experiences participants wanted to share. The Consultation focussed on women from the following seven communities in Canberra: Arabic, Spanish, Chinese, African continent, South East Asian, South Asian and Pacific Islander. It is important to note that these women represent a cross-section of the communities they are part of and not the whole community itself. All of these discussions took place between November 2017 and May 2018.

The Consultation piloted culturally appropriate and safe engagement strategies to consult with women from CALD backgrounds resulting in best practice methodologies being developed. These approaches could be considered by the ACT Government and service providers and implemented (where appropriate) to ensure women from CALD backgrounds feel safe and supported.

This Consultation Report outlines valuable insights provided by women from CALD backgrounds regarding ACT Government services. The report firstly covers the consultation scope, discussion questions asked and methodology used to analyse the consultation results. Secondly, findings of each community consultation are then presented. Thirdly, an outline of the evaluation survey results for the consultations is presented and features of the best practice methodology developed by CMWF are summarised. The Consultation Report concludes with key recommendations, informed by the consultations, which CMWF would like to present.

It should be noted that some of the recommendations in this Consultation Report align with certain actions under the First Action Plan of the ACT Women's Plan 2016-2026. As the ACT Government embarks on implementing practical solutions in the second year of the First Action Plan, CMWF recommends that the feedback shared in this report is considered and utilised to inform policy and initiatives aimed at women from CALD backgrounds living in the ACT.

Scope

This Consultation gave a platform to women from CALD backgrounds living in the ACT to have their experiences and feedback heard on ACT Government services, particularly those related to FDV. Since this Consultation was designed as a pilot initiative, the reach was intentionally small in scale. As a result, representation from women from all CALD communities living in Canberra or those with intersectional identities such as women from CALD backgrounds with disability or those who identify as Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Intersex (LGBTQI) was not always adequate. Going forward, CMWF would like to work more closely with these women to ensure advocacy efforts include their insights.

It should also be noted that in regards to scope, when FDV was mentioned during the consultations, participants spoke about the issue generally rather than referring to specific forms of violence. While many victim survivors across the ACT experience similar patterns of violence, power and control, at times, FDV manifests differently for some women from CALD backgrounds. This may include experiencing forms of violence such as dowry abuse, forced marriage and female genital cutting (FGC). In the future, CMWF plans to undertake dedicated consultations with communities affected by these forms of violence and develop a best-practice methodology to respectfully engage with women from CALD backgrounds with intersecting identities on these sensitive issues.

During the consultations, FDV-related services were referred to in one of the questions. However, the questions were deliberately broad to ensure that women could share their experiences and feedback about the overall ACT Government service sector. CMWF intentionally structured the consultation questions in this way so that participants could freely contribute and not feel compelled to disclose feedback about FDV-related services if they were not comfortable. Many of the participants did choose to share their perspectives regarding FDV-related services (this issue was spoken about at length in each consultation) highlighting the trust CMWF representatives have built with women in the communities consulted.

Consultations led by CMWF focussed on communities according to ACT Government population statistics, with the largest and/or fastest growing CALD community language groups⁴. The ACT has a higher proportion of the population who speak a language other than English (21.8 per cent), compared to the overall Australia population (20.8 per cent)⁵, while 26 per cent of people living

in the ACT were born overseas⁶. The top ten languages spoken at home in the ACT in 2016, other than English, were Italian, Macedonian, German, Filipino/Tagalog, Mandarin, Punjabi, Arabic, Greek, Croatian and Spanish⁷. The fastest growing languages spoken in the ACT from 2011– 2016 were Punjabi (+347 persons), Mandarin (+241 persons), Filipino/Tagalog (+209 persons), Nepali (+170 persons) and Arabic (+134 persons)⁸. It is important to compare these statistics with 'country of birth' statistics as migrants and refugees often arrive via third countries, but also the second-generation are not represented in the country of birth statistics. Where possible, this Consultation Report will list statistics for both the language spoken at home and country of birth for each community consulted (see Table 1). For this pilot initiative, CMWF Committee members contributed their volunteer skills and time throughout the development and implementation phases. Further, the communities consulted in this initiative were selected due to the linguistic or cultural connections CMWF had with those communities.

Recent reports into the ACT Government FDV service system highlight many gaps in relation to women from CALD backgrounds. *The ACT Domestic Violence Service System Final Gap Analysis Report* ⁹ notes gaps in relation to service accessibility, service appropriateness for the needs of women from CALD backgrounds and the need for an integrated approach¹⁰. The *Review of Domestic and Family Violence Deaths in the ACT*¹¹ noted several of the deceased victims of FDV were born overseas. These women had a number of unmet needs, at times were socially isolated and lacked appropriate support from the service system. Similarly, the Glanfield Inquiry echoes these findings, as do several other reports into FDV nationally¹². Women from CALD backgrounds represent a significant portion of the ACT's population (ACT Health, 2016) and anecdotal evidence¹³ suggests the rates of these women accessing FDV-related services are increasing. In many instances, women from CALD backgrounds are under-represented, not only in consultations on the issue of FDV, but also in civic engagement more broadly. While women from CALD communities were consulted to inform the design of the ACT Family Safety Hub, it is advised that these discussions remain ongoing and include these women and organisations such as CMWF.

To address gaps in ACT Government services and gather evidence to inform policy development in this area, a CMWF facilitator led focus groups with women from the communities listed in Table 1 below. The facilitators understood the participants' language and cultural backgrounds, therefore enabling access into the focus communities and engagement with women who may not normally participate in consultation processes. The facilitators also worked diligently to ensure the insights shared at the consultations were noted down accurately and reflected in the findings of this Consultation Report.

Key Communities Consulted	Consultation Dates
Arabic Community Consultation	16 November 2017 and 28 October 2017
Chinese Community Consultation	14 March 2018
Spanish Community Consultation	7 April 2018
South East Asian Community Consultation	7 April 2018
South Asian Community Consultation	7 April 2018
Pacific Islander Community Consultation	14 April 2018
African Continent Community Consultation	12 May 2018

TABLE 1: LIST OF COMMUNITY CONSULTATIONS

Methodology

CMWF conducted seven community consultations between November 2017 and May 2018. A CMWF representative was the facilitator for each consultation. Facilitators were trained¹⁴ for the role and consultations were conducted either in the relevant community language or in English. The training received by CMWF representatives comprised of: understanding the role of a facilitator; how to establish trust and openness depending on different cultural contexts; how to navigate the discussion of sensitive subjects and possible conflict; and how to ensure all voices present were heard in a respectful environment.

Consultations had three key aims:

- 1. Undertake a comprehensive examination of the needs of women from CALD backgrounds in the ACT.
- 2. Understand the experiences of women from CALD backgrounds accessing FDV-related and other ACT Government services.
- 3. Develop a best practice methodology for effective and respectful consultation with women from CALD backgrounds¹⁵.

This Consultation aimed to identify the needs of women from CALD backgrounds in order to inform ACT government policy and service design. Special attention was given to the promotion of each consultation to ensure it was reaching women from the focus communities who would not ordinarily engage in consultations. In order to promote the consultations, flyers were developed for each consultation and were translated into relevant community languages. Flyers were professionally translated in the following languages: Arabic, Hindi, Indonesian, Malay, Mandarin, Spanish and Tamil. Efforts were made to translate flyers in Pigeon English and Bislama, however, professional translators were not available in the ACT to undertake this work. If translating flyers or other promotional material for future consultations or events was replicated by the ACT Government (in addition to other strategies mentioned in this Report), it could facilitate an increase in future civic participation of women from CALD backgrounds.

During this process, CMWF also aimed to establish a consultation participant base, which could be engaged (depending on the consent of the participants) to provide further insights to the ACT Government on other matters. Providing women from these CALD communities with the opportunity to share their perspectives in meaningful initiatives and consultations in the future is a key step to increasing the representation of women from CALD backgrounds in policy development and advisory roles.

Table 2 presents the discussion questions asked in the consultation. The discussion notes from each community consultation are presented in the Report under the findings section and summarised and coded according to:

- (i) each community consulted; and
- (ii) the questions asked (including the following six key questions).

 TABLE 2: DISCUSSION QUESTIONS

Key Questions Addressed at the Community Consultations
Question 1: Which ACT Government services do you know about?
Question 2: What ACT Government services do you use (this may include FDV-related
services)?
Question 3: What are your experiences with ACT Government services?
Question 4: What works well?
Question 5: What does not work well?
Question 6: How can the ACT Government improve their services to reach out to people

with cultural/language barriers?

When the above questions were raised at each consultation, at times women shared feedback that directly answered these questions and at other times they provided general insights. In this Report, participant perspectives have been included as they were stated in the consultations to ensure accurate representation and highlight the flow of the discussion. CMWF has decided to include

the unfiltered opinions of women from the CALD communities consulted as it is critical that these women are given a platform to share their feedback about ACT Government services.

However, CMWF is mindful that sometimes when the unapologetic voices of women from CALD communities are shared on different issues, there is a risk that these communities may be further stigmatised or negatively stereotyped. This is not the intention of the Report or the consultation initiative. CMWF requests that all ACT Government employees (policy officers and service providers) as well the broader community carefully and respectfully consider the views of participants shared in this Report and utilise their feedback to facilitate meaningful change.

The consultation's findings, participant insights and suggestions are then explored further in this Report followed by these sections: towards a best practice consultation model; evaluation results for the community consultations and recommendations.

Findings of the Community Consultations

The next section of this Report presents the findings for the consultations with the following communities: Arabic, Spanish, Chinese, African continent, South East Asian, South Asian and Pacific Islander (Findings).

These findings address the seven questions outlined above, which were discussed at each consultation. The following part of the Report provides an overview of each community, in terms of their history in Australia and population size in Canberra. A rationale for the approach taken at each consultation is subsequently outlined. Participant suggestions from each consultation are then presented. This Report concludes with recommendations informed by the consultations.

1. Arabic communities

Overview

There are 22 countries that form the Arab League. Although all 22 countries are Arabic speaking, not all people form these countries identify as being ethnically Arab. Further, these Arabic speaking nations are broken into three distinct dialects: Levantine, North African, and Arabian Gulf. Each dialect has unique cultures and norms particular to their respective region that do not necessarily align. Although Arabic is the common language, the challenge for the community consultation was whether to use classical Arabic (formal) or to speak in a regional dialect acceptable to most attendees. It was agreed that classical Arabic would not be used, as it would detract from the informal nature of the conversation. Arabic communities, in the context of this consultation, includes people who live in the ACT, who identify by geographic origin (country of birth or ancestry) as being Lebanese, Iraqi, Syrian, Jordanian or Egyptian and who speak Arabic as their common language. Of the five source countries for this community consultation, Lebanon is the largest and oldest source country of migrants who identify as being members of Arabic communities in Australia and in the ACT¹⁶. This is followed by Iraq, Egypt, Syria and, lastly, Jordan. There were also participants from Tunisia and Iraq, via a third country, where asylum was provided¹⁷.

The first influx of Lebanese migration to Australia coincided with the first migration of Syrians from around 1880 to about 1920¹⁸. Lebanese were classified as Syrian immigrants¹⁹ or were classified as 'Turks' by the Australian colonial governments, because the Ottoman Empire ruled what is now Lebanon and Syrian. From the 1940s Lebanese migration has peaked in various years. These peaks coincide with changes to Australian migration policies, which resulted in influxes of Lebanese economic and family migrants, as well as conflicts, such as the 1967 Arab-Israeli War and 1975-1990 Civil War in Lebanon²⁰. Similarly, Syrian migration has been a steady flow of migration from Syria, mainly family migrants and humanitarian refugees since 2011 when war began in Syria.

The Iraqi-born population was first recorded separately in the census in 1976. The population of Iraqi migrants in Australia includes Kurds, Assyrians, Armenians, Turks, Turkmen and Jews²².

Iraqi immigration to Australia increased from 1992 to 1995, first driven by the Gulf War of 1991 and then by changes to Australian migration policy, which increased the number of places for Middle Eastern refugees²³.

Egyptian migration to Australia goes back as early as 1871²⁴. The population of Egyptian migrants remained very small until there were significant increases in the 1940s and 1950s, driven by the turmoil of the Arab nationalist movement in Egypt and the Suez Crisis²⁵. Another increase occurred in the 1970s and 1980s, as either skilled or family migration²⁶. Jordanians are a relatively new migrant group to Australia, with a small, but steady influx over the last 20 years, as skilled migrants moving to Australia with their families²⁷. Figure 1, below, shows that the population of people who live in the ACT that were born in Lebanon, Iraq, Syria, Jordan and Egypt, is at 1314²⁸. However, Arabic speaking communities are larger than those who are born in the Middle East and includes second and third generation migrants and those born in transit countries. Those who speak Arabic at home are estimated to be the seventh largest non-English speaking community in the ACT, with a population of 3245²⁹.

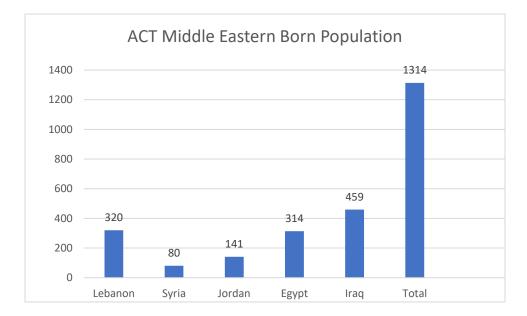


FIGURE 1: MIDDLE EAST BORN POPULATION OF THE ACT. SOURCE: ABS 2016

Rationale

It was agreed that either the dialect from the Levantine region and/or Egypt would be spoken for the community consultation, as both regions have significant influence in the Middle East, through their role in the arts, movies and music. Most attendees would have watched movies and listened to music from that region. Of the Arabic speakers, the Lebanese and Egyptians form the majority of Arabic speaking communities in the ACT. Furthermore, migrants from Lebanon come from multi-generational families from previous waves of migration to Australia, dating back over a hundred years.

Consideration was also given to reaching women from all religious backgrounds within ACT Arabic communities. Although there are different religious practices in the Arab world, this pilot trialled a combined group outreach approach, drawing upon the harmony that exists in Arabic communities in the ACT³⁰. It was important that the event be timed sensitively so as not to be held during important Islamic celebrations, such as Ramadan, or Christian events such as Easter. CMWF is well connected with members of the Arabic community and were aware of influential and respected people who are known to most Arabic speaking women in the ACT. Due to connections with isolated women, CMWF is able to bring women of all backgrounds and faiths to events such as the consultation. Consideration was also given to leaders of faith communities, as these are individuals who are on religiously affiliated boards, organisations and forums. These individuals may hold various office bearer positions such as secretary or president of these groups and they have access to their communities through email databases, social media and, very importantly, faith events. It is important to be aware of who the respected faith leaders in the community are and how to approach them. Other key individuals and communities invited to participate in the event included the following:

- Well-respected community elders;
- Heads of community cultural groups; and
- Embassy connections.

It was important that the people who approached members in the community were trusted and well known to spread the message via many channels, including word of mouth, social media, WhatsApp, text messaging or phone calls. It was important to be aware that older community members rely on oral and telephone communication to know about events and not social media. CMWF identified one key person who is known and respected amongst all Arabic speaking women, including across faith groups. This person has insight into the community and a unique profile, as she was raised in an inter-religious family.

Consultation results

During the Consultation, the facilitators provided an overview of the event, explained the purpose of the Consultation and then asked participants the following questions:

Question 1: Which ACT Government services do you know about?

There was a general lack of awareness of ACT Government services. However, the services referred to most in the consultations were: midwifery; health; education; and training. This is shown in the feedback below relating to Question 3 on their experiences with ACT Government services.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

There was a general lack of awareness of available services in this area. Further a strong social stigma around FDV was noted in the discussions. The following observations were made:

- There is a limited knowledge of FDV services;
- Men tend to talk to each other about relationships and won't go to counselling;
- In the house when there is FDV, there needs to be a way to let people know what goes on behind closed doors;
- Statistics say it is mostly men who commit violence against women;
- Where should women go if there is a problem? There is a lack of awareness in this area and links with other problems, such as visa status and access to housing;
- When women hide the issue of FDV, the problem gets bigger and there is a need to get community support to openly address this issue;
- One challenge is getting information to women who are isolated with violent partners;
- One barrier to accessing FDV services is the perception that services ask women to leave their husbands, rather than provide interventions with the husband. There is a social sanction against the breakdown of the family³¹;

- Men from CALD backgrounds need to work with other men on community-based prevention education and intervention;
- These men could approach FDV with other men through different more subtle approaches;
- Women may not go outside the community for help and they won't contact a helpline phone number. There needs to be a way for women to leave an unsafe marriage as when they are scared to talk, they stay in a violent situation, and the community needs to intervene at this point;
- Education needed about FDV is a top down approach;
- Imams, as respected faith leaders, need to preach in their sermons about positive relationships and help inform the community about FDV;
- Religious leaders, including Imams and Priests, need to have qualifications to give advice and should recommend that community members seek professional help regarding FDV;
- There needs to be training to help women be assertive, but be aware that there is cultural sensitivity about women being seen as a 'home wrecker';
- Some husbands think that hitting women keeps them in line, it won't lead to murder, and this isn't FDV;
- The biggest issue in new migrant communities is that a "problem with a husband" can become an item of gossip throughout the community, so people tend to keep quiet; and
- There is too much domestic violence in the community and there is a need to take it out of the household from behind closed doors.

Question 3: What are your experiences with ACT Government services?

- Midwifery services: There is generally not enough healthcare workers in the hospital who speak Arabic;
- Women give birth both in office hours, out of office hours, and late in the night, so providing translators and interpreters is difficult;
- Hospitals tend not to use the TIS interpreters, and sometimes use unofficial translators to do this work. This can pose legal problems to the hospital;
- There is a need for cultural awareness training;
- There is only one Arabic speaking midwife in Canberra;
- Two midwives from Somalia and Lebanon/Egypt work with FGC issues; and

• There is a need to understand some of the disorders Middle Eastern women have in pregnancies, such as Thalassaemia Minor, which hospitals do not know enough about.

The gap for women is in health matters and where to access services

- Australia's health care system is different to other countries, for example a vitamin compound is used instead of a Vitamin D injection. The ACT Government Heath Directorate is unclear on where to access these services;
- One participant lost her baby at an ACT hospital and felt they pushed her to go through the process of labour. She referred to the experience as 'obstetric violence';
- 'Informed consent' may be a new experience for migrants in a litigious system;
- There are cases where the lack of interpreters has led to malpractice and it is a difficult system legally if something goes wrong at the hospital; and
- Midwifery isn't being practiced properly because it is underfunded; and services have become worse with one doctor covering the whole hospital at night a risk.

Racism in the health care system is a big issue. Cultural competency in the health system is very important. Racism can be overt and covert as well as direct and indirect³².

- For example, a woman with heritage from the African continent who has had a baby in room A describes a white nurse who assumes that the midwife from a Somali background should service the patient;
- The white nurse is more caring to white patients and abrupt with CALD clients;
- There is institutional racism in the health system and better cultural competency is needed;
- Stereotyping of 'ethnic' midwives as being only for the 'ethnic' patients;
- Problems with racism both paper based and face-to-face are sometimes experienced with older nurses in the health care system;
- Terrible racism towards patients wearing hijabs by nurses and making poor taste jokes;
- A pharmacist who wears a head scarf says she is assumed to be less knowledgeable and must do twice as much to be recognised; and
- Racism hurts, words hurt.

Education and training:

- The main issues raised in this part of the discussion focused on the recognition of qualifications and the restrictions caused by the IELTS (International English Language Test System) scores;
- Bridging services are needed to have qualifications recognised;
- Assistance is needed to find a job and be re-trained; and
- A key community contact is needed who can help direct new people.

Questions 4 / 5: What works well and what does not work well?

- Government websites for skills and qualifications are not easy to understand;
- Understanding rights and where you can access services, especially when you first arrive is very difficult; and
- General practitioners (GPs) are too expensive. A \$90 consultation fee is too high and bulk billing is limited. How can new immigrants afford to go to the doctor? They charge more for every question asked.

Question 6: How can the ACT Government improve their services to reach out to people with cultural/language barriers?

- Make websites easier to understand for people from CALD backgrounds, such as GP lists;
- Use more medical interpreters in hospitals;
- Provide bridging services for getting qualifications recognised; and
- There needs to be information about bulk billing and where to go for newly arrived migrants.

Participant Suggestions

- 1. Provide cultural awareness training at hospitals to address the lack of cultural competency and institutional racism;
- 2. Establish a phone line to assist those who are unsure about navigating the health care system;
- 3. Fund medical interpreters who are trained and paid by the hospital and are fully accredited;
- 4. Fund a 'go to' person for each community who is trained by the government;
- 5. Men need to work with other men in order to prevent and intervene in FDV; and
- 6. Holding high tea events for Arabic speaking women as a possible engagement strategy.

2 Spanish communities

Overview

Spanish communities, in the context of this study, includes people that reside in the ACT, who identify by geographic origin (country of birth or ancestry) as Spanish, Chilean, Argentinian, Mexican and Peruvian, and are united by Spanish as their common language. Mexicans are a relatively new and very small migrant group in Australia³³. All of the other source countries making up Spanish communities in this consultation have lived in Australia in very small numbers since the 1800s³⁴. The mid 1900s saw a marginal increase in Spanish immigration during the 1936-1939 Spanish War³⁵. A more significant increase began in the 1950s and 1960s, following migration agreements between the Spanish and Australian Governments³⁶. These agreements provided assisted migration to Spanish immigrants escaping poor living standards. Immigration to Australia from Chile and Argentina peaked during the 1970s due to declining economies, living standards and political conflict, such as the 1973 Military Coup in Chile and 1976-1983 Dirty War in Argentina³⁷. While there has been a very small Peruvian presence in Australia since the 1800s³⁸, migration flow has remained small and steady like Mexican migration. Figure 2 shows the approximate population born in Latin America and Spain in the ACT, making a total of 1484 people. However, Spanish speaking communities are larger, if the number of those who speak Spanish at home, including those from El Salvador and Venezuela, are considered. Based on the 2016 ABS Population and Housing survey, 3273 people speak Spanish at home, making Spanish speaking communities the fifth largest in the ACT.³⁹

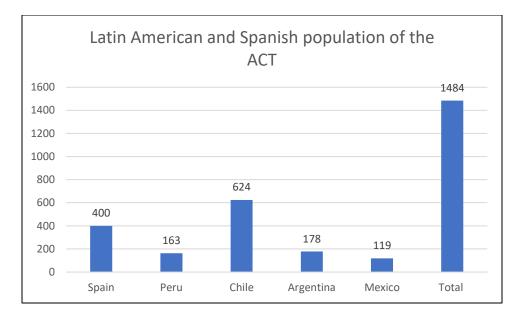


FIGURE 2: POPULATION BORN IN SPAIN AND LATIN AMERICA IN THE ACT. SOURCE ABS 2016

Rationale

The Consultation met with members of the Spanish speaking community to develop best practice in understanding the needs of women in their community, particularly in relation to FDV services and other ACT Government services including health; law; and educational services.

CMWF aimed to reach out to women who generally do not participate in community events and activities in their respective communities. The consultation discussed the community's understanding and knowledge of key ACT Government services. It was explained that similar consultations were conducted with other women's groups in the ACT and information collected will be reported to the ACT Government to better design and communicate with CALD communities and improve the delivery of services in the future.

The consultation included participants from different Spanish speaking countries from four regions: South America, Central America, North America, and Spain. The community consultation also included women from a range of ages, backgrounds, professions, levels of education, marital statuses, and those who had children and those who did not. The venue was a central location in Canberra, which was easy to access, had free parking, and transport links. An informal space at Northside Community Service was selected, because of cultural functions previously held at the

venue. The kitchenette had an advantage for catering purposes and there was a good size room with amenities.

The following points relate to the organisation, promotion and catering for the event:

- Catering included Latino food to bring people together;
- As a bonus, participants could take a plate home;
- Something sweet was essential, a cake with a message in Spanish was served and was a hit in the community;
- Promotion was by email invitation in Spanish and English, which ensured the message would be clearly understood;
- A direct approach to communication is relevant for the Spanish speaking community and is a point of difference compared to the more indirect communication style in English;
- A map was included with details for parking, which the Latin community appreciates; and
- Communication was via Facebook, Messenger and WhatsApp and reminders were also posted.

The facilitator was available and contactable on the day, which was useful as some participants contacted her to advise they were late or asked for directions. The session was held in Spanish and this is attracted most participants to attend.

Participants were forthcoming in their input, genuinely interested in the topic, and had a lot to contribute. Participants shared experiences in relation to: housing; health; interpretation services; and how to provide information in other languages.

Approximately twenty women were invited and fifteen attended. There were some who could not speak English, which turned out well as the session was in Spanish. The Spanish language used was a mix of formal and simple Spanish to cater for the participants, as relying on the colloquial language of the facilitator would not have been suitable. To be inclusive of those with caring responsibilities, the event was held on a weekend during the day. However, this was a challenge in terms of attendance. Future timings could be reviewed.

Some participants had a mixture of cultural backgrounds but identified with the Latin community and culture. There was a significant difference of opinion between those who had been in Australia for a long time, as opposed to more recent arrivals in how they perceived barriers and access to services.

Consultation

The consultation addressed six key questions, regarding ACT Government services and their experiences with FDV-related services.

Question 1: Which ACT Government services do you know about?

There was a general lack of awareness of government services and finding information about services is difficult. Community members made the following points:

- They look for information on Google about services, including for FDV;
- Many do not know where to look as there are too many websites;
- Not everyone has access to the internet and unfortunately all services are online now;
- Contact by phone is a barrier, especially for the older population, and face to face assistance should still be available;
- Language is a key barrier to accessing services;
- The Spanish speaking population could increase their English language skills in the medium term to better access services;
- Additional challenges to learning English exist for people who are illiterate, older, or have a disability;
- When they see a doctor or a lawyer it was noted they need an interpreter, because the terminologies are complicated to understand; and
- They want to learn English at a functional level.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

To promote respectful relationships, all pre-settlement migration packages should mention FDV is unacceptable in Australia (rather than only spousal visas). The information must be provided in different languages.

The following suggestions were made to improve the communication of information in this area:

• Put information on sites like Centrelink as well as other Government organisations that liaise with new migrants;

- Provide information on forms that FDV takes as some people think FDV is just physical and emotional but there is also financial abuse;
- Use libraries to distribute information on FDV (and other topics) as well as community boards in the shopping centres, at the GP, in schools (community hubs), Centrelink, and Medicare;
- Train interpreters in FDV, as someone experiencing FDV can be nervous. If they talk to an interpreter who does not understand him/her, it will be worse, and if it is by telephone it will be difficult for someone to open up because these are very sensitive issues;
- Publish information in the community newsletters;
- Psychologists and counsellors should support the family not just the person in trouble;
- Replicate the Legal Aid brochure about responsibilities and rights for young people on issues of violence and abuse, which is published in several languages; and
- Recognise that religion is sometimes an obstacle to disseminating information about sexual abuse.

Question 3: What are your experiences with ACT government services?

The key barrier to accessing services was the use of interpreters. The following points were made:

- Children or friends act as interpreters because some adults do not understand or understand very little, especially in relation to medical issues;
- Centrelink often does not provide information in another language and they don't always offer an interpreter;
- Phone interpreters can take hours and up to days;
- Sometimes a doctor does not understand the interpreter over the phone;
- Communication is a right for all and so it should be considered;
- You cannot accompany someone to the services and interpret as it is not legal;
- If people do not understand the interpreter or the doctor, for example if they are older, they get confused and stop talking;
- Community help at the time of translation should be made official;
- Friends/family who work for government cannot help with interpreting;
- ACT Health should restore face-to-face interpreting services because telephone interpreting does not always work even though it is frequently used; and

• There are benefits to phone interpreting though as it allows for degree of anonymity, which a person experiencing FDV may prefer. The importance is that there should be a choice.

Questions 4 / 5: What works well and what does not work well?

- There must be a government effort to make sure that newly arrived people have access to studying functional English;
- People should give official feedback about interpreters that do not do a proper job;
- Doctors may have limited time to attend to patients however, they must have compassion and patience in dealing with people from all backgrounds;
- In schools, psychologists or counsellors see students with family issues but there is no information for the broader community on how to address these issues. Education about FDV should be part of the school curriculum to cut the cycle;
- Immigration companies should organise meetings pre-settlement about life in Australia with information about FDV as a key feature; and
- Not allowing parents to bring in babies to walk in clinics is difficult as they are then referred to the Emergency Department and made to wait hours.

Question 6: How can the ACT Government improve their services to reach out to people with cultural/language barriers?

There is a need to understand the dynamics of the Spanish community and that they are not a single group with a strong voice. Gathering Latinas is complicated because they do not always want to attend such events. Suggestions to overcome this barrier include:

- Create a Latin American group to receive new Latino migrants and assist their integration into the community; and
- Provide written material so if new migrants do not understand they can go home and ask someone to translate or use Google translate.

Participant Suggestions

- 1. Provide access to English language classes and increase the use of official translators and faceto-face interpreters, particularly in the health sector;
- 2. Use libraries to distribute information on FDV and school counsellors to engage the whole family on FDV issues;

- 3. Provide written material to those with limited English language skills so that they can seek translation from a family member or use Google translate; and
- 4. Support the creation of a Latin American group that can receive, assist and integrate new arrivals.

3 Chinese communities

Overview

Chinese communities, in the context of this consultation, include people who reside in the ACT, who identify by geographic origin (country of birth or ancestry) as being Chinese. Two main languages are spoken in this community: Mandarin and Cantonese. The first wave of Chinese migration to Australia began in the late 19th Century and was driven by civil disorder, famine and floods in Southern China, as well as the economic prospects arising from the discovery of gold ⁴⁰. By 1861, Chinese-born migrants made up Australia's second largest migrant population⁴¹, establishing themselves as grocers, farm-hands, import-export businessman and in other occupations⁴². From the 1850s to the 1970s Chinese migration was restricted by various Government policies, such as the 1901 Immigration Restriction Act or 'White Australia Policy' and a dictation test, which prohibited the migration of non-Europeans⁴³.

In the 1960s and 1970s immigration restrictions were relaxed and diplomatic relations established with the Republic of China, which led to an increase in Chinese immigration⁴⁴. By the 1980s Chinese immigration rapidly increased with political turmoil in China and active marketing of educational services and opportunities by the Australian Government⁴⁵.

Today Chinese communities make up one of the largest migration groups in Australia⁴⁶. The total Chinese born population in the ACT is 10,162 people (although this does not include those of Chinese origin who might have been born in Indonesia, Malaysia, Singapore or Taiwan or the second generation). As shown in Figure 3, Mandarin speakers comprise the majority of the population at 9100 people while Cantonese speakers are approximately 1062 people. However, the total population born in China who reside in the ACT in 2016 was 11,351 people and the total number of those who speak Mandarin at home in the ACT in 2016 was 12,408 people⁴⁷ (the language spoken at home statistics are always larger than the country of birth statistics, as Mandarin speakers are also born in countries other than China).

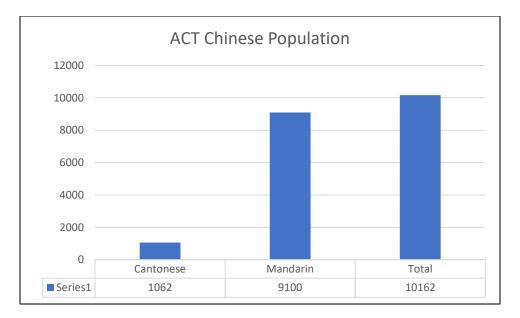


FIGURE 3: CHINESE BORN POPULATION OF THE ACT, EXCLUDING TAIWAN. ABS 2016

Rationale

The rationale for the community consultation was to understand the needs of members of the Chinese speaking community in the ACT and their experiences accessing FDV-related services and other ACT Government services. CMWF conducted the community consultation and fifteen community members participated. The community consultation's scope was broadened to also consider participants' experiences of, and barriers to, accessing a range of ACT Government services, and how communication with women from CALD backgrounds in the ACT can be improved. The discussion focused on the following services: FDV; child and family services; women's services; Centrelink; health and immigration.

Consultation

The following points were raised during the consultation.

Question 1: Which ACT Government services do you know about?

- There was a lack of awareness of FDV services and no clear understanding of how to access these services;
- There is a need to better communicate with the Chinese community about FDV services;

- Child and family services were mentioned, and it is common for grandparents to live with children and assist with raising young children. However, awareness of services for young families was limited as well as for elders; and
- There is no single Chinese women's organisation to communicate their needs.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

- There is a gap in knowledge of ACT Government FDV-related services;
- There is a lack of understanding and knowledge of the many services available to support women facing hardship, including those experiencing FDV, relationship problems, and financial difficulties;
- English literacy is a key barrier, which prevents Chinese women from engaging with ACT government services; and
- FDV is a sensitive topic. Culture and privacy issues make some members of the Chinese community reluctant to seek help or report FDV.

Question 3: What are your experiences with ACT Government services?

A number of government services were mentioned as being particularly difficult to access for Chinese women, in particular the following services:

- **Centrelink:** Has a poor attitude to individuals seeking information, such as providing translation services. There is limited explanation of how to access services, such as Health Cards, Pension Cards, and unemployment benefits. Community members often have difficulty completing forms.
- **Health Services:** Hospitals need to assist more and provide letters to clients regarding appointments. All signs at the hospital are in English, and no multilingual signage is provided in emergency and walk in clinics.
- **Translation Services:** Bilingual brochures, signage, and service staff are needed across government services, as staff who are not official interpreters are not allowed to translate even if they speak Mandarin.

Questions 4 / 5: What works well and what does not work well?

- Legal Aid: Is not helpful and often requires payment for services, which newly arrived migrants often find difficult to pay; and
- Immigration: The Chinese community experience problems with visa status issues, especially family visas, family reunion and require better information on temporary and permanent visas.

Question 6: How can the ACT Government improve their services to reach out to people with cultural/language barriers?

- Improve access to Chinese language medical staff in the health sector;
- Improve access to interpreters and translators across services including health; women's services; Centrelink and legal services;
- Ensure interpreters are trained with cultural knowledge of the communities they work with;
- Establish a day per month when translation services are available for different language groups;
- Chinese women would like a platform to support women's rights and to assist them develop greater financial independence through finding paid work;
- Further English language training still needed in their community; and
- Women's small business training to improve financial independence is needed.

Participant Suggestions

- 1. Explain FDV services to Chinese communities in the ACT;
- 2. Re-establish and fund a Chinese women's organisation;
- 3. Provide a multilingual app for accessing ACT Government services;
- 4. Provide picture based signage at hospitals to improve understanding, as the signs are currently in English;
- 5. Develop bilingual brochures for services in Mandarin and English;
- 6. Improve access to interpreters at government shop fronts, especially in health; and
- 7. Provide further opportunities for English language training for women.

4 African continent communities

Overview

The communities from the African continent, in the context of this consultation, include people in the ACT, who identify by geographic origin (country of birth or ancestry) as being Sudanese, Kenyan, Nigerian, and South African, with the African continent being their (at times) common geographic, linguistic and cultural origin.

Multiple languages are spoken in this community including Swahili, Amharic, Yoruba and Dinka. South Africa is the oldest source country of migrants from the African continent in Australia. Trade links between South Africa and Australia have existed since colonisation⁴⁸. The discovery of gold in Australia in the late 1800s drew British and European settlers from South Africa⁴⁹. Since then there has been a steady flow of South-African born people arriving in Australia, with peaks occurring in the 1960s driven by political tension and then again post-apartheid⁵⁰.

More recently, other source countries have contributed to the African continent community. The easing of restrictions on non-European migration, in combination with political and civil conflict in West Africa, resulted in the settlement of migrants from Nigeria, under the Special Commonwealth African Assistance Plan⁵¹. The number of Nigerian born people in Australia has remained very small since⁵². Similarly, the number of Kenyan born people in Australia has been very small, steadily increasing from 1 in 1901 to almost 3,000 in 2011⁵³.

People from Sudan are the most recent to arrive in Australia from the African continent, with numbers increasing significantly from the 1990s onwards. Most Sudanese resettling in Australia arrive as refugees, escaping war, famine and drought, which has affected Sudan since its independence in 1956⁵⁴.

According to the ABS, see Figure 4, the African continent born population of the ACT is 3166 people. In addition to English, the three main African continent languages spoken in the ACT are Dinka, Yoruba, and Swahili, see Figure 5.

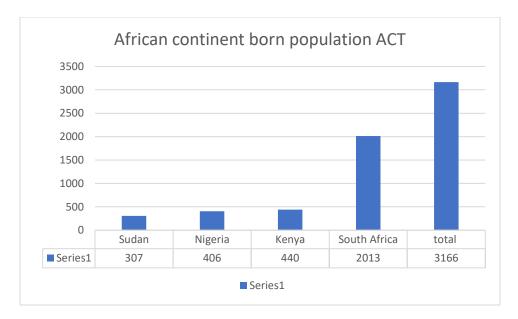


FIGURE 4: AFRICAN CONTINENT BORN POPULATION IN THE ACT. SOURCE ABS 2016.

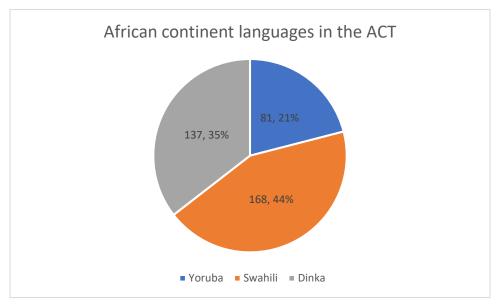


FIGURE 5: AFRICAN CONTINENT LANGUAGES SPOKEN IN THE ACT. SOURCE ABS 2016

Rationale

The aim of the consultation was to understand the experiences of women from African continent communities in relation to accessing ACT Government services, particularly FDV-related services. Given the immense diversity within African continent communities and the number of languages spoken, the consultation was not able to consult with women from all of these language communities living in Canberra. Instead this consultation was represented mostly by women from

East African communities (Kenya, Uganda and Zimbabwe). It is worth noting that some women with North-African heritage attended the Arabic communities consultation, which highlights the intersections between different language and cultural communities living in Canberra.

Consultation

The discussion addressed six broad questions.

Question 1: Which ACT Government services do you know about?

Women employed in the public service or who grew up in Australia have a better understanding of government services than those who have newly arrived. The issues identified are as follows:

- Unemployment is a problem as well as accessing tertiary education;
- Income is important and this depends on the visa you arrive on (student, spouse, humanitarian).
 Many people cannot access government services due to limitations on their visa;
- A primary focus is building a new life and finding a job in Australia;
- International students can only work twenty hours a week; and
- International students are not covered by health care and must take out private insurance.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

- Culturally appropriate services are needed for FDV services;
- Women sometimes rely on their husband for information, which is a barrier;
- It is best if men pass on information to other men about FDV, for example through activities such as sport, e.g. soccer games;
- Provide support for women's empowerment and help them to understand FDV; and
- Visa status has a huge impact on the information you are aware of regarding government services.

Question 3: What are your experiences with ACT Government services?

- GPs play a huge role in informing people about government services; and
- It is important to work with community leaders to better inform the community.

Questions 4 / 5: What works well and what does not work well?

- Language, culture and the perception of women's employment are all barriers;
- There is limited knowledge of services available to develop your CV and this can cause problems in finding a job;
- Further community consultations and workshops are needed for communities from Ghana and Sierra Leone, which are large communities in the ACT;
- Let the communities determine the date and time for an event;
- Telling people about the objective for an event is important, as people need to feel that the event is seeking their specific voice and engaging communities in event marketing; and
- An untapped group are those people who are now Australian citizens, who could mentor those who have newly arrived in Australia.

Question 6: How can the government improve their services to reach out to people with cultural/language barriers?

- Provide support to youth from East African backgrounds. They feel isolated and this could lead to the Victorian situation;
- Discrimination and stereotyping is having an impact;
- Support women's empowerment through increased funding to local community groups;
- Need for a collective voice for those with heritage from the African continent;
- Culturally appropriate training for services is required to diminish bias;
- Increase representation of CALD members at the government level and in community services;
- Review government inclusion policies and make reports more widely disseminated;
- Allow communities to drive and own their own events; and
- Provide more women's events, which are family friendly with someone to look after children onsite. Cultural exchanges may be a good way to engage the community.

Participant Suggestions

- 1. Consult with women from West African backgrounds living in Canberra;
- 2. Since the youth from East African backgrounds feel alienated, a youth focused engagement strategy should be co-designed;

- 3. Develop culturally sensitive engagement strategies for communities with heritage from the African continent;
- 4. Ensure men inform other men about positive relationships and issues related to FDV; and
- 5. Provide work training and educational opportunities.

5 South East Asian communities

Overview

South East Asian communities, in the context of this consultation, included people in the ACT, who identify by geographic origin or ancestry, as being Indonesian, Vietnamese, Malaysian or Filipino from the South East Asian region. Multiple languages are spoken in these communities, including: Bahasa Indonesian; Vietnamese; Malaysian; and Tagalog. With the exception of Vietnam, migrants from each source country making up South East Asian communities have been present in Australia since the mid 19th Century⁵⁵.

Migration flows from Indonesia, Malaysia, and the Philippines were curbed during the early 20th Century, with the implementation of the 1901 Immigration Restriction Act or 'White Australia Policy'⁵⁶. World War II saw small increases in migration populations from these three source countries caused by the Japanese occupation of South East Asia⁵⁷.

The Colombo Plan was a key initiative in driving migration flows from South East Asia, since its implementation in Australia in 1951⁵⁸. This initiative, designed to boost Asian economic and social development, has allowed Australian residence to students from South East Asian countries and continues to mediate migration flows from these countries today⁵⁹.

In the 1970s there was an increase in migrant populations from all of the South East Asian countries. After the Vietnam War around 49,000 Vietnamese refugees were resettled in Australia by 1981⁶⁰. The 1980s saw the biggest increase in immigration from Malaysia, Vietnam and the Philippines, under the family reunion program⁶¹.

Today, the Philippines is the fastest growing migration group from South East Asia⁶². Figure 6 shows that the total South East Asian born population in the ACT is 5664 people, with the Vietnamese being the largest group, followed by Philippines, Indonesians, and Malaysians.

However, the number who speak South East Asian languages at home is larger, with the 2016 census showing Vietnamese was spoken by 4216 at home in the ACT, followed by Indonesian with 1325 people and Tagalog with 2992 people⁶³. This consultation particularly focused on women from Indonesia and Malaysia, which consists of approximately 250-500 families.

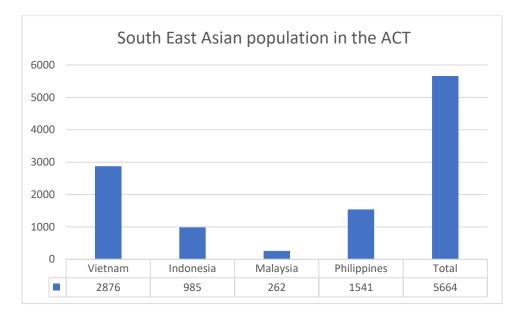


FIGURE 6: SOUTH EAST ASIAN BORN POPULATION IN THE ACT. SOURCE ABS 2016.

Rationale

The aim of the community consultation was to understand the experiences of women from South East Asian backgrounds as well as gauge their understanding of ACT Government services. The format of the event, led by a facilitator from CMWF, aimed to build a safe environment where participants felt comfortable sharing their feedback.

Consultation

In order to invite women to this consultation, key female leaders from these communities and large organisations in the ACT were contacted via email and social media. This proved to be an effective way of securing strong attendance from these communities especially on a weekend morning. The consultation was held in a community meeting room located in Canberra city centre, which was noted as convenient for many participants.

The key issue identified at the consultation was the relationship between religion and culture, which at times can create barriers in both accessing services and receiving culturally appropriate care. There is also a cultural norm that one should agree with authority or be honest about their experiences. People found it difficult to openly voice their concerns (outside this consultation setting) regarding barriers in accessing services.

Since the majority of the consultation participants were from Indonesian backgrounds, Indonesian food was provided by well-known Indonesian food caterer in the ACT and this was positively received by all participants. Many of the attendees noted they felt respected by CMWF's catering efforts, as when they have attended other consultations the food does not always meet their dietary requirements or tastes.

Question 1: Which ACT Government services do you know about?

The key services discussed were:

- Aged Care;
- English as a Second Language education;
- Hospitals;
- Multicultural community services;
- Legal Aid; and
- FDV-related services.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

- There is a general lack of awareness of FDV-related services and low English language competency is a key barrier to accessing these services;
- Participants were not aware of the 1800RESPECT telephone and online service;
- Communities do not utilise all of the services as navigating the system is challenging; and
- A specialised women's clinic is needed for health matters.

Question 3: What are your experiences with ACT Government services?

- Aged care is an issue, with problems of mistreatment a concern. Some elders in the community want to revert to their mother tongue in older age which means their ELP (English language proficiency) reduces over time;
- Islamophobia is a common experience for women who wear headscarves in the ACT, they have engaged with the Chief of Police on this matter; and
- Helping migrants settle in Canberra is an important issue.

Questions 4 / 5: What works well and what does not work well?

- Meaningful action to follow up this consultation and further grants from the government;
- Culturally appropriate childcare is another gap in service provision. Anglicare is a good example of a provider which offers halal food options in its care facilities;
- Translating and Interpreting services (TIS) is a major area of concern; and
- Some interpreters are not trained in cultural awareness which poses problems with some clients from CALD backgrounds; and
- Websites are difficult to navigate and service phone lines are not attended 24/7.

Question 6: How can the government improve their services to reach out to people with cultural/language barriers?

- Provide multi-faith prayer rooms (cordoned off from inside and outside);
- Establish a culturally appropriate women's clinic for health matters and women's services;
- Train culturally competent social and health workers who respect sensitivities on FDV;
- Fund support people who work to assist members of CALD communities navigate the ACT service sector;
- Ensure Police understand that women may not want to share private experiences with them;
- Whenever Police are called to FDV incident ensure there are male and female officers;
- Improve representation of people from diverse backgrounds in Police so officers can apply their knowledge about ways of working with certain communities to their work;
- Ensure interpreters are trained appropriately so that they can compassionately help victims;
- The ACT Government should maintain a list of community leaders to engage with; and
- Legal Aid is difficult to access and understand, so providing multilingual information is essential.

Participant Suggestions

- 1. Provide multilingual information through government websites such as Access Canberra;
- 2. Include 1800RESPECT details in email follow up to consultation participants;
- 3. Engage with the Indonesian Family Association due to their strong community links;
- 4. Improve cultural competency of FDV-related services;
- 5. Make multi-faith prayer rooms available at hospitals and other government services;

- 6. Develop a specialised centre and health service for women from CALD backgrounds;
- 7. Consider providing culturally appropriate, government funded town house communities rather than retirement villages for the elderly; and
- 8. More collaboration between multicultural communities in the ACT is needed. Shared events provide a better way to understand each other's cultures.

6 South Asian communities

Overview

South Asian communities, in the context of this consultation, includes people in the ACT, who identify by geographic origin (country of birth or ancestry) as Bangladeshi, Sri Lankan, Indian or Pakistani, united by the South Asian region as their common cultural origin. Multiple languages are spoken in these communities including Urdu, Sinhalese, Hindi and Bangla. With the exception of Bangladesh⁶⁴, all of the source countries that make up South Asian communities have had a presence in Australia since the 1800s⁶⁵.

Until the 1960s migration flows from these countries were not large. There were some small peaks in migration when India, Pakistan and Sri Lanka gained independence in the late 1940s, pushing out Indian-born British citizens from India and Tamils and Burghers from Sri Lanka⁶⁶. The Immigration Restriction Act curbed any migration from non-Europeans from these countries until it was lifted following WWII.

From the 1960s to the 1980s migration of non-Europeans from India, Bangladesh, Sri Lanka and Pakistan increased with the arrival of skilled professionals⁶⁷. A number of asylum seekers from Sri Lanka also entered Australia from the 1980s to early 2000s, driven by the civil war between Tamil separatists and the Sri Lankan government⁶⁸.

Today the vast majority of migrants in Australia from South Asia are skilled professionals⁶⁹. The total ACT population born in these four South Asian countries is 7228, with those born in India comprising the majority, see Figure 7. Hindi is one of the top ten languages other than English spoken in the ACT and one of the fast growing, with 3,646 people speaking the language at home in 2016⁷⁰.

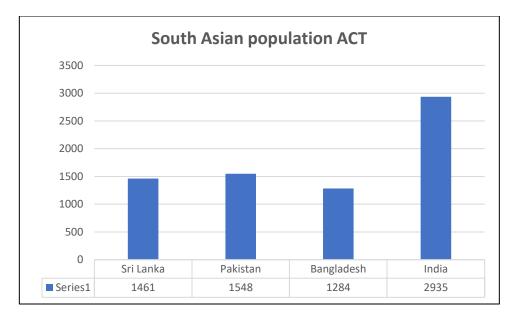


FIGURE 7: SOUTH ASIAN BORN POPULATION OF THE ACT. SOURCE ABS 2016

Rationale

South Asian communities included in this consultation were Sri Lankan, Pakistani, and Bangladeshi. The majority of the consultation participants were from Sri Lankan communities. Sri Lanka has various languages, religions, and cultures and the intersection between them creates unique groups of individuals with different cultural/religious practices and norms. It is important to know that language and religion do not necessarily correlate, so targeting a language group does not necessarily align with targeting a religious group. For example, in Australia, the main languages spoken by Sri Lankan people include Singhalese, Tamil and English while the religions practiced across these language groups include Christianity, Hinduism, Buddhism and Islam.

Although Singhalese and Tamil are the national languages, a lot of women who have gone to school in larger cities speak English as it is very common to go to an English-speaking school or university, or to work in English.

Although religious groups worship separately, currently in Canberra, they do hold events together, such as Sri Lankan Independence Day celebrations. Aside from political views, in some instances, there is no religion that dominates Sri Lankan identity, as Sri Lankans have practiced religious co-habitation and co-celebration for centuries (i.e. in Sri Lanka the nation celebrates all major religious holidays/festivals as national holidays).

Consultation

It is important to note nuances when communicating with South Asian communities. For example, Bangladesh is a Muslim majority country with a majority of people speaking Bangla. However, there are smaller populations of Christians, Hindus and Buddhists within the country group. Like Sri Lanka, English is used as a language for education and work in the city, so many Bangladeshi women speak English, if they have gone to university or worked in larger cities.

Moreover, Pakistan is a Muslim majority country and, like Bangladesh, has smaller populations of Christians, Hindus and Buddhists. There are a wide range of languages and dialects spoken among the Pakistani population. Urdu is the nationally recognised language and English is used in education and larger cities. Most Pakistani people associate their national identity and Muslim faith together, due to the history of how the country originated.

For the community consultation, it was agreed that English would be the language spoken, as it is the lingua franca amongst South Asian communities. Cultural and religious sensitivity should be applied when deciding when to connect with South Asian communities. This means being aware of major celebrations or days of significance for the respective religions including the Buddhist, Hindu and Islamic calendars. These include:

Sri Lankan communities

• Buddhist and Hindu New Year festival, Christmas, Easter, Muslim Eid Festivals, Ramadan, Sri Lankan Independence Day, Thai Pongal, and Maha Shivaratri.

Bangladeshi communities

• Bengali New Year, Independence Day, Christmas, Easter, Muslim Eid Festivals, and Ramadan.

Pakistani communities

• Pakistani Independence Day, Christmas, Easter, Muslim Eid Festivals, and Ramadan.

Social media, rather than email, is an effective mode of communication with South Asian communities in the ACT, and popular platforms include WhatsApp, Viber, and Facebook Messenger. Therefore, it is important to connect with a member of the community who can reach out to social groups through means other than email. Embassies are also a good contact point.

CMWF representatives reached out to their known strong contacts within these community groups. However, it was important to frame messaging around the consultations so that it was not too direct, as this may not be well received within some community groups. For example, instead of assuming that all attendees have used FDV-related services within the ACT, the communicated messaging was broadened to say, 'consultations to share insights on ACT Government services, which may include FDV-related; legal; or health services'. One interested participant did not attend as she was not comfortable sharing information in the pilot group conversation method.

The way in which this consultation was set up and structured to facilitate open discussion is as follows:

- Women were invited to sit at a small table and share ideas;
- Pens and paper were provided to enable women to write down their thoughts if they did not feel comfortable sharing openly; and
- Women were asked prior to the consultation if they did not want their photo taken and this was respected.

The consultation was held in a community meeting room located in Canberra city centre. Anecdotal evidence suggests other members of South Asian communities may have attended the event if it was held at a house or community hall (a more intimate environment). Food from various South Asian cuisines was organised for the participants and they were grateful that CMWF ordered food, which considered their preferences and dietary requirements. Food was an important factor in getting participants interacting and talking at the beginning of the consultation.

Question 1: Which ACT Government services do you know about?

Due to the indirect messaging approach, a range of government services were addressed during the consultation, including car registration, schools, hospitals, mental health services as well as FDV-related services.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

• Centrelink is sometimes considered the only contact point for those in a difficult marriage, so training is needed for staff to adequately address these issues and support clients; and

• A multicultural women's refuge and dedicated women's centre is needed in the ACT to encourage women from CALD backgrounds to seek assistance.

Question 3: What are your experiences with ACT Government services?

- Particular barriers exist for psychological services due to taboos associated with seeking support for mental health issues;
- There is a poor awareness of legal services in the ACT;
- Racism experienced by students and parents at ACT public schools; and
- The National Disability Insurance Scheme (NDIS) is very difficult to navigate and there is limited assistance with completing the application form and overall process.

Questions 4 / 5: What works well and what does not work well?

- There are many barriers to securing employment so merit-based CVs would help;
- Staff and facilities in government services often don't reflect the diversity of the Canberra community; and
- Support workers or a point of contact is needed to report inappropriate behaviour within ACT Government services.

Question 6: How can the government improve their services to reach out to people with cultural / language barriers?

- Multi faith prayer rooms are needed in hospitals and schools;
- Provide food which considers more dietary requirements, including Halal food, in ACT hospitals;
- Ensure more Australian Federal Police officers are from CALD backgrounds;
- Need for tailored services to better support CALD communities;
- Female interpreters with cultural awareness of the language communities they work with would be preferred;
- Services need to be aware of cultural sensitivities of newly arrived clients or those from CALD backgrounds rather than making prejudicial assumptions;
- ACT Education needs to provide cultural awareness training to teachers and school support staff. This will hopefully address the issue of racism in public schools and ensure children from

CALD backgrounds are not pushed into English as a Second Language (ESL) classes as a default when English is their first language;

- Teachers at ACT public schools also need to better support students from CALD backgrounds and make a greater effort to say students' names correctly and accepting racism is occurring at the school. When teachers ignore a students' experience or make excuses for it, they end up contributing to the racism experienced;
- Ensure there are multicultural liaison officers within the staff at Access Canberra;
- Embed cultural awareness training for staff at ACT public hospitals and clinics to ensure a culture of respect; and
- Employ more people from CALD backgrounds to ensure ACT Government services better serve the needs of the diverse Canberra community.

Participant Suggestions

- 1. Establish a multicultural women's refuge and dedicated women's centre in the ACT to encourage women from CALD backgrounds to seek assistance;
- 2. Ensure there are multicultural liaison officers within the staff at Access Canberra;
- 3. Mandate cultural awareness training for all staff in ACT Government front line services, hospitals, women's services as well as public schools; and
- 4. Establish multi-faith prayer rooms at the hospital.

7. Pacific Islander communities

Overview

Pacific Islander communities, in the context of this consultation, include people in the ACT, who are from the Pacific Island region (by birth or ancestry) and identify as being Tahitian, Ni Vanuatu, Samoan, Fijian, or Tongan. There is a long association and history between Australia and Pacific Islander people, dating back to trading vessels and whaling, prior to the colonisation of Australia⁷¹.

Migrant populations from each of the source countries making up Pacific Islander communities remained very small until the 1960s⁷². During this period, the establishment of Australian missionaries in the Pacific Islands initiated migration flows between the Pacific Islands and Australia. Pastors, other converts, and the offspring of Australian missionary families that settled in the Islands migrated to and from Australia⁷³.

The 1970s and 1980s saw increases in the migrant populations from Fiji, Tonga and Samoa⁷⁴. These increases were driven by the 1987 Military Coup in Fiji, leading to considerable Fiji-Indian migration, as well as educational programs sponsored by the Australian Government ⁷⁵. Today, diverse ancestries make up Pacific Islander communities from Indigenous Fijian, Samoan, Tongan and Polynesian, to Chinese, Rotuman and European⁷⁶.

The total Pacific Islander population in the ACT, as shown in Figure 8, is approximately 1450⁷⁷. The Pacific Islands are divided into different language groups, including Micronesian, Polynesian, and Melanesian languages. French and English are also widely spoken.

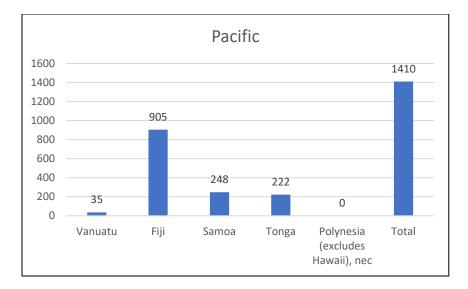


FIGURE 8: BORN POPULATION IN THE SOUTH PACIFIC IN THE ACT: SOURCE ABS 2016

Rationale

This consultation with Pacific Islander communities, while not in the initial listing for the CMWF consultations, was considered an important gap to address. One CMWF Committee member expressed she would like to do a consultation with her community and this was supported by the broader Committee. The consultation was conducted with the Vanuatu community, as the committee member belongs to this community and could facilitate the discussion. For the consultation, three languages were used including Bislama, English and French. The food provided was traditional Vanuatu cuisine made by one of the community members, who prepares this food and sells it within the community.

Attendees were invited personally through the CMWF representative's network via text messaging, WhatsApp, Facebook messages, invitations, and an email flyer. An event was created on Facebook and a flyer was circulated. The venue for the consultation was the CMWF representative's home and she facilitated the discussion. This was only feasible because the attendees who participated were all known to the CMWF representative. Childcare was also provided for the young children present, which encouraged participation.

The facilitator encouraged attendees to feel comfortable sharing their stories. The attendees noted that a community advocate would be useful for ACT-Government services but that this should be

a paid position. It needed to be clarified by the facilitator that the questions for the consultation pertained to the ACT context and not to their villages back home.

Consultation

The following are responses to the discussion question raised during the consultation.

Question 1: Which ACT Government services do you know about?

The key services discussed were

- Medical and women's health;
- Public schools;
- Access Canberra; and
- FDV-related services.

Question 2: What ACT Government services do you use (which may include FDV-related services)?

- Most women would not know where to seek support for FDV in their communities even though some noted FDV is an issue in Pacific Islander communities;
- Most women would seek shelter in a friend or family member's home rather than access a government-funded service; and
- Cultural sensitivity and working through the community is important rather than bringing in Police straight away.

Question 3: What are your experiences with ACT Government services?

Medical services

- Access to bulk billed medical services is difficult and health care is too expensive;
- Women are forced to use word of mouth to find and access bulk billed medical services as online search results are ineffective;
- Sexual and reproductive health care services are difficult to access, with participants experiencing lengthy waits; and
- Mental health services also difficult to access.

Questions 4 / 5: What works well and what does not work well?

- Access Canberra was mentioned as being difficult to access due to their opening hours on weekdays between 9am-5pm, with no afterhours service options;
- After school care has put up prices three times in one year with little parental insight into this price rise;
- School sporting commitments are also challenging to juggle for single mothers; and
- Legal advice is difficult to access, some noted they ended up going to friends for advice.

Question 6: How can the government improve their services to reach out to people with cultural / language barriers?

- A multicultural women's centre to bring together a range of services to meet the needs of CALD communities; and
- Women are often unaware of their rights in the event of a family breakdown.

Participant Suggestions

- 1. Establish a multicultural women's centre to cater to women from different cultural backgrounds;
- 2. There is a need for culturally appropriate FDV-related support services in the ACT; and
- 3. Re-consider hours Access Canberra is open and consider after hours service.

Discussion of findings

Based on the findings from the seven community consultations, recurrent themes and issues were identified by women from CALD backgrounds regarding their experiences with ACT Government services. These experiences need to be considered holistically and the barriers faced must be considered in a systematic and coordinated approach.

As shown in Figure 9 below, which synthesises the findings of the seven consultations, four barriers and enablers across ten services were identified. These barriers and enablers are based on the frequency with which they were mentioned in the consultations.

The ten services identified included: Centrelink; education and training; community services; Access Canberra; FDV-related services; immigration services; health services; legal services; child and family services and translation services.

The four barriers and enablers identified are as follows:

- 1. Lack of knowledge of services or difficulty obtaining information about services (indicated by the colour blue);
- 2. Difficulty with interpreting services and access to multilingual information (indicated by the colour yellow);
- 3. Absence of cultural competency due to service providers not being culturally sensitive (indicated by the colour grey); and
- 4. Need for services to improve their engagement with CALD communities (indicated by the colour orange).

For FDV-related services, the two key barriers experienced by women from CALD backgrounds are the limited knowledge of these services and how to access them, as well as the need to improve and tailor services for these women experiencing violence. In the consultations there was also an emphasis for women from CALD backgrounds to be provided support to improve their English language proficiency and have their qualifications recognised to facilitate employment opportunities. Improvements to education and training for service providers was also identified, particularly in cultural competence and better service etiquette. Both Centrelink and Access Canberra were frequently mentioned as examples of services which needed to improve their cultural competency as they often direct women from CALD backgrounds to other services.

Access Canberra could improve their services and accessibility, particularly in providing after hours assistance, for example on Saturday mornings. Access Canberra also need to have either staff from CALD backgrounds at their shopfront or staff which have been trained to effectively support clients from CALD backgrounds.

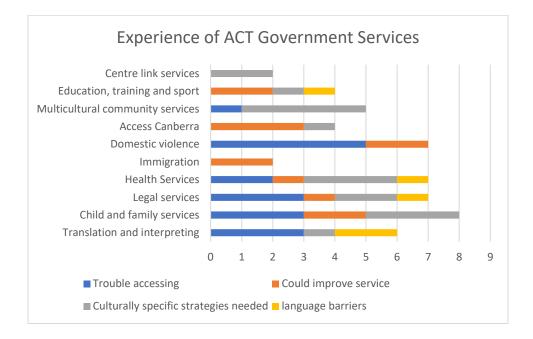


FIGURE 9: ATTITUDES TO ACT GOVERNMENT SERVICES

There was extensive discussion about the complex barriers women from CALD backgrounds face in negotiating the health care system; legal services; child and family services; and translation services. Barriers and suggestions for improvement included:

- Access to and information about services, including signage at public facilities and multilingual information on ACT Government websites;
- The appointment of multicultural liaison officers within all ACT Government services to assist members of CALD communities with limited English language skills;
- Funding better trained interpreters with knowledge of health, legal, and education sectors;

- A mix of reliable face-to-face interpreters and telephone-based interpreters to assist clients based on their specific needs; and
- The lack of cultural competency amongst ACT Government services and the need to systematically address and improve the government-funded service sector overall.

Towards a best practice consultation model

In designing and implementing the CALD Women's Consultation Initiative, lessons were learned in effective communication and consultation by CMWF. The following six areas should be considered in designing a best practice model for consultation with women from CALD backgrounds to promote engagement, participation, feedback and integrated findings. This will guide ACT Government services to make a difference and meet the needs of their increasingly diverse clients.

The following are the six key lessons learned in developing a best practice consultation model:

1. Communication strategy

- Develop diverse approaches to promote events and invite participants through word of mouth, email, social media and texting platforms such as WhatsApp;
- Translate flyers or other promotional material in the languages of the communities being consulted;
- Approach respected community leaders and include them in the organisation of the consultations; and
- Conduct multilingual consultations where appropriate or utilise bi-lingual facilitators with connections to the focus community.
- 2. Community-led
- Ensure consultations are led by women from focus communities (in the case of this initiative those who were members of CMWF); and
- Organise from the grassroots level to encourage community ownership, support and engagement in the consultation process.
- 3. Meeting place and food
- Hold consultations in a central and intimate venue, either in the Theo Notaras Multicultural Centre, a community hall, or in the facilitator's home; and
- Provide food and drinks, which reflect the tastes and dietary requirements of the group being consulted to show respect and build trust.

4. Discussion format

- Engage small groups of ten to fifteen people in a circular format to promote open discussion; and
- Hold the consultation outside of business hours and make them child friendly.
- 5. Cultural competency⁷⁸
- Engage a bilingual facilitator from the same cultural background as the participants to lead the discussion;
- Consider multi-faith religious holidays in scheduling the consultation and invite all religions within particular language and cultural communities so that the community is appropriately represented;
- Consult relevant faith leaders during the consultation process; and
- Approach FDV sensitively as it can have a strong social stigma in some CALD communities. Adopt an indirect communication strategy, to nest the issue in a broader discussion so that participants can share insights on FDV only if they feel comfortable. An indirect communication strategy also ensures that some women are not prevented by family members from attending consultations openly promoted on the issue of FDV.

6. Integrated findings: recognise that everything is connected

- The format of the consultations resulted in a broad range of related findings across key ACT Government services;
- The integrated findings reflect that women from CALD backgrounds often experience more than one barrier and disadvantage simultaneously, not just in relation to one service;
- Cultural and linguistic barriers can, at times, affect their ability to access multiple health; FDV; translation; and community services; and
- An intersectional approach is needed, which recognises that women who need to access FDV-related services, may need translation services, have visa, legal and housing issues as well as gaps in education and training, which affect their employment status. Women from CALD backgrounds may also have other aspects of their identity, which pose additional barriers to seeking support, for example women from CALD backgrounds with a disability or women who identify as LGBTQI. When these women are not supported appropriately, this can exacerbate their experience of FDV. It is important to remember everything is connected and women's identities or experiences cannot be siloed.

Evaluation results for the community consultations

An evaluation of the community consultations found an overall high level of satisfaction with the consultation process from participants. Overall, 90 per cent of participants across the seven consultations rated the event as either very good or excellent, as shown in Figure 10. The speakers were rated very effective by 70 per cent of respondents, as well as the program organisation and the information material by 50 per cent of the respondents, as shown in Figure 11.

Overall, 90 per cent of respondents thought the community consultation was about the right length of time. All the respondents said they would value an event with service providers to provide further information. Half of the respondents were between 30 and 50 years of age and 30 per cent were over 60 years of age. The length of time in Australia varied, with 20 per cent having been here for 2-5 years, half for more than 10 years and 30 per cent for more than 20 years.

Regarding religion, 40 per cent of respondents were Christian, 50 per cent were Muslim and 10 per cent noted no religion. Overall, it was found that paper-based surveys work better than online surveys for this cohort of participants.

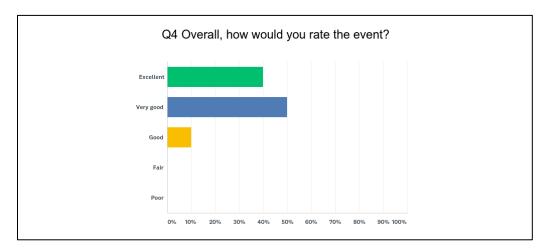


FIGURE 10: THE EVENT

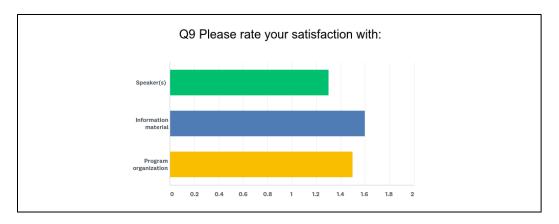


FIGURE 11: SATISFACTION

Evaluation results for the Multicultural Women's Expo

The Multicultural Women's Expo, held on 2 June 2018, was the culmination of the community consultation process and was organised and hosted by the Canberra Multicultural Women's Forum. The event was free and gave services the opportunity to provide information (in some cases multilingual) about their organisation to women from CALD backgrounds and seek feedback. The event was attended by over 100 people and launched by ACT Deputy Chief Minister and Minister for Women, Ms Yvette Berry MLA, and supported by the ACT Government Office for Women. Catering was provided and the flyer at Figure 12 was distributed.



FIGURE 12: MULTICULTURAL WOMEN'S EXPO FLYER

The evaluation of the Multicultural Women's Expo found a high level of satisfaction with the event. As shown in Figure 13, over 80 per cent of respondents rated the information provided at the Expo as useful for women from CALD backgrounds. Some respondents noted that initially they thought they would not need to attend an expo, as they knew about all possible services. However, after attending the Women's Expo, their feedback indicated they had a stronger awareness of services catering to the needs of women from CALD backgrounds, especially in regards to employment services. Written comments from respondents highlighted that they enjoyed the diverse mix of stallholders at the Expo and they were pleased to see members of ACT Government in attendance. Text comments also mentioned it was useful to connect with other women from CALD backgrounds in the Canberra community and link them with service providers. Overall 70 per cent of respondents were satisfied with the event and 30 per cent were very satisfied.

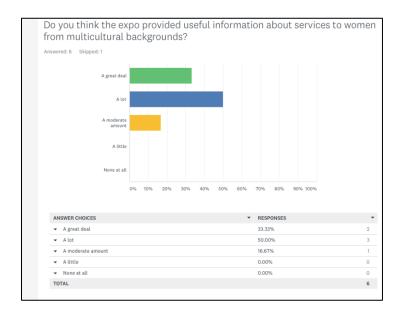


FIGURE 13: THE EXPO

The event was a success and participants indicated they would like to attend another Multicultural Women's Expo in the future. Participants thought it was an excellent way to bring together clients from CALD backgrounds and service providers in the same venue.

Recommendations

This Consultation Report highlights the findings and outlines suggestions participants made in the seven consultations. These suggestions relate to FDV services; translation and multilingual information and services; health and community services; and the need for further engagement and representation of women from CALD backgrounds in advisory roles.

CMWF makes the following fourteen recommendations for consideration by ACT Government. These recommendations are directly informed by the findings and suggestions provided by participants in the Consultation and are formulated to present practical ways ACT Government can improve their services.

Key Recommendations

- 1. Develop a culturally appropriate engagement strategy for ACT Government services, co-designed with CALD communities, to improve service delivery.
- 2. Additionally, co-develop a culturally appropriate engagement strategy with youth from CALD communities to ensure the ACT Government can support their diverse interests and needs.
- 3. Support community-based initiatives focussed on men from CALD backgrounds working with other men on FDV-related issues in terms of prevention education and intervention.
- 4. Establish a fully accessible refuge with wraparound services for women and children from CALD backgrounds in the ACT staffed by culturally competent staff able to support women escaping violence.
- 5. Provide funding for more interpreters with specialist knowledge across health, legal, and education sectors.
- 6. Provide funding for more interpreters with knowledge of the cultural, religious and geographic diversity within different language communities.

- Ensure interpreters receive trauma-informed training to better support CALD communities.
- 8. Deliver face-to-face cultural awareness training across all ACT Government departments and services to increase knowledge of the diversity of experiences and identities in CALD communities and to address personal and institutional racism.
- 9. Provide multilingual information on the Access Canberra website.
- 10. Make available after-hours services for Access Canberra.
- 11. Appoint multicultural liaison officers (MLOs) within Access Canberra as well as mandate the appointment of MLOs in all ACT Government services.
- 12. Increase representation of women from CALD backgrounds in ACT Government Advisory Councils.
- 13. Provide a multi-faith prayer room in ACT Government service locations including hospitals.
- 14. Undertake further consultations regarding the specific forms of violence, which may manifest in some CALD communities in the ACT, as well as consult with communities not represented as part of this initiative. Any new findings or further best-practice methodology should be incorporated into a subsequent report.

Analysis on Recommendations

Further analysis has been provided with each recommendation to ensure it is understood and addressed appropriately. However, CMWF proposes future meetings with ACT Government (including policy officers and service providers) so that in-depth advice on these recommendations can be shared.

When considering the recommendations, it is important to note that although the consultations revealed recurring themes, indicating that women from CALD communities face common barriers when accessing ACT Government services, responses to address these barriers must be tailored to suit the different needs both across and within CALD communities in the ACT. Merely developing a 'CALD response' to the issues raised will likely be ineffective.

1. Develop a culturally appropriate engagement strategy for ACT Government services, codesigned with CALD communities, to improve service delivery.

This engagement strategy, developed in collaboration with CALD communities, should reflect the ongoing ways ACT Government and services will consult with CALD communities to ensure policy and services are responsive to community need. This strategy should include different and culturally appropriate approaches to engagement beyond traditional methods of consultation to ensure various views within communities are heard. A starting point to consider for this recommendation is the *Engaging Canberrans: A Guide to Community Engagement* produced in 2011 by the ACT Government.

2. Additionally, co-develop a culturally appropriate engagement strategy with youth from CALD communities to ensure the ACT Government can support their diverse interests and needs.

A similar strategy to the one above needs to be developed in collaboration with youth from CALD backgrounds. There was a concern raised in some of the consultations that at times, youth from CALD backgrounds feel alienated and stigmatised. To address this concern, it is recommended that ACT Government consult with both youth from CALD backgrounds and relevant organisations to outline this diverse cohort's needs and how best to support them. This strategy should include the culturally appropriate ways ACT Government plans to engage with youth from CALD communities on an ongoing basis.

3. Support community-based initiatives focussed on men from CALD backgrounds working with other men on FDV-related issues in terms of prevention education and intervention.

Mainstream FDV prevention education or intervention may not be effective across all CALD communities. In addition to other evidence-based strategies, ACT Government could work with men from CALD backgrounds and experts to develop community-based initiatives which encourage these men to engage with other men on FDV. There are a number of pilot programs being trialled in NSW where at activities of shared interest, men role model positive relationships with other men to address FDV in a subtle way. Following evaluation results, similar initiatives could be considered for implementation in ACT.

4. Establish a fully accessible refuge with wraparound services for women and children from CALD backgrounds in the ACT staffed by culturally competent staff able to support women escaping violence.

Establishing a fully accessible, dedicated refuge for women and children from CALD backgrounds was a recurring suggestion throughout the consultations. While all refuges in the ACT currently welcome women and their children from CALD backgrounds, there is sometimes a perception from members within CALD communities that these may not be adequate since they are not specifically designed for women from CALD backgrounds as well as these women with disability or other intersecting identities. Further, a distrust of mainstream services is sometimes enough reason for women from CALD backgrounds to not seek help in the first place. It is recommended that a dedicated CALD refuge be established with wraparound services and staff who understand different cultural sensitivities associated with FDV. This may encourage more women from CALD backgrounds to escape violence and access support.

5. Provide funding for more interpreters with specialist knowledge across health, legal, and education sectors.

Interpreters may be called upon when someone with limited English proficiency accesses a service or discloses experiences of FDV. At times, interpreters are ill equipped with specialist knowledge related to the service being accessed, and as a result their interpreting approach and representation of the client's views may be negatively impacted. More interpreters need to be trained in the terminology and sensitivities related to health, legal and education and they should be contacted in the first instance when someone needs an interpreter in these sectors.

6. Provide funding for more interpreters with knowledge of the cultural, religious and geographic diversity within different language communities.

There is immense diversity in communities, even those with a shared language. When the interpreter engaged has insufficient knowledge about the cultural, religious and geographic diversity of their client, this can lead to misunderstandings and the client feeling unsupported.

It is recommended that as part of interpreter accreditation processes, they are required to understand this diversity and apply this understanding to their work.

7. Ensure interpreters are provided with trauma-informed training to better support CALD communities.

Interpreters are often contacted to translate for women with limited English proficiency who wish to disclose experiences of FDV or women who have recently arrived in Australia and need to access a service. At times, compassion and respect is not afforded to these women, making the translation experience disempowering for them. It is essential that interpreters are provided trauma-informed training due to sensitive issues they may have to translate and women's past experiences. This would ensure the translation process is client-centred and supportive.

8. Deliver face-to-face cultural awareness training across all ACT Government departments and services to increase knowledge of the diversity of experiences and identities in CALD communities and to address personal and institutional racism.

Frequently, the diversity of experiences and identities within CALD communities is not acknowledged, and assumptions are made that CALD communities are all the same (in a negative way). As a result, policies and services may not be designed to respond effectively to the needs of this significant and diverse cohort. It is recommended that all ACT Government departments and services provide face-to-face cultural awareness training to address this concern. Models for training could be tailored to include important information about the main communities accessing a particular service as well as ensuring the needs of new and emerging communities is considered. This training should be delivered by representatives from CALD communities with the necessary skills to develop and deliver cultural awareness training. If this training is delivered, it will likely contribute to improved service delivery and will be a first step in addressing both personal and institutional racism in the ACT.

9. Provide multilingual information on the Access Canberra website.

Currently there is no multilingual information on the Access Canberra website. Without this, women with limited English language skills may be unsure which services are available and how to access them. To increase traffic to the Access Canberra website and ensure all Canberra residents have equality to available information about services, this gap should be addressed. The Service NSW website is a good example of a government website, which provides multilingual information across all of its webpages.

10. Make available after-hours services for Access Canberra.

While many aspects of the ACT Government service system can be accessed online, there are some services related to Access Canberra, which need to be attended to in person. The current operating hours of Access Canberra (9am-5pm Monday to Friday) was raised as inflexible in some of the consultations. It may not be possible for all Access Canberra shopfronts to be open on a Saturday morning for a few hours however, it is recommended that at least one shopfront be open at this time to support members of the community who are not able to attend on a weekday.

11. Appoint multicultural liaison officers (MLOs) within Access Canberra as well as mandate the appointment of MLOs in all ACT Government services.

In the consultations, the appointment of MLOs was regarded as an effective way to support members of CALD communities accessing ACT Government services. MLOs from a range of different cultural backgrounds and with language skills in addition to English could be employed to act as a first point of contact (both in Access Canberra shopfronts and other services) to assist those from CALD communities navigate a particular ACT Government service.

12. Increase representation of women from CALD backgrounds in ACT Government Advisory Councils.

In a number of ACT Government Advisory Councils (excluding the Multicultural Advisory Council), there is disproportionate underrepresentation of women from CALD backgrounds. It is recommended that for future appointments to ACT Government Advisory Councils, a specific number of positions are reserved for women from a variety of CALD backgrounds with intersecting identities to ensure fair representation. This will enrich the work of Advisory Councils and the quality of advice they provide to ACT Government.

13. Provide a multi-faith prayer room in ACT Government service locations including hospitals.

Accessing a safe and clean space to perform one's religious obligations is a challenge in some ACT Government service locations and participants mentioned that at times it can lead to a decrease in civic participation or use of services. It is recommended that as a first step, all ACT hospitals provide a well-signed and appropriate space with washing facilities for people from different faiths to use 24/7 as this was a common example provided by consultation participants.

14. Undertake further consultations regarding the specific forms of violence, which may manifest in some CALD communities in the ACT, as well as consult with communities not represented as part of this initiative. Any new findings or further best-practice methodology should be incorporated into a subsequent report.

To build on this pilot initiative, CMWF seeks to undertake further consultations with women from CALD backgrounds regarding forms of violence such as dowry abuse, forced marriage and FGC. It is recommended specific consultations are undertaken with particular communities to better understand experiences of these forms of violence and the ways in which services can best support victim survivors. CMWF also plans to consult with women from other communities in the ACT, both established and new and emerging as well as women from CALD backgrounds with disability or who identify as LGBTQI. Learning more about how these women's multiple and intersecting identities impact their experience of FDV and the support services available will be a priority for future consultations.

Endnotes

¹ Grant title: CALD Women's Consultation Initiative for Domestic and Family Violence.

² Family and domestic violence refers to physical and non-physical forms of coercion and control that occur in families.

³ See

https://www.facebook.com/events/169117920447126/?acontext=%7B%22ref%22%3A%223%22%2C%22ref_news feed_story_type%22%3A%22regular%22%2C%22feed_story_type%22%3A%2222%22%2C%22action_history%2 2%3A%22null%22%7D

⁴ Source: ABS 2016 census, population and housing compiled by .ID Population Experts <u>https://profile.id.com.au/australia/language?WebID=170</u>

⁵ These statistics were calculated, based on the ABS population and housing survey 2016, by .ID Population Experts <u>https://profile.id.com.au/australia/language?WebID=170</u>.

⁶ ABS 2016 http://www.abs.gov.au/ausstats/abs@.nsf/lookup/Media%20Release8

7 Ibid.

⁸ Ibid.

⁹ The ACT Domestic Violence Service System Final Gap Analysis Report, 2016. Community Services Directorate, ACT Government.

https://www.google.com.au/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0ahUKEwjl_6eGxqPcAhWEGZ QKHYqWCEwQFggoMAA&url=http%3A%2F%2Fwww.cmd.act.gov.au%2F__data%2Fassets%2Fword_doc%2F 0009%2F864711%2FACT-Domestic-Violence-Service-System-Final-Gap-Analysis-Report.DOCX&usg=AOvVaw3b0yuYffg0Pcmqv311szSV

¹⁰ See also <u>http://www.abc.net.au/news/2016-11-25/opinion-pallavi-sinha-domestic-violence-cald-communities/8047232</u>

¹¹ <u>http://www.cmd.act.gov.au/ data/assets/pdf file/0003/864714/DVPC-Review-of-Domestic-and-Family-Violence-Deaths.pdf</u>

¹² See also the Multicultural Access and Equity Framework developed by FECCA in Access and Equity Report 2013 http://www.mhima.org.au/pdfs/fecca_multicultural_access_equity_report_june2013.pdf

¹³ See <u>https://www.canberratimes.com.au/national/act/culturally-diverse-women-highly-vulnerable-to-domestic-violence-support-agencies-20150319-1m2xxp.html</u>

¹⁴ Professional training in leadership and community engagement was provided by Suzanne Eastwood, a Vocational Trainer, with a background in community development, social justice and ending violence against women and children. She is a member of the LGBTIQ Ministerial Advisory Council in the ACT.

¹⁵ English only surveys are a known limitation for methods <u>https://aifs.gov.au/publications/groups-and-</u> <u>communities-risk-domestic-and-family-violence</u>

¹⁶ M Rizk, 'Where were Australia's Arabic speaking immigrants born?' in SBS 28 June 2017 <u>https://www.sbs.com.au/yourlanguage/arabic/en/article/2017/06/28/where-australias-arab-immigrants-were-born</u>

¹⁷ Ibid

¹⁸ T Batrouney, 'Lebanese-Australian families' in Australian Institute of Family Studies 1995 <u>https://aifs.gov.au/publications/families-and-cultural-diversity-australia/9-lebanese-australian-families</u>

¹⁹ This period pre-dated the formation of Lebanon as an independent nation in 1943.

²⁰ Department of Social Services, 'The Syria-born Community' 2014 <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-syria-born-community</u>

²¹ Ibid.

²² Ibid

²³ Ibid

²⁴ Museum Victoria, 'History of immigration from Egypt' https://museumsvictoria.com.au/origins/history.aspx?pid=15

²⁵ Ibid

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²⁷ Department of Social Services, 'The Jordan-born Community' <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-jordan-born-community</u>

²⁸ See

http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/2071.0~2016~Main%20Features~Cultural%20D iversity%20Data%20Summary~30

- ²⁹ According .ID Population Experts, this data is based on the Australian Bureau of Statistics, <u>Census of Population</u> and <u>Housing</u> 2011 and 2016. Compiled and presented by .ID population experts.
- ³⁰ Otherwise, it would be necessary to hold segregated events based on religion. Another example of religious difference, is that Orthodox Christians celebrate Christmas at a different time to the majority of Christians, (Catholic and Protestant) due to following the Julian Calendar rather than the Gregorian Calendar.
- ³¹ Sometimes community elders are misinformed and send women back to 'save the family'.
- ³² See <u>https://www.humanrights.gov.au/quick-guide/12049</u>
- ³³ Department of Social Services, 'The Mexico-born Community' 2014 <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-mexico-born-community</u>
- ³⁴ Various: Department of Social Services Publications: <u>https://www.dss.gov.au/sites/default/files/documents/02_2014/argentina.pdf</u> and <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-spain-born-community and https://www.homeaffairs.gov.au/LifeinAustralia/Documents/MulticulturalAffairs/chile.pdf and https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multiculturalaustralia/programs-and-publications/community-information-summaries/the-peru-born-community</u>
- ³⁵ Museum Victoria, 'History of immigration from Spain' https://museumsvictoria.com.au/origins/history.aspx?pid=57&cat=none&cid=0

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- ³⁷ Department of Social Services publications: <u>https://www.dss.gov.au/sites/default/files/documents/02_2014/argentina.pdf</u> and <u>https://www.dss.gov.au/sites/default/files/documents/02_2014/argentina.pdf</u>
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- ³⁹ Numbers prepared by .ID Population Experts, based on the ABS 2016 Census data <u>https://profile.id.com.au/australia/language?WebID=170</u>
- ⁴⁰ Department of Social Services, 'China-born' 2014 <u>https://www.dss.gov.au/sites/default/files/documents/02_2014/china.pdf</u>
- ⁴¹ Ibid
- ⁴² Museum Victoria, 'History of immigration from China' <u>https://museumsvictoria.com.au/origins/history.aspx?pid=9</u>

- ⁴³ Ibid, Department of Social Services, 'China-born' 2014
- ⁴⁴ Ibid, Museum Victoria, 'History of immigration from China' https://museumsvictoria.com.au/origins/history.aspx?pid=9
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- ⁴⁷ Australia community profile. ID The Population Experts <u>https://profile.id.com.au/australia/language?WebID=170</u>
- ⁴⁸ Department of Social Services, 'The South Africa-born Community' 2014 <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-south-africa-born-community</u>

⁴⁹ Ibid

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⁵¹ Department of Social Services, 'The Nigeria-born Community' 2014 <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-nigeria-born-community</u>

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- ⁵³ Department of Social Services, 'The Kenya-born Community' 2014 <u>https://www.dss.gov.au/our-responsibilities/settlement-services/programs-policy/a-multicultural-australia/programs-and-publications/community-information-summaries/the-kenya-born-community</u>
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