

# MULTICULTURAL HEALTH SERVICE

Issued: October 2015

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## **Directors Report**

The interest and concern of many Australians have been focused on the Syrian Refugee crises. Although the Australian Government has agreed to take 12,000 Syrian Refugees from the camps in the Lebanon, Jordan and Turkey it is still not clear how many will actually come to Newcastle and the Hunter Region. In the past most refugees are settled in areas where relatives or others from that country have already settled.

Between January 2010 and August 2015, 3,255 Syrian born people arrived in NSW. 80% of these were part of Australia's humanitarian migration stream, 17% from the family stream and 1% from the skilled migration stream. 67% of these humanitarian entrants arrived in NSW in the last financial year (2014-2015). Of the Syrian born people who arrived in NSW between January 2010 and August 2015, the main language spoken is Arabic (61%), followed by Assyrian (23%), Not stated (10.4%), Armenian (3%) and Kurdish (0.7%).

At the time of the 2011 Census there were 8,274 people with Syrian ancestry living in NSW, with 63% having been born in Syria. The major religion of people with Syrian ancestry in 2011 was Islam (37.8%) followed by Western (Roman) Catholic (18.2%), Other Oriental Orthodox (10.7%), Other Eastern Orthodox (8.5%) and Greek Orthodox (5.8%). This information has been made available by the Transcultural Mental Health Unit in NSW.

## **Celebrating Multicultural Health Week 2015**

According to the dictionary collage art is "an artistic composition made of various materials, glued on the surface". It is unique, because you take already existing materials to make your piece of art and create your voice.

This year Community Aged Care Service (CACS) - Greater Newcastle Cluster (GNC) Units celebrated Multicultural Health Week by using their creative skills and working collaboratively to create exciting images focusing on culture, healthcare and clients' from CALD backgrounds rights. The services were invited to work on their collage from June, July through August until September 7<sup>th</sup>.

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Eight units entered the competition: Short Term Resident Accommodation Service, RPC North Ward, NECHC, Hunter Equipment Service, Executive Team, Wallsend Aged Care Facility, Hunter Spinal Cord Injury Service and the Practice Support Team.

During MHW the Multicultural Access Committee had to select the winning service. Wallsend Aged Care Facility has received the title, because the residents, staff and visiting relatives all took part in making and creating an extraordinary collage.

## **Multicultural Mental Health**

At the beginning of the year the Mental Health Wellbeing Program was delivered to the Afghani, Russian and Filipino communities. The program offers information to help identify depression, anxiety and stress, and aims to provide coping strategies and information on access to services. The program will continue in October with the Bosnian, Chinese and Congolese communities as our next participants in the program.

## **Multicultural Drug and Alcohol**

*Talking Tactics Together* is a drug and alcohol education program which aims at improving the communication between parents and children on the topic of drug and alcohol. The program is a part of the activities of the Multicultural Community Drug Action Team (CDAT). The consultations with African communities on harm related to the use of alcohol indicated the need for improved communication between parents and children on drug and alcohol issues.

*Talking Tactics Together* was delivered to a group of sixteen African children between 10 and 14 years of age by three members of the CDAT team from the Multicultural Health Service, Catholic Care Refugee Service and the Family Action Centre. Activities included: lectures, quizzes, group activities, tests and role plays. The feedback from children and parents was positive.

## **Multicultural Health Week in Mental Health**

Multicultural Health Week for mental health services included a lecture to staff from the Kestrel Unit at Morisset Hospital on how Islamic religious beliefs impact on mental health care. The lecture was presented by Mr Ibrahim Attalla, an experienced science teacher, ex-president of the Federation of Islamic Council and an ex-president of the Community Languages School. Mr Attalla explained many of the religious practices associated with Ramadan and staff were given an opportunity to clarify their concerns related to patient care.

The second activity for Multicultural Health Week was a presentation on “the patient’s journey through mental health services” introduced by Kim Lane, Manager of the Innovation, Partnerships and Engagement Team HNEMH and delivered by Gordana Bozinovski from the Referral and Information Centre and Dubravka Vasiljevic from the multicultural health unit. In attendance were representatives from various NGO’s who are responsible for case management of clients with mental health problems.

## Foetal Alcohol Spectrum Disorder

"If we said we had a cure for the most common form of non-genetic birth defect, we'd be inundated," observes Tony Brown, chair of the Multicultural Community Drug Action Team which has as its target in 2015 to make communities more aware of the effect of alcohol on the neurological development of the foetus. "And in this case, it's not a multibillion-dollar drug or vaccination or treatment. The cure is really, really simple - abstain from alcohol.

An Australian expert, Dr Shelton, emphasised that alcohol is more destructive to an unborn baby than any illicit drug. "The hysteria about ice [methamphetamine] is a distraction," he says. "Alcohol is far more toxic and causes greater damage."



60 per cent of pregnancies are unplanned, 60 per cent of pregnancies have some exposure to alcohol, 60 per cent of people with FASD will encounter the justice system at some point, and 60 per cent of professionals worry that talking about FASD will stigmatise or cause guilt in the person they're talking to so there's a certain amount of reluctance among health professionals to open up this conversation with their women patients."

The guidelines issued in 2009 state that women who are planning a pregnancy or are pregnant should avoid alcohol. The key message is that there is no safe level of consumption.



Multicultural Health Week is an annual NSW state-wide event, held every September that started in 2009. The event highlights the importance of language and culture for health services as well as providing an opportunity to raise health issues in multicultural communities.

On Monday, the 7<sup>th</sup> of September the Health Minister Jillian Skinner launched the beginning of Multicultural Health Week at Parliament House by stating that the theme for 2015 "*Rights and Responsibilities: Get involved in your health care*", was very fitting when 27% of people in NSW speak a language other than English at home and 31% were born overseas. She continued in saying that "the NSW Government respects the right of every citizen to access healthcare services and information in their language or in a way they understand. Patients, clinicians, health care workers, health service organisations - each has an important role to play in contributing to safe and high quality care for all members of our diverse society."

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The Health Care Interpreter Service, Hunter region acknowledged this year's Multicultural Health Week with the help of Multicultural Health Service staff and sessional interpreters.

Maura Tavasci and Vesna Dragoje, spoke about the importance for all of us to understand what our rights and responsibilities are as both professionals and consumers. They emphasised the importance of understanding the key messages of access to healthcare services for all. People should be encouraged to discuss their health issues with their healthcare service providers. Patients, consumers, healthcare providers and health service organisations all have an important part to play in contributing to a safe and high quality healthcare system.

They spoke about Hunter New England Health's commitment to *Excellence*. HNE believes in a planned, disciplined approach to doing the right thing for patients and their families, doing it consistently and doing it with respect.

The most memorable and valuable part of the day was the open discussions had with colleagues. There was open discussion of controversial points within the interpreting profession and the manner within which duties are performed.

*"I believe that this was a very valuable exercise where we were able to learn from one another. I would like to thank everyone who attended and especially for their honesty and input of comments shared. We have a wonderful pool of knowledge and experience which is important to share with one another."* (Vesna Dragoje)

The second part of the day was dedicated to showcasing the new *Working with Interpreters* DVD developed by the NSW Health Care Interpreter Services. This new resource was launched by Health Minister Jillian Skinner at Parliament House as part of Multicultural Health Week celebrations.



The training resource includes techniques and strategies that can be used in a variety of clinical consultations. It covers risks involved in using a patient's family or friends to interpret, assessing the need for an interpreter, communicating through interpreters on-site, over the phone or in family conferences; and assessing through an interpreter patients who are experiencing mental illness.



Congratulations to two of our staff interpreters, Nhung Bui and Marija Dugac who have patient roles in the DVD. They perform like professional actresses.