

PHN Multicultural Health Framework

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Table of contents

02 Aim

02 Objectives

02 Development and
acknowledgments

03 Background

04 Definitions

05 Principles

05 Enablers

06 Action areas



Developed by the PHN Multicultural Health Framework Working Group and the National PHN Cultural Diversity Community of Practice. Approved by the PHN Cooperative.

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Aim:

This framework has been developed to improve health and wellbeing outcomes and experiences for multicultural communities across all Primary Health Network (PHN) regions.

The framework is designed to be a roadmap to improvement and to be flexible, rather than prescriptive, in order to guide planning and implementation.

Development and acknowledgments

This framework was developed by the PHN Multicultural Health Framework Working Group and the National PHN Cultural Diversity Community of Practice. We would like to acknowledge the frameworks and guidance from the following organisations, which helped to inform the PHN Multicultural Health Framework.

The action items in this framework are tailored to suit the PHN context and are grouped by PHN Program Performance and Quality Framework outcomes. Actions draw from guidance and best practices published by the below organisations and authors:

- [The Embrace Framework for Mental Health in Multicultural Australia: Towards culturally inclusive service delivery](#) (Mental Health Australia)
- [Access and Equity Framework](#) (North Western Melbourne PHN)
- [Good Practice Approaches in Facilitating Primary Health Care Delivery to Migrants and Refugees: The role of Primary Health Networks](#) (Migrant and Refugee Health Partnership)
- [User Guide for Health Service Organisations Providing Care for Patients from Migrant and Refugee Backgrounds](#) (Australian Commission on Safety and Quality in Health Care)
- [Multicultural Access and Equity Assessment Tool](#) (Department of Home Affairs)
- Cultural Responsiveness Assessment Tool (North Western Melbourne PHN)
- Intersectionality Toolkit (The International Lesbian, Gay, Bisexual, Trans, Queer and Intersex Youth & Student Organisation)
- [Bringing Light and Heat: A Health Equity Guide for Healthcare Transformation & Accountability](#) (HealthBegins, Health Leads, JSI, Social Interventions Research and Evaluation Network and Human Impact Partners)
- [A framework for cultural competence](#) (Centre for Culture, Ethnicity and Health).

Objectives:



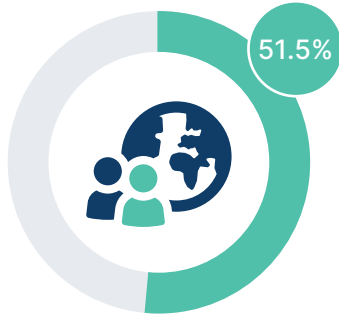
The PHN Multicultural Health Framework:

- provides high-level guidance for PHNs to develop a culturally responsive partnership approach aimed at increasing health system access and equity for multicultural communities
- provides best practice actions to support PHNs to deliver locally informed and relevant responses that consider the:
 - diversity of communities and contexts across PHNs
 - PHN priorities and capacity
- supports advocacy for resources and sustainable practices.

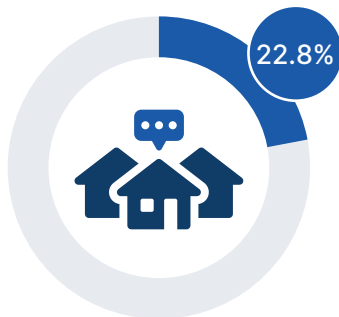
Background



Australia has a rich mix of cultural backgrounds, and our diversity is widely recognised as a national strength. Results from the 2021 Census of Population and Housing found Australia's population consists of more than 300 different ancestries¹. Further findings from 2021 show:



Over half of the Australian population was either born overseas or had at least one parent born overseas².



Nearly a quarter of the Australian population speak a language other than English at home³.



Over 3 percent of the Australian population do not speak English well or at all³.

Cultural background data is not consistently captured in health care settings. However, what we do know is that culture and language can have a profound influence on a person's:

- healthcare-seeking behaviours
- understanding of health care systems
- perceptions of what it means to be healthy.

Cultural norms, ideas, values, and practices shape perceptions and experiences of health and illness. People from multicultural backgrounds, particularly non-English speaking backgrounds, often face additional barriers to accessing and navigating the Australian health care system, including:

- language barriers, for example, accessing appropriate interpreting services
- health literacy challenges
- cultural safety and appropriateness of available health services
- stigma and discrimination
- socioeconomic and systemic factors.

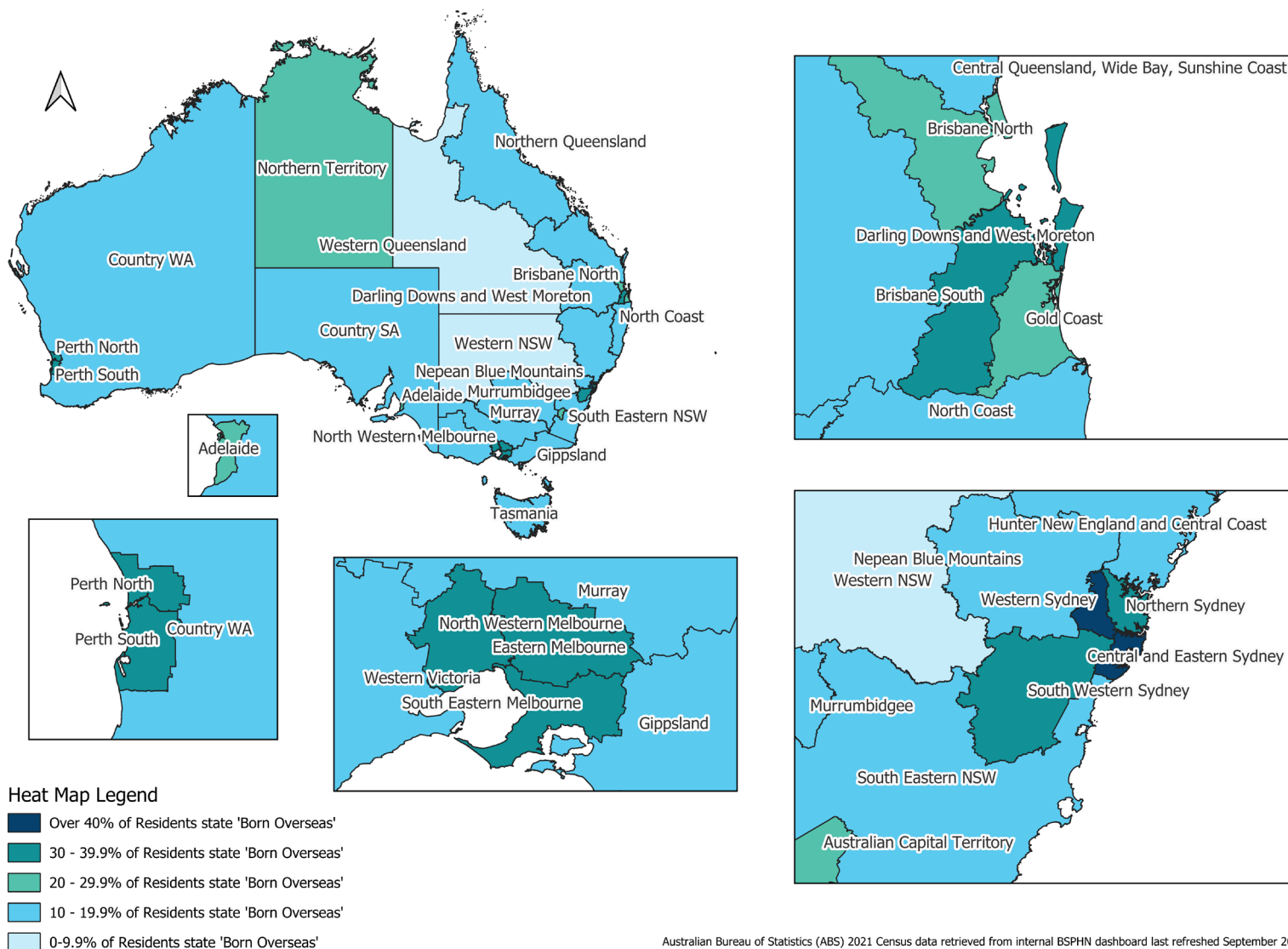
With a dedicated focus on supporting the delivery of coordinated, person-centred care, Primary Health Networks (PHNs) are well placed to increase access and improve the effectiveness of health services and quality of health care for people from multicultural backgrounds.

Definitions

The terms 'multicultural' and 'culturally and linguistically diverse' (CALD) are used interchangeably in this framework. 'Multicultural' is generally preferred by communities⁵ and will be used when discussing communities and needs. 'CALD' will be used when discussing data and data collection, as it is used by many Australian service providers and agencies. However, a consistent definition is lacking⁴.

For the purposes of this framework, people of multicultural or CALD backgrounds refer to those whose cultural identity varies from the Anglo-Celtic majority or First Nations populations of Australia⁵. Our use of both terms recognises there is great diversity among people from multicultural backgrounds in Australia across cultures, faiths, languages, migration journeys and experiences.

Percentage of Australian residents born overseas, reported in 2021



Australian Bureau of Statistics (ABS) 2021 Census data retrieved from internal BSPHN dashboard last refreshed September 2023.

1. Australian Bureau of Statistics, 2022, [Understanding and using Ancestry data](#), ABS Website, accessed 1 February 2024
2. Australian Bureau of Statistics, 2021, [Snapshot of Australia](#), ABS Website, accessed 1 February 2024
3. Australian Bureau of Statistics, 2022, [Cultural diversity of Australia](#), ABS Website, accessed 1 February 2024
4. [Definitions of Culturally and Linguistically Diverse \(CALD\): A Literature Review of Epidemiological Research in Australia](#). Int J Environ Res Public Health. Pham TTL, Berecki-Gisolf J, Clapperton A, O'Brien KS, Liu S, Gibson K. 2021 Jan 16;18(2):737. doi: 10.3390/ijerph18020737. PMID: 33467144; PMCID: PMC7830035.
5. World Wellness Group, 2023, [Think Piece 2: Commissioning: Co-designed commissioning lens focused on multicultural health](#) www.worldwellnessgroup.org.au, accessed 1 February 2024

Principles

Principles	Definition
Cultural responsiveness	We seek to understand and consider the cultural backgrounds of the people we work with and serve, acknowledging their diversity and intersectionality of needs. We create safe, inclusive, accessible, and equitable environments and opportunities.
Localised and tailored	We determine our activities according to our local PHN contexts and they are tailored to address the specific needs of the multicultural communities in our regions.
Meaningful partnerships	We actively engage, collaborate and co-design with stakeholders and ensure the voice of the community is embedded across all our work. We support community self-determination, empowering multicultural communities to have agency and control over their health and wellbeing.
Continuous improvement	We commit to ongoing learning, sharing and improvement, acknowledging that this is a change management journey for all PHNs.

Enablers

PHN enablers	Definition
Committed leadership	Leadership commitment and buy-in to ensure the framework is implemented across all areas of PHN with appropriate governance.
Financial sustainability	Recognition that the provision of culturally responsive and equitable services requires more resources, and this is factored into PHN processes.
Data and digital capacity	Accurate and transparent information across PHN programs and services to monitor and respond to trends that can inform ongoing improvement.
Capable workforce	Improved capability of PHN staff, primary care and commissioned serviced providers to deliver safe and high-quality care which is responsive to consumers' needs and to the current health system environment.
Whole of system collaboration	PHNs are well placed to engage and influence across multiple sectors, systems, and communities to make sustainable changes, recognising that inequity and social determinants of health often extend beyond the boundaries of the health system.





Action areas

1. Addressing Needs

PHNs identify and address the needs of multicultural communities in their regions through culturally responsive commissioning.

Strategic planning

Understanding needs

- 1.1 Multicultural communities' needs, as well as strengths and assets, are comprehensively captured in PHN Health Needs Assessments. In particular, unique challenges presented across different migration pathways (i.e for migrants, people of refugee background, people seeking asylum, seasonal workers, international students, Trans-Tasman visa holders) are accounted for, and at-risk groups are identified.
- 1.2 PHNs understand the health care usage, gaps in care, barriers to access and key points of inequities for multicultural communities and identify potential actions that they and partners could make to address these.
- 1.3 PHNs, primary care providers and commissioned service providers consistently collect the 5 key CALD data fields (country of birth, language spoken, interpreter required, ethnicity/cultural background, year of arrival in Australia) and are trained on how to do this in a sensitive way.
- 1.4 PHNs advocate for data systems that allow for the accurate capture and analysis of CALD data.

Commissioning services

Engagement and co-design

- 1.5 PHNs develop relationships and collaborate with multicultural communities, organisations, service providers, and stakeholders to establish mechanisms to support an understanding of multicultural populations' diverse needs and develop appropriate solutions.
- 1.6 PHNs are flexible in their approach to engaging with multicultural communities and adapt their approach to meet local community needs.
- 1.7 PHNs ensure multicultural communities are active participants in co-design of service planning, delivery, and evaluation. PHNs recognise the diversity of views within multicultural communities and provide opportunities for different perspectives to be heard.
- 1.8 PHNs provide feedback to communities they have engaged with about outcomes of co-design or consultation.

Market shaping and development

- 1.9 PHNs build capacity and capability of providers and adapt commissioning approaches to enable multicultural organisations to participate in tendering opportunities.

Procurement

- 1.10 PHNs identify multicultural communities as a priority group and, where appropriate, allocate funding for multicultural-specific responses to improve access and equity.
- 1.11 Tender selection criteria includes demonstration of applicant's capability around equitable, accessible and culturally responsive service provision.
- 1.12 PHNs include people from multicultural backgrounds on tender selection panels including people with lived experience, as relevant.

Monitoring and evaluation

Contract management

- 1.13** PHNs ensure commissioned service providers consider and account for costs/time associated with cultural responsiveness (such as translating and interpreting, community/stakeholder engagement, bicultural workers, capturing CALD data, cross-cultural training, culturally diverse workforce) via contracts, service plans, and budget templates.
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- 1.14** PHNs set KPIs related to improving access and equity, including the numbers of multicultural participants based on their local population profile.
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- 1.15** PHNs, primary care providers and commissioned service providers collect meaningful data on service outcomes and satisfaction for people from multicultural backgrounds, adapting methods to ensure participation. This data is then reflected in provider monitoring reports and structured data sets.
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- 1.16** PHNs, primary care providers and commissioned service providers have feedback, compliments and complaints mechanisms that are accessible to people from multicultural backgrounds and ensure incident management reports capture demographic details, including ethnicity.

2. Quality Care

PHNs support local health care providers to deliver quality, culturally appropriate care to people of multicultural backgrounds.

Health care provider capability building

- 2.1** PHNs work in collaboration with multicultural health stakeholders to build capability in primary care and commissioned service providers via:
- education delivery: PHNs deliver or fund multicultural-specific education and embed culturally responsive case studies/key messages across other PHN education events and practice support
 - the development and promotion of resources and information sharing
 - provision of support with assessments/quality improvements to enhance cultural responsiveness e.g. Embrace Framework.

Interpreting

- 2.2** PHNs promote and provide support around working with interpreters for primary care and commissioned service providers (including allied health, pharmacy, pathology, and radiology).

3. Improving Access

People from multicultural backgrounds can access health care services in the PHN region as required.

Health literacy and health service navigation

- 3.1 PHNs commission and/or work with partners to co-create sustainable health literacy and health service navigation models and activities.

- 3.2 PHNs develop/promote community-focussed health literacy campaigns to increase awareness of local health services and health issues.

- 3.3 PHNs, primary care providers, and commissioned service providers use communication mechanisms that are tailored to the diversity of their local stakeholders such as plain language and translated resources.

Flexible delivery

- 3.4 PHNs consider commissioning approaches and service delivery models that promote co-location and outreach to multicultural services/communities.

Advocacy

- 3.5 PHNs advocate for multicultural policy and systems change at the local, state, and federal levels.

4. Coordinated Care

People from multicultural backgrounds receive co-ordinated, integrated culturally appropriate services from local health providers.

Integration and care-coordination

- 4.1 PHNs commission and/or work with partners to co-create sustainable models of care for people from multicultural backgrounds.

- 4.2 PHNs ensure integration across PHN activities/programs and commissioned services, including approaches such as pooling resources to ensure less duplication and more efficient use of resources.

- 4.3 PHNs work with partners to develop and promote locally tailored multicultural-specific referral pathways, including on joint platforms such as HealthPathways.

- 4.4 PHNs collaborate with health services, community organisations, social services, and communities to support integration and care coordination, including cross-sector collaboration to address the social determinants of health.

5. Capable Organisations

The PHN has processes in place to ensure a culturally responsive approach across all activities.

Governance and operational management

- 5.1 PHNs identify multicultural health as a priority area within their strategies, ensuring commitment and accountability at every level, including executive leadership and board engagement.
- 5.2 PHNs implement clear and measurable indicators to assess their cultural responsiveness and ensure continuous quality improvement. This framework or similar can be used.
- 5.3 PHNs ensure there is multicultural community representation on clinical and community advisory councils.

People management

- 5.4 All PHN staff undertake ongoing professional development training related to cultural responsiveness, access and equity.
- 5.5 Human resource processes are in place to support the recruitment and retention of people from multicultural backgrounds and cultural diversity is reflected across different roles of the PHN.

Financial management

- 5.6 PHNs allocate resourcing specifically for internal position/s that focus on multicultural health activities and that ensure all PHN programs/services are culturally responsive.
- 5.7 PHNs advocate for ongoing sustainable funding to support the delivery of multicultural health focused activities.

Stakeholder relationships

- 5.8 PHNs participate in local, state and national multicultural health working/advisory groups.
- 5.9 PHNs share knowledge, experience, and learnings with other PHNs through the National PHN Cultural Diversity Community of Practice.



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