# Tips for Mental Health Services working with people from CALD backgrounds

#### 1. Use an Interpreter

Public Mental Health Service: Be aware of local booking processes via Interpreter Service Information System. www.health.qld.gov.au

Private Medical Practitioners: GPs can access a free interpreting service through TIS National's Doctor Priority Line (DPL) on 1300 131 450.

NGOs: Check if your agency is eligible for free interpreting services and apply for a client code. www.tisnational.gov.au

#### When using an interpreter:

- Use an appropriate interpreter Carefully consider ethnicity and gender
- Allow extra time and brief the interpreter.
- Speak directly to the client. Say "What is your name", not "What is her name?"
- · Use simple language, without jargon and complicated medical terms
- Consider that people experiencing a mental illness may feel shame in front of an onsite interpreter and prefer a telephone interpreter (you can book the interpreter using a 'confidential' name to protect the client's privacy even more).
- Try to book the same interpreter for all communications.
- Avoid using family, friends and bilingual staff as interpreters as there may be uncertainty about accuracy, impartiality and confidentiality.
- · Never use children as interpreters.

## 2. Watch your language!

Medical language and talk of systems and referrals are hard to understand when you are "outside the system". Use simple and positive language. Use words like 'recovery' and 'wellbeing' (rather than 'Mental Health', 'mental' and 'illness') on buildings, doors and printed flyers. Talk about receiving help in the form of 'coping with difficulties' and 'managing stress'.

#### 3. Consider referral

Consider referral to a CALD specific organisation to support the work that you are doing. You can find a list of referral points at www.materonline.org.au/refugeehealth. Translated information can also be given to the patient www.mhima.org.au

#### 4. Respect cultural beliefs

People have different perceptions and cultural understandings of the causes and treatments of mental illness and their expectations of health care, which affects their acceptance of treatments. Communicate respectfully and listen to cultural and spiritual beliefs about causes and treatments. Incorporate these beliefs into the treatment – do not dismiss them.

Consider contacting the Qld Transcultural Mental Health Centre on (07) 3167 8333 to access a bilingual mental health worker or cultural consultant to advise on managing cultural issues in mental health.

#### 5. Consider involving family

Some cultures are more collectivist than Western society and the notion of 'family' is quite broad. Many clients may want to keep their issues private, due to shame and stigma, however you could ask if they would like to involve a family member, as it can help you to build trust. In some family structures it is essential to engage the head of the household in order to work effectively with the family. Each family is different.

#### 6. Consider involving a leader

Don't assume that people will want to be connected with their ethnic community, due to heightened stigma, shame and past experiences of torture and trauma. However, do ask who the key people in the client's life are and who they want involved, at different stages of treatment. This may be include a religious leader, an informal or elected community leader. Multicultural support agencies are often a good point of contact to connect with community leaders and elders.

#### 7. Consider the flexibility of your service

Consider your service model. Does it allow for outreach and home visits to overcome access barriers? Make sure the focus of the first appointment is on building trust and rapport, to make another appointment (rather than interrogating with a long list of questions). It will take time to gather all the information.

#### 8. Organisational policy

Use the Organisational Cultural Responsiveness Assessment Scale (OCRAS) available at www.mhima.org.au to develop an action plan for your organisation. Invite a speaker from QTMHC to give examples of using the framework and best-practice models.

#### 9. Employ a diverse workforce

Consider employing a variety of people from different cultural backgrounds to work with CALD clients but don't assume that the client will necessarily want to work with a bi-cultural worker. It is important to employ male and female workers to avoid potential difficulties communicating accross genders.

### 10. Train all staff (including reception staff)

Cultural responsiveness education and training in mental health, increases skills and confidence for all staff at your organisation. Organisations offering training in Queensland are:

- Qld Transcultural Mental Health Centre (QTMHC)
   Contact: (07) 3167 8333

  Visit www:health.gld.gov.au/metrosouthmentalhealth/gtmhc
- Qld Program of Assistance to Survivors of Torture and Trauma (QPASTT) — Contact: (07) 3120 1525
   Visit www:qpastt.org.au/training

**More information:** Mater Online Refugee Health provides clinical resources and publications for health professionals including referral pathways. Translated resources for patients are also available. <a href="https://www.materonline.org/refugeehealth">www.materonline.org/refugeehealth</a>



