



MENTAL HEALTH NGO SUBSECTOR COMMISSIONING: DISCUSSION GUIDE

**Culturally and
Linguistically Diverse
People and
Communities**



June 2023

ACT Commissioning for Outcomes
2022- 2024

About the kitchen table conversation

Why a kitchen table conversation

Kitchen Table Conversations are a way to have a guided conversation in your social or community groups. It provides an opportunity for you to participate in our Mental Health Commissioning process on your own schedule and in a more casual environment.

This pack provides all the information you need to have these conversations with your friends, family, carers, community groups, or colleagues about what is important to consider in the design of our commissioned mental health sector.

Who can participate

Anyone who wants to host or have a conversation regarding our commissioned mental health sector can have their own kitchen table conversation. This can be done at home, in a social group or even at work.

What we want to know

We want to receive responses to design specific questions for the mental health subsector. This will include ideas of what types of services we should consider, and how to make the service system best fit the needs of Canberrans. These questions are included in each of the Discussion Feedback papers and in the Design Phase Blueprint, all available from our commissioning website at:

<https://www.communityservices.act.gov.au/commissioning/sectors-in-progress/mental-health>

Getting Started

Someone will need to host the conversation. This will be a person who organises the group meeting, and ensures that everyone has an opportunity to participate and contribute. The host will lead the group through the questions within the document and then, either themselves or with the help of a scribe, write notes for feedback to the Mental Health Commissioning Team.

This feedback could be filled in on this Word Template, hand written on a print out, with a copy sent to the team, or emailed directly to the Mental Health Commissioning Team at mentalhealthcommissioning@act.gov.au

When hosting your discussion considering using a 'Talking Object'. This will allow people to take turns when speaking and ensuring that everyone has an opportunity to contribute.

You are also welcome to print out the pages in this guide to use as prompt cards so everyone can see the questions and conversation can be guided as necessary.

Hosting the Conversation

To host the conversation you will need:

- A few people to come together and talk;
- This guide;
- A pen and notebook or laptop to take notes; and
- Optional: the feedback paper, or the Blueprint found here:
<https://www.communityservices.act.gov.au/commissioning/sectors-in-progress/mental-health>

Step-by Step instructions:

Step	Instructions
1	Gather your group
2	Welcome and thank everyone for participating in this discussion
3	Acknowledgment of Country and lived experience (see below for examples)
4	Complete introductions and discuss talking object if using
5	Nominate one person to take notes or scribe, this can be yourself
6	Follow the questions below
7	Submit your feedback

Acknowledgement Scripts

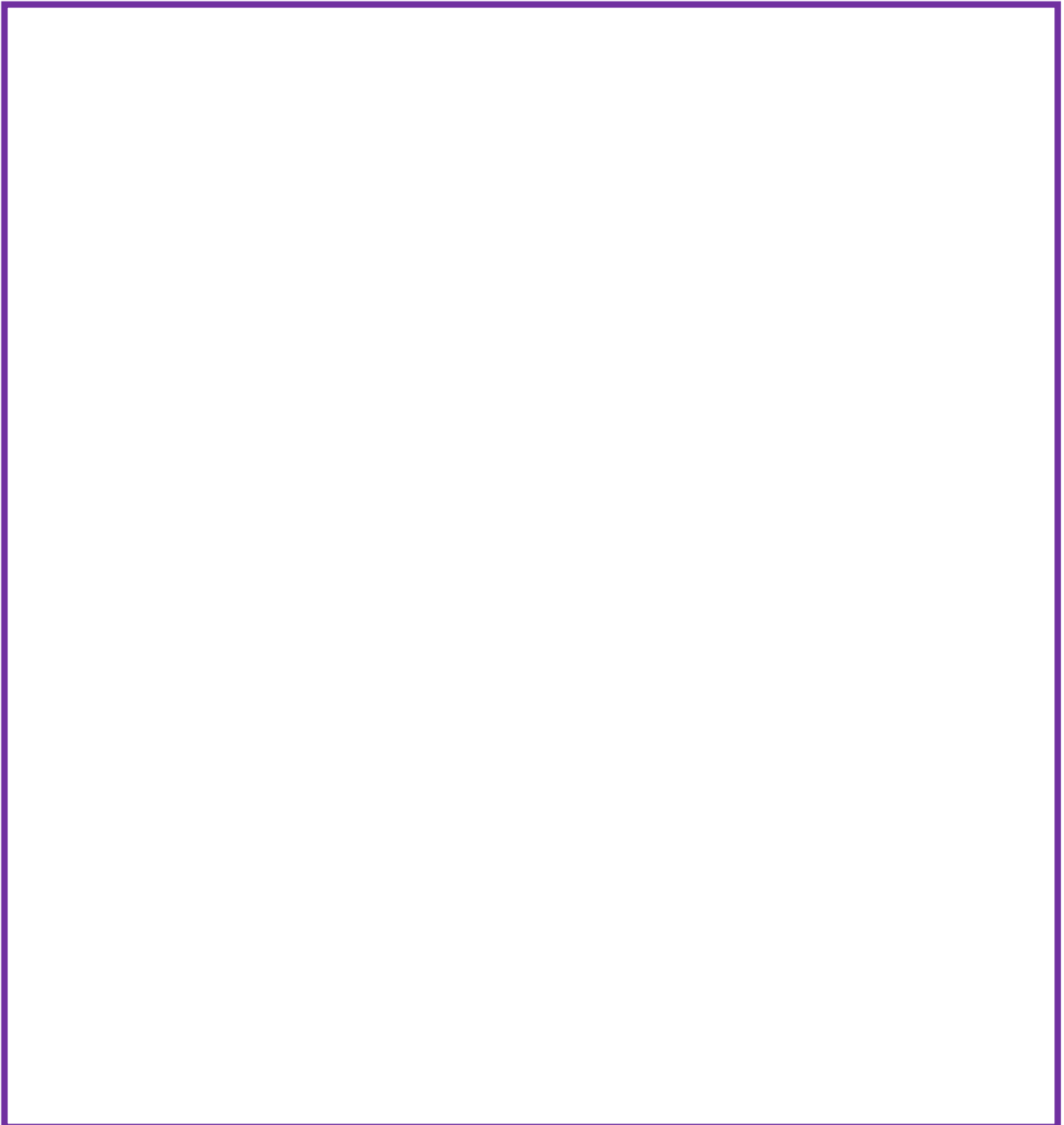
Acknowledgment of Country: ‘I/We wish to acknowledge the Ngunnawal people as traditional custodians of the land we are meeting on and recognise any other people or families with connection to the lands of the ACT and region. I/We wish to acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region. I/We would also like to acknowledge and welcome other Aboriginal and Torres Strait Islander people who may be attending today’s event.’

Acknowledgement of lived experience: ‘I/We wish to acknowledge lived experience and its importance in the mental health sector. I extend my respect and welcome any person with lived or living experience to contribute today. It is important as we move forward to acknowledge the impact this has on our conversations and consider it within our conversation.’

Questions from the CALD Discussion Paper

1. How can prevention and promotion activities better engage with CALD communities?

- Are there particular ways or places that would be best for you to learn about mental health?
- Can you think of ways your organisation could reach out to CALD communities?



2. Which of the listed barriers, or others you can identify, are the biggest barriers for:

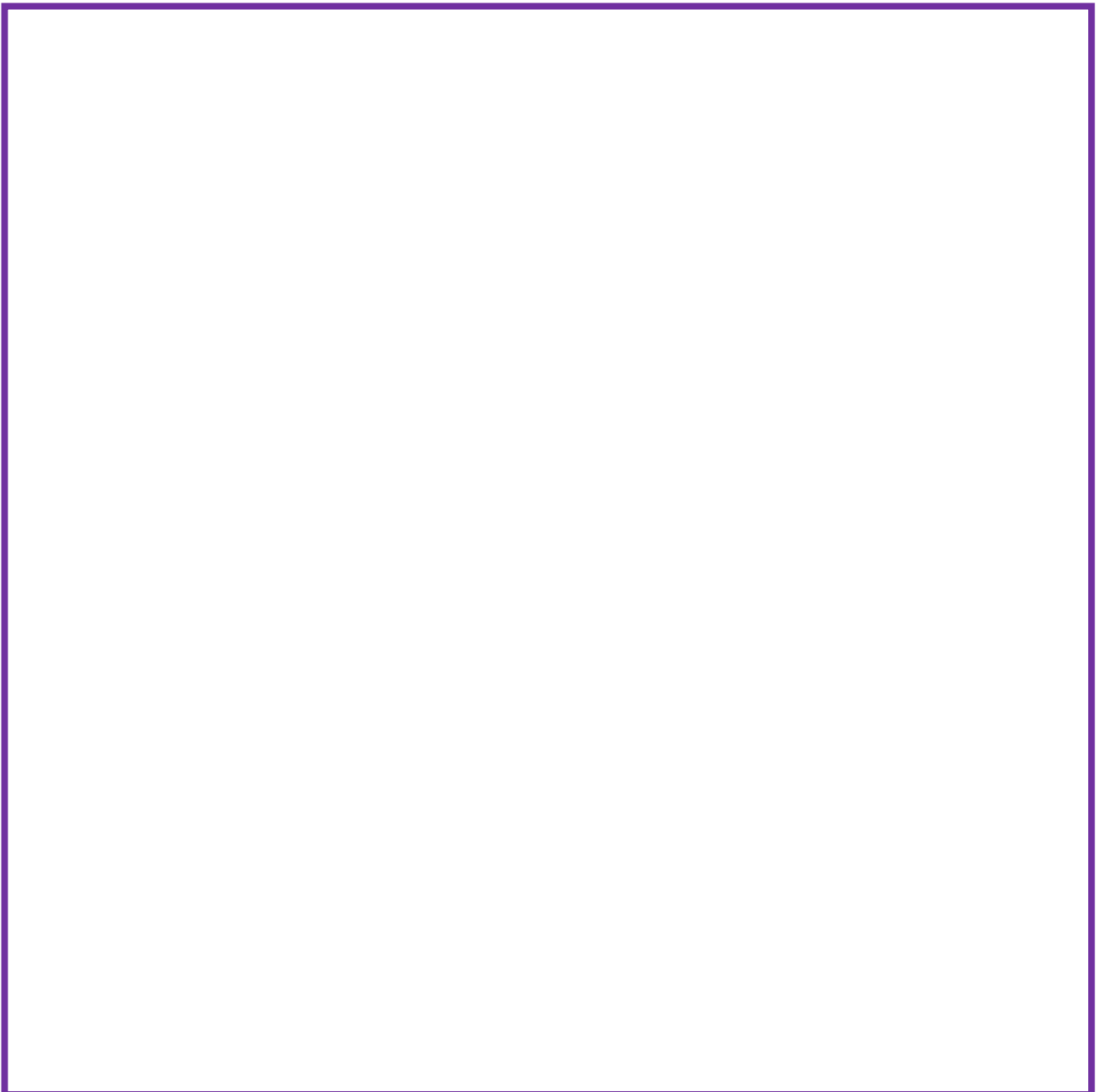
a. CALD people to access and engage with services; and

b. For services to provide culturally sensitive and appropriate care for CALD people?

- These challenges include:
 - Communication barriers
 - Loss of close family connections
 - Cultural stigma or competing values
 - Racism or discrimination
 - Stress of migration or adjustment of living in Australia
 - Trauma
 - Limited opportunity to get work or use skills
- Are there any other barriers not included in his list?
- What could address these barriers for NGO services?

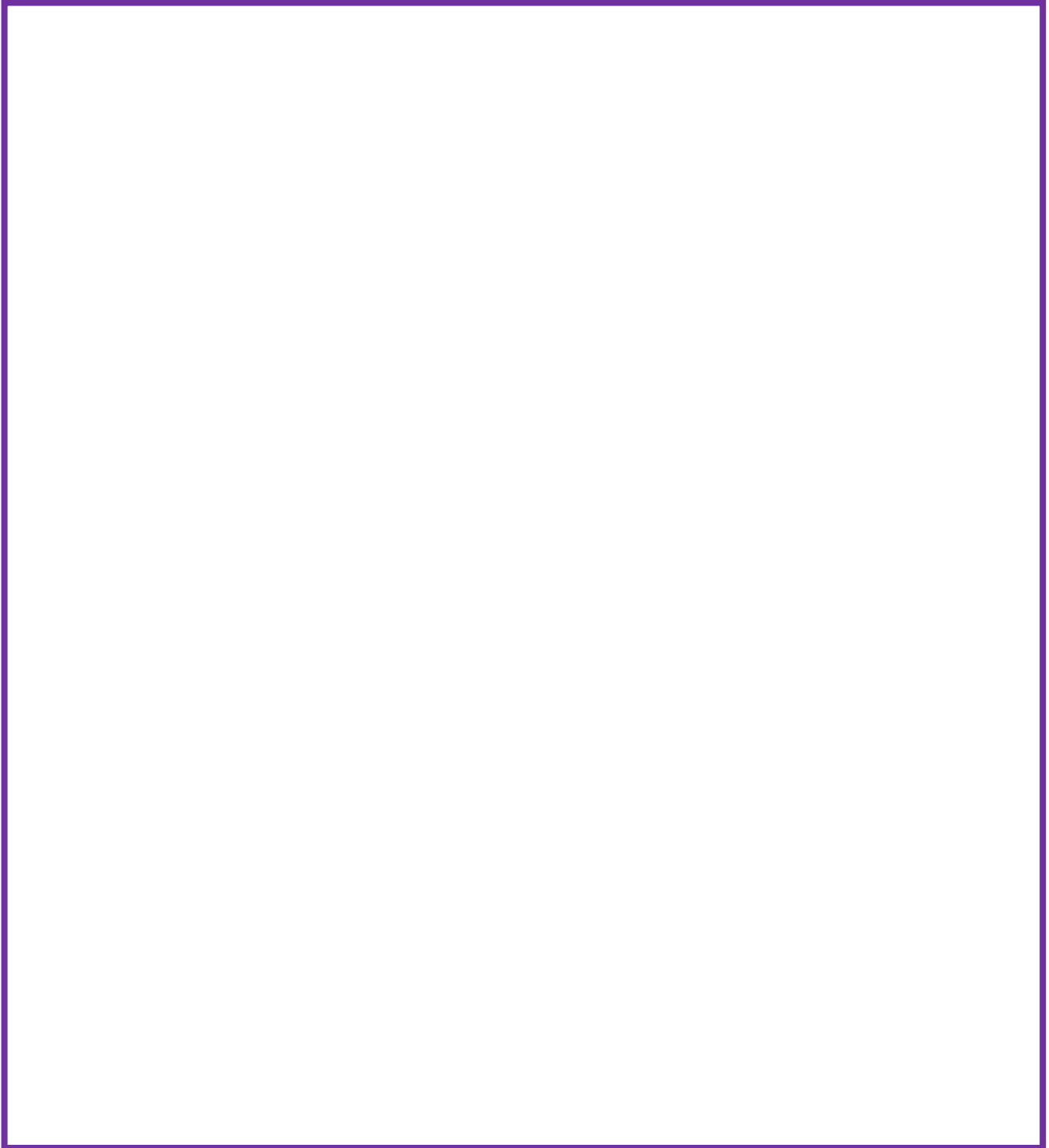
3. What needs to be done to support mental health commissioned NGO services to be more accessible for people from CALD communities?

- What would make a service feel more open and welcoming for you to attend?
- How can ACT Health assist services to be more accessible?
- What are some easy steps an organisation can take to increase accessibility?
- What are the long-term goals needed to achieve accessible services?



4. How can services be supported to develop their cultural competency? In your experience, what challenges to this have you experienced?

- What are the main barriers to developing cultural competency?
- How can ACT Health support organisations to developing cultural competency?



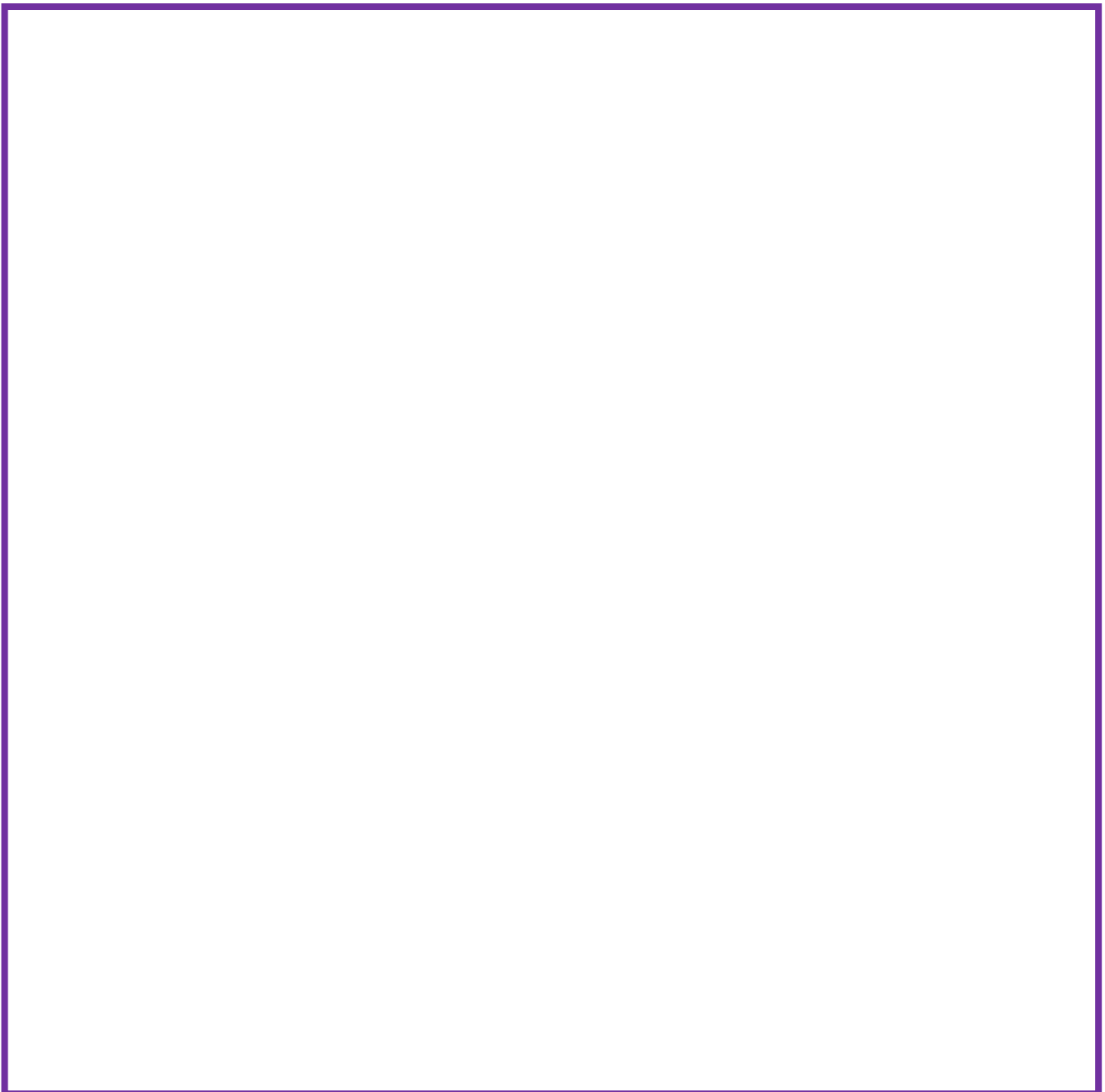
5. Noting the options suggested in the feedback paper, or any others you can think of, what would be your top priorities for services supporting CALD communities?

- Think about what you would like to see as a service in the community for people from CALD backgrounds. These may include:
 - Increased availability of translations services
 - Mental health peer workers of identified cultural groups
 - Refugee and/or family-based counselling
 - Trauma-based services
- Try identifying your top two choices for what services are important.



6. What do we need to measure to make sure we have the right services and supports for CALD people, and that those services and supports are having a positive impact on peoples lives?

- For example:
 - A change in social participation or inclusion for people from CALD communities
 - Increasing mental health knowledge for people from CALD communities



7. What challenges do NGO services have for recording and measuring data relating to CALD people?

- Does your service capture data regarding CALD communities and people?
- How would you be able to capture people from CALD communities in your data?
- What are the big limitations for you to engage with CALD people when recording your data?

Questions from the Design Phase Blueprint:

8. What are the specific service needs for CALD communities?

- Can you identify any characteristics of services that have worked well and supported CALD communities?
- What hasn't worked?



9. Are there any particularly vulnerable groups which require support?

- Do any cultural groups have specific mental health needs or barriers requiring support that you can identify?
- Does your service see a particular cultural group more than others?

10. What needs to be established for mainstream services to be accessible to CALD people?

- Should all services increase accessibility and cultural competency?
- What steps should be taken to increase cultural competency in all funded services?
- What are the main barriers to all services increasing cultural competency and safety?
- How can ACT Health support the development of sector wide cultural competency?





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