

Aboriginal and **Torres Strait Islander Cultural Protocol**

St Vincent's Health Australia **Inclusive Health Program**

Date

November 2020

Version

Cultural Disclaimer

Aboriginal and Torres Strait Islander readers should be aware that this document may contain images or names of people who have passed away

This document was written by the Service Innovation Project Officer, Inclusive Health Program. Consultation was performed throughout its development with members of the SVHA Reconciliation Action Plan Steering Committee. Funding for the development of this protocol has been provided by the SVHA Inclusive Health Program. This protocol was first approved in November 2017 and most recently reviewed in October 2020.

St Vincent's Health Australia Ltd ABN 75 073 503 536

Level 22, 100 William Street Woolloomooloo NSW 2011

Telephone 02 9367 1100 Facsimile 02 9367 1199

www.svha.org.au

Table of Contents

1. Preamble	1
2. Overview	2
3. Purpose	2
4. Online Cultural Awareness Training	3
5. Context Acknowledgements What is a cultural protocol? Why do we need an Aboriginal and Torres Strait Islander cultural protocol?	3 4
6. Overview of Aboriginal and Torres Strait Islander Health	5
7. Definitions	6
8. Acronyms	8
9. Aboriginality	8
 10. Cultural Protocols Respect and Acknowledgement. Culturally Appropriate Language and Terminology Communication and Publication Consultation and Conducting Meetings and Events Use of Intellectual and Cultural Property Undertaking Projects and Research Death and Dying Aboriginal and Torres Strait Islander Flags 	
11. Important Dates and Cultural Events	
12. SVHA Protocols, Policies and Websites SVHA SVHM SVHNS SVPHS	
13. Relevant External Documents	20 21 21
14. External Services and Resources	

National	22
Victoria	22
New South Wales	22
Queensland	22
15. References	23
16. Appendix 1 – Acknowledgement to Country	24
Examples of Acknowledgement	
Verbal Acknowledgments	
Written Acknowledgements	
Acknowledgment of Elders	24
17. Appendix 2 – Traditional Custodians, Language Groups and Nations	25
Victoria	25
New South Wales	26
Queensland	27
18. Appendix 3 – SVHA Aboriginal Health Services and Mission Departments	
Contact Details	28



1. Preamble

When sharing the stories of the bravery and pioneering spirit of the first sisters of Charity, who came to this land in 1838, we often speak of a black crucifix purportedly amongst the luggage brought across the seas. The inclusion of this item has been regarded by many as a sign of Mary Aikenhead's desire to respect and work with and for the original inhabitants of this land; and to act as a symbol of the importance of establishing right relationships between those who had been here since time immemorial and those more recent settlers.

In 2018, The SVHA Reconciliation Action Plan Steering Committee are pleased that this document, the SVHA Aboriginal and Torres Strait Islander Cultural Protocol has been developed to assist our staff in strengthening their knowledge and awareness of some of the historical and contemporary issues facing Aboriginal and Torres Strait Islander peoples and their communities. Being aware of these issues and protocols will contribute to optimum/excellent episodes of care for Aboriginal and Torres Strait Islander people. Grounded in the tenet of our Person Centred Care methodology, this information seeks to serve as a platform upon which to provide responsive healthcare that respects the choices, values, beliefs and culture of Aboriginal and Torres Strait Islander people and their families. The historical and cultural considerations for these groups across this country are diverse and complex and could not be fully explored within a single document, hence the importance of prioritising a person-centred approaching in the first instance – other materials and resources may then be referred to as necessary. The individual facility site contexts should also be considered to enable a streamlined approach to care.

Thank you for the care that you offer to our Aboriginal and Torres Strait Islander communities. Today, your care and concern is a direct extension of the initial ministry of the first five Sisters of Charity to serve in this land, and your efforts to offer excellent care to all enhance our mission and values at every level.

Darlene Dreise - Chair, SVHA Reconciliation Action Plan

Darlene Dreix



1

2. Overview

St Vincent's Health Australia (SVHA) recognises the unique and valuable position Aboriginal and Torres Strait Islander peoples hold as First Australians and acknowledge their cultures, histories, spiritualties and customs. We are committed to the creation of a community where Aboriginal and Torres Strait Islander peoples and all Australians work together in a spirit of trust and openness through equity, inclusion and the provision of opportunities for all people. This is our vision for Reconciliation, of which the development of this cultural protocol is one step on our journey.

SVHA have a long history of providing health care to Aboriginal and Torres Strait Islander peoples. We are committed to ensuring that our services are accessible and appropriate, now and into the future. We commit to doing all we can to reduce the disadvantage experienced by Aboriginal and Torres Strait Islander peoples and working towards 'Closing the Gap' of health, education and employment outcomes. It is with this goal in mind that this document has been developed.

Further information:

Access SVHA's Stretch 2020-2023 Reconciliation Action Plan here.

3. Purpose

The purpose of this protocol is to provide SVHA with a central document to guide policy development, interactions and communication both internally and externally. It is to be used as a tool to ensure SVHA staff work in a way that respects Aboriginal and Torres Strait Islander culture and practices.

This document links to existing SVHA Aboriginal and Torres Strait Islander policies, and our SVHA Reconciliation Action Plan. It contains information about processes within SVHA, and provides links to external organisations and resources.

These cultural protocols should be observed by all staff and volunteers at SVHA. The suggested approaches in this protocol are relevant to interactions with Aboriginal and Torres Strait Islander partners, staff, patients and their caregivers.

4. Online Cultural Awareness Training

One of our key RAP initiatives has been the creation of our own online cultural awareness training program for all staff. The program aims to assist staff in differentiating between facts, myths and misconceptions. It also helps them understand how to respond in a culturally sensitive, person-centred manner with Aboriginal and Torres Strait Islander patients and colleagues. The module takes one hour to complete and was developed using images of our staff and facilities along with input from members of local Aboriginal communities we work closely with.

The SVHA Aboriginal and Torres Strait Islander Cultural Awareness learning package can be accessed via the Workday Learning platform.



5. Context

Acknowledgements

The development of this protocol document was undertaken as part of the SVHA Inclusive Health Strategy. Throughout this process, input and feedback was obtained from the Reconciliation Action Plan Steering Committee. The author would like to acknowledge members of this committee and other Aboriginal and Torres Strait Islander SVHA staff for sharing their knowledge and contributing to the formation of this document.

What is a cultural protocol?

Cultural protocols describe the historical and current customs, lore and accepted codes of behaviour of a specific cultural group. These protocols, both formal and informal, are present in all cultures and are an important part of ensuring people interact and conduct their behaviour in an appropriate and respectful manner.

This document provides a guide to effective engagement with Aboriginal and Torres Strait Islander peoples at SVHA. It is hoped that the observation of these protocols will pave the way for improved working relationships between the organisation and its Aboriginal and Torres Strait Islander partners, and consequently assist in achieving better health outcomes for patients. The protocols provide an insight into Aboriginal and Torres Strait Islander perspectives and are designed to protect Aboriginal and Torres Strait Islander cultural and intellectual property rights.

As in every culture, Aboriginal and Torres Strait Islander principles and practices are dynamic and change over time. Additionally, Aboriginal and Torres Strait Islander people come from different Nations, each of which have unique cultural perspectives and traditions. Therefore, the protocols described in this document may also change and should be considered within, and adapted to, their local context. Aboriginal and Torres Strait Islander cultural protocols are rich and varied and there may be additional principles that are not included in this document. Ongoing consultation with Aboriginal and Torres Strait Islander representatives is essential to ensure that the protocols outlined in this document are reflected in our work at SVHA.

Why do we need an Aboriginal and Torres Strait Islander cultural protocol?

The consideration and observance of these cultural protocols will greatly benefit Aboriginal and Torres Strait Islander patients and their families, staff, and organisational partners. It is hoped that adherence to these protocols will ensure that our organisation is culturally safe and that Aboriginal and Torres Strait Islander patients feel welcome, respected, valued, safe, and have positive experiences within our services. It is hoped that the creation of this culturally safe environment will lead to increased self-determination, self-empowerment and participation of Aboriginal and Torres Strait Islander patients and communities.

While this protocol can be seen as a starting point from which SVHA staff can increase their awareness and confidence in interactions, it is hoped that staff will go on to foster individual relationships with Aboriginal and Torres Strait Islander patients and colleagues. Although SVHA staff have access to the Aboriginal Health Unit team at SVHM and SVHNS to provide support and guidance in this process, we would encourage all staff to develop their personal ability to work in a culturally acceptable, safe and well-informed way with Aboriginal and Torres Strait Islander people.

For our non-Indigenous staff, these protocols also represent an opportunity for self-reflection, discussion, and awareness of the importance of improved cross-cultural communication with Aboriginal and Torres Strait Islander people. This document aims to assist in mending, building and strengthening relationships with members of the Aboriginal and Torres Strait Islander community. It is designed to provide practical guidance to staff working with Aboriginal and Torres Strait Islander people, and to reduce unnecessary misunderstandings and communication barriers.

6. Overview of Aboriginal and Torres Strait Islander Health

Before European colonisation, Aboriginal and Torres Strait Islander peoples inhabited most areas of the Australian continent. Lifestyles, spiritual beliefs and cultural traditions varied from region to region, and hundreds of separate languages and dialects were spoken. Historically, Aboriginal and Torres Strait Islander peoples have a strong sense of belonging to, and responsibility for, the land and waters on which they live. This sense of connection endures to this day despite the effects of generations of discriminatory government policy including eviction from traditional lands and the forced removal of Aboriginal and Torres Strait Islander children from their families, referred to as the 'Stolen Generations'.

The Aboriginal and Torres Strait Islander view of health and wellbeing may differ to that of non-Indigenous Australians. For Aboriginal and Torres Strait Islander peoples, health is a holistic notion, considering not just the wellbeing of individuals, but that of communities and country.

Aboriginal health means not just the physical wellbeing of the individual but refers to the social, emotional and cultural wellbeing of the whole community in which each individual is able to achieve their full potential as a human being thereby bringing about the total wellbeing of their community -National Aboriginal Community Controlled Health Organisation (NACCHO)

The health and wellbeing of Aboriginal and Torres Strait Islander peoples has suffered greatly under successive governments racist and exclusionary policies. This health decline began in the period of time immediately post colonisation with the devastating effects of newly introduced disease and denial of access to food and water supplies. Coupled with massacres, systematic attacks and poisonings, the Aboriginal and Torres Strait Islander population was decimated and families and communities were destroyed.

Aboriginal and Torres Strait Islander peoples not only experienced genocide, rape and torture, but were subjected to theft of land, forcible removal of children from their families and destruction of livelihood and culture. This has resulted in profound grief, suffering and loss in Aboriginal and Torres Strait Islander communities and the ongoing effects of this severe trauma cannot be underestimated. This unresolved distress is often passed down through families and communities, which results in what is known as 'intergenerational trauma'.

Socioeconomic disadvantage is known to have a profound negative impact on health. Poverty, unemployment, and low levels of educational attainment continue to persist in many Aboriginal and Torres Strait Islander communities and contribute to ongoing poor health. Aboriginal and Torres Strait Islander people live significantly shorter lives than non-Indigenous Australians, and shoulder a heavier burden of both acute and chronic illness.

SVHA has an extensive history of provision of healthcare to Aboriginal and Torres Strait Islander people, of which we are very proud. In the spirit of our founding Sister, Mary Aikenhead, we continue to prioritise provision of care to disadvantaged and vulnerable groups within our society.

Although much progress has been made, Aboriginal and Torres Strait Islander people can expect to live an average of 8.5 years less than non-Indigenous Australians. The 2020 Closing the Gap reports reveals that while some early childhood education targets are on track, there remains much work to be done to resolve persistent inequalities in schooling, employment and life expectancy. As new targets are negotiated at a federal level, Closing the Gap and improving the health outcomes for Aboriginal and Torres Strait Islander people will continue to be one of SVHA's core priorities.

Further information:

You can find the latest information on Aboriginal and Torres Strait Islander health at the Australian Institute of Health and Welfare by clicking <u>here.</u>

To find out more about the progress of the Closing the Gap initiative, click this link.

To find out about St Vincent's Health Network Sydney's approach to Aboriginal and Torres Strait Islander health, click <u>here.</u>

To find out about St Vincent's Hospital Melbourne's approach to Aboriginal and Torres Strait Islander health, click <u>here.</u>

7. Definitions

Clan

A clan is a local descent group, larger than a family but based on family links through a common ancestry. A clan is a subset of a nation, for example, the Yuin nation in south-eastern NSW has several clans within it. The term clan has a specific meaning derived from other societies, and therefore may not be entirely applicable to Aboriginal and Torres Strait Islander culture (1).

Community

Due to the forcible removal of people from their ancestral lands, the Aboriginal and Torres Strait Islander perspective of community is not necessarily based on geographical location. In this context, the term community refers to country, extended family ties, shared experience, interrelatedness and belonging (1).

Country

A culturally defined area of land associated with a distinct group of people or nation (1).

Cultural awareness

Cultural awareness is the initial step toward understanding 'difference' – what constitutes a cultural group, their rituals, customs, behaviours and practices (2).

Cultural competence

Becoming aware of cultural differences that exist, appreciating and having an understanding of those differences and accepting them. It also means being prepared to guard against accepting your own behaviours, beliefs and actions as the norm (3).

Cultural respect

The recognition, protection and continued advancement of the inherent rights, cultures and traditions of a particular culture (3).

Cultural responsiveness

Cultural responsiveness finds legitimacy in the positive experience of the patient and improved health outcomes. Cultural responsiveness must be integrated in the delivery of health services in order to reduce the institutionalised racism that maintains current Aboriginal health standards (4). It is a 'set of behaviours, attitudes

and policies that come together in a system, agency or among health professionals and enable that system, agency of those health professionals to work effectively in cross cultural situations' (5).

Cultural safety

Cultural safety in the SVHA context is providing quality health care that fits within the familiar cultural values and norms of the person accessing the service that may differ from one's own and/or the dominant culture (6). Actions that recognise, respect and nurture the unique cultural identity of a person and safely meet their needs, expectations and rights. It means working from the cultural perspective of the other person, not from your own perspective (3).

Elder

An Elder is a highly respected person in the Aboriginal or Torres Strait Islander community who possesses specific cultural knowledge and skills. Elders act as custodians of Aboriginal or Torres Strait Islander knowledge, traditions and lore. Elders may not always be of advanced age (7).

Intergenerational trauma

Trauma is generally understood as a person's response to a major catastrophic event that's so overwhelming it leaves that person unable to come to terms with it. In some cases, trauma is passed down from the first generation of survivors who directly experienced or witnessed traumatic events, to future generations. This is referred to as intergenerational trauma, and can be passed on through parenting practices, behavioural problems, violence, harmful substance use and mental health issues (8).

Men's or women's business

Men's and women's business can be defined as particular roles, ceremonies and Lore that are specific and sacred to men and women individually. The customs and practices within men's and women's business are strict, with harsh penalties and punishments if the rules are broken. Men are not to know what happens in women's business and women cannot know what happens in men's business (9).

Mob

A term used to identify a group of Aboriginal or Torres Strait Islander people associated with a particular place or country. This term is generally used to describe other Aboriginal and Torres Strait Islander people, and should not be used by non-Indigenous people unless use is known to be acceptable (1).

Nation

A culturally distinct group associated with a particular culturally defined area of land or country. Each nation has boundaries that cannot be changed and language that is tied to each nation and country. Boundaries of nations may cross state borders, which is important to recognise in service delivery, provision and negotiation (1).

Sorry Business

This is the cultural and social obligation of family, friends and associates to take part in an extended period of mourning following the death of an Aboriginal or Torres Strait Islander person. The community will often gather together to express and share their sorrow and to provide support to fellow mourners. Sorry Business may also be conducted if individuals lose connection to their community due to imprisonment or drug or alcohol use (10).

Stolen Generations

The Stolen Generations are an extended period of history when Aboriginal and Torres Strait Islander children were forcibly removed from their communities and families by Australian government agencies and church

missions under acts of parliaments. This occurred from the late 1800's right up to the 1970's. These children were sent away to be placed in girls and boy's homes, missions and foster families where they were forbidden from speaking their native language or expressing any part of their Aboriginal or Torres Strait Island culture (11).

Traditional Owner/Custodian

An Aboriginal and Torres Strait Islander person or persons directly descended from the original Aboriginal and Torres Strait Islander inhabitants of a culturally defined area of land or country, who has a cultural association with the country that derives from traditions, observances, customs, beliefs or history of the original inhabitants (1, 11).

Tribe

Similar to Nation, a tribe can be defined as a culturally distinct group of people associated with a particular, culturally defined area of land or country. This term has a specific meaning derived from non-Indigenous culture, so may not always be suitable for use within the Aboriginal and Torres Strait Islander community (1).

8. Acronyms

ACCO/ACCHO Aboriginal Community Controlled Health Organisation

AHLO Aboriginal Hospital Liaison Officer

AHU Aboriginal Health Unit

ALO Aboriginal Liaison Officer

NACCHO National Aboriginal Community Controlled Health Organisation

SALO Senior Aboriginal Liaison Officer

VACCHO Victorian Aboriginal Community Controlled Health Organisation

9. Aboriginality

Since the early 1980's the accepted definition of an Aboriginal or Torres Strait Islander person is someone who:

- 1. Is of Aboriginal and/or Torres Strait Islander descent and
- 2. Identifies as an Aboriginal and/or Torres Strait Islander person and
- 3. Is accepted as such by the community in which they currently (or formerly) lived

It is important to recognise that Aboriginality is defined by culture, not colour. It is considered extremely offensive to question the 'amount' of Aboriginal and/or Torres Strait Islander blood an Aboriginal or Torres Strait Islander person possesses. Terms such as 'half-caste' and full-blood' are considered to be racist and should not be used. In addition, the determination of who is Aboriginal and Torres Strait Islander can only be decided by Aboriginal and Torres Strait Islander by non-Indigenous people.

Every patient should be asked "Are you of Aboriginal and/or Torres Strait Islander origin?" on their first contact with SVHA, and periodically after this time as a person's wish to identify as Aboriginal or Torres Strait Islander may change. This question is asked in order to inform the provision of culturally appropriate care and to ensure services and resources available to Aboriginal and Torres Strait Islander patients are properly utilised. Accurate

recording of Aboriginality is also important for statistical analysis and to inform health service planning, delivery and monitoring. The process of identification of Aboriginality may vary between different Australian states, therefore it is important to be guided by local practices. Aboriginal and Torres Strait Islander people may choose not to identify as such, which should not be questioned. It is not acceptable to assume Aboriginality or non-Aboriginality based on a person's physical appearance, style of dress, use of language, community or family group.

It is also important to understand that there are significant differences between Aboriginal people and Torres Strait Islander people. Each group have their own distinct history, culture, and beliefs and while some aspects of these are similar, it should not be assumed that what is relevant to Aboriginal people is necessarily applicable to Torres Strait Islander people and vice-versa.

Diversity also needs to be recognised within Aboriginal and Torres Strait Islander peoples. Just like in any other culture, Aboriginal and Torres Strait Islander people have varied beliefs, behaviours and world-views and there is no 'one size fits all' approach to understanding culture.

10. Cultural Protocols

Respect and Acknowledgement

In our work at SVHA, it is important that Aboriginal and Torres Strait Islander culture, customs and rights are recognised and respected. When conducting events and significant meetings at St Vincent's sites or offsite involving St Vincent's staff and partners, it is important to recognise traditional land owners/custodians. Depending on the circumstance, this may be in the form of a Welcome to Country or an Acknowledgement of Country. Please refer to the table below for more detail about Welcome and Acknowledgement of Country.

The Acknowledgement of Elders is another provision of respect which is necessary at all major events and formal meetings. In some cases, it may also be relevant to acknowledge local Aboriginal and Torres Strait Islander sites of historical and/or current importance. The performing of symbolic cleansing practices, such as a Smoking Ceremony may also be appropriate, particularly when opening new facilities or buildings.

When conducting videoconferences, it is advisable to perform an Acknowledgement to Country, particularly if there are Aboriginal or Torres Strait Islander people known to be involved in the meeting. One approach to this is for the organiser of the meeting to perform a general acknowledgement referring to 'all Traditional Owners/Custodians' as one group. Alternatively, the organiser may choose to acknowledge each specific Aboriginal and Torres Strait Islander group, or may advise participants in advance that they are requested to perform their own acknowledgements, one for each of the locations in which they are situated.

Please see next page for further information.

Information about the use, process and significance of these ceremonies can be found here:

Protocol	Description	When To Use	Notes
Welcome to Country	Traditional welcoming ceremonies are performed at the beginning of events. They are performed by an Elder or appropriate member of an Aboriginal or Torres Strait Islander community to welcome people who are visiting and/or meeting on their traditional land. These ceremonies vary from speeches of welcome, to traditional dance and smoking ceremonies.	Welcome to Country should be incorporated into the opening of major internal or public events, meetings, forums or functions, as well as at the opening of buildings or facilities.	Plan well ahead to allow for the availability of the appropriate person to conduct the ceremony. A fee for travel costs and the time given by community members will likely be charged. To arrange a Welcome to Country, consult your relevant AHU or Mission Department. See Appendix 3 for a list of contact numbers.
Acknowledgement of Country	Acknowledgement of Country can occur with or without a Welcome to Country and/or when a smaller or less formal gathering is taking place.	Acknowledgement of Country should be performed by the first speaker or most senior representative at any significant organisational forum with a range of internal and external stakeholders present. This is a mark of respect for the owners/custodians of the land on which the event is taking place. Subsequent speakers may also choose to acknowledge Traditional Custodians.	Make every attempt to determine the name of the Traditional Custodians in preparation for an event, but if you are uncertain a general acknowledgement is acceptable. It is better to use a general acknowledgement than to cause offence by referring to an incorrect Aboriginal or Torres Strait Islander group. See Appendix 1 for examples of Acknowledgement to Country. See Appendix 2 for a list of Traditional Custodians.

Acknowledgement of Elders	The first speaker at a forum recognises and pays respect to Elders, past and present. This acknowledgment forms part of the Acknowledgement to Country.	At major events, Acknowledgement of Elders (past and present) usually follows Acknowledgement of Traditional Custodians.	This acknowledgement should be performed irrespective of known attendance of Elders. Elders should be acknowledged by name only with permission. Other terms should also only be used with prior approval (for example Aunty or Uncle).
Acknowledging significant Aboriginal sites	The first speaker at a forum recognises cultural or historical sites of significance in the vicinity of the meeting.	When an event is held near a significant site.	For example, it may be appropriate for an Elder or community leader to acknowledge the site of a traditional meeting place or of a massacre on behalf of all present.

Culturally Appropriate Language and Terminology

Respectful use of language and terminology is an essential part of effective cross-cultural communication. The meaning of our words and our use of language has a historical context that may reinforce discrimination, prejudice and unjust power dynamics. Therefore, the use of non-discriminatory and accurate language is an important part of ensuring social justice and safeguarding the human rights of Aboriginal and Torres Strait Islander peoples.

When language and terminology are used in a sensitive and appropriate manner, this will lead to improved communication. Effective communication is an essential element in the formation of trust and partnership between Aboriginal and Torres Strait Islander and non-Indigenous people. For patients, improvements in cross-cultural communication will lead to increased confidence in seeking care, asking health related questions, and performing self-advocacy.

Alternatively, when cross-cultural communication is performed poorly, this may lead to unnecessary confusion, misunderstanding, disappointment and resentment. The following table provides information about appropriate and inappropriate terminology used in the description of, and interaction with Aboriginal and Torres Strait Islander peoples:

Appropriate Terminology	Inappropriate Terminology
Aboriginal people(s)	Aborigines
Aboriginal person	Aboriginal(s) and Torres Strait Islanders(s) – as a noun and plural
Torres Strait Islander people(s)	The Aboriginals
Torres Strait Islander person	Native
Indigenous people(s)	ATSI (or any other abbreviation)
Aboriginal and/or Torres Strait Islander communities	indigenous (refers to many cultures from around the world and diminishes Aboriginality)

First Nations people/ First People European invasion/European colonisation Shared issues/Shared challenges Blackfella/Whitefella*	Mixed blood/Half Caste/Quarter Caste/Full blood/Part- Aboriginal/25%, 50% Aboriginal Them/Them people/Those people/You people European settlement/European arrival/European discovery Aboriginal problem/Indigenous problem
Aboriginal people(s)	Aborigines
Aboriginal person	Aboriginal(s) and Torres Strait Islanders(s) – as a noun and plural
Torres Strait Islander people(s)	The Aboriginals
Torres Strait Islander person	Native
Indigenous people(s)	ATSI (or any other abbreviation)
Aboriginal and/or Torres Strait Islander communities	indigenous (refers to many cultures from around the world and diminishes Aboriginality)
First Nations people/ First People European invasion/European colonisation	Mixed blood/Half Caste/Quarter Caste/Full blood/Part- Aboriginal/25%, 50% Aboriginal
Shared issues/Shared challenges Blackfella/Whitefella*	Them/Them people/Those people/You people
,	European settlement/European arrival/European discovery Aboriginal problem/Indigenous problem

*Though contentious, these terms may be used when use is known to be acceptable. It is advised that the practice of local Aboriginal and Torres Strait Islander groups is followed.

Note: It is important to refer to non-Indigenous Australians as 'non-Indigenous Australians' not 'Australians'

Communication and Publication

There are specific guidelines that must be followed when writing about Aboriginal and Torres Strait Islander peoples or culture in both private communication and public forums. Always use a capital for naming words such as Aboriginal, Torres Strait Islander, Traditional Owner/Custodian and Elder. The term Aboriginal should never be abbreviated as this is considered extremely offensive.

In Aboriginal and Torres Strait Islander culture, there are often specific rules and protocols about naming people who have died. All SVHA publications that include the names and images of Aboriginal and Torres Strait Islander people should include a warning statement. An example of an appropriate warning that can be used in such a case is 'Aboriginal and Torres Islander readers should be aware that this document may contain images or names of people who have since passed away'. Any written publication where there has been input from Aboriginal or Torres Strait Islander people should also include acknowledgement of their consultation and ownership as applicable.

When producing written information for non-Indigenous and/or Aboriginal and Torres Strait Islander patients, it is advised to use plain language and avoid overly complicated medical jargon. This is due to varying levels of health literacy. To use images of significance to Aboriginal or Torres Strait Islander people, appropriate permission must be obtained. For further information on this process, please see the section of this document titled 'Use of Intellectual and Cultural Property'. Further information:

Access the NSW Health guide to positive communication with Aboriginal and Torres Strait Islander people here.

Consultation and Conducting Meetings and Events

Proper consultation is essential in all stages when conducting meetings and events that involve or impact on Aboriginal or Torres Strait Islander peoples, and their self-determination should be encouraged at all times. Historically, Aboriginal and Torres Strait Islander peoples have been excluded from consultation and decision making about their own affairs and those of wider society. Therefore, it is important to ensure respectful engagement throughout these processes and to work in partnership with Aboriginal and Torres Strait Islander people to avoid repeating past mistakes and injustices.

In the initial phase of planning a significant meeting or event that will involve or impact on Aboriginal or Torres Strait Islander peoples, it is advisable to include an appropriate Aboriginal and/or Torres Strait Islander representative. To facilitate this, the AHU of the facility or the local ACCHO should be contacted (see Appendix 3 for further details). The Aboriginal or Torres Strait Islander representative will assist with initial planning and preparation, 'Warm the Ground' by notifying Aboriginal and Torres Strait Islander community members of the event and aid in the formation of trust within the community. Prior to the meeting, proper acknowledgement of Traditional Owners/Custodians should be arranged. Please see the 'Respect and Acknowledgement' section of this document for further information.

When planning and conducting meetings with Aboriginal and Torres Strait Islander people, there are a number of cultural differences of which non-Indigenous people should be aware. Due to the communal nature of social structures and decision making within communities and the prioritisation of community business, consultation and decision making may take an extended time. Due to this, the person or people organising the meeting or event must be flexible in their approach and allow plenty of time to make arrangements.

If the meeting or event is being held on Country or in a community setting, it is important to find out what type of behaviour is acceptable to the specific group. When conducting meetings, there may be culturally defined rules around order of speaking, who speech is addressed to and where people sit. SVHA staff are advised to consult with Aboriginal and/or Torres Strait Islander representatives prior to the meeting or event to ensure that their behaviours are culturally appropriate and do not inadvertently cause offense. It is also important to keep in mind that some subjects may not be appropriate for discussion in certain groups, for example Men's and Women's Business and sacred or secret material. Additionally, when addressing attendees of the meeting, it is advisable to avoid putting them on the spot by asking them to immediately answer questions or to justify their position in front of the group, as this may cause embarrassment or shame. Throughout the meeting, be aware of people's responses and body language and use this to guide your approach.

Additionally, the format of the meeting itself may differ from those held in a non-Indigenous setting. They may be less structured and sequential than what SVHA staff are used to. With this increased fluidity, it is important to remain flexible and to keep in mind that as long as the desired outcome is either achieved or progressed towards, the meeting can be considered a success. In saying this, it is also advisable not to rely on reaching an agreement or outcome in just one meeting; rather it is better to think of the meeting as a sharing exercise aiming to move towards mutual understanding of the topic at hand.

After the meeting or event, it is important to keep Aboriginal and Torres Strait Islander stakeholders included in follow up and ongoing consultation. Aboriginal and Torres Strait Islander representatives should also be invited to provide feedback throughout the consultation and decision making process. Significant meetings and events should be evaluated to assess the success of proper consultation and involvement of Aboriginal and Torres Strait Islander people.

For further information or advice on culturally appropriate meetings and events, please contact your facilities' AHU or Mission Department or your local ACCHO.

Use of Intellectual and Cultural Property

As appropriation has occurred in the past and still occurs to this day, it is important to ensure that Aboriginal and Torres Strait Islander intellectual and cultural property is respected and acknowledged. This property may include (but is not limited to) images, art, songs and stories. In the use of any of these media, SVHA must uphold Aboriginal and Torres Strait Islander people's rights to ownership, in the past, present and future.

Gaining appropriate permission and the observation of copyright law are key in the use of intellectual and cultural property. Art, photos and stories should never be reproduced or utilised without previous consultation with the artist or other appropriate representative. Permission must be gained each and every time Aboriginal or Torres Strait Islander art or property is represented, even if it is already on display in a SVHA facility. Once finding out who is the correct person to ask for permission, SVHA staff should explain how and where the property will be used, and for what purpose. The potential risks and benefits of use should be discussed and it should be ensured that the property owner/custodian has a comprehensive understanding of all aspects of this process. Written permission must then be obtained through the use of a SVHA approved consent form which can be obtained from the relevant Arts Department.

When selecting images or works of art to utilise, it is important to ensure that these represent Aboriginal and Torres Strait Islander peoples or culture in a positive light and do not perpetuate negative stereotypes. Some cultural and intellectual property may be considered confidential, personal, sacred or secret, and as such will not be suitable for public scrutiny. Cultural protocols around the naming and/or representation of Aboriginal and Torres Strait Islander people that have died should be considered; more information on this topic can be found in the 'Written Communication and Publication' section of this document. For further information in regards to the use of Aboriginal and/or Torres Strait Islander art at SVHA please read the SVHM Arts Policy (available on the SVHM intranet) or contact your facilities' Arts Department or Curator.

Lastly, non-Indigenous Australians must be cautious around assuming their ability to understand and interpret the meaning of Aboriginal and Torres Strait Islander intellectual and cultural property. When describing art and relaying stories, SVHA staff must acknowledge that while they have some insight into their significance, deeper understandings can only be explained by the Aboriginal and/or Torres Strait Islander artist or author themselves.

As part of SVHA's Reconciliation Action Plan, 48 of our staff members, led by 3 leading Aboriginal and Torres Strait Islander artists, collaborated on a 2016 art project to explore the meaning of Reconciliation. SVHA is the custodian of this collaborative art piece and it is currently on display at each of our facilities. All of the artists have provided copyright permission for the use and reproduction of the piece.



Reconciliation: Towards excellent health, happiness and equality. Bianca Beetson, Vicki Couzens and Jeffrey Samuels in collaboration with 48 SVHA staff members, 2016.

Undertaking Projects and Research

Research with Aboriginal and Torres Strait Islander Peoples spans many methodologies and disciplines and the ways in which Aboriginal and Torres Strait Islander individuals, communities or groups are involved in or affected by research varies. The variations depend on factors such as the research scope, the participant group (for example the demographics such as age, gender or geographical location or illnesses) or the social phenomena to be studied as well as the historical, social and cultural context and connections of participants. Researchers should address relevant issues of research design, ethics, culture and language specific to the participant group.

Researchers planning research or projects involving Aboriginal and Torres Strait Islander peoples must consult and follow appropriate ethical guidelines. These guidelines include but are not limited to the following documents:

The National Health and Medical Council (NHMRC) <u>Ethical conduct in research with Aboriginal and Torres Strait</u> <u>Islander Peoples and communities: Guidelines for researchers and stakeholders</u> and <u>Keeping research on track II</u>.

As well as the <u>Guidelines for Ethical Research in Australian Indigenous Studies</u> produced by the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS).

These guidelines embody the best standards of ethical research and human rights and seek to ensure that research with and about Aboriginal and Torres Strait Islander peoples follows a process of meaningful engagement and reciprocity between the researcher and the individuals and/or communities involved in the research.

The NHMRC National Statement on Ethical Conduct in Human Research includes a chapter on Aboriginal and Torres Strait Islander Peoples (refer to chapter 4.7). This chapter outlines six core values that have been identified as being important to Aboriginal and Torres Strait Islander peoples. These include: Reciprocity, Respect, Equality, Responsibility, Survival and Protection and Spirit, and Integrity. Application of these core values, and of additional cultural and language protocols, should be determined by the Aboriginal and Torres Strait Islander communities or groups involved in the research.

Click here to access detailed information about these core values.

Human Research Ethics Committees (HRECs) are also required to apply the principals within Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities: Guidelines for researchers and stakeholders, as the basis for assessing proposals for health research with Aboriginal and Torres Strait Islander participation. The processes to assess this may vary across HRECs and some may also require additional documentation to demonstrate adherence to the Aboriginal and Torres Strait Islander values.

To ensure a project or study is culturally acceptable, an appropriate Aboriginal or Torres Strait Islander representative/s should be included from the outset. This representative/s will ideally possess an understanding of the context and aims of the project and should be a respected member of the community you plan to engage with. When undertaking a significant activity that will have a high impact on Aboriginal or Torres Strait Islander people, it is advisable to consult widely with community members to ensure varying perspectives are gained. Aboriginal and Torres Strait Islander people's rights to self-determination must be upheld, and if individuals or groups decline to be involved in research or do not allow a project to go ahead, these decisions must be supported and respected.

Some Aboriginal and Torres Strait Islander communities may have formal approval processes that need to be followed prior to agreeing to be involved in the research or project. The Aboriginal or Torres Strait Islander representative/s involved with the project will ideally be able to provide guidance, or will know who to consult with to seek approval. This consultation and approval process may take an extended period of time as building trust within the community and/or organisation is imperative. Due to community decision making processes and the frequent involvement of individuals and groups in Community Business, it is advised to be flexible with deadlines and to allow plenty of time to conduct projects. Several short visits to communities may be more productive than one longer visit as it may take numerous interactions to gain rapport and trust. Aboriginal and Torres Strait Islander representatives should be kept up to date throughout the research process, and information should be regularly fed back to communities in a meaningful and relevant way.

For advice and assistance in engaging an Aboriginal and Torres Strait Islander representative, contact the SVHA Senior Aboriginal Research Fellow, your local Aboriginal Health Unit or ACCHO.

Further information:

See the AIATSIS Guidelines for Ethical Research in Australian Indigenous Studies.

The <u>Lowitja Institute</u> is another organisation that provide ample information on Aboriginal and Torres Strait Islander projects and research.

Death and Dying

When providing Aboriginal and Torres Strait Islander patients with palliative care, there are certain cultural considerations that should be taken into account. It is important to understand that Aboriginal and Torres Strait Islander people may have a different approach to death, dying and grieving to non-Indigenous Australians.

For some Aboriginal and Torres Strait Islander people, the time period before, during and after death are subject to a number of customary practices. The meanings of these practices are often sacred and as such may not be disclosed to hospital staff. Due to this, it is essential that Aboriginal and Torres Strait Islander people's approaches to death are respected, and that SVHA staff handle any practices or requests with sensitivity and without judgement.

Respectful and culturally appropriate communication with patients and their families is crucial in this difficult and confronting time. Information is imparted by way of mutual exchange and communication techniques may be used such as inferring, volunteering knowledge, silence and waiting until people are ready to bestow their information. Some Aboriginal and Torres Strait Islander people may feel uncomfortable with the words "death"

or "dying"; using the word "passing" may be more acceptable and better reflect Aboriginal and Torres Strait Islander spiritual beliefs about the life-cycle. Building and maintaining rapport and trust is essential to ensure lines of communication remain open. If staff are able to form relationships with the dying patient and their family, there is increased likelihood of them asking questions and expressing their needs. The Aboriginal Hospital Liaison Officer (AHLO) or AHU should be contacted as soon as possible when it is identified that a patient is expected to die, if they are not already involved in the persons care. Your facilities Pastoral Care team may also be able to provide culturally tailored and appropriate spiritual support. For more information on culturally safe communication, please see the sections of this document entitled 'Culturally Appropriate Language and Terminology' and 'Communication and Publication'.

When it is known that an Aboriginal or Torres Strait Islander person is likely to pass away, close and extended family members, friends and community members will often gather as a mark of respect. This may result in large groups of visitors. Where possible, space should be made available for groups to gather and the patient should be cared for in a single room. Family members may request to stay with the palliative patient, especially when they are far from home and Country. These requests should be facilitated wherever possible. Additionally, Aboriginal and Torres Strait Islander patients and their family may request that arrangements are made for the patient to return to their community so that they are able to pass away on Country.

Due to differing spiritual understandings and realities, terminally ill patients and their families may describe hearing or seeing spirits of their ancestors. This should not be interpreted as a result of medication or pathology. Once the patient has passed away, care should be used not to use the name of the person, as some Aboriginal and Torres Strait Islander people believe this to cause the person's spirit to be held back or recalled to this world. When notifying next of kin about the death of an Aboriginal or Torres Strait Islander person, some believe that it is unacceptable for this to be done by non-Indigenous staff. The AHLO, AHU or Pastoral Care team should be contacted to provide assistance in this situation.

Following the passing away of an Aboriginal or Torres Strait Islander person, members of their community may enter into a prolonged period of 'Sorry Business'. This is the cultural and social obligation of family, friends and associates to take part in an extended period of mourning. Sorry Business may take precedence over other obligations and community activities may be postponed. This cultural duty will often include Aboriginal staff at SVHA who may be eligible for Bereavement, Ceremonial or Cultural leave, depending on their place of work, role and Enterprise Bargaining Agreement (EBA).

Further information:

The <u>QLD Health Sad News Sorry Business</u> document offers guidance on the palliative care of Aboriginal and Torres Strait Islander people.

The Australian Indigenous Health Info Net provides additional information and resources.

Aboriginal and Torres Strait Islander Flags



The Aboriginal flag was designed by Harold Thomas, a Luritja man from Central Australia, who retains copyright of the flag, along with a non-Indigenous company, WAM Clothing. The flag is divided into three sections. The black half represents Aboriginal people and the red half represents the earth and the colour of ochre used in traditional ceremonies and spirituality. The yellow circle represents the sun, the giver of life and protector. The Aboriginal flag may only be reproduced in accordance with the provisions of the Copyright Act 1968, or with written permission from Mr Harold Thomas.



The Torres Strait Island flag was designed by Bernard Namok from Thursday Island. In the Torres Strait Island flag, the green sections represent the land, the middle blue section represents the sea that separates the islands, and the black lines represent the Torres Strait Islander people. In the centre of the flag a Dari is depicted, which is a traditional Torres Strait Island dancers' headdress. Underneath the Dari is a white star, which represents the five main island groups and is a symbol of navigation, peace, and for some, a representation of Christianity. Copyright for the Torres Strait Island flag is owned by the Torres Strait Island Regional Council. To reproduce the flag, written consent must first be gained.

Both flags are considered to be official flags of Australia. The display of Aboriginal and Torres Strait Island flags within SVHA indicate that our services welcome Aboriginal and Torres Strait Island peoples and are a demonstration of our ongoing commitment to Aboriginal and Torres Strait Islander health. There is no requirement to gain permission prior to flying the Aboriginal or Torres Strait Island flags. When buying flags, ensure that these are purchased through a licenced seller and that profits are returned to the Aboriginal or Torres Strait Islander community.

Note: Copyright approval has been gained for use of the Aboriginal and Torres Strait Islander flags in this document. This approval may extend to other forms of use across SVHA – please contact your local Communications Team for more information.

Further information:

Access the <u>Australian National Flags Protocols</u> for further guidance.

11. Important Dates and Cultural Events

The observance of significant Aboriginal and Torres Strait Islander dates and events occurs across all SVHA facilities, and all staff are encouraged to take part in these. The acknowledgement and/or celebration of these events are valuable opportunities to interact and network with the Aboriginal and Torres Strait Islander community and will act to increase social connectedness. The following is a list of important dates and cultural events:

Event	Date
Survival Day/Invasion Day (Australia Day)	January 26th
The Apology to the Stolen Generations	February 13th
National Close the Gap Day	Second half of March
National Sorry Day	May 26th
Reconciliation Day Public Holiday (ACT Only)	May 28th
National Reconciliation week	May 27th – June 3rd
Mabo Day	June 3rd
Coming of the Light (Torres Strait Islands)	July 1st
NAIDOC Week	Begins first Sunday in July
National Aboriginal and Torres Strait Islander Children's Day	August 4th
International Day of the World's Indigenous People	August 9th

12. SVHA Protocols, Policies and Websites

SVHA

SVHA Stretch Reconciliation Action Plan (RAP) 2020-2023

SVHA enVision 2025 Strategy

SVHA Employment Parity Initiative 2020 – *Contact your HR Department for further information* St Vincent's Health Australia Group Code of Conduct – *Available on SVHA intranet* Equal Employment Opportunity Policy and Procedure - *Available on SVHA intranet*

SVHM

SVHM Aboriginal Health Unit website

SVHM enVision Strategic Service Plan 2017–2025

SVHM Aboriginal and Torres Strait Islander Culturally Appropriate Care – Available on SVHM intranet

SVHM Aboriginal and Torres Strait Islander Culturally Appropriate Care (Correctional Health) – Available on SVHM intranet

SVHM Aboriginal Cultural Heritage – Available on SVHM intranet

SVHM Diversity and Inclusion Policy – Available on SVHM intranet

SVHM Cultural Leave Policy – Available on SVHM intranet

SVHNS

SVHNS Aboriginal Health Unit website

SVHNS Aboriginal and Torres Strait Islander Health Plan 2017-2020

Aboriginal Cultural Activities Policy – Available on SVHNS intranet

Parklea Correctional Centre Standard Operating Procedure: Aboriginal Health – Available on SVHNS intranet

NSW Health Good Health - Great Jobs: Aboriginal Workforce Strategic Framework 2016 – 2020 – Available on SVHNS intranet

Pandemic Preparedness and Response with Aboriginal Communities in NSW – Available on SVHNS intranet

Respecting the Difference: An Aboriginal Cultural Training Framework for NSW Health Policy - Available on SVHNS intranet

SVPHS

SVPHS Aboriginal and Torres Strait Islander Health website

SVPHS Aboriginal Employment Plan – Under development

SVPHS Care of the Aboriginal and Torres Strait Islander Patient Policy – Available on SVPHS intranet

13. Relevant External Documents

National

Aboriginal and Torres Strait Islander Quality Improvement Framework and Toolkit for Hospital Staff, The Lowitja Institute and SVHM, 2015.

<u>Communicating with Aboriginal and Torres Strait Islander Audiences. Australian Government Department of the</u> <u>Prime Minister and Cabinet, 2016.</u> National Aboriginal and Torres Strait Islander Health Plan 2013–2023. Australian Government Department of Health and Ageing, 2013.

My Life My Lead - Opportunities for strengthening approaches to the social determinants and cultural determinants of Indigenous health: Report on the national consultations December 2017. Australian Government Department of Health, 2017.

National Safety and Quality Health Service Standards User Guide for Aboriginal and Torres Strait Islander Health. Australian Commission on Safety and Quality in Health Care, 2017.

National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017-2023. Australian Government Department of Prime Minister and Cabinet, 2017.

Closing the Gap Report 2020. Australian Government, 2020.

Commonwealth Aboriginal and Torres Strait Islander workforce strategy 2020–24. Australian Public Service Commission, 2020.

Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19). Australian Government Department of Health, 2020.

Aboriginal and Torres Strait Islander Health Performance Framework. 2017 Report. Australian Government Department of Health, 2017.

Victoria

Aboriginal and Torres Strait Islander Health Performance Framework 2017 Report Victoria. Australian Institute of Health and Welfare, 2017.

Aboriginal Social and Emotional Wellbeing Plan. Justice Health and Corrections Victoria, 2017.

Balit Murrup: Aboriginal social and emotional wellbeing framework 2017-2027. Victorian Government Department of Health and Human Services, 2017.

Koolin Balit: Victorian Government Strategic Directions for Aboriginal Health 2012-2022. Victorian Department of Health & Human Services, 2012.

Korin Korin Balit-Djak: Aboriginal health wellbeing and safety strategic plan 2017-2027. Victorian Department of Health & Human Services, 2017.

Victorian Aboriginal Affairs Framework 2018-2023. Victoria State Government, 2018.

Victorian Aboriginal Affairs Report 2019. Victoria State Government, 2019.

New South Wales

Communicating Positively: A guide to appropriate Aboriginal Terminology. NSW Ministry of Health, 2019.

NSW Aboriginal Health Impact Statement. Centre for Aboriginal Health, NSW Ministry of Health, 2017.

NSW Aboriginal Health Plan 2013-2023. NSW Ministry of Health, 2012.

NSW State Health Plan - Towards 2021. NSW Ministry of Health 2014.

14. External Services and Resources

National

The Australian Indigenous Health Info Net provides a wide variety of resources including a map of Aboriginal and Torres Strait Islander Health Services across Australia: <u>Australian Indigenous Health Info Net</u>

Victoria

The Victorian Aboriginal Community Controlled Health Organisation provides a list of its member organisations here: <u>Our membership</u>

New South Wales

See the Aboriginal Health and Medical Research Council's Members map to locate Aboriginal Community Controlled Health Services in NSW: <u>Members</u>

Queensland

The Queensland Aboriginal and Islander Health Council's list of members can be accessed here: Our members

15. References

- 1. Communicating Positively: A guide to appropriate Aboriginal terminology. NSW Ministry of Health, 2019. <u>https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/GL2019_008.pdf</u>
- 2. National Health and Medical Research Council. Promoting the health of Indigenous Australians. A review of infrastructure support for Aboriginal and Torres Strait Islander health advancement. Final report and recommendations. Canberra: NHMRC, 1996: part 2: 4.
- 3. Cultural Awareness. Health Education and Training Institute, NSW Government (n.d.). <u>https://www.heti.nsw.gov.au/education-and-training/courses-and-programs/international-medical-graduate-information/cultural-awareness</u>
- 4. An Introduction to Cultural Competency. Royal Australian College of Physicians, 2004. <u>https://www.racp.edu.au/docs/default-source/advocacy-library/an-introduction-to-cultural-competency.pdf</u>
- 5. Nguyen H. T. Patient Centred Care: Cultural Safety in Indigenous Health. Australian Family Physician, Vol.37, No.12, December 2008
- Cultural responsiveness framework: A guide for Victorian health services. Victorian Department of Health, 2009. <u>https://www2.health.vic.gov.au/about/publications/policiesandguidelines/Cultural-responsiveness-framework---Guidelines-for-Victorian-health-services</u>
- 7. Cultural Safety. Victorian Aboriginal Community Controlled Health Organisation, 2016. http://www.vaccho.org.au/consultancy/cs/
- 8. Protocols for consultation and negotiation with Aboriginal people. Department of Aboriginal and Torres Strait Islander Policy and Development, Queensland Government, 1998. <u>https://www.datsip.qld.gov.au/resources/datsima/people-communities/protocols-aboriginal/aboriginal-protocols-for-consultation.pdf</u>
- 9. Men's and Women's Business. Deadly Story, (n.d.). <u>https://www.deadlystory.com/page/culture/Life_Lore/Ceremony/Men_s_and_Women_s_Business</u>
- 10. Aboriginal culture People Mourning an Aboriginal death. Creative Spirits, 2018. https://www.creativespirits.info/aboriginalculture/people/mourning-an-aboriginal-death
- 11. Intergenerational Trauma. Australians Together, (n.d.). <u>https://www.australianstogether.org.au/discover/the-wound/intergenerational-trauma/</u>

16. Appendix 1 – Acknowledgement to Country

Examples of Acknowledgement

Please note: these spoken or written phrases should be contextualised to include the Traditional Owners/Custodians of the relevant geographic location (please see page 25 for more info).

Verbal Acknowledgments

- 1. 'St Vincent's Hospital Sydney, acknowledges the Traditional Custodians of this land, the Gadigal people, and all the members of the Eora nations. We pay our respects to their Elders past and present. They hold the memories and traditions, culture and hopes of Aboriginal Australia.'
- 2. 'I/We wish to acknowledge the Traditional Custodians of the land we are meeting on, all of the members of the Kulin Nation. I/We wish to acknowledge and respect their continuing culture and connections to the land. I/We would also like to acknowledge and welcome any Aboriginal and Torres Strait Islander peoples who may be attending today's event'

Written Acknowledgements

- 1. 'St Vincent's Health Australia wishes to acknowledge that we are on Aboriginal land. We pay our respects to all Traditional Custodians. This document/video may contain images of deceased members of the Aboriginal and Torres Strait Islander community. They are used with the greatest respect and appreciation'
- 2. 'St Vincent's Hospital Sydney, recognises the Traditional Owners/Custodians of the land on which its many sites are located. We pay our respects to Elders past and present and welcome all Aboriginal and Torres Strait Islander people to our health service.'
- 3. 'We live and work on Aboriginal Land. We pay our respect to the Elders, both past and present and acknowledge the Traditional Owners /Custodians of this Land.'
- 4. 'St Vincent's Hospital acknowledges the local Aboriginal people of the land on which it's many sites are located. St Vincent's acknowledges Aboriginal people as the Traditional Owners/Custodians of the land. We are committed to improving the health and wellbeing of Aboriginal and Torres Strait Islander people and their communities.'

Acknowledgment of Elders

1. 'I would like to pay my respect to the Elders both past and present and extend that respect to other Aboriginal and Torres Strait Islander people who are here today'

17. Appendix 2 – Traditional Custodians, Language Groups and Nations

To view an online map representing Aboriginal language, tribal or Nation groups, access the AIATSIS website. *Pease note - copyright approval must be gained to print and reproduce the map*: <u>AIATSIS Map</u>

To view a Torres Strait Island map and find out more about Torres Strait Islanders languages and culture see: <u>Creative Spirits - Torres Strait Islander culture</u>

Please see below for a list of Traditional Custodians and Nations for each of our facilities.

Note: For those facilities where a different Traditional Custodian and Nation are listed, the Acknowledgement should first state the Traditional Custodian name, followed by the Nation. For example '...the Gadigal people, of the Eora Nation'.

Victoria

SVHA Facility	Physical Location	Traditional Custodians	Nation
St Vincent's Health Australia	East Melbourne	All of the members of the Kulin Nation	Kulin* (Cool-in)
St Vincent's Hospital, Melbourne	Fitzroy	All of the members of the Kulin Nation	Kulin (Cool-in)
St Vincent's Private Hospital, Melbourne	Fitzroy East Melbourne Kew	All of the members of the Kulin Nation; at Kew, Wurundjeri (Wu-run-jeri)	Kulin (Cool-in)
St Vincent's Private Hospital, Werribee	Wyndham	All of the members of the Kulin Nation	Kulin (Cool-in)
St George's Hospital	Kew	Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)	Kulin (Cool-in)
Caritas Christi	Kew	Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)	Kulin (Cool-in)
St Vincent's Care Services	Eltham	Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)	Kulin (Cool-in)
Auburn House	Hawthorn East	Wurundjeri (Wu-run-jeri)	Kulin (Cool-in)

		Bunurong (Bu-nu-rong)	
Cambridge House	Collingwood	Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)	Kulin (Cool-in)
Riverside House	Richmond	Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)	Kulin (Cool-in)

*The Kulin Nation consists of the five language groups who are the traditional owners and lived in the Port Phillip region:

- Bunurong (Boonwurrung)
- Dja Dja Wurrung (Djadjawurrung)
- Taungurung
- Wathaurung (Wathaurong)
- Woiwurrung, commonly known as Wurundjeri.

New South Wales

SVHA Facility	Physical Location	Traditional Custodians	Nation
St Vincent's Health Australia	East Sydney	Gadigal (Gad-e-gal)	Eora (E-ora)
St Vincent's Health Network, Sydney	Darlinghurst	Gadigal (Gad-e-gal)	Eora (E-ora)
St Vincent's Private Hospital, Sydney	Darlinghurst	Gadigal (Gad-e-gal)	Eora (E-ora)
Sacred Heart Health Service	Darlinghurst	Gadigal (Gad-e-gal)	Eora (E-ora)
Mater Hospital	North Sydney	Guringai (Gur-in-guy)	Guringai (Gur-in-guy)
St Vincent's Private Hospital, Griffith	Griffith	Wiradjuri (Wir-a-ju-ri)	Wiradjuri (Wir-a-ju-ri)
St Joseph's Hospital	Auburn	Darug (Da-ruk)	Darug (Da-ruk)
St Vincent's Care Services	Auburn	Darug (Da-ruk)	Darug (Da-ruk)
St Vincent's Care Services	Bronte	Gadigal (Gad-e-gal)	Eora (E-ora)
St Vincent's Care Services	Edgecliff	Gadigal (Gad-e-gal)	Eora (E-ora)

Queensland

SVHA Facility	Physical Location	Traditional Custodians	Nation
St Vincent's Private Hospital, Brisbane	Kangaroo Point	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Private Hospital, Toowoomba	Toowoomba City	Giabil (Gi-ar-bil)	Giabil (Gi-ar-bil)
Holy Spirit North Side Private Hospital	Chermside	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Care Services Head Office	Bowen Hills	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Care Services	Arundel	Kombumerri (Kom-bu- merri)	Yugambeh (Yug-am-be)
St Vincent's Care Services	Bardon	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Care Services	Enoggera	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Care Services	Gympie	Gubbi Gubbi (Gub-bi Gub-bi)	Murri (Mah-ri)
St Vincent's Care Services	Kangaroo Point	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Care Services	Maroochydore	Gubbi Gubbi (Gub-bi Gub-bi)	Murri (Mah-ri)
St Vincent's Care Services	Mitchelton	Turrbal (Turr-bal)	Turrbal (Turr-bal)
St Vincent's Care Services	Southport	Yugambeh (Yug-am- be)	Yugambeh (Yug-am-be)
St Vincent's Care Services	Toowoomba	Giabil (Gi-ar-bil)	Giabil (Gi-ar-bil)

18. Appendix 3 – SVHA Aboriginal Health Services and Mission Departments Contact Details

State	Service/Department	Contact
Victoria	SVHM Aboriginal Health Unit (AHU)	(03) 9231 3436
	SVHM Aboriginal Hospital Liaison Officer (AHLO)	(03) 9231 3436
	SVHM Mission Department	(03) 9231 3390
	SVPHM Mission Department	(03) 9411 7545
New South Wales	SVHNS Aboriginal Health Unit (AHU)	(02) 8382 2213
	SVHNS Mission Department	(02) 8382 2370
	SVPHS Mission Department	(02) 8382 7445
Queensland	SVPHB & HSNPH Mission Department	(07) 3326 3534
	SVCS HR & Indigenous Program Specialist	(07) 3435 7256