

Centre for Culture Ethnicity and Health Consumer Participation Strategies Matrix
A Practical Guide to Engaging Culturally and Linguistically Diverse Consumers

Action	Strategy	Description	Benefits	Issues to consider	Actions for success
Highest Level of Organisational Consumer Participation					
Has Control	CALD Consumers on Boards of Management	Organisations seek representation on Boards of Management that is reflective of CALD communities within their catchment	<ul style="list-style-type: none"> Input is at the top level of decision making Organisation has greater links with particular ethnic communities Opportunities for skill enhancement and social participation for consumer representatives Consumer can provide input on particular cultural sensitivities in program/service planning 	<ul style="list-style-type: none"> Consumer can't represent all ethnic communities in the catchment Consumer can't be the 'cultural expert' for their entire community or other ethnic communities Danger in looking for a 'representative' CALD consumer 	<ul style="list-style-type: none"> Engage with the community to select the most appropriate representative from that community Have a commitment to training, supporting and mentoring the consumer about the health sector/meeting processes, etc. Meet the languages needs of the consumer
Has Delegated Control	Consumer Planning Days	An issue relevant to a particular CALD community is identified and presented to that community to make decisions which are incorporated into planning processes	<ul style="list-style-type: none"> Community is given ownership to plan for a particular issue, which will encourage cultural appropriateness Community will have closer involvement with mainstream services, therefore greater awareness of services available Agency has greater links with community which may also help to address access issues 	<ul style="list-style-type: none"> Community is not involved in needs identification or problem definition Community may have lack of knowledge of planning and systemic parameters Community involvement is limited to part of the planning phase 	<ul style="list-style-type: none"> Consider sustained involvement throughout the processes of planning, implementation and evaluation e.g. through steering groups Clear rationale for the issue is provided Translated materials and use of interpreters Work from a community based venue and facilitate the days through community representatives and organisations Develop content and procedures for Planning Days based on community feedback to ensure cultural appropriateness
Plans Jointly	Consumers on Project Reference and Steering Groups	Ongoing participation by CALD community members in planning processes and contribution to implementation and evaluation is sought by organisation	<ul style="list-style-type: none"> Ongoing engagement and commitment to CALD issues Attention is paid to the outcomes of the project reaching different sections of the community If communities are aware of representation by their own community members they may be more likely to use the services/programs Valuable participation in steering groups may encourage higher levels of participation in the future 	<ul style="list-style-type: none"> Formal meeting structures may be unfamiliar and intimidating Difficulty of recruiting representatives for ongoing time commitment Whether the issue being discussed is one that affects the community in question 	<ul style="list-style-type: none"> Using ethno-specific agencies as a contact point for recruiting consumer representatives Reimbursement for attendance Consumer has good links with their community Support and mentoring in committee structures Resourcing interpreters and translators appropriately Ensure that project aims have a clear benefit for the community
Advises Organisation	Consumer Advisory Groups	CALD consumers are engaged to provide input to groups that are separate from Boards of Management to elicit responses to particular questions	<ul style="list-style-type: none"> CALD representatives mean that the groups are more proportionally representative of the entire community Able to engage with and target particular communities on particular issues Allows for dialogue between consumers of different ethnic backgrounds Facilitators can experience a variety of views within a particular community 	<ul style="list-style-type: none"> Consumers not necessarily learning a lot about health services Benefits are skewed towards agencies As consumers are not involved in decision making, programs may not end up being culturally sensitive Not all issues are relevant to all communities 	<ul style="list-style-type: none"> Ensure questions being asked are culturally appropriate to each community Select representatives that have knowledge, experience and interest in the issues Use interpreters when required Pilot test questions to ensure cultural appropriateness and relevance Brief other consumers in the group on how to work with interpreters
Is Consulted	Focus Groups	An organised discussion where CALD consumers are invited to share their views and experiences on a particular topic	<ul style="list-style-type: none"> Allows for specific cultural and linguistic requirements to be met Can provide an opportunity to target smaller or marginalised communities Can discuss a topic that is sensitive to the wider community, or those from particular cultural backgrounds, in depth 	<ul style="list-style-type: none"> May be difficult to record all responses if people speak at the same time and require an interpreter May be difficult to find a demographically balanced sample group Focus group format may not be a culturally appropriate method of consultation 	<ul style="list-style-type: none"> Reimbursement for attendance Consider holding more than one group to cater for different age and gender mixes, for example within a language group or ethnicity Liaise with specialist services to ensure that subjects for discussion are culturally appropriate Ensure findings and actions are fed back to focus group participants
Receives Information	Information Sessions and Printed Materials	Sessions are held to provide information to CALD communities about relevant health issues and services and associated printed materials are also distributed	<ul style="list-style-type: none"> Can reach a large number of people in a small amount of time Consumers have relevant information to take away and refer to later Community members have an opportunity to meet with a variety of participants Community leaders can 'spread the word' through distributing printed materials 	<ul style="list-style-type: none"> Consumers are not involved in the development of the information Some information may be irrelevant to a particular community Information or education sessions may not be a familiar mode of learning There may be literacy issues 	<ul style="list-style-type: none"> Provide sessions and materials in relevant community languages Do not use straight translations - utilise culturally appropriate visual diagrams and pilot test all materials prior to use Use culturally appropriate venues and disseminate and promote through community representatives If possible, use a peer educator model of delivery where respect is given to this mode of learning by the community Use 'experts' in communities where respect is given to people of expertise, high standing or authority Provide opportunities for consumers to feed back on the session(s) and material(s) as part of review and evaluation processes
Lowest Level of Organisational Consumer Participation					

* The first column of this table and the references to levels of participation comes from the Brager and Sprecht *Ladder of Participation*, 1973.