



Government of **Western Australia**  
**Mental Health Commission**

# **Multicultural Plan 2022-25**

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# Leadership Statement

Western Australia is a multicultural society. Our community originates from more than 190 countries, speaking more than 240 languages. Western Australia needs an effective mental health and alcohol and other drugs (AOD) system that can provide mental health and AOD services that are culturally responsive and inclusive and meet the needs of people from a range of cultural and linguistic backgrounds.

As a system leader, the Mental Health Commission (MHC) recognises the current opportunity to positively reshape and set a new standard in developing a connected, consumer and carer-centred mental health and AOD system that can meet the needs of people from diverse backgrounds. The MHC recognises that a diverse and culturally responsive workforce adds value to the workplace and can contribute positively to employee engagement, organisational effectiveness and drive better outcomes for people from culturally and linguistically diverse (CaLD) and ethnoculturally and linguistically diverse (ELD) backgrounds.

The MHC is committed to implementing the multicultural policy priorities outlined in the Western Australian Multicultural Policy Framework through the development of a Multicultural Plan that outlines achievable actions to facilitate an inclusive and harmonious society for all Western Australians.

The MHC Multicultural Plan outlines our commitment to:

- a workplace culture that is welcoming and inclusive of all people;
- providing our workforce with the knowledge, skills and understanding to provide inclusive and culturally sensitive services that meet people's needs, regardless of their cultural or ethnic background; and
- working with culturally and ethnically diverse communities to develop policies, programs and services that meet the needs of people from CaLD backgrounds.

I encourage all MHC staff to work together in developing a consumer and carer-centred mental health and AOD service system that can better meet the needs of people from CaLD and ELD backgrounds.

**Jennifer McGrath**  
**Commissioner**

# About the Mental Health Commission

## Our Vision and Mission

Our vision is to achieve a Western Australian community that experiences minimal alcohol and other drug-related harms and optimal mental health.

We do this by being an effective leader of alcohol, drug and mental health commissioning, providing and partnering in the delivery of person-centred and evidence-based:

- Prevention, promotion and early intervention programs;
- Treatment services and community supports; and
- Research, policy and system improvements.

## Our Values

- Respect for individuals and culture
- Working together and supporting each other
- Involving and engaging others
- Ownership, transparency and accountability
- Fair and ethical decisions
- Improvement focus

## Strategic Direction

The Western Australian mental health and AOD sector has a clear vision for the future, derived from broad consultation and rigorous modelling of the optimal balance of service requirements to be achieved by 2025. This vision is articulated in the [Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015-2025](#) and the [WA State Priorities Mental Health, Alcohol and Other Drugs 2020-2024](#).



The MHC recognises the current opportunity to positively reshape and set a new standard in developing a connected consumer and carer-centred mental health and AOD system. To achieve this change, significant transformation across the system is in progress. The MHC is leading system transformation, working across a diverse range of stakeholder groups to drive reform across the sector.

The MHC is led by the Mental Health Commissioner, supported by five divisions responsible for unique functions which contribute to the delivery of high-quality mental health and AOD services across Western Australia:

- Office of the Commissioner
- Office of the Chief Medical Officer Mental Health
- System Development
- Operations – Prevention, Treatment and Community Support Services
- Governance and Corporate Services.

The MHC also provides corporate services support to three independent bodies, the Mental Health Advocacy Service (MHAS), the Mental Health Tribunal (MHT) and the Office of the Chief Psychiatrist (OCP). Each entity is responsible for their own day to day management and implementation of any policies and guidelines.

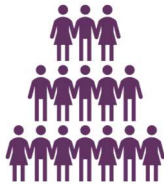
# Cultural Diversity of WA

Australia is recognised as one of the most successful multicultural countries in the world. Aboriginal peoples are the original inhabitants of Western Australia and provide a rich and diverse foundation of culture, language and spirituality. The term Aboriginal is used throughout this document in preference to Aboriginal and Torres Strait Islander in recognition of this and no disrespect is intended to our Torres Strait Islander colleagues and community. Since European settlement, migrants to Australia have created an even more diverse society. Western Australians now come from more than 190 countries and speak approximately 240 languages including around 50 Aboriginal languages. The data from the 2021 Census demonstrates Western Australia's cultural diversity:



*32.2% of Western Australians were born overseas, compared with the national figure of 27.6%*

*29.7% of Western Australians reported Australian ancestry.*



*55.6% of Western Australians have one or both parents born overseas.*



*The top 10 countries of birth outside of Australia include England, New Zealand, India, South Africa, Philippines, China, Malaysia, Scotland, Italy and Ireland.*

## WA Charter of Multiculturalism

The WA Charter of Multiculturalism demonstrates the Western Australian Government's commitment to multiculturalism and a multicultural policy position that embraces all of us. The purpose of the Charter is to explicitly recognise that the people of Western Australia are of different linguistic, religious, racial and ethnic backgrounds, and to promote their participation in democratic governance within an inclusive society.

The Charter is founded on four principles:

### Civic Values

The equality of respect, mutual respect, individual freedom and dignity for all members of society subject to the acceptance of the rule of law, social, political and legal institutions and constitutional structures.

### Equality

Equality of opportunity for all members of society to achieve their full potential in a free and democratic society where every individual is equal before, and under, the law.

### Fairness

The pursuit of public policies free of prejudice, discrimination and exclusion on the basis of characteristics such as origins, perceived 'race', culture, religion, ethnicity and nationality.

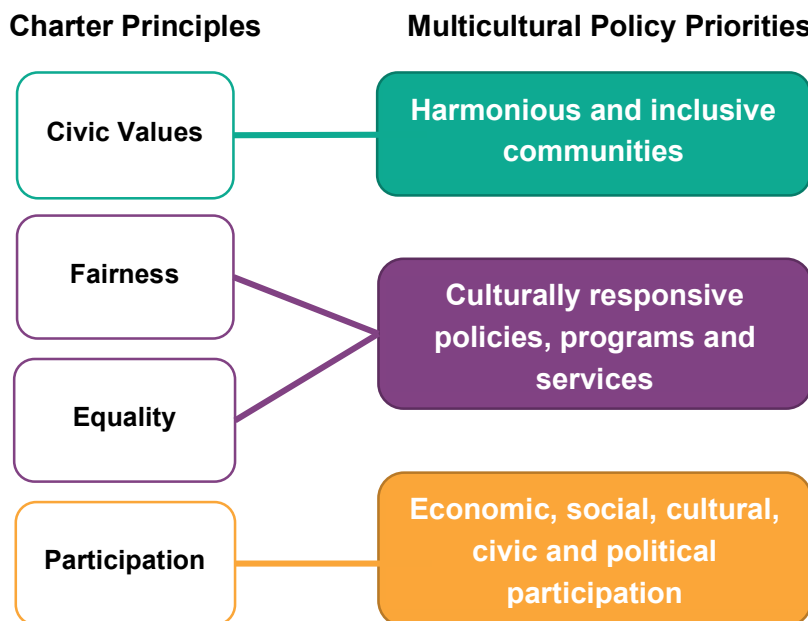
### Participation

The full and equitable participation in society of individuals and communities, irrespective of origins, culture, religion, ethnicity and nationality.

# Western Australian Multicultural Policy Framework

The Western Australian Multicultural Policy Framework articulates policy priorities and provides a guide for government to translate the WA Charter of Multiculturalism’s principles and objectives into actions that will lead to positive outcomes for all Western Australians.

The Framework identifies three multicultural policy priorities:



## Our Vision for Multiculturalism

The MHC strives to establish mental health and AOD systems that meet the needs of Western Australia’s population and deliver quality outcomes for individuals and their families. The MHC understands an effective mental health and AOD system must be able to provide care to people that is appropriate to their cultural background and the language they speak.

The MHC uses the term ‘ethnoculturally and linguistically diverse’ (ELD) as the more contemporary term as guided by the Mental Health Network Multicultural Subnetwork. This term recognises that ethnicity, as much as culture, can significantly influence values and belief systems surrounding timely mental health service access, utilisation and perceived/anticipated outcomes.

The Office of Multicultural Interests identified that for the purpose of this plan and consistency across the Western Australia public sector, the term CaLD is to be used in this document.

In Western Australia, people from CaLD backgrounds can be under-represented in mental health and AOD services, due to barriers of language, lack of awareness of services, and factors such as fear of stigmatisation. People from CaLD backgrounds may have also experienced a range of psychosocial stressors including trauma, discrimination, alienation, isolation and lack of community attachment, lack of social and family support networks, loss of employment status and communication difficulties.<sup>1</sup>

<sup>1</sup> Western Australian Mental Health Commission. The Western Australian Alcohol and Other Drug Services Plan 2015-2025. 8 | Multicultural Plan 2022-25. MHC22/94094



The MHC Multicultural Plan has been developed with the intent to guide the WA Health system toward improving mental health services and alcohol and other drug services for people from CaLD backgrounds. Refer to **Appendix 1** for definitions.

The MHC recognises substantial improvements are required to address the barriers faced by people from CaLD backgrounds accessing mental health and AOD services. Our previous Multicultural Plan focused on:

- developing an internal workplace culture that is welcoming and inclusive of all people; and
- equipping our workforce with the knowledge, skills and understanding to provide inclusive and culturally sensitive services that meet people's needs, regardless of their cultural background.

Our next step, and the objective of this plan, is to focus the workforce towards the WA Multicultural Policy Framework - Policy Priority 2: Culturally responsive policies, programs and services.

This plan places significant focus on maintaining our culturally responsive workforce culture at the MHC while incorporating learnings into models of service and commissioning of services.

All activities listed in this plan and outlined in the tables below against the three policy priorities, are aimed toward the common objective:

**Building capacity of the health system to improve health and wellbeing by integrating culture into the delivery of mental health and alcohol and other drug services.**

## Policy Priority 1 – Harmonious and Inclusive Communities

Policy Priority 1: Harmonious and inclusive communities				
<p><b>WA Multicultural Policy Framework Strategies</b></p> <ul style="list-style-type: none"> <li>Promote the benefits of cultural and linguistic diversity and celebrate the achievements of people from culturally diverse backgrounds</li> <li>Address racism and discrimination at both an individual and institutional/systemic level, including implementing the Policy Framework for Substantive Equality</li> <li>Develop workplace cultures that are welcoming and inclusive of all Western Australians</li> <li>Initiate and support events and projects that build mutual understanding and respect between cultures</li> </ul>				
	Activity	Responsibility	Outcome	Timeframe
1.1	Promote MHC Values to ensure everyone is treated the way we expect them to be treated. Respect; Togetherness; Engagement; Accountability; Honesty.	Executive Director Governance and Corporate Services	Uplift in <i>Values Alignment</i> indicator to next maturity zone in 2024 Spring Point staff engagement survey.	December 2024
1.2	Celebrate Harmony Week and promote the benefits of cultural diversity and social cohesion.	Chief Human Resource Officer	Employee awareness is evaluated and informs improvement opportunities.	June 2023
1.3	Develop a communication plan to promote the benefits of diversity, inclusion and cultural safety.	Assistant Director Strategic Communications	Communication plan is developed, and internal stakeholders are engaged in delivery.	December 2023

<b>Policy Priority 1: Harmonious and inclusive communities</b>				
	<b>Activity</b>	<b>Responsibility</b>	<b>Outcome</b>	<b>Timeframe</b>
1.4	Develop employee cultural competence and raise awareness of <i>Western Australian Language Services Policy 2020</i> requirements through relevant training programs that promote roles, responsibility and accountability.	Chief Human Resource Officer	Implementation and results of cultural competence activities are evaluated and inform improvement opportunities.	June 2023
1.5	Develop and promote education material to raise staff awareness about unconscious bias, discrimination and harassment in recruitment, training and other relevant work practices and culture.	Chief Human Resource Officer	Employee awareness is evaluated annually and informs improvement opportunities.	December 2022

## Policy Priority 2 – Culturally responsive policies, programs and services

Policy Priority 2: Culturally responsive policies, programs and services				
<b>WA Multicultural Policy Framework Strategies</b> <ul style="list-style-type: none"> <li>• Integrate multicultural policy goals into strategic and corporate planning, procurement and review processes</li> <li>• Identify inequities in service access and outcomes for Western Australians from CaLD backgrounds and develop strategies to address them</li> <li>• Provide language services to ensure language is not a barrier to equitable access to information and services, including complaints processes</li> <li>• Collect and analyse cultural and linguistic data to contribute to the identification of client needs, the development of policies and programs, and evaluation of outcomes</li> <li>• Enable culturally diverse communities to have meaningful input into policies, programs and systems through co-design and planning, co-delivery and implementation, and evaluation processes</li> <li>• Implement recruitment and selection processes that facilitate workforce diversity, and provide opportunities for the development of cultural competencies across the workforce</li> </ul>				
	Activity	Responsibility	Outcome	Timeframe
2.1	Partner with CaLD employees to review and co-design recruitment practices.	Chief Human Resource Officer	Employment barriers identified, and improvement opportunities implemented.	July 2023
2.2	Partner with Mental Health Multicultural Sub-Network to identify priority services and strategies.	Director System Development	Priority services identified, and recommendations submitted to Executive Leadership Group for consideration.	July 2023

<b>Policy Priority 2: Culturally responsive policies, programs and services</b>				
	<b>Activity</b>	<b>Responsibility</b>	<b>Outcome</b>	<b>Timeframe</b>
2.3	Determine preferred cultural and linguistic data sets that MHC will collect; and develop system capability to collect cultural and linguistic diversity data relating to service users.	Executive Director Governance and Corporate Services	Data management system is capable of receiving cultural and linguistic diversity data relating to service users. Provides insight into prevalence of mental health and AOD use in CaLD communities.	December 2024
2.4	Service Agreement templates include recommendations that service providers collect and report cultural and linguistic data	Chief Procurement Officer	Contracts are managed across the MHC according to specifications – in relation to service access, outcomes and satisfaction.	December 2024
2.5	Use data, information and evidence to inform mental health and AOD prevention programs and strategy development for CaLD people.	Deputy Commissioner Operations	Data is collected and/or reviewed to inform planning and prioritisation of prevention programs and strategies.	July 2025
2.6	Ensure language services are incorporated in procurement Request documentation where appropriate.	Chief Procurement Officer	Western Australian Language Services Policy 2020 specifications are incorporated in tender documentation.	December 2022

2.7	<p>Complete <a href="#">The Framework for Mental Health in Multicultural Australia: Towards culturally inclusive service delivery   Embrace Multicultural Mental Health</a> (<a href="http://embracementalhealth.org.au">embracementalhealth.org.au</a>) self-assessment annually to identify improvement opportunities</p>	Office of the Commissioner	Self-assessment completed, and findings reported to Executive Leadership Group.	July 2025
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<b>Policy Priority 2: Culturally responsive policies, programs and services</b>				
	<b>Activity</b>	<b>Responsibility</b>	<b>Outcome</b>	<b>Timeframe</b>
2.8	Promote links to <a href="#">Embrace Multicultural Mental Health</a> on MHC website.	Assistant Director Strategic Communications	Link to Embrace Multicultural Mental Health website is prominently displayed on the MHC landing page including link to Multilingual Information page.	December 2022
2.9	Prevention projects and communications consider solutions to ensure language is not a barrier to equitable access to information.	Deputy Commissioner Operations	Prevention projects and communications promote CaLD translation and support services.	December 2024

## Policy Priority 3 – Economic, social, cultural, civic and political participation

<b>Policy Priority 3: Economic, social, cultural, civic and political participation</b>				
<b>WA Multicultural Policy Framework Strategies</b>				
<ul style="list-style-type: none"> <li>• Implement recruitment and career development processes that support employment and progression of staff from CaLD backgrounds</li> <li>• Achieve equitable representation of people from CaLD backgrounds at all levels and in decision-making roles</li> </ul>				
	<b>Activity</b>	<b>Responsibility</b>	<b>Outcome</b>	<b>Timeframe</b>
3.1	Include CaLD specific recruitment, support and diversity strategies in the MHC Diversity and Inclusion Plan.	Chief Human Resource Officer	Quarterly progress report to Executive Leadership Group outlining actions completed and expected benefits.	December 2023

# Appendix 1 - Definitions

## **Culturally and linguistically diverse**

Culturally and linguistically diverse (CaLD) was introduced in 1996 to replace 'non-English speaking background' (NESB) and was intended to be a broader, more flexible and inclusive term. It is generally applied to groups and individuals who differ according to religion, language and ethnicity and whose ancestry is other than Aboriginal or Torres Strait Islander, Anglo Saxon or Anglo Celtic.

For the purposes of data collection, the Australian Bureau of Statistics *Standards for Statistics on Cultural and Language Diversity* apply. These are national standards for measuring diversity and include a core and standard set of cultural and language indicators.

The core set comprises:

- country of birth
- main language other than English spoken at home
- proficiency in spoken English
- Indigenous status (used when the focus is not specifically on people from migrant and refugee backgrounds).

The other indicators in the standard set are:

- ancestry
- birthplace of parents
- first language spoken
- languages spoken at home
- main language spoken at home
- religious affiliation
- year of arrival in Australia.

## **Ethnoculturally and Linguistically Diverse (ELD)**

The MHC uses the term 'ethnoculturally and linguistically diverse' (ELD) as the more contemporary term as guided by the Mental Health Network Multicultural Subnetwork. This term recognises that ethnicity, as much as culture, can significantly influence values and belief systems surrounding timely mental health service access, utilisation and perceived anticipated outcomes.

The Office of Multicultural Interests identified that for the purpose of this plan and consistency across the Western Australia public sector, the term CaLD is to be used in this document.

## **Public Sector Commission's definition of culturally and linguistically diverse (CaLD) used for workforce reporting purposes**

Employee's ancestry is other than Aboriginal or Torres Strait Islander, Anglo Saxon or Anglo Celtic. Specifically, the employee's country of birth is a country other than Australia, New Zealand, United Kingdom, England, South Africa, United States of America, Canada, Northern Ireland, Ireland, Scotland and Wales.