







AAG DISCUSSION PAPER RECOGNISING CULTURAL AND LOCAL KNOWLEDGES IN AGED CARE

May 2023



DISCLAIMER

PROCESS LIMITATIONS AND THE IMPORTANCE OF CULTURAL INTEGRITY



This project and the development of this paper involved Aboriginal and Torres Strait Islander and non-Indigenous interviewees, AAG members and Aboriginal and non-Indigenous subject matter experts. It is appropriate to disclose that one expert raised early concerns about the cultural integrity of data gathering and interpretation processes, and the overall representation of data in the project. This person eventually asked not to be included in the final project. The data gathering and interpreting stages of the project were conducted by a non-Indigenous higher education policy and regulation expert who requested to leave the project when these concerns were raised by the complainant. Following their departure, the policy and regulation expert raised misgivings about how their work may be represented by AAG without their ongoing input. To address this, AAG shared this draft paper with the remaining subject matter experts, interviewees and contributing members, and invited them to provide de-identified feedback to ensure an accurate presentation of their views was included. Policy and research staff at AAG's National Office then completed the paper. AAG acknowledges that the data were interpreted and presented by non-Indigenous staff. This process has highlighted a critical need to improve our engagement with Aboriginal and Torres Strait Islander peoples, representatives, knowledges¹ and methodologies, to which AAG is committed. Despite these limitations, we believe that it is important to share the process and findings of this project.

1. We acknowledge the diversity within and across the many Aboriginal and Torres Strait Islander Nations, Clans, and language groups in Australia. We note that there is no single 'Indigenous culture' or form of 'Indigenous knowledge'; therefore, we respectfully use the term 'knowledges' to reflect this multiplicity.

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EXECUTIVE SUMMARY

There is a clear need for inclusive and culturally appropriate aged care services for older Aboriginal and Torres Strait Islander peoples and Elders. These services depend on genuine respect of local, cultural, spiritual and community knowledges, and open collaboration with people willing to share their knowledge and expertise.

In a member forum hosted by AAG in March 2021, a member of AAG's Aboriginal and Torres Strait Islander Ageing Advisory Group (ATSIAAG), and an employee at a community-controlled aged care provider suggested that AAG collaborate on a project to investigate options for supporting the aged care sector to better recognise cultural and local knowledges. Through this project and the paper, Aboriginal and Torres Strait Islander and non-Indigenous stakeholders came together to discuss the systemic barriers and on-ground solutions to recruiting, retaining and promoting workers who provide important cultural and local knowledges in aged care. Interviews were conducted with people working in or with Aboriginal and Torres Strait Islander aged care providers. Three final themes identified from the data related to workforce challenges and these were:

- The importance of a recruitment strategy and hiring Aboriginal and Torres Strait Islander staff with cultural and local knowledges.
- Inflexible working conditions prevent Aboriginal and Torres Strait Islander employees from balancing their commitments to their communities and their employer.
- Regulatory practices and funding arrangements are often misaligned, creating burdensome reporting requirements and restricting responsive care models.

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- Build supportive funding models for existing smaller organisations that may lack the resources to apply for/compete for funding under the current aged care system.
- Create a clear pathway for redress for the infringement of cultural rights in aged care.
- Set specific targets for non-Indigenous operated aged care organisations to recruit Aboriginal and Torres Strait Islander staff and maintain culturally safe workplaces.

Despite barriers to integrating cultural and local knowledges into aged care, there are opportunities to deliver care that in varied contexts, promotes culturally safe services, and is supportive of Aboriginal and Torres Strait Islander aged care clients, staff and providers.

ACKNOWLEDGMENT OF COUNTRY

AAG acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures, to Elders past and present, and to all Aboriginal and Torres Strait Islander peoples including members of the Stolen Generations. For further information see AAG's Aboriginal and Torres Strait Islander Ageing Advisory Group.





BACKGROUND

AAG's Aboriginal and Torres Strait Islander Ageing Advisory Group (ATSIAAG) consists exclusively of Aboriginal and Torres Strait Islander members of AAG. Its aim is to ensure that Aboriginal and Torres Strait Islander voices inform and shape the policy and practice arena of older First Nations Peoples of Australia in an informed and collaborative way. Non-Indigenous members of AAG can support the work of ATSIAAG by joining the Friends of ATSIAAG network.

At various AAG events and workshops, members of ATSIAAG have often shared their frustration at systemic barriers to recruiting, retaining and promoting the careers of Aboriginal and Torres Strait Islander aged care workers who provide important cultural and local knowledges in their services in a way that meets the requirements of the current aged care system. These barriers persist, despite increasing recognition of the importance of engaging cultural and local knowledges in the design and delivery of services to support the care needs of Elders and older Aboriginal and Torres Strait Islander peoples. The Actions to support older Aboriginal and Torres Strait Islander people: a Guide for Consumers outlines the following:



We should experience services that effectively meet our specific needs, characteristics and life experiences, and those of our family and carers, in a respectful and inclusive way.

- We expect greater service accountability to ensure ALL needs are being met in a culturally respectful way.
- We expect that providers and their staff have an understanding of Elders in Aboriginal cultures and our role as Elders will be respected and supported.
- We expect providers and their staff to understand the importance of our role as informal care givers in our communities.
- We are assisted to participate in cultural events and activities.
- We continue participating in hobbies that we enjoy.
- Our spiritual, cultural and religious beliefs are supported by providers' staff.
- We are given opportunities to re-visit our own Country for spiritual and emotional well being.
- We are protected from abuse/harassment.

The Aboriginal and Torres Strait Islander Action Plans produced in 2017 under the Australian Government's Aged Care Diversity Framework (Aged Care Sector Committee Diversity Sub-group, 2017) are evidence that the design of the aged care system requires systemic improvements in be inclusive of many Aboriginal and Torres Strait Islander peoples' needs and experiences. To achieve the examples of care outlined in the Action Plans (such as ensuring clients can participate in cultural events and have opportunities to re-visit Country, and that staff support people's spiritual, cultural and religious beliefs) requires that providers both engage with cultural and community knowledges and have the capacity to act accordingly. In addition, the great diversity among Aboriginal and Torres Strait Islander Peoples and Nations should also be acknowledged when progressing any type of cultural safety framework. There is little utility in care standards, competency frameworks and requirements that do not reflect local priorities and knowledges, while simultaneously creating regulatory burden for providers.

More recently, the final report of the Royal Commission into Aged Care Quality and Safety (Royal Commission into Aged Care Quality and Safety, 2021) included recommendations for greater cultural safety and trauma-informed care measures to be introduced in aged care services providing support to Aboriginal and Torres Strait Islander clients and staff. For example, Recommendation 48 states the following:





Recommendation 48: Cultural safety

1. By 1 July 2022, the Australian Government and the System Governor should:

- a. require all of its employees who are involved in the aged care system, and any care finders who are not its employees, to undertake regular training about cultural safety and trauma-informed service delivery
- b. require all aged care providers which promote their services to Aboriginal and Torres Strait Islander people to:
 - (i) train their staff in culturally safe and trauma-informed care, and
 - (ii) demonstrate to the System Governor that they have reached an advanced stage of implementation of the Aboriginal and Torres Strait Islander Action Plan under the Diversity Framework.

2. From 1 July 2023, the System Governor should:

- a. ensure care finders serving Aboriginal and Torres Strait Islander communities are local Aboriginal and Torres Strait Islander people who are culturally trained and familiar with existing Aboriginal and Torres Strait Islander service providers who are trusted by the local population
- b. ensure, wherever possible, that aged care assessments of Aboriginal and Torres Strait Islander people are conducted by assessors who are Aboriginal or Torres Strait Islander people, or others who have undertaken training in cultural safety and trauma-informed approaches
- c. work with State and Territory Governments to establish culturally appropriate advance care directive processes, guidance material and training for aged care providers that account for the diversity of cultural practices and traditions within each State and Territory.
- 3. From 1 July 2023, the System Governor should require its employees, and any care finders who are not its employees, to undertake regular training about cultural safety and trauma-informed service delivery.

Beyond knowing and respecting local and cultural protocols, meeting the recommendations by the Royal Commission will require that providers engage with local communities to identify a trusted person to assist Elders and older people navigating the aged care system.

There is no doubt of the value of ensuring and establishing culturally safe, trauma-informed and locally trusted aged care services which are respectful of local, cultural, spiritual and community knowledges. However, translating these principles into practice is rarely simple and typically lies outside the scope of current funding models. As a result, the efforts of providers and staff to provide these services are often unfunded 'add-ons' to existing roles and services funded under specific conditions of the aged care system.

Despite these challenges, many Aboriginal and Torres Strait Islander community-controlled service providers and Aboriginal and Torres Strait Islander led programs draw on their local knowledge and resources to provide effective care that is culturally appropriate to the context, engaging with local knowledge holders and employing trusted persons. However, the current funding and policy constraints do not accommodate the efforts of organisations to gain this knowledge and ensure that the people wanting to share this knowledge are respected as experts in the field. While clinical skills and expertise are considered compulsory competencies which are remunerated in many roles in the aged care sector, there is a clear gap in translating into practice the aspirations of current recommendations and diversity frameworks that advocate for the inclusion of local and cultural knowledges within the current aged care system. These policy and funding gaps leave Aboriginal and Torres Strait Islander community-controlled service providers and programs in aged care to work around systemic barriers and adapt existing roles, often without much guidance or support.

This project builds on previous work undertaken by ATSIAAG and Friends of ATSIAAG networks. This includes previous government research and recommendations, such as the Aged Care Diversity Framework and subsequent Action Plans, and the Royal Commission into Aged Care Quality and Safety, which have produced important recommendations and guides for providers and consumers in this space. Important ongoing work is also being undertaken in advocating for culturally safe and quality aged care provision, by organisations such as the newly formed National Aboriginal and Torres Strait Islander Aging and Aged Care Council (NATSIAACC) (formerly NAGATSIAACC, the National Advisory Group for Aboriginal and Torres Strait Islander Aged Care).





ABOUT THE PROJECT

Through this project, we sought to understand how organisations connected to AAG's ATSIAAG membership are already working with local and cultural knowledge holders under the current aged care system, and what their priorities are for improving this aspect of the system. Our aims were to:

- 1. Document how members of ATSIAAG and Friends of ATSIAAG working in/with the aged care sector recruit and retain people with cultural and/or community knowledge.
- 2. Explore ways members of ATSIAAG and Friends of ATSIAAG working in/with the aged care sector ensure Aboriginal and Torres Strait Islander people with cultural and/or community knowledges are appropriately supported in their roles.
- 3. Understand systemic barriers to employing, retaining and promoting the careers of people with cultural and/or community expertise and skills.
- 4. Share ways to better support care providers in recruiting, retaining and recognising Aboriginal and Torres Strait Islander workers who have cultural and/or community knowledges.

The concept for this project idea was considered at a May 2022 online Yarn Up co-hosted by ATSIAAG and Booroongen Djugun Pty Ltd. Members of this Yarn Up were invited to discuss the project and participate in semi-structured interviews about their experiences recruiting and retaining workers with local and cultural knowledges, and the results of hiring people with local and/or cultural knowledges. This paper provides an overview of the project, key findings from the preliminary interviews and recommendations for potential next steps. AAG's commitment to progressing this work is also presented.

PROJECT OVERVIEW

Initially, a small number of Aboriginal and Torres METHOD Strait Islander representatives from Indigenous-led A non-Indigenous higher education aged care organisations or programs of varying policy and regulation consultant was sizes from across Australia answered guestions in engaged by AAG to interview 10 people an interview about their experiences in recruiting, working in, or undertaking research in, developing, and retaining Aboriginal and Torres aged care services for older Aboriginal and Strait Islander staff. This was augmented by Torres Strait Islander peoples. The consultant a group of Indigenous and non-Indigenous conducted semi structured interviews, and then stakeholders from ATSIAAG and Friends of summarized these discussions into themes. They ATSIAAG who were at the 2-Day Forum Yarn Up. then suggested potential further steps for this All the individuals interviewed were members topic and produced a preliminary draft which of ATSIAAG or Friends of ATSIAAG, or who were was developed by AAG's First Nations Policy and recommended by members as relevant knowledge ATSIAAG Officer and shared with the interviewees holders. The themes from these preliminary for their feedback. Interviewees were shown the discussions and resulting recommendations are preliminary and developed drafts to ensure the outlined in this paper. accuracy of the content.





KEY FINDINGS

Despite diversity in the locations, services, roles and employment arrangements, community groups, and seniority of the interviewees, the findings were consistent. The examples and issues revealed that, regardless of size or location, Aboriginal and Torres Strait Islander-led aged care organisations and programs are experiencing many of the same types of difficulties when it comes to implementing care that is culturally appropriate to their contexts.



At the core of these problems is the mismatch between cultural needs/values and Australian bureaucratic expectations; the Aged Care Quality Standards framework; and the current funding models in use. These expectations, standards and funding models are not flexible enough to support these organisations. Further, in some cases, they represented a significant burden which hindered the organisation's ability to meet the needs of their communities. The findings are grouped under three themes:

► THEME 1:

Organisation/provider strategies in recruitment processes and supporting professional connections

► THEME 2: Working conditions and culture

► THEME 3:

Misaligned and burdensome regulatory practices and funding arrangements

THEME 1

ORGANISATION/PROVIDER STRATEGIES IN RECRUITMENT PROCESSES AND SUPPORTING PROFESSIONAL CONNECTIONS

Interviewees reported that the success they have in recruiting Aboriginal and Torres Strait Islander staff with cultural and local knowledge requires a deliberate recruitment strategy that clearly states this requirement for the role. To achieve this, 'mainstream' recruitment processes need to be modified by the organisation. All interviewees described needing to implement 'workarounds' and adjustments to standard recruitment processes to better reflect the way Aboriginal and Torres Strait Islander communities operate. Examples of these workarounds include:

- Re-writing position descriptions to focus on cultural knowledge and the ability to learn through a variety of approaches (for example, advertising and supporting practical learning experiences under supervision and mentorship, rather than formal qualifications).
- Where a staff member with cultural knowledge is required, the recruitment process does not list specific skills/competencies but focuses on recruiting someone who is actively part of their community and can demonstrate an understanding of the community's needs and practices. This is a critical point, as it does not assume a single set of 'cultural knowledge' skills that represent all Aboriginal and Torres Strait Islander communities but highlights the commonality of strategies used to fill the need for different cultural knowledge in the organisation/service.
- Working with respective communities to recruit individuals who are identified within and by their communities as already having the necessary skills via 'word of mouth', instead of using traditional channels to advertise roles.
- Replacing formal interviews with 'yarns'.
- Actively seeking to increase the number of Aboriginal and Torres Strait Islander staff in any organisation.



Despite the commonality of experiences and approaches undertaken by organisations recruiting staff, each organisation has largely worked in isolation. Beyond ATSIAAG, there does not seem to be a formal national channel for Aboriginal and Torres Strait Islander community- controlled services and Aboriginal and Torres Strait Islander aged care leaders to connect with each other and share their responses to the challenges they face. This has a particularly strong impact on smaller organisations, who often lack the administrative support needed to navigate bureaucratic requirements while also fulfilling their community's expectations for support.

The key outcome of this finding is that organisations have developed strategies to 'work around' and 'work through' the system. They do not need more regulations about skills, but a supported space to come together and share tips and resources to reduce the amount of 'going it alone' that is experienced, especially by smaller organisations. Other ways to reduce the burden and sense of 'going it alone', especially for smaller, regional, rural and remote services, related to opportunities to 'share technical and administrative supports. For example, small providers could be assisted to come together and contract IT services or administration staff at a central hub. This would reduce the demands on each organisation to contract and maintain these services alone. Such 'pooling' by organisations might even extend to client facing staff, including for those services that provide more complex care and higher-level Home Care Packages. In this way, smaller organisations and providers can attract, retain and share allied health professionals and registered nurses, rather than compete against each other in an area where finding such staff is often a challenge. This model has the potential to allow service providers to share skills and resources while building and nurturing a dedicated group of

trusted clinicians who work across community organisations.

THEME 2

WORKING CONDITIONS AND CULTURE

Standard working conditions do not provide enough flexibility to support Aboriginal and Torres Strait Islander employees in balancing their commitments to their communities and their employer. Once employed, standard employment practices such as defined annual and personal leave entitlements, and little support for staff who have experienced trauma, make it difficult for them to continue to meet obligations to their community and/or maintain the strong connection with culture for which they were hired.

Some interviewees also pointed to the risk of blurring lines between cultural practices and the responsibilities of paid work. All Aboriginal and Torres Strait Islander people interviewed reported that their way of working differs from the traditional western '9 to 5' concept. This is particularly true in the aged care sector as the role involves providing care to fellow community members, which intersects with obligations embedded in many Aboriginal and Torres Strait Islander kinship and community relationships. This 'cultural load' should be recognised and separated from paid work, and/or factored into employer expectations. The need for cultural safety in this context is complex, as there are existing cultural duties that are not translated into non-Indigenous ways of being and doing, and which can quickly 'add up' when a highly structured paid workload starts to intersect with existing relationships and roles. The key outcome from this finding is that because the current aged care system is not centred on Aboriginal and Torres Strait Islander ways of working, there are unintended consequences for the worker who must navigate client needs, community expectations and assigned service duties.



These unintended consequences risk leaving the worker overloaded with additional duties that the service is not funded to provide, alienated when they cannot help a client or family member because their needs fall beyond the remit of their paid work, or pressures the worker into unsafe cultural practices, such as working across roles which are differently positioned within men's and women's business.





THEME 3

MISALIGNED AND BURDENSOME REGULATORY PRACTICES AND FUNDING ARRANGEMENTS

The current governance model does not support Aboriginal and Torres Strait Islander-led aged care organisations to operate in a way that will best meet the needs of the communities they serve. Stakeholders reported negative experiences that ranged from not being able to hire people with the skills their communities need because they do not fit into the funding model, to being assessed as 'not being culturally safe' because the organisation's practices did not align with the narrow expectations of 'culture' that inform non-Indigenous auditors. This points to the misalignment between the regulatory system and the diversity that exists in different communities and organisations. Current assessment, definitional and approach problems mean that the call to integrate more Aboriginal and Torres Strait Islander staff and community-controlled organisations into aged care risks bringing these organisations into a burdensome and culturally unsafe system. Smaller community-based organisations face an additional struggle in accessing different funding streams, because they lack the resources and infrastructure to enable the application process.



The current system does not support these organisations to achieve recommendations by the Royal Commission that 'priority is given to existing and new Aboriginal and Torres Strait Islander organisations, including health, disability and social service providers, to cooperate and become providers of integrated aged care services' (47.B.) and for the Australian Government to fund capital works and upscale existing Aboriginal and Torres Strait Islander community controlled providers to bring them into the aged care system (53.1.B.). Rather than enabling these goals, the existing system is overloading Aboriginal and Torres Strait Islander organisations – particularly smaller ones – by overloading them with administrative requirements and limitations.

Given the current barriers experienced by Aboriginal and Torres Strait Islander organisations, larger non-Indigenous organisations are often better placed to compete for funding. They are also often encouraged to hire Aboriginal and Torres Strait Islander staff, despite not having culturally safe environments. This happens because these organisations have the capacity to apply for funding and meet guality reviews which align with non-Indigenous frames of reference. There is an urgent need for secure funding for all Aboriginal and Torres Strait Islander community care providers working with older clients, especially those in regional, rural and remote areas, and including multi-purpose services. This could be achieved by paying biannual block grants in advance and reconciling the balance against a service delivery agreement, rather than the current model in which payment is made in arrears based on an invoice for services delivered.

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DISCUSSION OF THEMES

The key ideas discussed by interviewees is that organisations find themselves having to 'work around' and 'work through' aged care systems. Despite the clear value of 'recognising' cultural and local knowledges within the aged care system, organisations risk having more regulations imposed on them for developing and maintaining the skills and workforce they need. It would be far more beneficial to support diverse organisations to come together and reduce the challenges and inevitable inefficiencies of 'going it alone' experienced especially by smaller organisations. Even in non-Indigenous organisations and providers, the administrative cost borne by smaller providers is higher per capita than the administrative costs borne by larger providers with extensive infrastructure and staff to oversee and implement reporting requirements (Speirs and Hicks, 2021).



Smaller community-based organisations are struggling to access funding streams because they lack the resources and infrastructure to bring them into the aged care system. For these organisations to provide aged care services in a sustained way, the system needs to be suitable and manageable. Failing this, the aged care system will be a regulatory and economic burden that will inadvertently disadvantage Aboriginal and Torres Strait Islander organisations by overloading them with new requirements while consequently advantaging larger non-Indigenous providers. These non-Indigenous providers are often ill equipped to recruit and support Aboriginal and Torres Strait Islander staff, often bringing them into culturally unsafe environments and roles. Ultimately, this negatively affects those people the organisation seeks to support in the community.

For workers, the increased expectations that arise from managing work duties and cultural loads can guickly add up. The restrictive way personal and community care, disability and health services are billed and defined means it is usually the individual care workers who must manage client expectations when people are not receiving the services they need. The complex and siloed structure of the aged, health and disability care policy landscape acts as a barrier to providing what the client might need, leaving the worker to manage client needs and/ or requests, even if they know there is no-one else to provide the additional support. The home care or client-facing worker must then navigate these mismatches, by either refusing to provide greater assistance beyond the paid role or taking on duties which they are not contracted for. This pressure is particularly problematic if the worker has been hired because of their local and/ or cultural knowledge and are highly connected to

RECOMMENDATIONS

NEXT STEPS

Interviewees in this project reported that Aboriginal and Torres Strait Islander peoples should be the ones making the decisions about how aged care services supporting their communities run and setting the standards to be met. This depends on an aged care governance framework that fits the needs of Aboriginal and Torres Strait Islander aged care organisations and how they work, allowing for diverse translations of aged care standards to their specific contexts, and adjusting standards that are inappropriate, unfeasible or potentially damaging to workers.

This aged care governance framework should include:

- Block-funded approaches that allow for flexibility in the use of funding for clients and the security of providing funding in advance of service provision.
- Support to translate skills and roles to the context in which they operate. For example, providing additional mentoring and supervision hours, developing step-by-step guides to inform practice, translating government material into local language materials and creating visual aids for clients and staff.
- Emphasis on community consultation and iterative codesign. Organisations should embrace two- way learning strategies when developing programs and materials which foster culturally appropriate changes in the organisation while also keeping the community informed about the services and options available to them.

their community.

- In-built supports and sustainable funding for smaller organisations who lack resources to apply for/compete for funding under the current system
- A charter of rights for older people which are amendable to different cultural contexts and a clear pathway for redress
- Specific strategic goals for non-Indigenous led aged care organisations to recruit Aboriginal and Torres Strait Islander staff and maintain culturally safe workplaces. These goals should be measurable and reflected in how their recruitment processes are designed.
- Flexible working conditions for Aboriginal and Torres Strait Islander staff, including but not limited to full or part-time roles with weekly flexibility, cultural leave and exemptions from duties deemed culturally inappropriate.
- Support for staff who are caring for clients impacted by trauma and/or have experienced trauma themselves.





AAG COMMITMENT

While we note that there are many others across the ATSIAAG, Friends of ATSIAAG and AWESIG membership who can make valuable contributions to this work, we hope this project can be a preliminary step in our efforts to develop the ideas in conjunction with these important networks. As a result of this project, AAG will continue to advocate for block funding Aboriginal and Torres Strait Islander organisations providing aged care (Australian Association of Gerontology's Aboriginal and Torres Strait Islander Ageing Advisory Group, 2019; Aboriginal and Torres Strait Islander Ageing Advisory Group (ATSIAAG), 2020) and for flexibility around assessment procedures. AAG will also continue to advocate for stewardship and support programs for Aboriginal and Torres Strait Islander community-controlled organisations who are engaging with the Aged Care Quality and Safety Commission assessment process, which allows services to provide appropriate care in a range of contexts, while also ensuring that the needs of older people are met.

While we await more detail from the Australian Government regarding the new Aged Care Act, aged care regulatory system and the Aboriginal and Torres Strait Islander Aged Care Commissioner, we return to the Royal Commission's call that: "The Australian Government should ensure that the new aged care system makes specific and adequate provision for the diverse and changing needs of Aboriginal and Torres Strait Islander people and that:

Aboriginal and Torres Strait Islander people receive culturally respectful and safe, high quality, traumainformed, needs-based and flexible aged care services regardless of where they live" (Royal Commission into Aged Care Quality and Safety, 2021 Recommendation 47 A)

In the interim, AAG commits to facilitate regular forums through ATSIAAG where service managers and workers from Aboriginal and Torres Strait Islander-led organisations can connect, share and discuss difficulties and their strategies. AAG will also continue to work with members of ATSIAAG and Friends of ATSIAAG to fulfill our purpose of connecting research, policy and practice in gerontology.

SPONSOR ACKNOWLEDGMENT

This work was funded by the Australian Government through the Dementia and Aged Care Services fund



Australian Government

Department of Health and Aged Care

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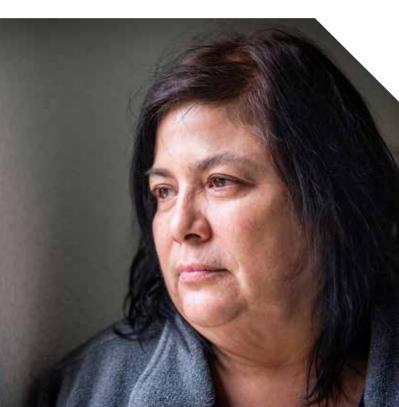
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To improve the experience of ageing through CONNECTING RESEARCH, POLICY and **PRACTICE**

Australian Association of Gerontology Suite 8, 322 St Kilda Road St Kilda VIC 3182 Australia

Telephone: +61 3 8506 0525

Email: enquiries@aag.asn.au

Web: www.aag.asn.au



