



Acknowledgement of Traditional Custodians

cohealth acknowledges the Traditional Custodians of the land on which our offices stand, the Boon Wurrung, Wurundjeri and Wathaurung people of the Kulin Nation, and pays respects to Elders past, present and emerging.

We acknowledge the Stolen Generations and the historical and ongoing impact of colonisation on Aboriginal and Torres Strait Islander peoples. We also recognise the resilience, strength and pride of the Aboriginal and Torres Strait Islander communities.

Aboriginal and Torres Strait Islander peoples' living culture is the oldest continuing culture in the world, and we acknowledge that the lands and waterways are a place of age-old ceremonies of celebration, initiation and renewal.











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about the strategy

cohealth has a mission to improve health and wellbeing for all and tackle inequality in partnership with people and the communities they live in. We have a long-standing commitment to promoting human rights and health equity.

As a health provider, we understand that discrimination and exclusion have a direct impact on health and wellbeing. This Diversity & Inclusion Strategy articulates cohealth's commitment to provide culturally safe and inclusive services and work environments as a matter of core business. It sets out our diversity and inclusion vision, strategic goals and the steps we will take to impact change.

The Diversity & Inclusion Strategy draws on the information gathered and themes identified in the review of cohealth's previous equity plans. Its development is based on consumer, staff and partner agency consultation, in addition to a comprehensive literature review of best practice for achieving equity and inclusion within health and social services.

Inclusion occurs when a diversity of people (of different cultural backgrounds, sexualities, genders, abilities) feel a sense of belonging, are valued and respected, and have equal access to opportunities. (Diversity Council Australia, 2015)

Cultural safety: "An environment that is spiritually, socially and emotionally safe, as well as physically safe for people; where there is no assault challenge or denial of their identity of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning together." (Williams, 1999)

our commitment to reconciliation

To progress diversity and inclusion in a genuine way, it is essential to start with a strong commitment to reconciliation. Australia's First Nations Peoples continue to experience the historical and ongoing impact of colonisation and dispossession. As a mainstream health provider, we have an obligation to improve the health and wellbeing disparity that exists between Aboriginal and Torres Strait Islander and non-Indigenous peoples.

cohealth has a vision for reconciliation where Aboriginal and Torres Strait Islander peoples have social, health and wellbeing equity, achieved through an understanding of our shared history, deep listening, ongoing learning and reflection. Our reconciliation commitments are outlined within cohealth's 2020–2023 Reconciliation Action Plan.



Artwork: Wellness Dreaming (2014) by Ngardarb Francine Riches

"It's integral that non-Indigenous people reflect and share their ideas on how they can best contribute to reconciliation and equity. This also lessons the burden on the Aboriginal and Torres Strait Islander community. I don't feel that there is a right or wrong way to do this, as it's a shared journey of learning, respect, forming relationships and reconciling our history together." Aboriginal Health Promotion Worker

our approach

cohealth adopts a 'whole of organisation' approach to diversity and inclusion. To create sustainable organisational change and demonstrate impact, a systematic advancement of inclusive practices, systems, policies and processes is required across all levels of the organisation. Strong collaboration with key cohealth teams is essential to identify and transform systems of power and privilege that negatively shape individual outcomes.

Privilege is the invisible, unearned advantages, entitlements, benefits and choices that people can experience based on their gender, sexuality, gender identity, cultural background and abilities. These privileges are generally experienced unconsciously, manifest both at a personal level and an organisational level, and perpetuate social hierarchies.

cohealth implements a holistic approach that fosters a culture of belonging and celebrates diversity. The experiences of coworkers and consumers are interconnected and considered equally important.

Threats to inclusion must be considered in the context of unconscious bias, privilege, stigma and discrimination. The image below (an adaption of the Anti-Defamation League's Pyramid of Hate) illustrates how bigs and microaggressions are foundations to hate crimes and violence. All actions and attitudes within the image have a negative impact on individuals.

Violence

hate crimes, threats

Systemic discrimination

economic, political, educational, employment, housing, segregation

Individual acts of prejudice

victim blaming, profiling, slurs and insults, social avoidance and exclusion, name calling

Biased attitudes/microaggressions



The Diversity & Inclusion Strategy is integral to cohealth achieving its mission and vision. It assists in operationalising our human rights framework and creates sustainable structures to implement our Reconciliation Action Plan, Rainbow Tick accreditation, Disability Inclusion and Anti-Racism Plan.

cohealth mission & vision

cohealth Human Rights Framework

cohealth Diversity & Inclusion Strategy

Reconciliation Action Plan

Rainbow Tick accreditation

Disability Inclusion Plan Anti-Racism Plan

who it benefits

An inclusive service and workplace culture benefits all. We want everyone to have a culturally safe and inclusive experience of cohealth, where there is no challenge or denial of their identity.

To enable us to make sustainable changes with the resources we have available, the Diversity & Inclusion Strategy focuses on individuals and communities that experience poorer health and wellbeing outcomes due to systemic and institutional discrimination. This includes:

- Aboriginal and/or Torres Strait Islander peoples
- · Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Asexual (LGBTIQA+) people
- Culturally diverse people, particularly those with refugee and asylum seeker backgrounds
- People with disability
- Women (all identified)

We acknowledge that these cohorts do not form homogenous groups, and that great diversity and uniqueness exists within. We also understand that people can have overlapping experiences of discrimination. The principle of intersectionality is key to addressing unique challenges, barriers and experiences of people.

Other diversity markers, such as age, drug and alcohol use, and socio-economic status, are also very important. We believe all people who experience discrimination will benefit from the strategy.

our model



principles explained

Principle	Description		
Human rights	Human rights are the inherent entitlements to just and fair treatment afforded to each person by virtue of their humanity regardless of sex, age, gender, ethnicity, sexuality, gender identity, faith, socioeconomic status or ability. cohealth is required under the Charter of Human Rights and Responsibilities Act 2006 (Vic) to protect, respect, promote and fulfil the human rights of the people we engage with, including our staff and service users.		
Intersectionality	Intersectionality recognises the ways in which different identities produce intersecting systems of privilege or oppression, and how these systems create unique lived experiences within our social context. As human beings, we exist in a multitude of intersecting spaces and identities. Defining discrimination within a single category (eg. race or gender) does not capture the unique challenges, barriers and experiences of people with intersecting identities.		
Cultural safety	Williams (1999) defines cultural safety as: "An environment that is spiritually, socially and emotionally safe, as well as physically safe for people; where there is no assault challenge or denial of their identity of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning together."		
Cultural humility	Cultural humility is a lifelong process of self-reflection and self-critique where an individual examines and consciously acknowledges the assumptions, biases, values and social position within the context of the present moment (Yeager & Bauer-Wu, 2013). It is continuous awareness and sensitivity to the discrimination and oppression against certain groups of people. Cultural humility is not a 'competency' to be taught, but an ongoing commitment to ongoing learning and reflecting.		
Self-determination	The recognition that people have the right to make decisions on matters that affect their lives and communities, using their own cultural values, models, paradigms and ways of working (Phillips, 2015). Respecting that people hold the knowledge and expertise about what is best for themselves, their families and their communities (DPC, 2018).		



our key focus areas

1. Diverse workforce and inclusive workplace culture

Goal: cohealth's workforce to reflect the diversity of the community we serve, across all levels of the organisation

Why is this important?

There is clear evidence that workforce diversity and inclusion are important for both social and economic outcomes.

Diverse workforces and inclusive workplace cultures are better performing:

- Diversity Council Australia & Suncorp (2020) found that people in inclusive teams are:
 - 5 times more likely to provide excellent customer service
 - 19 times more likely to be satisfied at work
 - 9 times more likely to innovate
- Ethnically diverse companies are 35% more likely to outperform their less diverse counterparts. This is linked to increased efficiency, problem-solving skills, creativity and resilience (DPC et al., 2018)

Australia's workforce does not represent the diversity within the community. People who are Aboriginal or Torres Strait Islander, women, LGBTIQA+, culturally diverse and/or have disability experience more bias and discrimination across all stages of employment:

- Compared to Anglo-Saxon people, Aboriginal and Torres Strait Islander people submit 35% more applications before attaining an interview; Middle Eastern people 64% more; Chinese people 68% more (DPC & CEL, 2018)
- Women represent 17.1% of CEOs and 31.5% of key management personnel this disparity is compounded for older women, women with children and women from certain ethnic and racial groups (WGEA, 2019)
- 47.2% of Australian's with a disability are not in employment, and over half of the people not employed would like to work (ABS, 2019)
- The Victorian Equal Opportunity and Human Rights Commission received 890 reports of workplace discrimination in 2018–2019, related to disability (595), race (188), sex (169), sexual harassment (122), age (100), parental status (68), religious beliefs (56) and other (235)

Unconscious bias is a key reason why workplaces may lack diversity. Unconscious bias refers to "attitudes and beliefs that can impact our behaviour towards others without us being aware of it."

DPC & CEL, 2018.

We will achieve our goal by:

- Measuring and reporting on workforce diversity
- Improving recruitment processes to enhance accessibility and reduce bias and structural discrimination
- Creating more purposeful employment pathways (e.g. internships, students)
- Strengthening partnerships with employment agencies that specialise in recruiting diverse staff e.g. people with disability or culturally diverse people
- Training recruiting managers in bias and the benefits of workforce diversity
- Implementing staff support structures, such as specialised employee assistance programs, peer support networks/working groups

- Improving retention through:
 - increasing coworker knowledge and awareness of cultural safety
 - strong and well-implemented policies and guidelines on reducing discrimination
 - welcoming and accessible physical environments
 - celebrating/acknowledging culturally significant dates
- Improving advancement through increased professional development opportunities, including sponsorship/ mentorship initiatives

The stages of the employment journey that will be reviewed and updated to promote equity.



2. Culturally safe and accessible services

Goal: Consumers experience cohealth as accessible, inclusive and culturally safe

Why is this important?

- Aboriginal and Torres Strait Islander peoples, ethnic minorities, members of the LGBTIQA+ community, and people with disabilities are more likely to:
 - have disproportionately higher rates of ill-health (must be understood in the context of racism, homophobia, transphobia, sexism and ableism) (Williams & Lawrence, 2019)
 - experience individual and structural discrimination when accessing mainstream healthcare services
- Consumers who use a culturally safe and inclusive service are more likely to be satisfied with their healthcare experience, improving engagement and consequently improving health and wellbeing outcomes (Laverty et al., 2017)

We will achieve our goal by:

- Developing the skills, awareness and knowledge of our workforce to provide culturally safe, inclusive and trauma-informed practice (through a suite of flexible learning opportunities and awareness-raising campaigns)
- Developing and updating resources and guides that improve culturally safe and inclusive practice
- Recruiting and supporting Inclusion Champions across the organisation to build the capacity of their teams to provide culturally safe and inclusive services and workplaces
- Ensuring our physical environments send a message of welcome and inclusion

- Improving access to cohealth sites through disability access audits and site modifications
- Improving access to information through effective use of interpreters, translations and embedding plain-English principles into all communications
- Acknowledge and/or celebrate culturally significant dates to demonstrate community support

"Many minority communities have significant barriers to accessing safe and equitable healthcare which lead to poorer health and wellbeing outcomes. Every day I hear stories of marginalised communities being caused harm by outdated systems and attitudes. Yet creating cultural change is hard work. Firstly we have to look within and examine our unconscious bias and then we have to commit to challenging the very systems that have sometimes benefited us or we are met with a level of resistance that can appear overwhelming. Yet it is each of our responsibility to create a better world than we were born into."

Starlady, Zoe Belle Gender Collective Program Manager (auspiced by cohealth)



3. Community collaboration and partnerships

Goals: The voices of community members, consumers and staff with lived experience of inequity are central to decision making across all levels of the organisation. We maintain strong partnerships with organisations that specialise in equity.

Why is this important?

- Cultural safety can only be defined by the person experiencing it, not by the person/organisation providing it
- If the design, delivery and evaluation of services and programs are informed by people that represent the community, our services will meet the needs of the community we serve
- Self-determination is a proven approach that has produced effective and sustainable improvements in outcomes for communities that have experienced structural discrimination

We will achieve our goals by:

- Prioritising community advisory positions to people from diverse communities
- Building the capacity of cohealth staff to engage in culturally safe and effective community participation and co-design practices
- Ensuring Board members represent the diversity of the community we're serving
- Ensuring community voice is central to any project or program that affects community
- Creating opportunities for community-led action
- Establishing and supporting employee networks to improve employee experience of cultural safety, e.g. existing employee networks:
 - Aboriginal and Torres Strait Islander Staff Working Group (Balit Narrum)
 - LGBTIQA+ Staff Support Network (A2Z)
- Strengthening relationships with peak bodies and sector leaders to ensure the Diversity & Inclusion strategy is informed by best practice



"Engaging community advisors who can speak to accessing healthcare from different perspectives – for example, from a non-English speaking background or as a young queer person – isn't just about learning how to adjust our service delivery to meet their needs; it's about learning to unpack a system that has kept certain groups from being able to participate in decision making."

Emily Taylor, Community Engager

4. Inclusive leadership

Goal: Our leaders foster an inclusive team culture

Why is this important?

A leader who prioritises inclusion as core business is more likely to achieve sustained organisational change. Diversity Council Australia's research (2015) cited the following benefits of inclusive leadership:

- Improved job or team performance, as well as higher return on income and productivity
- Higher levels of team innovation
- Greater team engagement
- Higher rates of employee wellbeing and psychological safety
- Lower levels of workplace discrimination complaints
- Higher retention: 33% less employee turnover, on average

We will achieve our goal by:

- Providing targeted training and resources that support leaders to build confidence in:
 - Identifying and addressing personal unconscious bias
 - Inclusive leadership skills
 - Identifying and addressing discrimination promptly
 - Knowledge of flexible working arrangements and reasonable adjustments
- Embedding and supporting Inclusion Champions across the organisation to lead inclusion within teams

5. Advocacy for broader change

Goal: We use our sphere of influence to shape broader societal change

Why is this important?

- Discrimination has a direct impact on wellbeing, cohealth is committed to addressing the underlying causes of ill-health, and advocacy has been a successful mechanism to create change.
- Lobbying for equity to institutions and local, state and federal governments leads to a more fair and equitable society.

We will achieve our goal by:

- Aligning advocacy efforts with priority population needs
- Sharing and promoting cohealth's equity and inclusion efforts and learnings through presentations, papers, publications and resources
- Promoting inclusion and human rights to external stakeholders through social media
- Engaging in reactive and strategic advocacy regarding the promotion of human rights, including policy submissions, letters to government and campaigns



"We want to feel accepted and for our clients to feel accepted, and to be able to create a society (not just an organisation) where our variety of backgrounds, needs

and preferences are included. By changing the face of cohealth to be more diverse and inclusive we will be better able to attain our goal of looking after the health and wellbeing for all."

Dr Nadia Chaves, Infectious Diseases Specialist

measuring diversity and inclusion

At cohealth we want to demonstrate our impact. Measuring inclusion and embedding robust evaluation frameworks into practice is essential for monitoring progress, creating benchmarks, setting targets and informing strategic decisions.

All diversity and inclusion activities will be evaluated in a timely way to demonstrate outcomes, to test our theory of change and to refine our future work.

Standard evaluation auestions include:

- How effective has the initiative been in achieving the short, medium and long-term outcomes detailed within the theory of change (see Appendix p23)
- To what extent has the initiative improved awareness, understanding and knowledge of cultural safety and inclusion?
- To what extent has the initiative improved consumer and staff experience of cultural safety and inclusion at cohealth?
- To what extent did the initiative increase cohealth's staff and consumer diversity?

The following metrics related to staff and consumer experience of inclusion are analysed and reported on annually. This information determines where cohealth's strengths lie and where targeted efforts are required, it also informs the annual Diversity & Inclusion Action Plan:

- 1. Staff diversity survey
- 2. Consumer demographic data
- 3. Staff and consumer engagement surveys
- 4. Exit interview data
- 5. Staff and consumer complaints/feedback
- 6. Number of 'workplace reasonable adjustments' requested and implemented

cohealth's Diversity & Inclusion Strategy will be reviewed and updated in line with cohealth's broader Strategic Plan (2019–2023).





for more information

Contact the Diversity & Inclusion Manager: inclusion@cohealth.org.au

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appendix

how & why we expect change to occur (theory of change)

Issue	Participants	Activities	Short term changes
People who experience discrimination often have poorer health and wellbeing outcomes	Inclusion benefits all. The strategy specifically looks at improving inclusion for cohealth staff, consumers and community members. Particularly: • LGBTIQA+ • Aboriginal and/or Torres Strait Islander peoples • Culturally diverse people • People with disability • Women (all identified)	Improved recruitment, retention and advancement processes, policies and practices	Leaders have the skills and knowledge to support equitable employment experiences,
		Workforce development; information more accessible; welcoming and accessible environments	Increase in staff knowledge and awareness of inclusion; consumers easily access information; consumers feel valued and respected; increase in number of consumers from diverse backgrounds
		Lived experience central to all levels of organisational decision making	Stronger community collaboration and partnerships; people empowered through self-determination; increase in engagement from people from diverse backgrounds
		Leaders supported to champion inclusion	Leaders prioritise inclusion as core business, and model inclusive behaviours; multiple people across the organisation champion inclusion
		Reactive and strategic public advocacy	Increase in community/ services/ local, state and federal governments knowledge and awareness of inclusion

cohealth mission: improve health and wellbeing for all and tackle inequality, in partnership with people and the communities they live in.

Medium term changes	Long term changes	Impact	
People experience less interpersonal, structural and institutional discrimination	Diverse workforce & inclusive workplace culture	High-performing, engaged and satisfied workforce	
	Culturally safe and accessible services		
	Service design and delivery meet the need of diverse communities		Social, economic and health equity
	Inclusive culture embedded across the organisation		
	Community/ services/ local, state and federal governments become more inclusive		

