Warning

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 Daisy Sargeant, 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 will be subject to annual review.
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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 sign of Mary Aikenhead’s desire to respect and work with and for the original inhabitants of this land, 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 Working Party are pleased that this document, the SVHA Aboriginal and Torres Strait Islander Cultural Protocol has been developed to assist our staff in strengthening an awareness of some of the unique historical and contemporary considerations and protocols which contribute to optimum/excellent episodes of care for these groups. Grounded in the tenet of our Person Centred Care methodology, this information seeks to serve as a platform upon which to build person-centred care and responsiveness in both clinical and aged care contexts.

Please note, that this document should be considered as a beginning point when considering how best to care for Aboriginal and Torres Strait Islander peoples. The historical and cultural considerations for these groups across this country are diverse and complex and could not be authentically explored within a single document, hence the importance of prioritizing 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 need to 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 – Co-Chair, SVHA Reconciliation Action Plan Steering Committee
Overview

St Vincent’s Health Australia (SVHA) recognises the unique and valuable position Aboriginal and Torres Strait Islander people hold as First Australians and acknowledge their cultures, histories, spiritualities 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 people. 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.

Find out more about SVHA’s Reconciliation Action Plan: https://svha.org.au/wps/wcm/connect/bd9fe263-52bb-4949-80a1-fa54a0bc2476/St+Vincents+RAP+doc+final+version+for+web..pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=bd9fe263-52bb-4949-80a1-fa54a0bc2476

Purpose

The purpose of this protocol is to provide SVHA with a central document to guide policy development, interactions and communication. 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 policy, 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 our Aboriginal and Torres Strait Islander partners, staff, patients and their caregivers.

Online Cultural Training

SVHA have designed a one-hour online Aboriginal and Torres Strait Islander Cultural Awareness learning package. The package will soon be made available across all sites and a link will be provided here. All staff will be encouraged to complete the training.
Context

Acknowledgements

The development of these protocols 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, lores and accepted codes of behaviour of a specific cultural group. These protocols 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 people 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 our 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 a cultural protocol?

The consideration and observance of these cultural protocols will greatly benefit our Aboriginal and Torres Strait Islander patients, staff and organisational partners. It is hoped that adherence to these protocols will ensure that our organisation is culturally safe and that our 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.

This protocol can be seen as a starting point from which SVHA staff can increase their confidence in interactions. It is hoped that staff will foster individual relationships with Aboriginal and Torres Strait Islander patients and colleagues. Although SVHA staff have access to the Aboriginal Liaison team to provide support and guidance in this process, we would encourage all staff to develop their personal ability to work in a culturally acceptable and well informed way with Aboriginal and Torres Strait Islander people.

For our non-Indigenous and Torres Strait Islander 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 mend, build and strengthen relationships with our 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.
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 people, 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 people 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 people 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 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, at the time of writing Aboriginal and Torres Strait Islander people can expect to live an average of 10.6 years less than non-Indigenous Australians. 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.
Find the latest information on Aboriginal and Torres Strait Islander life expectancy and health here: https://www.aihw.gov.au/reports-statistics/population-groups/indigenous-australians/overview

Keep up to date with SVHA’s current Aboriginal and Torres Strait Islander health initiatives here: https://svhs.org.au/wps/wcm/connect/aa19a324-c854-495f-a050-46eb4b1efc91/SVHA2515_Annual_DY_Newsletter_Online.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=aa19a324-c854-495f-a050-46eb4b1efc91

Access SVHNS’s plan for Aboriginal and Torres Strait Islander health here: https://svhs.org.au/wps/wcm/connect/41986cba-e41f-4946-9186-bf0f57f81469/SVHA2597_Aboriginal+Health+Plan+2020_Online.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=41986cba-e41f-4946-9186-bf0f57f81469
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 is about providing quality health care that fits within the familiar cultural values and norms of the person accessing the service that may differ from your 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)

**Mob**

A term used to identify a group of Aboriginal people associated with a particular place or country. This term is generally used by Aboriginal people 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, drugs or alcohol use. (9)

**Stolen Generation**

The Stolen Generations describes how many Aboriginal and Torres Strait Islanders children were stolen and removed from their communities and families as children by Australian Federal and State government agencies and church missions under acts of parliaments. This occurred from the late 1800’s to the 1970’s. These children were then 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. (10)

**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, 10)

**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 be suitable for use with the Aboriginal and Torres Strait Islander community. (1)
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

Aboriginality

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

1. Is of Aboriginal or Torres Strait Island descent
2. Identifies as an Aboriginal or Torres Strait Island person
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 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 and who is not can only be decided by Aboriginal and Torres Strait Islander people and should never be attempted 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 bought into question. 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 Island people.

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.
Cultural Protocols

Respect and Acknowledgement

In our work at SVHA, it is vital 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 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.

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

<table>
<thead>
<tr>
<th>Protocol</th>
<th>Description</th>
<th>When To Use</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome to Country</td>
<td>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.</td>
<td>Traditional Welcome’s should be incorporated into the opening of major internal or public events, meetings, forums or functions.</td>
<td>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 may be charged. To arrange a Welcome to Country, consult your closest AHU or Mission Department (see Appendix 3)</td>
</tr>
<tr>
<td>Acknowledgement of Elders</td>
<td>The first speaker at a forum recognises and pays respect to Elders, past and present. This acknowledgment forms part of the Acknowledgement to Country.</td>
<td>At major events, acknowledgement of Elders (past and present) usually follows acknowledgement of Traditional Custodians.</td>
<td>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).</td>
</tr>
<tr>
<td>Acknowledging Significant Aboriginal sites</td>
<td>The first speaker at a forum recognises cultural or historical sites of significance in the vicinity of the meeting.</td>
<td>When an event is held near a significant site.</td>
<td>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.</td>
</tr>
<tr>
<td>Acknowledgement of Country</td>
<td>Acknowledgement of Country can occur with or without a Welcome to Country and/or when a smaller or less formal gathering is taking place.</td>
<td>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.</td>
<td>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</td>
</tr>
</tbody>
</table>

Adapted from Aboriginal and Torres Strait Islander Cultural Protocols, Oxfam Australia (2007)
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 people.

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 asking health related questions, seeking care 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 people:

<table>
<thead>
<tr>
<th>Appropriate Terminology</th>
<th>Inappropriate Terminology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indigenous Australian people(s)</td>
<td>Aborigines</td>
</tr>
<tr>
<td>Aboriginal people(s)</td>
<td>Aboriginal(s) and Torres Strait Islanders(s) – as a noun and plural</td>
</tr>
<tr>
<td>Aboriginal person</td>
<td>The Aboriginals</td>
</tr>
<tr>
<td>Torres Strait Islander people(s)</td>
<td>Native</td>
</tr>
<tr>
<td>Torres Strait Islander person</td>
<td>Blackfella/Whitefella</td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Islander Communities</td>
<td>ATSI (or any other abbreviation)</td>
</tr>
<tr>
<td>First Australians/First people</td>
<td>Indigenous (refers to many cultures from around the world and diminishes Aboriginality)</td>
</tr>
<tr>
<td>European invasion/European colonisation</td>
<td>Mixed blood/Half Caste/Quarter Caste/Full blood/Part-Aboriginal/25%, 50% Aboriginal</td>
</tr>
<tr>
<td>Shared issues/Shared challenges</td>
<td>Them/Them people/Those people/Those folk/You people</td>
</tr>
<tr>
<td></td>
<td>European settlement/European arrival/European discovery</td>
</tr>
<tr>
<td></td>
<td>Aboriginal problem/Indigenous problem</td>
</tr>
</tbody>
</table>

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 people 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, be sure to use plain language and avoid 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’.

For more information on how to best communicate with Aboriginal and Torres Strait Islander people please refer to: http://www.health.nsw.gov.au/aboriginal/Publications/pub-terminology.pdf

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 people, and their self-determination should be encouraged. Historically, Aboriginal and Torres Strait Islander people 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 people, it is advisable to include an appropriate Aboriginal or Torres Strait Islander representative. To facilitate this, the Aboriginal Health Unit (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 people of the event and aid in the formation of trust with 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 need to 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 can sit. SVHA staff are advised to consult with Aboriginal 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 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 and aim 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 people 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 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 people 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.

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 or Torres Strait Islander artist or writer 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 an 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.
Find out more about the Reconciliation Action Plan Collaborative Art Project here: https://svha.org.au/wps/wcm/connect/6d2feb3d-4246-41ec-b4c3-1ce8760b201a/St+Vincents+RAP+Art+Book+LR.PDF?MOD=AJPERES&CONVERT_TO=url&CACHEID=6d2feb3d-4246-41ec-b4c3-1ce8760b201a

For further information in regards to the use of art at SVHA please read the SVHM Arts Policy or contact your facilities Arts Department or Curator: Available on SVPHS intranet

**Undertaking Projects and Research**

When undertaking projects or research involving Aboriginal and Torres Strait Islander people, it is essential to consult and collaborate with individuals and groups throughout the process. There should be no projects or research completed about Aboriginal and Torres Strait Islander people that did not directly involve Aboriginal and Torres Strait Islander people in both the design and delivery stages. Additionally, when non-Indigenous people are conducting this form of activity, they should view themselves as having a participatory, rather than controlling role. For a brief overview of consultation with Aboriginal and Torres Strait Islander people and groups, please refer to the section of this document titled ‘Consultation and Conducting Meetings and Events’.

To ensure a project or study is culturally acceptable, an appropriate Aboriginal or Torres Strait Islander representative should be included from the outset. This representative 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 with as many community members as possible to ensure varying perspectives are gained. Aboriginal and Torres Strait Islander people’s rights to self-determination must be upheld, and if people 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 an informal approval process that needs to be followed prior to beginning an activity. The Aboriginal or Torres Strait Islander representative involved with the project will ideally be able to provide information on this, or will know who to consult to find out. Ethics approval for studies involving Aboriginal and Torres Strait Islander people must be obtained from the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) and your local Human Research Ethics Committee (HREC).

Due to community decision making processes and the frequent involvement of individuals and groups in Community Business, it is advisable 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 your local Aboriginal Health Unit or ACCHO.

For detailed information in regards to obtaining ethics approval for studies involving Aboriginal and Torres Strait Islander communities, you can access the AIATSIS website here: http://aiatsis.gov.au/research/ethical-research/guidelines-ethical-research-australian-indigenous-studies

The National Health and Medical Research Council (NHMRC) website also provides a comprehensive guide to ethical conduct in Aboriginal and Torres Strait Islander health research: https://www.nhmrc.gov.au/health-ethics/ethical-issues-and-further-resources/ethical-guidelines-research-involving-aboriginal-
To assist Aboriginal and Torres Strait Islander people to make informed decisions about their involvement in research, the NHMRC have developed the ‘Keeping research on track’ guide: https://www.nhmrc.gov.au/_files_nhmrc/file/publications/synopses/e65.pdf

The Lowitja Institute is another organisation that provide ample information on Aboriginal and Torres Strait Islander projects and research: http://www.lowitja.org.au/

**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. 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 may 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 going to die, if they are not already involved in care.

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 or AHU should be contacted to provide assistance in this situation.

Following the passing away of 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 role and Enterprise Bargaining Agreement (EBA).

You can find detailed guidelines on caring for Aboriginal and Torres Strait Islander people during the palliative phase here: https://www.health.qld.gov.au/__data/assets/pdf_file/0023/151736/sorry_business.pdf

The Australian Indigenous Health Info Net provides additional information and resources: http://www.healthinfonet.ecu.edu.au/related-issues/palliative-care
Aboriginal and Torres Strait Islander Flags

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

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. The Torres Strait Island flag was designed by Bernard Namok from Thursday Island. 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 extends to other forms of use across SVHA – contact the Inclusive Health Program for more information.

For more information on obtaining copyright approval for the reproduction of the Aboriginal and Torres Strait Island flags see: https://www.pmc.gov.au/government/australian-national-symbols/australian-flags

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:

<table>
<thead>
<tr>
<th>Important Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Survival Day/Invasion Day (Australia Day)</td>
<td>January 26th</td>
</tr>
<tr>
<td>The Apology to the Stolen Generations</td>
<td>February 13th</td>
</tr>
<tr>
<td>Close the Gap</td>
<td>March 24th</td>
</tr>
<tr>
<td>National Sorry Day</td>
<td>May 26th</td>
</tr>
<tr>
<td>Reconciliation Day Public Holiday (ACT Only)</td>
<td>May 28th</td>
</tr>
<tr>
<td>National Reconciliation week</td>
<td>May 27th – June 3rd</td>
</tr>
<tr>
<td>Coming of the Light (Torres Strait Islands)</td>
<td>July 1st</td>
</tr>
<tr>
<td>NAIDOC week</td>
<td>July 3rd - July 10th</td>
</tr>
<tr>
<td>National Aboriginal and Islander Children’s Day</td>
<td>August 4th</td>
</tr>
</tbody>
</table>

SVHA Protocols, Policies and Websites

SVHA

SVHA 2015–2018 Reconciliation Action Plan
https://svha.org.au/wps/wcm/connect/bd9fe263-52bb-4949-80a1-fa54a0bc2476/ St+Vincents+RAP+doc+final+version+for+web..pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=bd9fe263-52bb-4949-80a1-fa54a0bc2476

SVHA enVision 2025

SVHA Employment Parity Initiative 2020 – Contact your HR Department for further information

SVHM

SVHM enVision Strategic Service Plan 2017–2025

SVHM Aboriginal and Torres Strait Islander Culturally Appropriate Care – Under development at the time of creating this protocol

SVHM Aboriginal Cultural Heritage SVHM Aboriginal Community Elders Service (ACES) CACPs referrals – Available on SVHM intranet

SVHM Aboriginal Health Unit website
SVHNS

SVHNS Aboriginal and Torres Strait Islander Health Plan 2017-2020
https://svhs.org.au/wps/wcm/connect/41986cba-e41f-4946-9186-bf0f57f81469/SVHA2597_Aboriginal+Health+Plan+2020_Online.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=41986cba-e41f-4946-9186-bf0f57f81469

SVPHS

SVPHS Aboriginal Employment Plan – Available on SVPHS intranet
SVPHS Care of the Aboriginal and Torres Strait Islander Patient Policy – Available on SVPHS intranet
SVPHS Aboriginal and Torres Strait Islander Health website

External Documents

National

Aboriginal and Torres Strait Islander Quality Improvement Framework and Toolkit for Hospital Staff, The Lowitja Institute and SVHM, 2015.
http://www.healthinfonet.ecu.edu.au/key-resources/promotion-resources?lid=28995

Charter of Aboriginal Rights – Under development at the time of creating this protocol

Communicating with Aboriginal and Torres Strait Islander Audiences. Australian Government Department of the Prime Minister and Cabinet, (2016).


NHMRC Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research. NMHRC, 2003.

Victoria

Improving Care for Aboriginal and Torres Strait Islander Patients (ICAP) Resource Kit. Victorian Department of Health Melbourne, 2013.
http://www.healthinfonet.ecu.edu.au/key-resources/promotion-resources?lid=15917


New South Wales


External Services and Resources

National

The Australian Indigenous Health Info Net provides a map of Aboriginal and Torres Strait Islander Health Services across Australia: http://www.healthinfonet.ecu.edu.au/health-infrastructure/health-workers/aboriginal-and-islander-medical-health-services

Victoria

The Victorian Aboriginal Community Controlled Health Organisation provides a list of its member organisations here: http://www.vaccho.org.au/om/our-membership/

New South Wales

See the Aboriginal Health and Medical Research Council’s Members map to locate Aboriginal Community Controlled Health Services in NSW: http://www.ahmrc.org.au/members.html

Queensland

The Queensland Aboriginal and Islander Health Council’s list of members can be accessed here: https://www.qaihc.com.au/about/our-members
References


Appendix 1 - Acknowledgement to Country

Examples of Acknowledgement
These spoken or written phrases should be contextualised to include the Traditional Owners/Custodians of the differing geographic locations.

Verbal Acknowledgements
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, the Gadigal people of the Eora 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 other 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; the Gadigal people of the Eora Nations. 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.’

Acknowledgement 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’
Appendix 2 - Traditional Custodians, Language Groups and Nations

To view an online map representing Aboriginal language, tribal or Nation groups, access the AIATSIS website. Please note - copyright approval must be gained to print and reproduce the map: http://aiatsis.gov.au/aboriginal-studies-press/products/aiatsis-map-indigenous-australia

To view a Torres Strait Islander map and find out more about Torres Strait Islanders languages and culture see: https://www.creativespirits.info/aboriginalculture/people/torres-strait-islander-culture

To learn about the local Indigenous People, history and culture of your area, access the ‘Where do I live?’ documents on the Australians Together website: http://www.australianstogether.org.au/

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

<table>
<thead>
<tr>
<th>SVHA Facility</th>
<th>Physical Location</th>
<th>Traditional Custodians</th>
<th>Nation</th>
</tr>
</thead>
<tbody>
<tr>
<td>St Vincent's Health Australia</td>
<td>East Melbourne</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
<td>Kulin (Cool-in)</td>
</tr>
<tr>
<td>St Vincent's Hospital, Melbourne</td>
<td>Fitzroy</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
<td>Kulin (Cool-in)</td>
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<tr>
<td>St Vincent's Private Hospital, Melbourne</td>
<td>Fitzroy East Melbourne Kew</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
<td>Kulin (Cool-in)</td>
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<td>St Vincent's Private Hospital, Werribee</td>
<td>Wyndham</td>
<td>Use ‘Kulin Nation’</td>
<td>Kulin (Cool-in)</td>
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<td>St George's Hospital</td>
<td>Kew</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
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<tr>
<td>Caritas Christi</td>
<td>Kew</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
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<tr>
<td>St Vincent's Care Services</td>
<td>Eltham</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
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<td>Auburn House</td>
<td>Hawthorn East</td>
<td>Wurundjeri (Wu-run-jeri) Bunurong (Bu-nu-rong)</td>
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<td>Cambridge House</td>
<td>Collingwood</td>
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<td>Riverside House</td>
<td>Richmond</td>
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### New South Wales

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<td>St Vincent’s Health Australia</td>
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<td>Eora (E-ora)</td>
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<td>Sydney</td>
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<td>Sydney</td>
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<td>Sacred Heart Health Service</td>
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<td>Eora (E-ora)</td>
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<td>Griffith</td>
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<td>St Vincent’s Private Hospital, Toowoomba</td>
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<td>Giabil (Gi-ar-bil)</td>
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<td>St Vincent’s Care Services Head Office</td>
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<tr>
<td>St Vincent’s Care Services Arundel</td>
<td>Kombumerri (Kom-bu-merri)</td>
<td>Yugambeh (Yug-am-be)</td>
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<td>St Vincent’s Care Services Bardon</td>
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<td>St Vincent’s Care Services Enoggera</td>
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<td>Turrbal (Turr-bal)</td>
<td>Turrbal (Turr-bal)</td>
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<td>St Vincent’s Care Services Gympie</td>
<td>Gubbi Gubbi (Gub-bi Gub-bi)</td>
<td>Murri (Mah-ri)</td>
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<td>St Vincent’s Care Services Kangaroo Point</td>
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## Appendix 3 - SVHA Aboriginal Health Services and Mission Departments Contact Details

<table>
<thead>
<tr>
<th>State</th>
<th>Aboriginal Health Service</th>
<th>Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>VIC</td>
<td>SVHM Aboriginal Health Unit (AHU)</td>
<td>(03) 9231 3436</td>
</tr>
<tr>
<td></td>
<td>SVHM Aboriginal Hospital Liaison Officer (AHLO)</td>
<td>(03) 9231 3436</td>
</tr>
<tr>
<td></td>
<td>SVHM Mission Department</td>
<td>(03) 9231 3390</td>
</tr>
<tr>
<td></td>
<td>SVPHM Mission Department</td>
<td>(03) 9411 7545</td>
</tr>
<tr>
<td>NSW</td>
<td>SVHNS Aboriginal Health Unit (AHU)</td>
<td>(02) 8382 2213</td>
</tr>
<tr>
<td></td>
<td>SVHNS Mission Department</td>
<td>(02) 8382 2370</td>
</tr>
<tr>
<td>QLD</td>
<td>HR &amp; Indigenous Program Specialist</td>
<td><a href="mailto:violet.singh@svha.org.au">violet.singh@svha.org.au</a></td>
</tr>
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