## Supporting rural/remote Australians in a culturally appropriate way

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There are currently over 2.8 million carers in Australia, which equates to around 12 percent of our population. Who is a carer? They are mums, dads, grandparents, kids, siblings, spouses, friends, neighbours—unpaid persons who devote their lives to caring for a loved one or friend. In 2015, those carers put in 1.9 billion hours of unpaid care—a value of \$60.3 billion if the government had to pay for it. That's equivalent to 3.8% of Australia's GDP and 60% of the health and social work industry. In the NT we have over 30 000 unpaid family carers.

Carers NT provide unique, flexible and culturally appropriate support options for indigenous Australians with a disability or who are frail aged and living in the Top End of the NT. Carers NT has been working in remote NT communities since 1999. Carers NT is funded to support an area of just over 400,000sq kms, which includes over 6 Local Government Areas, 3 shires, and 4 municipalities, including islands. There are approx. 21 600 people in living in these remote communities, speaking approx. 35 distinct languages as well as Kriol and English. There is no word for disability in indigenous languages.

The Top End of the NT has a tropical climate consisting of two distinct seasons; the 'Wet' and the 'Dry'. The wet season, also called the monsoon season, lasts about six months, between November and March. It is hotter than the dry season, with temperatures between 30 and 50 degrees Celsius. The Dry season spans from May until the end of October. Temperatures are lower and the skies are generally clearer during the dry. The average temperature is around 20 degrees Celsius.

During the wet, there is a lot of rain, which frequently causes flooding, resulting in damaged, impassable roads and restricting access to many communities. Therefore, Carers NT direct services on community cannot be delivered during this time.

The Dry season is our busy time for service delivery for remote communities but also presents some challenges. Bushfires; wild animals such as buffaloes, crocodiles, dingoes, brumbies, snakes, occasions of extreme heat and cold and insects all have to be considered in our remote respite programs planning. Community cultural occasions can also impact on service delivery.

## **Carers NT Remote Respite Supports**

The Remote Respite Camp program, Troopy program and Wellbeing Troopy program all provide culturally respectful support on country.

A major benefit of these programs is frail/aged people, those with disabilities, those living with mental ill health and their carers living in Indigenous remote communities do not have to travel to major centres such as Darwin and Katherine to access respite supports.

Traditional cultural practices are part of everyday life in most communities. Feedback we receive from our carers emphasises the importance placed on connection with country, the use of bush medicine and eating bush tucker to make the spirit and body strong. We also know most aged people want to stay on their country, not be away from loved ones and travel for days to a regional centre so their carer can have a respite break.



Carers NT remote respite camps are delivered in remote communities on request during the dry season to support low care, frail aged indigenous female care recipients. Camps are held at a site determined by the community but must be no more than 20 minutes away from the local Health Clinic. Pre-planning for the respite camps commences in Darwin in the Wet season months. The Remote Team Leader and the Aged Care Manager liaise with key stakeholders on community, in Darwin and Katherine during this period to process requests from communities.

When camp requests have been prioritised, the Team Leader then begins work with the community to ascertain a suitable date and time for the camp, taking into consideration any planned cultural activities in the community. Camp staffing consists of a Carers NT Team Leader and a Remote Coordinator. In 2015 Carers NT introduced a brokerage model to utilise a local person from each community where the camps are delivered, resulting in a third support worker on camp. The aim of this model is to contribute to strengthening community capacity, employment opportunities and skills development. Historically, that worker has been a semi-skilled person already employed at the local aged care centre or a person training through the Remote Jobs and Communities Program (RJCP). This person works alongside Carers NT staff from camp setup to camp pulldown, assisting in the delivery of daily activities, sharing learnings and providing support to our camp participants.

Two Toyota Landcruiser Troopcarriers and a heavy duty off road trailer are used to deliver the program. We have two large tents for the women as well as three smaller staff tents. We take everything including the kitchen sink (well, a wash up dish anyway!). Two large solar panels and three 12v batteries power the camp. When we arrive on community, we always go to pay respect to the Traditional Owner and let him/her know we are on country and what we are doing with our programs and receive advice about areas that are off limits; e.g. sacred/ceremony grounds. A comprehensive risk assessment is carried out on arrival at the selected campsite, taking into consideration risks of wild animals, bushfire and unwanted persons coming into camp from nearby communities. The camp setup is self-sufficient with solar power, tents, sleeping equipment, food and activities supplied for the participants for the duration of the camp. Participants assist in general camp duties such as meal preparation, cleaning and tidying up. All staff focus on wellness, re-enablement and restorative approaches aiming at improving quality of life for participants. All activities are planned in consultation with the participants, focussing on clients' goals and outcomes. Past activities have included fishing, hunting, gathering pandanus and merrepen, gathering bush medicine and bush tucker, visiting other communities to see family, gathering colour for weavings, attendance at festivals, painting, storytelling. Many a fishing trip in the Troopy is accompanied by "Keep going, keep going", with not a visible track in sight! We use an inverter to run a TV so the women can enjoy a movie under the stars. Before they watch the "main feature", we also play a short educational DVD e.g. dementia information, mental illness, consumer rights, Aged and Disability advocacy service. A number of these DVDs are in different indigenous languages. At the end of the camp the women take home their foam mattress, bedding, towel and a goodie bag with personal care items.

Another successful program model is the Troopy Program that has been operating since 1999 and been delivered in many Top End remote indigenous communities. Carers NT Troopy programs are also delivered on request by, and in consultation with, a community. Local service providers and their staff in the community manage this program. Carers NT supply a Toyota Landcruiser Troopcarrier vehicle, fuel and a small budget for each respite outing. This provides the opportunity for carers and recipients in remote communities to access meaningful, on –country support, determined by them and delivered by familiar, local people. Respite outings have included fishing, hunting, visits to country,

gathering craft materials, funeral attendance, collecting bush medicine and bush tucker, trips to Darwin or Katherine, camping and visits to other communities to see family.

The Wellbeing Troopy program has the same concept with a different target group; that program specifically targets remote clients who are living with mental ill health. One long-term health clinic manager on a remote community called the Troopy program "the most sensible program she had ever seen". The service providers are required to provide Carers NT with data and feedback about the respite occasions.

The Urban Troopy program commenced in Darwin in early 2016 as a collaboration between Carers NT and Alzheimers NT. This program is specifically aimed at urban indigenous people living in Darwin who are in the early stages of dementia, some of whom are originally from remote communities. Alzheimers NT withdrew from the program in late 2016 and Carers NT have successfully continued with the program. Weekly outings are delivered with six clients and two staff (one indigenous), providing participants with a safe, stimulating and supportive environment with their peers. Participants are encouraged and supported to shop for food supplies, prepare lunch, and cook the BBQ etc. We have had barbecues and picnics at various scenic spots around Darwin as well as trips out to the Kakadu Wetlands, Batchelor, Berry Springs and Howard Springs. Apart from the big lunch, the aspect that is most enjoyed by participants is sitting around after lunch with a cuppa, yarning and laughing about the old days. Carers can self-refer or be referred by a service provider. Carer feedback has been extremely positive. The program has become so popular we have now established a waitlist.

Prior to the introduction of My Aged Care portal in July 2015, Carers NT received bulk funding to provide supports to unpaid family carers in the Top End.

The introduction of the My Aged Care portal and the recent Aged Care reforms has posed some significant challenges in the change in approaches to providing support for remote indigenous carers. Whereby previously the carer was our client, the care recipient is now our client. These particular programs are now funded through Commonwealth Home Support Program (CHSP) - Carer Relationships and Carer Support Sub-programme. The objective of these programmes is to support and maintain care relationships between carers and care recipients, through providing good quality care for frail, older people so that regular carers can take a break. All referrals for these programs funded under CHSP must be now made through the Federal government "My Aged Care" portal, by service providers or by self-referral. Whereby previously Carers NT would receive referrals from the community workers for carers and care recipients to be assessed as potential participants in the camps. When My Aged Care staff receive the referral, they will attempt to make contact with the client. Establishing this contact can prove difficult in urban areas and almost impossible at times in remote communities. If contact cannot be made with the client after two attempts, the referral is closed. It then becomes the responsibility of the client to make contact with My Aged Care to schedule an assessment. Lack of information on community about how MAC works, language barriers, reduced phone/internet coverage and historical distrust of government departments all create impacts on the efficiency of this process. Our experience on community tells us that phones are often lost, are out of credit and there can be hesitancy in answering an unfamiliar/private number or the person may have given their phone to another and no longer have any phone access.

In recognising these barriers for clients and in an attempt to minimise disadvantage, when Carers NT staff are on community, where possible, they are providing support to people to make contact with My Aged Care to navigate the registration and referral process. This can be a very time consuming

process and in the long term is not sustainable, as it is physically not possible to get to every one of our carers across the Top End. In addition, there is no provision for funding to provide this support.

Carers NT continues to consult and collaborate with regional councils, service providers and organisations to ensure we continue to provide responsive, culturally appropriate supports for our remote clients. We actively seek additional funding to further expand and diversify our reach to clients in remote communities in the Top End of the Northern Territory.

## **Presenters**

Susan Aiton is Team Leader for Remote Programs at Carers NT, based in Darwin. Sue has been working in the community services sector for nearly 25 years in the areas of disability, early childhood and aged care, including Indigenous-specific programs, in northern NSW. The last four-and-a-half years Sue has worked at Carers NT further developing her skills. Her work takes her across the Top End of the NT, delivering respite programs, support and information to unpaid family carers in remote communities during the Dry season. Cultural activities are an integral part of these programs and are determined by the families and care recipients. When it is the Wet season and remote road travel is compromised, Sue works in the Urban Troopy program. This program targets urban Indigenous people with early stages of dementia, taking them out for social interaction and trips to country. Travelling to communities and building supportive relationships with remote family carers has become a passion for Sue, who just loves being out in the bush.

Teresa Smithson is the Manager Aged Care Services based in Darwin, at Carers NT. Teresa has worked for Carers NT for over three years. Teresa completed her enrolled nurse training in 1978 and went on to work in acute care settings. Over the past 20 years Teresa has worked in the aged care sector in a variety of settings, including residential facilities and community care. During this time working in aged care, Teresa discovered her passion for caring for our elderly and their families, with a special interest in dementia care. As the Manager of Aged Care Services, Teresa oversees the programs that are delivered through the Commonwealth Home Support Program, Carer Relationships and Carer Support sub-program. With many recent changes to the aged care sector, Carers NT has seen many challenges to the way services are delivered, especially in remote communities. Teresa ensures issues and challenges are fed back to the Department of Health. Teresa works closely with the local regional assessment team and Carers NT remote team, exploring options of streamlining the process of registering clients for services, particularly the remote camps and Urban Troopy program, to ensure no one is disadvantaged.