



MCCSA

Multicultural Communities Council of SA

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Submission No. 024

(Dementia)

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111 Woodville Road
WOODVILLE SA 5011

Tel: 8345 5266

Fax: 8345 5277

Email: mccsa@mccsa.org.au

Web: www.mccsa.org.au

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Mr Steve Georganas MP
House of Representatives
PO Box 6021
Parliament House
CANBERRA ACT 2600

Re: Inquiry into Dementia: Early Diagnosis and Intervention

The Multicultural Communities Council of SA (MCCSA) is pleased to provide a submission to the Inquiry into Dementia: Early Diagnosis and Intervention. The MCCSA is a peak organisation which advocates on behalf of South Australians from culturally and linguistically diverse (CALD) backgrounds. Formed in 1995 through the merger of the Ethnic Communities Council of SA (est. 1975) and the United Ethnic Communities of SA (est. 1980), the MCCSA has a current membership of over 200 community groups and individuals. The MCCSA is advised on aged care issues by an Aged Care Committee members of which represent a broad range of professions, including MDs, psychologists, social & community workers and key CALD community leaders.

Access Economics research in 2006 highlighted that one in eight Australians with dementia do not speak English at home and that people from a CALD background constitute a large portion of the Australian population and that they are ageing rapidly.

The MCCSA would like to raise a number of key points which may affect access to early diagnosis of dementia for people from a CALD backgrounds.

1. CALD communities have a lack of awareness of the disease of dementia and consequently are not accessing supports early.
2. Assessments are sometimes not culturally or linguistically appropriate for the individuals thus leading to a possible misdiagnosis.

Also in some instances people from a non English speaking background may not be proficient in their own language, and assessments which rely on the written word may not be appropriate.
3. Clinicians are sometimes not culturally or linguistically sensitive to the needs of people from a CALD background or skilled in undertaking cross cultural assessments. Some clinicians are reluctant to use interpreters in assessments.
4. The need to address the competency of interpreters who assist in the diagnosis of dementia.
5. The need to develop additional screening tools which take into account peoples cultural, language and educational levels, and
6. The need to develop, where appropriate, specialised trans-cultural mental health units that would have the proper skills-set to meet the needs of people from culturally and linguistically diverse backgrounds.

Should you require any additional information please do not hesitate to contact me on mccsa@mccsa.org.au or 08 8345 5266

Yours sincerely,

Ron Tan OAM
President MCCA