

# Yanha-yalinya: Cultural responsiveness checking tool for services and programs



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## Overview

This is a tool to identify assess the cultural responsiveness of services and programs.

Cultural responsiveness has many meanings, but we consider it here to be the capacity of a service or program to respectfully use Aboriginal and Torres Strait Islander peoples' knowledges, values, and actions – ways of knowing, being, and doing – when designing, delivering and evaluating services and programs to be used by Aboriginal and Torres Strait Islander people.

We have developed a tool that organisations can use to assess their own cultural responsiveness, or that can be used by an outsider who is given access to policies, procedures and interviews. It focuses on services and programs, not the interactions of staff with clients or members of the public.

This tool is based on the holistic definition of Aboriginal and Torres Strait Islander health, on the health and human rights of Indigenous peoples, on cultural safety legislation and supporting documents, and on a range of literature and research about Aboriginal and Torres Strait Islander peoples and communities achieving wellbeing (see appendix).

The tool is also framed by multi-level empowerment theory, and a socio-ecological model of health and its determinants, which acknowledge that equity and wellbeing require actions at individual, family, community, service and system levels. This tool focuses on service and system levels, with actions at these levels providing individuals and their families and communities with best conditions for cultural safety and wellbeing.

In the health sector, Indigenous Allied Health Australia says in its cultural responsiveness framework (2015, p. 8) that:

*It is the responsibility of health service providers to demonstrate culturally responsive leadership, and build governance structures and environments that ensure health professionals are encouraged, expected and able to respond to the needs of Aboriginal and Torres Strait Islander peoples effectively.*



This tool divides cultural responsiveness concepts into themes, each with sub-themes:

1. Self-determination
2. Cultural safety
3. Service development
4. Health and wellbeing

The overall questions to be asked are: "What is the presence or absence of the sub-theme, to what extent, and what is the evidence?"

This tool does not check for service or program outcomes or impact, nor effectiveness, however, makes the assumption that establishing quality services and programs can lead to their effectiveness, and outcomes and impacts.

The tool is designed for people of any culture to use because it does not interpret information from a cultural perspective, but checks for extent and evidence of presence or absence.

The tool can be used simply as a checklist, or as a scorecard.

## Scoring

Ask each question individually, and use a scale as follows:

- 0 – no evidence
- 1 – some evidence
- 2 – clear evidence.

The person doing the rating is tasked with matching the text in the research item/s to the themes and sub-themes in the lists.

If used as a scorecard, scores are applied to each theme and sub-theme, then summed.

The person doing the scoring needs discernment and to become conscious of bias. Keep critical self-reflection notes about rationale for scoring, thoughts, and points for discussion with colleagues.

## Questions

1. Self-determination	Score
Service was co-designed or led by local Aboriginal and Torres Strait Islander people and/or organisations reflecting local priorities	
Stakeholder engagement is reported and ongoing	
Equitable employment of Aboriginal and Torres Strait Islander people at all levels	
Governance by Aboriginal and Torres Strait Islander people, including on Boards and as advisers	
Indigenous Data Sovereignty and Governance protocol and process occur	
Aboriginal and Torres Strait Islander peoples' knowledges and research are used in evidence-based practice	
<b>Total</b>	<b>/12</b>
<b>CONVERT TO PERCENTAGE</b>	<b>%</b>

2. Cultural safety	Score
Definition of cultural safety used, with references and rationale	
Risk matrix available and in use	
Staff training in cultural safety routinely occurs	
Process and tool/s are embedded for service users to evaluate cultural safety	
Findings of cultural safety evaluation are reported publicly	
Aboriginal and Torres Strait Islander peoples' knowledges and research are used in evidence-based practice	
Local community protocols are identifiable in service/program	
Local Aboriginal and Torres Strait Islander community-controlled organisations involved, e.g. as partners	
A process for complaining about racism is apparent, and it clearly uses the word "racism"	
<b>Total</b>	<b>/18</b>
<b>CONVERT TO PERCENTAGE</b>	<b>%</b>

3. Service development	Score
Government policies and legislation framing the work are named	
Alignment with standards for health care named	
Demonstrated use of evidence-base for practice	
Records and demonstrates impacts	
Continuous quality improvement processes are in use	
Investments required to achieve equity are identified	
Funding required to meet need is accessed	
Suitably qualified staff match population requiring and accessing care	
Volunteers and other in-kind resources from the local community are included	
Mainstream workforce development plan is in use	
Aboriginal and Torres Strait Islander workforce development plan is in use	
Partnerships with Aboriginal and Torres Strait Islander community-controlled organisations exist	
Physical location facilitates and promotes accessibility and effectiveness	
Change management and innovation are apparent	
Staff feedback mechanisms are in use	
Connections to higher-level alliance/s exist e.g., regional alliances and sector coordination	
Service coordination mechanisms, such as memorandums of understanding and service level agreements, are in place	
Professional supervision and mentoring are in use	
Cultural supervision is in use	
<b>Total</b>	<b>/38</b>
<b>CONVERT TO PERCENTAGE</b>	<b>%</b>

4. Health and wellbeing	Score
Models of care are in use	
Connection to culture, nation, language and identity is supported	
Immediate and underlying needs are addressed	
Physical health care is provided	
Mental health care is provided	
Emotional health care is provided	
Spiritual care is provided	
Social support is provided	
Life-death-life respected e.g. intergenerational care is supported	
Families are supported	
Individuals are supported to meet their full potential	
Successes and achievements are celebrated	
Culturally informed assessments are used	
Group work is offered	
Peer support is offered	
In-reach by community organisations is available	
Referral pathways are clear and in use	
Choice of care is offered	
Healing informed, trauma aware practices are in use	
Strengths-based language and practices are in use	
Diversity is responded to	
<b>Total</b>	<b>/42</b>
<b>CONVERT TO PERCENTAGE</b>	<b>%</b>

## Scores

Theme	Percentage
1. Self-determination	%
2. Cultural safety	%
3. Service development	%
4. Holistic health	%
<b>OVERALL SCORE (average of above)</b>	<b>%</b>

We regard the percentages to equate as follows:

- 0-25% – not at all culturally responsive
- 26-50% – minimal cultural responsiveness
- 51-75% – moderate level of cultural responsiveness
- 76-100% – high level of cultural responsiveness.

## Suggested citation

Williams, M., & Ragg, M. (2023). *Yanha-yalinya: Cultural responsiveness checking tool for services and programs*. Yulang Indigenous Evaluation. <https://yulang.com.au/starburst-indigenous-evaluations/yanha-yalinya/>

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# Appendix

## Development of the tool

This checklist was developed from a thematic analysis of key documents and resources about rights, principles and protocols of Aboriginal and Torres Strait Islander and other Indigenous peoples. These represent diverse perspectives, sustained engagement with ethical research practice and practical information to inform assessment of effectiveness.

Resources reviewed were:

- Australian Government Productivity Commission 2020 *Indigenous Evaluation Strategy* <https://www.pc.gov.au/inquiries/completed/indigenous-evaluation/strategy/indigenous-evaluation-strategy.pdf>
- Aboriginal Health and Medical Research Council of NSW 2020 *Ethical guidelines: Key principles* <https://www.ahmrc.org.au/publication/ahmrc-guidelines-for-research-into-aboriginal-health-2020/>
- Australian Health Practitioner Regulation Agency 2020 *National Aboriginal and Torres Strait Islander health and cultural safety strategy 2020-25* <https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy/health-and-cultural-safety-strategy.aspx>
- Australian Institute of Aboriginal and Torres Strait Islander Studies 2020 *AIATSIS Code of ethics for Aboriginal and Torres Strait Islander research* <https://aiatsis.gov.au/research/ethical-research>
- Haswell et al., 2012 program Critical Success Factors [https://www.researchgate.net/publication/258022621\\_The\\_Social\\_and\\_Emotional\\_Wellbeing\\_of\\_Indigenous\\_Youth\\_Reviewing\\_and\\_Extending\\_the\\_Evidence\\_and\\_Examining\\_the\\_Implications\\_for\\_Policy\\_and\\_Practice](https://www.researchgate.net/publication/258022621_The_Social_and_Emotional_Wellbeing_of_Indigenous_Youth_Reviewing_and_Extending_the_Evidence_and_Examining_the_Implications_for_Policy_and_Practice)
- Health Sociology Review 2022 *Yuwinbir* Special Issue articles on Indigenous knowledges <https://www.tandfonline.com/doi/full/10.1080/14461242.2022.2091304>
- Indigenous Allied Health Association 2015 *Cultural responsiveness in action framework* <https://iaha.com.au/workforce-support/training-and-development/cultural-responsiveness-in-action-training/>
- Jackson Pulver, Williams and Fitzpatrick 2019 model of multi-level empowerment in Oxford social determinants of health text
- Lowitja Institute 2022 *Tools for culturally safe evaluation* <https://www.lowitja.org.au/page/services/tools/evaluation-toolkit>
- Lowitja Institute 2022 *Indigenous data sovereignty readiness assessment and evaluation toolkit 2022* <https://www.lowitja.org.au/page/services/tools/indigenous-data-sovereignty-readiness-assessment-and-evaluation-toolkit>
- Maïam nayri Wingara 2018 *Indigenous data sovereignty principles*
- National Aboriginal and Torres Strait Islander Health Plan, 2013-2023
- National Health and Medical Research Council (NHMRC) 2018 *Ethical conduct in research with Aboriginal and Torres Strait Islander peoples and communities* <https://www.nhmrc.gov.au/about-us/resources/ethical-conduct-research-aboriginal-and-torres-strait-islander-peoples-and-communities>



- NHMRC 2018 *Keeping Research on Track II* <https://www.nhmrc.gov.au/about-us/resources/keeping-research-track-ii>
- NHMRC 2018 *National Statement on ethical conduct in human research (2007) updated 2018* <https://www.nhmrc.gov.au/about-us/publications/national-statement-ethical-conduct-human-research-2007-updated-2018>
- One Twenty-One Seventy 2010-2016 Continuous Quality Improvement e-learning modules [https://www.menzies.edu.au/page/Research/Centres\\_initiatives\\_and\\_projects/One21Seventy/](https://www.menzies.edu.au/page/Research/Centres_initiatives_and_projects/One21Seventy/)
- *United Nations Declaration on the Rights of Indigenous People 2007* [https://www.un.org/esa/socdev/unpfii/documents/DRIPS\\_en.pdf](https://www.un.org/esa/socdev/unpfii/documents/DRIPS_en.pdf)
- Williams, M. (2018). *Ngaa-bi-nya Aboriginal and Torres Strait Islander program evaluation framework* <https://journals.sagepub.com/doi/full/10.1177/1035719X18760141>

Through a process of coding these documents with keywords arising from their core concepts, a long list of themes was identified. These signified expectations of research from Aboriginal and Torres Strait Islander peak bodies' and researchers' perspectives, remembering that all research with and by Aboriginal and Torres Strait Islander people is connected to Aboriginal and Torres Strait Islander communities.

Keywords were then condensed into a shorter list of themes representing minimum expectations about which all research on issues for Aboriginal and Torres Strait Islander children and families must be based and be reported to then consider effectiveness.

These themes were categorised further into the checklist's core themes.