

Alcohol and other drug treatment interventions for people from culturally and linguistically diverse (CALD) backgrounds: A systematic review.

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The Difference is Research



AIM

Assess the global CALD-specific attributes that aim to increase treatment uptake and retention in Alcohol and other Drug (AoD) treatment services.
Why? To inform the development of AoD research, policy, and culturally sensitive practice in the Australian context.

1

BACKGROUND



Almost 50% of Australians are of culturally and linguistically diverse (CALD) backgrounds.

- CALD is defined as born or having one/both parents born overseas in a non-English speaking country and speaks a language other than English at home.

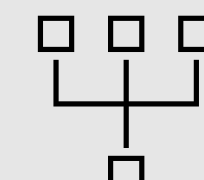
CALD populations

- have unique identities and experiences of AoD use.
- are at risk of AoD harms due to cultural differences, limited social supports, trauma, and stigma.

Little is known about culturally sensitive AoD treatment interventions among CALD populations in Australia.

2

METHOD



A PRISMA-compliant systematic review of peer-reviewed research was conducted.

- Years:** 2000 – 2023
- Databases** Medline, PsycINFO, Embase, and CINAHL
- Inclusions:** Evaluations of AoD treatment interventions, services, or initiatives in CALD populations
- Countries:** Australia, New Zealand, the United Kingdom, Canada, and the United States of America.

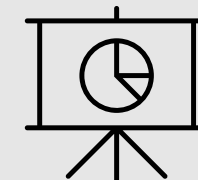
1189
articles



15
included

3

DISCUSSION



! The National Framework for AoD treatment (2019-2029) specifies three clear principles for working with people from CALD backgrounds:

- Services should be culturally responsive and appropriate
- Service providers should be trained in providing culturally responsive practices, and
- Treatment services should work within a framework that recognises and respects the central importance of culture and identity.

! Despite this, and the recognised unmet need, there is no CALD-specific framework for provision of culturally appropriate AoD treatment services for CALD people.

! Involvement from CALD communities and community leaders to drive change, is critical.

4

RESULTS



Preliminary results identified examples of CALD-specific AoD service and treatment frameworks in other countries, but there was a lack of Australian studies. The following **THEMES** around CALD specific AoD treatment service attributes were generated:

Establish culturally appropriate assessments:

Explore

- clients' cultural and religious beliefs and preferences

Consider

- acculturation histories, assimilation, and generational differences within the family.
- family substance use history and cultural view of AoD.
- experiences of trauma
- language usage in personal and private lives of clients.
- the role of spirituality and religion in clients' wellbeing and its intersection with AoD use and treatment.



Integrate cultural and religious beliefs and practices into care:

- culturally welcoming spaces and signs.
- CALD specific residential and other treatment services.
- recognition of traditional & complementary medicine.
- Involvement of traditional healers, CALD religious and community leaders, and cultural ceremonies.
- a focus on recruitment and retention of CALD staff.
- training for all staff in cultural competence.
- access to translator and interpreter services.

Acknowledge the value of a collectivist approach:

Stigma and discrimination in communities do not negate the need for collective.

- incorporate family and community in client care.
- ask people who they consider "family"
- involve parents in youth treatment & prevention programs

Co-design with openness, purpose and respect:

- include consumer focused and community informed AoD service development, delivery, and evaluation approaches.

Focus on holistic wellness:

- provide linkage to other services.
- facilitate community integration for recent arrivals.
- deliver integrated trauma treatment.
- work with other CALD community organisations.

Provide effective outreach and education:

- deliver tailored outreach to predominantly CALD communities.
- include resources in various languages.

5

IMPLICATIONS

CALD populations are at high risk of AoD harms (National Drug Strategy 2017-2026).

This review provides a strong starting point to develop a co-designed CALD specific AoD service delivery framework aimed at improving clients' experiences and access to services.

Better experiences and access may improve people's wellbeing, reduce harms, and create opportunity to identify and treat comorbidities.

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