

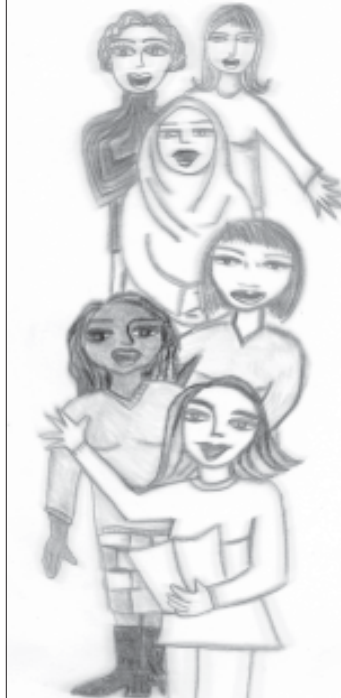
working well newsletter

amharic arabic cantonese
croatian dari farsi greek
italian kurkish macedonian
mandarin somali spanish thai
tigrigna turkish vietnamese



number ten march 07

multicultural centre for women's health
putting immigrant women's health first!



in this issue:
project and
program updates

also:
employment changes
for migrants
& refugees:
where are we going?

Multicultural Centre for Women's Health is an immigrant women's organisation committed to improving the health and wellbeing of immigrant women working in paid and unpaid employment across Australia.

Multicultural Centre for Women's Health provides national leadership and excellence in multilingual health education, advocacy, training, and research with specific expertise in sexual, reproductive, occupational, and mental health.

consumer credit project

The Healthy Credit Project is a year long project funded by Consumer Affairs Victoria under its Consumer Credit Funding Program. Its purpose is to conduct research into the credit and debt experience of immigrant women workers and provide multilingual education to immigrant women workers about debt and credit. The Project commenced in mid-November 2006.

amharic

arabic

cantonese

croatian

dari

farsi

greek

italian

The Project will incorporate a credit education component into the existing MCWH health promotion programs for immigrant women. Programs will be provided in a range of community languages, reaching women who would otherwise be unlikely to receive quality information about credit issues, strategies and available services.

The research component of the Project will initially provide a literature review of the research currently available on the issue, and consultation with key stakeholders in the consumer credit and financial counselling sector. The literature analysis, combined with the results of consultation, will inform the content of the education sessions for immigrant women.

The education sessions in immigrant women's workplaces and community settings will then provide an opportunity to collect qualitative data on immigrant women's experiences of debt and credit. Such data will inform the basis of new research into this issue. The research will seek to analyse the nature of the credit and debt problem within these community groups and explore appropriate regulatory and/or other responses to this issue.

kurdish

macedonian

mandarin

somali

spanish

thai

tigrigna

turkish

vietnamese

Strong linkages with Consumer Affairs Victoria, financial counselling services and consumer legal centres will be an important part of this Project to ensure that women are linked with specialist services where required. An advisory committee made up of experts in the field will guide the work of the Project.

A report will be produced and disseminated at the end of the Project outlining project outcomes and recommendations about appropriate regulatory and other responses regarding credit and debt issues affecting immigrant women.

nilufer yaman
project worker

the mcwh and caawi seminar program 2007

This year MCWH continues to focus on the needs of immigrant women including addressing gaps in service provision relating to their health and wellbeing. Providing Victorian-based professionals with a seminar and workshop program about immigrant and refugee women's issues, is a key way MCWH engages with professionals working with immigrant and refugee women.

amharic

arabic

cantonese

croatian

dari

farsi

greek

italian

During 2007 MCWH will again partner with the newly established CAAWI (Centre for African-Australian Women's Issues) to conduct a number of seminars aimed at empowering service providers with new information, resources and tools relating to immigrant and refugee women. (This comes after a first series of joint seminars on HIV and African communities which were very well attended and received.)

The main themes of this year's seminar series are sexual and reproductive health, and mental health amongst immigrant and refugee women. Expert presenters from the communities which are the focus of these seminars will highlight the unique nature of these sessions.

The first seminar in the series addresses 'Pregnancy and Childbirth Management in African communities'. The seminars that follow will address a myriad of issues including: debunking myths surrounding the role of migrant women from Somali, Italian, Arabic and Turkish communities;

Iraqi women's experiences of resettlement and the impact on their health and wellbeing including factors such as isolation and racism; the sexual and reproductive health of young African women; the needs of older migrant and refugee women relating to their sexual and reproductive health and wellbeing; and gender and racism within the framework of the Victorian Charter of Human Rights and Responsibilities.

Health and allied workers also have the opportunity in 2007 to attend a MCWH Professional Training course on working effectively with immigrant and refugee women in health care settings, based on the research report and training guide 'Knowing Her Better' (course participants will be provided with a complimentary copy of this resource).

This year we will also continue developing the skills and knowledge base for FARREP workers and for MCWH Bilingual Health Educators, which amongst other aims addresses quality of service and education needs for MCWH.

For further information on MCWH training events keep an eye on our website: www.mcwh.com.au or contact us on 03 9418 0999. We look forward to your participation.

amira rahmanovic
training programs coordinator

kurdish

macedonian

mandarin

somali

spanish

thai

tigrigna

turkish

vietnamese

employment changes for migrants & refugees: where are we going?

by
Santina Bertone
Victoria University

The changing nature of Australia's industry and where immigrant women workers are employed within it is always a key consideration for MCWH strategic planning. We asked Associate Professor Santina Bertone to address our recent AGM on this subject. Her presentation included invaluable insight into potential future directions for engaging immigrant women in the Australian workforce. This article is based on that presentation.

introduction

Australia has seen a long period of continuous change in the world of work. These changes are not confined to Australia but reflect a worldwide trend within developed countries. However, some of the changes (such as the decline of manufacturing and the increase in casual employment) are particularly pronounced within our country.

In general, the changes involve: changes in the structure of the economy; changes in the immigration program; and changes in the rules that govern work—that is to the industrial relations system. Any one of these changes would have had significant ramifications for the way we work and the conditions under which we work. Combined together they have had a profound impact on the nature and types of jobs on offer and the situation of immigrant workers in the Australian workforce.

It is important to recognise the centrality of [paid] work in the lives of many migrant and refugee women; it is also important to recognise their relative isolation and their need for information that is packaged in ways they can relate to. The Multicultural Centre for Women's Health delivers linguistically and culturally appropriate service delivery which recognises and addresses these and other issues. This commitment to the needs of immigrant and refugee women in the world of work is unusual even in 2007.

This Paper aims to provide practical advice on where work is heading for migrant and refugee women. It then looks at how this knowledge can be used to refocus service delivery to create the maximum benefit for immigrant and refugee women.

changes at work

Since the 1970s, the role of manufacturing in the Australian economy has been declining, and we've seen a massive reduction in the proportion of the workforce employed in factories (from about a quarter of the workforce down to about one in ten).

As we know, a lot of factories have closed down. Numerous companies have outsourced all or part of their production offshore to developing countries like China or India. Most companies have downsized their workforce, and those that continue operating have invested in new technology and new practises to survive in a globally competitive marketplace. This is a major feature of the very open economy Australia has developed since the floating of the Australian dollar in the early 1980s, and continuing reduction of tariffs since the 1970s. Global competition in the goods and services sector is now widespread across all sectors of the Australian economy. You can see this simply by observing as a consumer where you source many of your goods and services. Our choices as consumers have never been greater. However, this has placed pressure on local producers to modernise and streamline their operations. For many, this has meant shedding large numbers of workers, and this has been particularly pronounced in our manufacturing industries—clothing, automotive, white goods, steel making and so on.

At the same time, the services sector of the Australian economy has grown strongly. This growth has occurred both at the 'high' income end of the labour market—professional and managerial jobs such as accounting, health services and teaching—and at 'low' income end—such as retail, childcare, aged care and hospitality jobs. Much of the growth of women's jobs has been at the lower end of the job market, which has also seen a dramatic increase in part-time and casual or temporary jobs.

main feature

the changing workforce: impact on immigrant workers

Traditionally, migrants and refugees are more likely to work in factories than Anglo-Australians, and especially as unskilled or semi-skilled workers. This is particularly the case for migrant women, who are eight times more likely to work in manual, semi-skilled jobs than Anglo-Australian women. The post-war immigration program encouraged the entry of large numbers of less skilled workers to boost our growing manufacturing industries.

However, since the late 1980s, this has changed. The focus of Australian immigration has shifted from unskilled to highly skilled workers, with more of these expected to speak English before they arrive in Australia. By the turn of the century, up to half of immigrants in Australia were highly skilled. The result is that a high proportion of newly arrived migrants are highly skilled and educated, seeking professional or managerial jobs rather than factory work.

On the other hand, many migrants and refugees have fewer skills demanded in today's workplace, low English oracy and literacy, or difficulty getting their qualifications recognised in Australia. These people are more likely to be working either in manufacturing, or increasingly, in low paid service industry jobs such as cleaning, catering or community services.

For those who do work in manufacturing, the numbers of employees are far fewer, and the system of work has changed considerably. This means that the types of migrants found working in factories are also different. They are more likely to be young, reasonably well educated and to speak English well. This has happened because manufacturing employers (particularly in the larger companies) have moved towards flexible production systems that require job rotation, multi-skilling, and higher levels of self-management and communication among their workers.

Factory workers now increasingly work in teams, manage their own work process and are responsible for meeting their own production targets. Those with poor English oracy and literacy skills

main feature

have in many cases lost their jobs through redundancies in the 1980s and 1990s. Those people are either retired, have taken jobs in smaller factories or as outworkers, or work in service jobs.

In the place of manufacturing, we have seen a big growth in the service industries—retail, human services (like aged care and childcare), hospitality, tourism, education, finance, personal services and so on. These are the industries where the greatest numbers of jobs are available and where increasingly migrants and refugees are employed. However, we have a phenomenon where migrants are highly represented both in low paid and well paid jobs (at both ends of the skill spectrum). It is the low paid group that I am most concerned about and which MCWH has traditionally reached out to. The question is, where are they now?

immigrant workers & IR

Before turning to this point, I want to briefly mention industrial relations changes. The Work Choices legislation marks a significant shift away from awards and collectively negotiated enterprise agreements, towards individually negotiated, non-union agreements—Australian Workplace Agreements (AWAs). Since the enactment of the legislation, we have already seen a big increase in AWAs and fewer union-negotiated collective agreements. Research continues to be undertaken into the early effects of these legislative changes. However, we do know that when similar legislation was passed by the Kennett Government in Victoria in the 1990s, migrant and women workers were among those whose wages and working conditions suffered the most.

These industrial relations changes make it more difficult to negotiate access to workplaces through assistance of the trade union movement (since they attack the rights of union officials to enter workplaces), but also place workers in a more vulnerable and less secure position. For example, the abolition of unfair dismissal redress for employees in workplaces of less than 101 employees would leave many employees feeling less secure.

main feature

Combine this with the intense competition faced by many companies in a global marketplace, and you can see why it is probably harder these days—despite a booming economy and low recorded unemployment—to seek permission from employers to deliver services to migrant women in the workplace.

Despite the huge changes to the Australian workforce there are still many workplaces where significant numbers of migrant and refugee women can be found. However these places are often very different and spread across more industries than they were 20-30 years ago.

where to now?

Given the need for economies of scale and some critical mass in delivering programs to immigrant and refugee women, the following areas are appropriate targets for future efforts.

1. 'Back of house' jobs in large (four and five star) hotels—these are likely to employ many hundreds of migrant women, from a diverse range of countries, as cleaners who clean hotel rooms (as previous studies have shown). Many of these women are educated but have had trouble getting recognition of their qualifications in Australia.
2. Cleaning, catering and patient service delivery functions (people who deliver food to patients etc.) of large hospitals. Many hundreds of migrant women (European and Asian) work in such jobs.
3. Mail sorting jobs—again hundreds of migrant women, many of them Asian (Chinese, Vietnamese) work in such jobs.
4. Cleaners in the private sector—such as those employed by large cleaning firms in large offices.
5. Workers in cleaning and security jobs.
6. Childcare workers in larger childcare centres—such as local government or in the private sector.
7. Aged care workers in larger facilities.

This is not to say that there aren't many migrant and refugee workers employed in smaller workplaces, there certainly are. But the list of workplaces above would be more accessible and offer greater economies of scale. They are all service industry jobs, usually at the lower end of the salary spectrum, but because they tend to be unionised and based in large

main feature

workplaces, the wages and working conditions are more favourable than they are in smaller workplaces. They are more likely to be covered by awards and enterprise bargaining agreements, and access through the assistance of trade unions may be potentially more likely.

The unions linked to these workplaces include: Federated Miscellaneous Workers Union (hotels, cleaners, childcare workers); Health Services Union No. 1 branch (hospital workers) and HACSU (community service workers), and the Australian Services Union (local government workers for example childcare workers).

These are some suggestions regarding reaching out to migrant and refugee workers in the new growth areas of the workforce. Another possible opportunity in relation to reaching thousands of immigrant and refugee women each week is targeting centres where they are engaged in learning English and vocational skills (such as in TAFEs or through AMES). The beauty of reaching out to women in these contexts is greater access to newly-arrived women from a wider range of ethnic and educational backgrounds, such as African and Middle Eastern women refugees. Many TAFE administrators have a history of commitment to running social programs for refugees and migrants, places such as the Northern Melbourne Institute of TAFE and Victoria University TAFE and so on.

In conclusion, the world of work has changed significantly over the past ten to fifteen years, and this requires new strategies for reaching out to migrant women in the new growth areas of the workforce. The directions suggested in this Paper might form part of that consideration.

Santina Bertone is an Associate Professor in the School of Applied Economics, Victoria University. She is also Associate Dean (Research and Research Training) in that Faculty. She has researched and published extensively since the early 1990s in the areas of immigration, workplace change, migrant and women workers, and managing cultural diversity in the workforce.

mcwh's new bilingual health educators & industry visits program update

During 2007, MCWH will be recruiting a number of Bilingual Health Educators to join our current team of thirteen who between them already cover sixteen languages. Our new recruits will enable us to provide our services to recently settled community groups in Victoria in their own languages; they will also allow for our service to be brought to community groups we have worked with previously and are looking to work with again in 2007 and beyond. The groups we look to engage with through our new recruits—as with the groups we engage with through our established Educators—are indicative of the responsive nature of MCWH.

- amharic
- arabic
- cantonese
- croatian
- dari
- farsi
- greek
- italian

As well as increasing our available languages, (which in turn provides health information in the mother tongues of a wider number of community groups), new Bilingual Health Educators add to the diversity of MCWH's staff which is exciting and one of the many facets that makes working at MCWH so interesting.

Industry Visits Program

MCWH has been conducting health information sessions for immigrant women in the workplace since 1978. Sessions are conducted by trained Bilingual Health Educators using a woman-to-woman approach that allows for discussion about sensitive women's issues in a non-threatening and safe environment.

Through this Program we approach the management of (targeted) workplaces to offer our Program to their women workers. Where interest is established, our Educators run a series of sessions based on the needs as articulated by the women themselves. The Industry Visits Program also responds to requests from employers, unions, or individual working women.

Many changes have occurred on the Australian factory floor including: English is now a general requirement for gaining work in our factories (many managers say as their workforce speaks English there is little value to workers receiving important and sensitive information in their own language); job insecurity and pressure on supervisors is increasing due to the changes to workplace relations regulations; and much of Australia's manufacturing has moved offshore, leaving many companies in the role of importers and wholesalers—and many people out of work.

These and many other factors have contributed to the difficulty in engaging management in a discussion about providing health information to their female immigrant workers. This means that many immigrant women miss out on the free service that MCWH has provided for nearly thirty years. It is with these changes and challenges in mind that MCWH continues to develop and where necessary rethink its programs—as always responding to the varying needs of immigrant and refugee women remains the core of our work.

angela nesci
health education
programs coordinator

- kurdish
- macedonian
- mandarin
- somali
- spanish
- thai
- tigrigna
- turkish
- vietnamese

mcwh multilingual library update

The Multilingual Library Collection continues to disseminate health information to women in their language through industry visits, community health sessions, information requests, membership and the Library.

Our collection addresses (current) issues for and reflects the experiences of immigrant, newly-arrived and refugee women. This year we have received new books in Thai on sexual and reproductive health; and Greek books on alleviating back problems, mental health, nutrition, and physical health.

- amharic
- arabic
- cantonese
- croatian
- dari
- farsi
- greek
- italian

We also added many new reports to our Collection including: 'Living in shadows: acid attacks in Cambodia'; 'Countdown 2015: sexual and reproductive health for all, changing a harmful convention'; 'Access to HIV prevention: information among selected CALD communities in Victoria (refugee and asylum seeker issues in Australia)'; and 'For love, for money, for duty, for deed: beliefs and values about caring in the Anglo-Celtic, Greek, Italian, Polish, Turkish and Vietnamese communities in Victoria'.

Reports on violence against women have also been added to the Collection including: 'Identifying the woman, the victim and the client: assessing sexual violence services for women from CALD backgrounds. Case study of Chinese, East Timorese and Vietnamese women'; and 'Preventing and responding to violence and work'.

An area that is relatively new to MCWH is issues relating to women in unhealthy financial relationships. This is an area MCWH is addressing through the Consumer Credit Project (see report in this newsletter). We are learning about how women face financial hardship due to partner misinformation and/or intimidation regarding financial status and responsibilities. This has a major impact on family and intimate partner relationships. Reports relating to these issues which we have procured include: 'Women and debt'; 'Falling on hard times'; 'Consumer Credit Project 2006 (Department of Justice and Consumer Affairs Victoria)'; and 'His money or our money: financial abuse of women in intimate partner relationships'. We also have resources to assist women to utilise and better understand financial acquisitions such as 'Understanding ATMs' (in Arabic, Dinka, Nuer, and Sudanese), and 'Understanding money in Australia' (also in Arabic, Dinka, Nuer, and Sudanese).

- kurdish
- macedonian
- mandarin
- somali
- spanish
- thai

Some really fantastic books and reports have also just arrived such as: 'Living Islam out loud'; 'Voices of resistance: Muslim women on war, faith and sexuality'; 'The journey continues: women living with HIV/AIDS in Australia, private lives'; 'A report on the health and wellbeing of GLBTI (Gay, Lesbian, Bisexual, Transgender and Intersex) Australians'; and 'Multicultural Queer: Australian narratives'.

- tigrigna
- turkish
- vietnamese

I invite you all to come in and have look at our swish new place, browse through the multilingual resource area and borrow some books (MCWH membership gives you lending rights to our Multilingual Collection).

carmela ieracitano
multilingual library coordinator

★ subscribe!

To obtain regular copies of 'Working Well' contact us and we'll put you on the mailing list.

multicultural centre for women's health

tel: 03 9418 0999 fax: 03 9417 7877

email: info@mcwh.com.au

mcwh: suite 207, level 2,

carringbush building, 134 cambridge street,
collingwood victoria 3066.

★ publications!

You can also contact us for a [mcwh catalogue order form](#), our current publications and prices are listed below:

Beyond Cultural Barriers:

Young Sahel African Women's Access to Health Services (2003)

\$22.00 (M) \$25.30 (NM)

Journey Through:

Newly-arrived Immigrant and Refugee Women's Health

Conference Papers, WWH Conference, Royal Women's Hospital

Melbourne (2001) \$22.00 (M) \$25.30 (NM)

Knowing Her Better:

A Research Report and Training Manual About NESB Women's

Sexual & Reproductive Health (2000) \$28.00 (M) \$33.00 (NM)

Seamstress:

A Report on Health Issues of Women Workers in the Textile

Clothing and Footwear Industries (2000) \$22.00 (M) \$25.30 (NM)

Nobody Ever Asked Me if I Wanted to Know:

An Alcohol and Drug Health Promotion Project with Culturally and

Linguistically Diverse Working Women (2000)

\$14.00 (M) \$16.50 (NM)

Three D:

A Preliminary Report on Sexual and Occupational Health

of NESB Women with Disabilities (1999) \$9.00 (M) \$11.00 (NM)

☺ M = MCWH MEMBER ☹ NM = NON-MEMBERS PRICES INCLUDE GST

★ women become part of mcwh!

if you are interested in [immigrant and refugee women's health and wellbeing](#), become part of [mcwh](#), contact us for a [mcwh membership form](#).

The articles presented in this Newsletter do not necessarily represent the views of MCWH. Information in this Newsletter should be treated as general information only.