

HLT150 Indigenous Wellbeing Foundations

School: School of Health - Public Health

2025 | Semester 2

UniSC Sunshine Coast
UniSC Caboolture

**BLENDED
LEARNING**

Most of your course is on campus but you may be able to do some components of this course online.

Online

ONLINE

You can do this course without coming onto campus, unless your program has specified a mandatory onsite requirement.

Please go to usc.edu.au for up to date information on the teaching sessions and campuses where this course is usually offered.

1. What is this course about?

1.1. Description

This foundation course will develop your knowledge for Indigenous wellbeing, and skills for culturally safe professional practice. Working with Indigenous Peoples requires you to have self-reflective skills for cultural humility, and knowledge of decolonisation methodologies in order to engage with Indigenous ways of knowing, doing and being. You will apply your developing knowledge of decolonisation methodologies and self-reflective skills to analyse historical, political, social, and cultural determinants contributing to contemporary Indigenous wellbeing.

1.2. How will this course be delivered?

| ACTIVITY | HOURS | BEGINNING WEEK | FREQUENCY |
|--|-------|----------------|-----------|
| BLENDED LEARNING | | | |
| Learning materials – 2-hours of independent structured learning materials | 2hrs | Week 1 | 13 times |
| Tutorial/Workshop 1 – 2 hour workshop | 2hrs | Week 1 | 13 times |
| ONLINE | | | |
| Learning materials – 2-hours of independent structured learning materials | 2hrs | Week 1 | 13 times |
| Tutorial/Workshop 1 – 2 hour online workshop | 2hrs | Week 1 | 13 times |

1.3. Course Topics

Cultural capabilities

Respect for history of Aboriginal and Torres Strait Islander Peoples, knowledges and perspectives

Reflection and cultural humility for health practitioners

Indigenous Determinants of Health Framework

Advocating for Aboriginal and Torres Strait Islander Peoples health & wellbeing

2. What level is this course?

100 Level (Introductory)

Engaging with discipline knowledge and skills at foundational level, broad application of knowledge and skills in familiar contexts and with support. Limited or no prerequisites. Normally, associated with the first full-time study year of an undergraduate program.

3. What is the unit value of this course?

12 units

4. How does this course contribute to my learning?

| COURSE LEARNING OUTCOMES | GRADUATE QUALITIES MAPPING | PROFESSIONAL STANDARD MAPPING * |
|--|--|--|
| On successful completion of this course, you should be able to... | Completing these tasks successfully will contribute to you becoming... | Competencies from multiple Professional Bodies (see below) * |
| 1 Define and practice the concepts of cultural humility and self-reflexivity in relation to Aboriginal and/or Torres Strait Islander Peoples health and wellbeing. | Ethical | A.1, A.4, B.4, 1, 1.1.1, 1.1, 1.2, 1.2, 1.3, 1.4, 4, 4, 4.1, 4.2, 4.2, 4.3, 5.1 |
| 2 Identify and explain key determinants that impact or contribute to Aboriginal and/or Torres Strait Islander People's health and wellbeing. | Knowledgeable | B.3, A.5, 1, 1.1.1, 1.1, 1.2, 1.2, 1.3, 2, 2.1, 2.2, 2.3, 3, 3.1, 3.2, 3.3, 4.1, 4.3, 5, 5.1, 5.1, 5.2, 5.3, 6, 6.1, 6.2, 6.3, 6.4, 7, 7.1, 7.2, 7.3, 10.1, 10.2 |
| 3 Demonstrate knowledge in advocating for Indigenous Peoples' health equity. | Empowered | A.1, B.2, A.4, A.5, 1.4, 2.1, 2.3, 4.1, 4.3, 4.4, 5.1, 5.3, 6, 8.3, 15, 15.1, 15.2, 15.3, 16, 16.1, 16.2, 16.3, 17, 17.1, 17.3 |

* Competencies by Professional Body

| CODE | COMPETENCY |
|--|---|
| INTERNATIONAL UNION FOR HEALTH PROMOTION AND EDUCATION | |
| A.1 | Health as a human right, which is central to human development |
| B.2 | The concepts of health equity, social justice and health as a human right as the basis for health promotion action |
| B.3 | The determinants of health and their implications for health promotion action |
| A.4 | Addressing health inequities, social injustice, and prioritising the needs of those experiencing poverty and social marginalisation |
| B.4 | The impact of social and cultural diversity on health and health inequities and the Implications for health promotion action |
| A.5 | Addressing the political, economic, social, cultural, environmental, behavioural and biological determinants of health and wellbeing |
| 1.2 | Use health promotion approaches which support empowerment, participation, partnership and equity to create environments and settings which promote health |
| 2.1 | Use advocacy strategies and techniques which reflect health promotion principles |
| 2.3 | Raise awareness of and influence public opinion on health issues |
| 4.1 | Use effective communication skills including written, verbal, nonverbal, and listening skills |
| 4.2 | Use information technology and other media to receive and disseminate health promotion information |
| 4.3 | Use culturally appropriate communication methods and techniques for specific groups and settings |
| 4.4 | Use interpersonal communication and groupwork skills to facilitate individuals, groups, communities and organisations to improve health and reduce health inequities. |
| 6.4 | Identify the determinants of health which impact on health promotion action |

| CODE | COMPETENCY |
|---|---|
| DEPARTMENT OF HEALTH | |
| 1 | Respect |
| 1.1 | Historical Context: Recognise the impact of history and colonisation on contemporary Aboriginal and Torres Strait Islander health outcomes. |
| 1.2 | Cultural Knowledge: Knowledge of Aboriginal and Torres Strait Islander history, culture, values and social practices, and respect for how these aspects may influence health practice. |
| 1.3 | Diversity: Recognise the diversity of Aboriginal and Torres Strait Islander peoples' cultures and lived experiences and apply knowledge of the local community context. |
| 1.4 | Humility and Lifelong Learning: Utilise lifelong learning skills to develop cultural capabilities and demonstrate humility in regard to how much one can meaningfully understand Aboriginal and Torres Strait Islander cultures. |
| 4 | Reflection |
| 4.1 | Cultural Self and Health Care: Recognise the influence of one's own cultural identity and the culture of the Australian health care system on perceptions of Aboriginal and Torres Strait Islander peoples. |
| 4.2 | Racism: Evaluate different forms of racism and associated stereotypes that impact on Aboriginal and Torres Strait Islander health, and demonstrate practice that is free from racism. |
| 4.3 | White Privilege: Critique privileges and advantages afforded to white Australian society and understand the role of power relations in the inequitable distribution of privileges. |
| THE AUSTRALIAN ORTHOTIC PROSTHETIC ASSOCIATION | |
| 1.1.1 | Ensures all interactions with the client and/or carer demonstrate respect, honesty, empathy and dignity and are conducted in a culturally appropriate manner |
| PHYSIOTHERAPY BOARD OF AUSTRALIA | |
| 1.4 | Advocate for clients and their rights to health care |
| 4 | Reflective practitioner and self-directed learner |
| 5.1 | Engage in an inclusive, collaborative, consultative, culturally responsive and client-centred model of practice |
| ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH CURRICULUM FRAMEWORK | |
| 1 | Respect: History of Aboriginal and Torres Strait Islander peoples and the post-colonial experience |
| 1.1 | History of Aboriginal and Torres Strait Islander peoples and the post-colonial experience (Respect) - Describe the health of Aboriginal and Torres Strait Islander Australians pre-colonisation and identify key events since colonisation that have impacted the contemporary health of Aboriginal and Torres Strait Islander peoples (N) |
| 1.2 | History of Aboriginal and Torres Strait Islander peoples and the post-colonial experience (Respect) - Analyse the impact of historical events on Aboriginal and Torres Strait Islander health and health service access, and the implications of these events on building trust and relationships with individuals, families and communities in health practice (I) |
| 1.3 | History of Aboriginal and Torres Strait Islander peoples and the post-colonial experience (Respect) - Incorporate strategies for delivering health care that builds trust and relationships with Aboriginal and Torres Strait Islander individuals, families and communities (ETP) |
| 2 | Respect: Aboriginal and Torres Strait Islander culture, beliefs and practices |
| 2.1 | Aboriginal and Torres Strait Islander culture, beliefs and practices (Respect) - Describe Aboriginal and Torres Strait Islander culture precolonisation to the present (N) |
| 2.2 | Aboriginal and Torres Strait Islander culture, beliefs and practices (Respect) - Examine Aboriginal and Torres Strait Islander key concepts of health and wellbeing and the influence of culture, family and connection to country in health practice (I) |
| 2.3 | Aboriginal and Torres Strait Islander culture, beliefs and practices (Respect) - Design strategies to incorporate knowledge of Aboriginal and Torres Strait Islander culture and concepts of health and wellbeing into health care practice to enhance cultural safety (ETP) |
| 3 | Respect: Diversity of Aboriginal and Torres Strait Islander cultures |

| CODE | COMPETENCY |
|------|--|
| 3.1 | Diversity of Aboriginal and Torres Strait Islander cultures (Respect) - Describe the diversity of Aboriginal and Torres Strait Islander cultures and languages, and illustrate examples (N) |
| 3.2 | Diversity of Aboriginal and Torres Strait Islander cultures (Respect) - Examine key elements attributed to cultural beliefs and practices within the local context (e.g. kinship, reciprocity) (I) |
| 3.3 | Diversity of Aboriginal and Torres Strait Islander cultures (Respect) - Design strategies for delivering culturally safe health care with respect to individual, cultural and linguistic diversity (ETP) |
| 5 | Communication: Cultural Safety in health care: terminology and definitions |
| 5.1 | Cultural Safety in health care: terminology and definitions (Communication) - Identify key terms and definitions in the context of delivering culturally safe health care to Aboriginal and Torres Strait Islander clients (N) |
| 5.2 | Cultural Safety in health care: terminology and definitions (Communication) - Analyse the strengths and limitations of key terms and definitions in the context of culturally safe health practice (I) |
| 5.3 | Cultural Safety in health care: terminology and definitions (Communication) - Propose examples for applying key terms and definitions in health practice (ETP) |
| 6 | Communication: Cultural safe communication |
| 6.1 | Cultural safe communication (Communication) - Describe the impact of effective verbal and non-verbal communication as well as miscommunication and how this links to health outcomes (N) |
| 6.2 | Cultural safe communication (Communication) - Analyse differences between own verbal and non-verbal communication and Aboriginal and Torres Strait Islander clients, and the implications for health care (I) |
| 6.3 | Cultural safe communication (Communication) - Incorporate knowledge and skills of culturally safe communication when interacting with Aboriginal and Torres Strait Islander individuals and family members (ETP) |
| 7 | Communication: Strengths-based knowledge and communication |
| 7.1 | Strengths-based knowledge and communication (Communication) - Describe the concept of strengths-based knowledge and communication and how this is used to balance problem-based perspectives of Aboriginal and Torres Strait Islander health and peoples (N) |
| 7.2 | Strengths-based knowledge and communication (Communication) - Analyse how knowledge of improvements in Aboriginal and Torres Strait Islander mortality/ morbidity can be used in strengthsbased communication (I) |
| 7.3 | Strengths-based knowledge and communication (Communication) - Formulate strategies for incorporating strengths-based communication approaches into health practice with Aboriginal and Torres Strait Islander clients (ETP) |
| 8.3 | Partnerships with Aboriginal and Torres Strait Islander health professionals, organisations and communities (Communication) - Establish strategies to work in partnership with Aboriginal and Torres Strait Islander health professionals, organisations and communities, and devise a plan to respectfully acquire cultural information (ETP) |
| 10.1 | Population health (Safety and Quality) - Identify current demographic, health indicators and statistical trends for Aboriginal and Torres Strait Islander peoples and compare these to trends for non-Indigenous peoples in Australia over time (N) |
| 10.2 | Population health (Safety and Quality) - Analyse strengths and limitations of data used as key indicators of Aboriginal and Torres Strait Islander health, and also key policies and strategies designed to improve health care for Aboriginal and Torres Strait Islander peoples (I) |
| 15 | Advocacy: Equity and Human Rights in health care |
| 15.1 | Equity and Human Rights in health care (Advocacy) - Identify factors that can impact on Aboriginal and Torres Strait Islander individuals, families and communities having equal access to health services, in the context of the UN Declaration of Human Rights and Indigenous Peoples and other human rights instruments (N) |
| 15.2 | Equity and Human Rights in health care (Advocacy) - Analyse strengths and limitations in health care with reference to the UN Declaration of Human Rights and Indigenous Peoples and other human rights instruments in terms of equity for Aboriginal and Torres Strait Islander peoples (I) |
| 15.3 | Equity and Human Rights in health care (Advocacy) - Develop strategies for redressing inequity in health care for Aboriginal and Torres Strait Islander individuals, families and communities (ETP) |
| 16 | Advocacy: Social determinants |

| CODE | COMPETENCY |
|------|--|
| 16.1 | Social determinants (Advocacy) - Discuss the concept of social determinants and the impacts on Aboriginal and Torres Strait Islander health (N) |
| 16.2 | Social determinants (Advocacy) - Determine strengths and challenges in delivering health care with respect to the social determinants of health (I) |
| 16.3 | Social determinants (Advocacy) - Devise strategies for diagnosing and treating Aboriginal and Torres Strait Islander clients from the perspective of the social determinants of health (ETP) |
| 17 | Advocacy: Leadership, advocacy and effecting change |
| 17.1 | Leadership, advocacy and effecting change (Advocacy) - Describe the role of individual leadership in effecting positive change within the health system and identify key leadership capabilities (N) |
| 17.3 | Leadership, advocacy and effecting change (Advocacy) - Advocate for equitable health care for Aboriginal and Torres Strait Islander clients (ETP) |

5. Am I eligible to enrol in this course?

Refer to the [UniSC Glossary of terms](#) for definitions of “pre-requisites, co-requisites and anti-requisites”.

5.1. Pre-requisites

Not applicable

5.2. Co-requisites

Not applicable

5.3. Anti-requisites

Not applicable

5.4. Specific assumed prior knowledge and skills (where applicable)

Not applicable

6. How am I going to be assessed?

6.1. Grading Scale

Standard Grading (GRD)

High Distinction (HD), Distinction (DN), Credit (CR), Pass (PS), Fail (FL).

6.2. Details of early feedback on progress

You will receive early formative feedback through your written Task 1a 'Reflection Exercise' from your tutor in week 3.

6.3. Assessment tasks

| DELIVERY MODE | TASK NO. | ASSESSMENT PRODUCT | INDIVIDUAL OR GROUP | WEIGHTING % | WHAT IS THE DURATION / LENGTH? | WHEN SHOULD I SUBMIT? | WHERE SHOULD I SUBMIT IT? |
|---------------|----------|--------------------|---------------------|-------------|--------------------------------|-----------------------|--|
| All | 1 | Journal | Individual | 30% | 2x 300 word per reflection | Refer to Format | Online Assignment Submission with plagiarism check |
| All | 2 | Written Piece | Individual | 40% | 750 words | Week 8 | Online Assignment Submission with plagiarism check |
| All | 3 | Report | Group | 30% | 800 words | Week 13 | Online Assignment Submission with plagiarism check |

All - Assessment Task 1: Reflection Journal

| GOAL: | The goal of this task is to demonstrate your ability to engage in the process of cultural humility (lifelong learning), by practicing self-reflexivity to be an effective and culturally safe health practitioner for Aboriginal and/or Torres Strait Islander Peoples health and wellbeing. | | | | | | | | | | |
|------------------------|--|---------------------------|--|---------------------------|---|---|---|---|--|---|--|
| PRODUCT: | Journal | | | | | | | | | | |
| FORMAT: | <p>Submit: Weeks 3, 6.</p> <p>During this course, you will be asked to record your reflections on set topics related to the weekly readings and workshops in a Learning Reflection Journal. The Learning Reflection Journal is a narrative of your progress in understanding key concepts of the five cultural capabilities and a self-reflection of your own development towards lifelong learning relating to Aboriginal and/or Torres Strait Islander Peoples health and wellbeing. To be written in first person.</p> <p>Response limit is 300 words.</p> <p>Further details for this task will be made available via the Canvas course site</p> | | | | | | | | | | |
| CRITERIA: | <table> <thead> <tr> <th>No.</th><th></th><th>Learning Outcome assessed</th></tr> </thead> <tbody> <tr> <td>1</td><td>Demonstration of understanding key concepts</td><td>1</td></tr> <tr> <td>2</td><td>Evidence and practice of cultural humility and self-reflexivity relating to key concepts, theories and/or strategies presented in the weekly workshop/readings</td><td>1</td></tr> </tbody> </table> | No. | | Learning Outcome assessed | 1 | Demonstration of understanding key concepts | 1 | 2 | Evidence and practice of cultural humility and self-reflexivity relating to key concepts, theories and/or strategies presented in the weekly workshop/readings | 1 | |
| No. | | Learning Outcome assessed | | | | | | | | | |
| 1 | Demonstration of understanding key concepts | 1 | | | | | | | | | |
| 2 | Evidence and practice of cultural humility and self-reflexivity relating to key concepts, theories and/or strategies presented in the weekly workshop/readings | 1 | | | | | | | | | |
| GENERIC SKILLS: | Information literacy | | | | | | | | | | |

All - Assessment Task 2: Visual representation and explanation

| GOAL: | The goal of this task is for you to identify determinants of health and key concepts covered in weeks two to seven and explain how these impact on or contribute to Aboriginal and Torres Strait Islander People's health and wellbeing. | | | | | | | | | | | | | | | | |
|------------------------|--|---------------------------|--|---------------------------|---|---|---|---|--|---|---|--|---|---|---|---|--|
| PRODUCT: | Written Piece | | | | | | | | | | | | | | | | |
| FORMAT: | <p>For this assessment task, you are required to submit a visual representation accompanied by a 750 word written explanation relating to an Aboriginal and Torres Strait Islander Peoples' health and wellbeing topic and how it relates to a structured Indigenous determinants framework.</p> <p>Additional details about the available topics, and the format for the visual representation and accompanying document will be made available on Canvas.</p> | | | | | | | | | | | | | | | | |
| CRITERIA: | <table> <thead> <tr> <th>No.</th><th></th><th>Learning Outcome assessed</th></tr> </thead> <tbody> <tr> <td>1</td><td>Identification of cultural capability key concept relating to topic</td><td>2</td></tr> <tr> <td>2</td><td>Explanation of how at least one cultural capability concept impacts on Aboriginal and Torres Strait Islander People's health and wellbeing</td><td>2</td></tr> <tr> <td>3</td><td>Application of Indigenous Determinants of Health Framework</td><td>2</td></tr> <tr> <td>4</td><td>Adherence to culturally appropriate terminology</td><td>2</td></tr> </tbody> </table> | No. | | Learning Outcome assessed | 1 | Identification of cultural capability key concept relating to topic | 2 | 2 | Explanation of how at least one cultural capability concept impacts on Aboriginal and Torres Strait Islander People's health and wellbeing | 2 | 3 | Application of Indigenous Determinants of Health Framework | 2 | 4 | Adherence to culturally appropriate terminology | 2 | |
| No. | | Learning Outcome assessed | | | | | | | | | | | | | | | |
| 1 | Identification of cultural capability key concept relating to topic | 2 | | | | | | | | | | | | | | | |
| 2 | Explanation of how at least one cultural capability concept impacts on Aboriginal and Torres Strait Islander People's health and wellbeing | 2 | | | | | | | | | | | | | | | |
| 3 | Application of Indigenous Determinants of Health Framework | 2 | | | | | | | | | | | | | | | |
| 4 | Adherence to culturally appropriate terminology | 2 | | | | | | | | | | | | | | | |
| GENERIC SKILLS: | Information literacy | | | | | | | | | | | | | | | | |

All - Assessment Task 3: Advocacy Exercise

| | | | |
|------------------------|---|---|----------------------------------|
| GOAL: | This goal of this task is to critique an advocacy action for an Aboriginal and/or Torres Strait Islander Peoples' health equity priority. | | |
| PRODUCT: | Report | | |
| FORMAT: | You are to apply the principles of an equity framework to a current health priority. You will critique an advocacy campaign and submit a 800 word written report. | | |
| CRITERIA: | No. | | Learning Outcome assessed |
| | 1 | Evidence of collaboration | 3 |
| | 2 | Effectiveness of communication to report an Aboriginal and/or Torres Strait Islander Peoples' health and wellbeing equity priority | 2 |
| | 3 | Ability to apply your knowledge and understanding of advocacy principles to promote an Aboriginal and Torres Strait Islander Peoples health and wellbeing equity priority | 3 |
| GENERIC SKILLS: | Collaboration, Applying technologies, Information literacy | | |

6.4. Assessment to competency mapping

| PROGRAMME DELIVERY MODE | ASSESSMENT TYPE | TITLE | COMPETENCY | TEACHING METHODS |
|---|-----------------|--------------------|------------|-----------------------------|
| ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH CURRICULUM FRAMEWORK | | | | |
| | | | 1.1 | Taught, Practiced, Assessed |
| | | | 1.2 | Taught, Practiced, Assessed |
| | | | 1.3 | Taught |
| | | | 2.1 | Taught |
| | | | 2.2 | Taught |
| | | | 2.3 | Taught |
| | | | 3.1 | Taught |
| | | | 3.2 | Taught |
| | | | 3.3 | Taught |
| | | | 4.1 | Taught, Practiced, Assessed |
| | | | 4.2 | Taught, Practiced, Assessed |
| | | | 4.3 | Taught, Practiced, Assessed |
| | | | 13.1 | Taught, Practiced, Assessed |
| | | | 13.2 | Taught, Practiced, Assessed |
| | | | 13.3 | Taught, Practiced, Assessed |
| | | | 14.1 | Taught, Practiced, Assessed |
| | | | 14.2 | Taught, Practiced, Assessed |
| | | | 14.3 | Taught, Practiced, Assessed |
| | | | 1.1 | Taught, Practiced, Assessed |
| | | | 1.2 | Taught, Practiced, Assessed |
| | Journal | Reflection Journal | | |

| PROGRAMME DELIVERY MODE | ASSESSMENT TYPE | TITLE | COMPETENCY | TEACHING METHODS |
|-------------------------|-----------------|---------------------------|------------|-----------------------------|
| All delivery modes | Report | Advocacy Exercise | 1.3 | Taught, Practiced, Assessed |
| | | | 2.1 | Taught |
| | | | 2.2 | Taught, Practiced, Assessed |
| | | | 2.3 | Taught |
| | | | 3.1 | Taught |
| | | | 3.2 | Taught |
| | | | 3.3 | Taught |
| | | | 5.1 | Taught, Practiced, Assessed |
| | | | 5.2 | Taught, Practiced, Assessed |
| | | | 5.3 | Taught, Practiced, Assessed |
| | | | 6.1 | Taught |
| | | | 6.2 | Taught, Practiced |
| | | | 6.3 | Taught, Practiced |
| | | | 7.1 | Taught, Practiced, Assessed |
| | | | 7.2 | Taught, Practiced, Assessed |
| | | | 7.3 | Taught |
| | | | 9.3 | Taught |
| | | | 10.1 | Taught, Practiced, Assessed |
| | | | 10.2 | Taught |
| | | | 10.3 | Taught |
| | | | 12.1 | Taught |
| | | | 12.2 | Taught |
| | | | 12.3 | Taught |
| | | | 16.1 | Taught, Practiced, Assessed |
| | | | 16.2 | Taught, Practiced, Assessed |
| | | | 16.3 | Taught |
| | | Visual representation and | 1.1 | Taught, Practiced, Assessed |
| | | | 1.2 | Taught, Practiced, Assessed |
| | | | 1.3 | Taught, Practiced, Assessed |
| | | | 2.1 | Taught, Practiced, Assessed |
| | | | 2.2 | Taught, Practiced, Assessed |
| | | | 2.3 | Taught, Practiced, Assessed |
| | | | 3.1 | Taught |
| | | | 3.2 | Taught |
| | | | 3.3 | Taught |
| | | | 5.1 | Taught, Practiced, Assessed |
| | | | 5.2 | Taught, Practiced, Assessed |
| | | | 5.3 | Taught, Practiced, Assessed |

| PROGRAMME DELIVERY MODE | Written Piece ASSESSMENT TYPE | Visual representation and explanation TITLE | COMPETENCY | TEACHING METHODS |
|---|-------------------------------|---|------------|-----------------------------|
| | | | 6.1 | Taught, Practiced, Assessed |
| | | | 6.2 | Taught, Practiced |
| | | | 6.3 | Taught, Practiced |
| | | | 7.1 | Taught, Practiced, Assessed |
| | | | 7.2 | Taught, Practiced, Assessed |
| | | | 7.3 | Taught, Assessed |
| | | | 10.1 | Taught, Practiced, Assessed |
| | | | 10.2 | Taught |
| | | | 12.1 | Taught |
| | | | 12.2 | Taught |
| | | | 12.3 | Taught, Practiced, Assessed |
| | | | 16.1 | Taught, Practiced, Assessed |
| | | | 16.2 | Taught, Practiced |
| | | | 16.3 | Taught |
| 2020 AUSTRALIAN ORTHOTIC AND PROSTHETIC ASSOCIATION (AOPA) ENTRY LEVEL COMPETENCY STANDARDS FOR AUSTRALIAN ORTHOTIST/PROSTHETISTS | | | | |
| All delivery modes | Journal | Reflection Journal | 1.1.1 | Taught, Practiced |
| | Written Piece | Visual representation and explanation | 1.1.1 | Taught, Practiced |
| THE COMPHP CORE COMPETENCIES FRAMEWORK FOR HEALTH PROMOTION 2011 | | | | |
| All delivery modes | Journal | Reflection Journal | 6.6 | Taught |
| | | | A.3 | Taught, Practiced, Assessed |
| PHYSIOTHERAPY PRACTICE THRESHOLDS IN AUSTRALIA AND AOTEAROA NEW ZEALAND | | | | |
| All delivery modes | Journal | Reflection Journal | 1.1 | Taught, Practiced, Assessed |
| | Written Piece | Visual representation and explanation | 1.1 | Taught, Practiced |

7. Directed study hours

A 12-unit course will have total of 150 learning hours which will include directed study hours (including online if required), self-directed learning and completion of assessable tasks. Student workload is calculated at 12.5 learning hours per one unit.

7.1. Schedule

| PERIOD AND TOPIC | ACTIVITIES |
|--|---|
| 1. Introduction to course and cultural capabilities | n/a |
| 2. Racism & implicit bias in healthcare. White Privilege | n/a |
| 3. Historical context: pre-colonial and post-colonial Australia | Task 1a Reflection journal |
| 4. Diversity of First Nations Australians. Cultural self and healthcare, critical self-reflection & cultural humility | n/a |
| 5. Population health (Indigenous Australian demographics & health statistics). Social & cultural determinants of health | n/a |
| 6. Deficit discourse and Strengths-based approaches. Two-ways knowing | Task 1b Reflection Journal |
| 7. Culturally safe communication. Decolonising methodologies | n/a |
| 8. Protocols for engagement with Indigenous Australians | Task 2 Written explanation of visual representation |
| 9. Partnerships. Co-design. Indigenous health professionals | n/a |
| 10. Human rights & equity Indigenous Australian Leadership | n/a |
| 12. Advocacy | n/a |
| 11. Advocacy | n/a |
| 13. Reconciliation & National Healing | Task 3 - Advocacy critique |

8. What resources do I need to undertake this course?

Please note: Course information, including specific information of recommended readings, learning activities, resources, weekly readings, etc. are available on the course Canvas site– Please log in as soon as possible.

8.1. Prescribed text(s) or course reader

There are no required/recommended resources for this course.

8.2. Specific requirements

Nil

9. How are risks managed in this course?

Health and safety risks for this course have been assessed as low. It is your responsibility to review course material, search online, discuss with lecturers and peers and understand the health and safety risks associated with your specific course of study and to familiarise yourself with the University's general health and safety principles by reviewing the [online induction training for students](#), and following the instructions of the University staff.

10. What administrative information is relevant to this course?

10.1. Assessment: Academic Integrity

Academic integrity is the ethical standard of university participation. It ensures that students graduate as a result of proving they are competent in their discipline. This is integral in maintaining the value of academic qualifications. Each industry has expectations and standards of the skills and knowledge within that discipline and these are reflected in assessment.

Academic integrity means that you do not engage in any activity that is considered to be academic fraud; including plagiarism, collusion or outsourcing any part of any assessment item to any other person. You are expected to be honest and ethical by completing all work yourself and indicating in your work which ideas and information were developed by you and which were taken from others. You cannot provide your assessment work to others. You are also expected to provide evidence of wide and critical reading, usually by using appropriate academic references.

In order to minimise incidents of academic fraud, this course may require that some of its assessment tasks, when submitted to Canvas, are electronically checked through Turnitin. This software allows for text comparisons to be made between your submitted assessment item and all other work to which Turnitin has access.

10.2. Assessment: Additional Requirements

Eligibility for Supplementary Assessment

Your eligibility for supplementary assessment in a course is dependent of the following conditions applying:

- (a) The final mark is in the percentage range 47% to 49.4%; and
- (b) The course is graded using the Standard Grading scale

10.3. Assessment: Submission penalties

Late submissions may be penalised up to and including the following maximum percentage of the assessment task's identified value, with weekdays and weekends included in the calculation of days late:

- (a) One day: deduct 5%;
- (b) Two days: deduct 10%;
- (c) Three days: deduct 20%;
- (d) Four days: deduct 40%;
- (e) Five days: deduct 60%;
- (f) Six days: deduct 80%;
- (g) Seven days: A result of zero is awarded for the assessment task.

The following penalties will apply for a late submission for an online examination:

Less than 15 minutes: No penalty

From 15 minutes to 30 minutes: 20% penalty

More than 30 minutes: 100% penalty

10.4. SafeUniSC

UniSC is committed to a culture of respect and providing a safe and supportive environment for all members of our community. For immediate assistance on campus contact SafeUniSC by phone: [07 5430 1168](tel:0754301168) or using the [SafeZone](#) app. For general enquires contact the SafeUniSC team by phone [07 5456 3864](tel:0754563864) or email safe@usc.edu.au.

The SafeUniSC Specialist Service is a Student Wellbeing service that provides free and confidential support to students who may have experienced or observed behaviour that could cause fear, offence or trauma. To contact the service call [07 5430 1226](tel:0754301226) or email studentwellbeing@usc.edu.au.

10.5. Study help

For help with course-specific advice, for example what information to include in your assessment, you should first contact your tutor, then your course coordinator, if needed.

If you require additional assistance, the Learning Advisers are trained professionals who are ready to help you develop a wide range of academic skills. Visit the [Learning Advisers](#) web page for more information, or contact Student Central for further assistance: +61 7 5430 2890 or studentcentral@usc.edu.au.

10.6. Wellbeing Services

Student Wellbeing provide free and confidential counselling on a wide range of personal, academic, social and psychological matters, to foster positive mental health and wellbeing for your academic success.

To book a confidential appointment go to [Student Hub](#), email studentwellbeing@usc.edu.au or call 07 5430 1226.

10.7. AccessAbility Services

Ability Advisers ensure equal access to all aspects of university life. If your studies are affected by a disability, learning disorder mental health issue, injury or illness, or you are a primary carer for someone with a disability or who is considered frail and aged, [AccessAbility Services](#) can provide access to appropriate reasonable adjustments and practical advice about the support and facilities available to you throughout the University.

To book a confidential appointment go to [Student Hub](#), email AccessAbility@usc.edu.au or call 07 5430 2890.

10.8. Links to relevant University policy and procedures

For more information on Academic Learning & Teaching categories including:

- Assessment: Courses and Coursework Programs
- Review of Assessment and Final Grades
- Supplementary Assessment
- Central Examinations
- Deferred Examinations
- Student Conduct
- Students with a Disability

For more information, visit <https://www.usc.edu.au/explore/policies-and-procedures#academic-learning-and-teaching>

10.9. Student Charter

UniSC is committed to excellence in teaching, research and engagement in an environment that is inclusive, inspiring, safe and respectful. The [Student Charter](#) sets out what students can expect from the University, and what in turn is expected of students, to achieve these outcomes.

10.10. General Enquiries

In person:

- **UniSC Sunshine Coast** - Student Central, Ground Floor, Building C, 90 Sippy Downs Drive, Sippy Downs
- **UniSC Moreton Bay** - Service Centre, Ground Floor, Foundation Building, Gympie Road, Petrie
- **UniSC SouthBank** - Student Central, Building A4 (SW1), 52 Merivale Street, South Brisbane
- **UniSC Gympie** - Student Central, 71 Cartwright Road, Gympie
- **UniSC Fraser Coast** - Student Central, Student Central, Building A, 161 Old Maryborough Rd, Hervey Bay
- **UniSC Caboolture** - Student Central, Level 1 Building J, Cnr Manley and Tallon Street, Caboolture

Tel: +61 7 5430 2890

Email: studentcentral@usc.edu.au