Submission No 15

IMPROVING CRISIS COMMUNICATIONS TO CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

Organisation: CORE Community Services

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Submission in Response to Inquiry into Improving Crisis Communications to CALD Communities

The Hon Melinda Pavey MP
Chair, Committee on Community Services,
Legislative Assembly, NSW Parliament
Parliament House, Macquarie Street, Sydney NSW 2000

Dear Ms Pavey,

CORE Community Services (CORE) welcomes the opportunity to make this submission in response to the inquiry into improving crisis communications to CALD communities from the Committee on Community Services of the Legislative Assembly of the Parliament of New South Wales.

CORE is a not-for-profit community organization that delivers vital services to the people of southwest Sydney, with a particular focus on culturally and linguistically diverse (CALD) communities, children, young people and their families, people with disability, the aged, and those facing financial disadvantage or hardship. Our programs include children's services, neighbourhood centres, settlement services, youth services including specialist homeless support services and youth crisis refuges.

The Fairfield LGA is the current operational area of CORE and is considered one of the most culturally and linguistically diverse LGAs in Australia. In the 2016 census, almost 60% of residents were born overseas and over 75% of residents spoke a language other than English at home, with Vietnamese, Arabic, Assyrian Neo-Aramaic, Cantonese and Khmer the most frequently spoken languages. The Department of Social Services data indicates that between January 2016 and September 2018, Fairfield received over 8,000 newly arrived refugees and humanitarian entrants largely from Iraq and Syria.

CORE is committed to continue working with the Parliament of New South Wales to improve communications with CALD communities in crisis situations. We therefore call on the Committee on Community Services to openly communicate in a timely fashion with CORE and other non-government organisations that work with CALD communities, the outcomes of this inquiry.

CORE welcomes the opportunity for face-to-face consultation on this issue, as well as to work with the Parliament of New South Wales, the NSW Government and other relevant stakeholders to improve communications to CALD communities during crisis situations.

This submission is informed by our years of experience working and engaging with CALD communities, including community leaders, ethno-specific and faith-based organisations in southwest Sydney.

Thank you for the opportunity to contribute to this important issue and we look forward to hearing the outcome of the inquiry.

Yours sincerely,

Juana Reinoso
Chief Executive Officer
CORE Community Services

General Comments

According to recent studies, it is important for the Australian Federal and State governments to ensure that multicultural communities receive public health information in a language they understand properly, in a level they access and comprehend easily and from a reliable and trusted source.[1] However, at the beginning of the COVID-19 pandemic, both the Federal and State governments failed to engage effectively with CALD communities and provide health information and advice in suitable formats and languages tailored to the needs of those CALD communities.[2]

This corroborates that the warnings of the Australian Institute for Disaster Resilience in their 2007 Guidelines for Emergency Management weren't from the outset a major consideration in the Federal and State governments preparations for the COVID-19 pandemic. The Guidelines states that CALD communities might be particularly vulnerable in the context of emergencies and crisis as they may not be as resilient in an emergency if they are not particularly proficient in English and cannot access comprehensive information and resources.[3]

From CORE's experience working with CALD communities during the COVID-19 pandemic in 2020 and 2021, it was very difficult for many of those communities in the Fairfield LGA to interpret, understand and follow health communications and key COVID safety messages, such as 'stay at home', 'get tested' and 'not crossing over into families' from the NSW and Federal governments. This is because limited English proficiency and cultural or linguistic differences prevented many of CALD communities, particularly newly arrived refugees and migrants, from understanding and comprehending the meaning of messages and information they received.

In addition to the inability of CALD communities to access accurate, updated, translated and consistent communications from the NSW and Federal governments, Fairfield was one of the LGAs in southwest Sydney that was very negatively affected by the NSW Government's localised approach to lockdown policing during the pandemic. It is important to note that Fairfield LGA CALD communities are vibrant and resilient people, but they were significantly challenged as a result of the impacts of strict and extended lockdowns and outbreaks. The harsh police-enforced lockdowns, restrictions placed on people's movement and negative media attention led to the re-emergence of past traumatic experiences for many refugees who lived through war and conflict in their countries of origin. These concerns are reflected well in the following quotes from CALD community leaders:

"It was unnecessary to treat residents of Fairfield differently from other part of NSW during the lockdowns and outbreaks."

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[1] Migration Council of Australia, Integrating culturally, ethnically and linguistically diverse communities in rapid responses to public health crises, MCA accessed 10 June 2022, https://migrationcouncil.org.au, 2022.
[2] Alexandra Grey, Multilingual Australia is missing out on vital COVID-19 information, ***The Conversation,*** 29 June 2020, https://theconversation.com/multilingual-australia-is-missing-out-on-vital-covid-19-information-no-wonder-local-councils-and-businesses-are-stepping-in-141362, 29 Jun e2020.
[3] Australian Institute for Disaster Resilience, Guidelines for Emergency Management in CALD Communities, AIDR, accessed 14 June 2022, https://knowledge.aidr.org.au/media/1969/manual-44-guidelines-for-emergency-management-in-cald-communities.pdf, 2007.

"During the COVID-19, Fairfield was put in the spotlight by the government and the media, and local residents were treated in a very appalling way."

"Fairfield CALD communities were impacted negatively by the COVID-19 pandemic because of language barriers and lack of access to clearly communicated and translated messaging from the government."

While the COVID-19 pandemic contributed to numerous challenges for CALD communities in NSW, including the Fairfield LGA, it created an opportunity for CALD communities to work together and with government and non-government organizations to amplify their voices about challenges to the health and well-being of their respective communities. However, the absence of an inclusive NSW state-wide CALD engagement peak body for multicultural health and communication issues limited significantly the ability of CALD communities to work together in cooperative partnerships to represent the communication needs and challenges of their communities.[4]

It is also important to acknowledge the significant role that local non-government and settlement organizations played during the COVID-19 pandemic in working collaboratively with CALD communities to ensure that they receive timely and accurate information about the pandemic. Given their established relationship with CALD communities and ethno-specific and faith-based organizations, local organisations were instrumental in identify and addressing gaps in health communications and messages from the NSW and Federal governments.

For instance, CORE played a pivotal role in facilitating the interactions and bridging communications between CALD communities and government agencies and non-government services in Fairfield LGA, including NSW Health, Multicultural NSW and other relevant agencies. However, inconsistencies between Federal and State governments communications and language barriers were highlighted as a major challenge for CALD communities.

Responses to Individual Questions

To each question, we have provided a brief response together with the context and relevant issues from the perspectives of CORE as well as CALD community leaders we work with and other stakeholders who have undertaken research and advocacy work in the crisis communication space. We have also suggested a number of recommendations in response to each question to improve communications to CALD communities in crisis situations.

Use of multicultural and CALD community groups and networks to distribute in-language information	
CORE's response – the context and issues	During COVID-19 pandemic, CALD community groups and networks, including community leaders, ethno-specific and faith-based organisations, played a significant role in distributing in-language COVID-19 related information and health messages, using culturally appropriate methods. They were also

[4] Misha Ketchell, We asked multicultural communities how best to communicate COVID-19 advice, The Conversation, accessed 14 June 2022, https://theconversation.com/we-asked-multicultural-communities-how-best-to-communicate-covid-19-advice-heres-what-they-told-us-142719, 2020.

	instrumental in translating health information and producing information in audio and video formats as a moral obligation with the recognition that there was a gap to fill in order to help their respective communities.[5] This was critical as the majority of government resources were in written format and weren't accessible to those who were illiterate in their first or other languages. CALD community leaders were also considered a trusted source of sharing information within their respected communities and played a vital role in ensuring community support for relevant health orders such as physical distancing, testing and hand hygiene.[6] While CALD communities of NSW, particularly the Fairfield LGA, were affected disproportionately by COVID-19 in medical and social terms, the collective response to the pandemic from CALD community groups and networks in partnership with local non-government organisations, highlights the positive and promising aspect of meaningful collaboration to address the COVID-19 communications and other associated challenges.[7] This is ultimately the result of effective collaboration between CALD communities and local organisations in developing successful and culturally appropriate techniques for the distribution of public health information. It is also important to note that the use of CALD community groups and networks in distributing in-language information, translating resources into community languages and producing information in audio and video formats during the crisis should be balanced by relying equally on other methods of information-sharing and public communications. Local non-government organisations with strong links to CALD communities may play a significant complementary role working with CALD communities using culturally appropriate approaches in sharing and distributing public health information in partnership with CALD community groups and networks.
Recommendations	We recommend that the NSW Government and the Parliament of NSW: 1. Ensure that the public health information, including translated materials, during crisis situations becomes available immediately in audio and video formats in addition to written formats. In doing so,

[5] Settlement Council of Australia, Communicating with migrant and refugee communities during COVID-19: Learnings for the future, SCoA, accessed 14 June 2022, http://scoa.org.au/wp-content/uploads/2020/11/Report-Communications-during-COVID-19-FINAL.pdf, 2020.

[6] Settlement Council of Australia, Communicating with migrant and refugee communities during COVID-19: Learnings for the future, SCoA, accessed 14 June 2022, http://scoa.org.au/wp-content/uploads/2020/11/Report-Communications-during-COVID-19-FINAL.pdf, 2020.

[7] Ethnic Communities Council of Victoria, Our Voices, our Struggles, our Views: Will you choose to hear us? ECCV, accessed 13 June 2022, https://eccv.org.au/wp-content/uploads/2021/10/Report_COVID-19-recovery-and-migrant-and-refugee-communities_ECCV-Oct2196.pdf, 2021.

	partnerships with local non-government organisations working with CALD communities, ethno-specific and faith-based organizations and CALD community leaders should be prioritised to make sure that information and resources are culturally appropriate and tailored to the needs of local CALD communities. 2. Use reliable and proven methods of information-sharing and trusted individuals to distribute communications and health messages within CALD communities in crisis situations. Community leaders should be considered as one tool among many in distributing public health communications and needs to be identified and selected in collaboration with local non-government organisations and settlement service providers, to ensure that they are well-connected with their respective communities. 3. Allocate resources for building capacity and developing skills of CALD community groups and networks, particularly community leaders and ethnic-specific organisations, as one of the trusted sources of information-sharing with multicultural communities during crisis situations. This can be done by involving specialist settlement organisations, as they have expertise, cultural competency and infrastructure to assist the government in building capacity and skills of CALD community groups and networks. 4. Work with local non-government organisations, particularly specialist settlement service providers, as effective facilitators to provide the ground work for increased engagement with local CALD community leaders in circulating public health information within their communities. This would prevent the circulation of misinformation and enable CALD communities to access accurate, updated and translated information from reliable and trusted sources. 5. Engage with CALD communities through discussion groups, town-hall meetings or direct consultations to examine existing knowledge and capability gaps in government's responses to crises and distribution of public information. This would enable the government to promote a more tailored approach to the needs of CALD communities and to learn about available resources and capabilities within CALD communities that could be used to address crisis situations.

	6. Improve engagement with settlement service providers and CALD communities through establishing trusted and inclusive platforms to address miscommunication, mistrust and inconsistencies during the crisis situation. The focus and aim of such platforms should be to improve engagement, trust, mutual respect and acceptance between CALD communities, settlement organizations and government agencies. 7. Establish a State-wide peak body for multicultural health issues to allow multicultural and CALD community leaders and representatives to come together to speak about the health and well-being needs of their communities and issues around accessing communications from the government. Such a platform would enable the government to partner with multicultural communities to ensure that health-related messages are not lost in communication and translation, and CALD communities become able to receive public health information in a timely and concise manner.
Ways to improve channels of communication with CALD communities	
CORE's response – the context and issues	From the experience of CORE working with CALD communities during the COVID-19 pandemic, newly arrived refugees and migrants in the Fairfield LGA and surrounding areas were not able to receive sufficient official COVID-19 resources. There weren't the same number of topics covered in every community language, and there were obviously less translated resources than those available in English. These issues have been highlighted by a recent research report from the Settlement Council of Australia in which many CALD community leaders, settlement service providers and other stakeholders have raised concerns about the accuracy, consistency and accessibility of translated resources during the pandemic.[8] This is particularly important for those individuals from multicultural communities who are not proficient in English or less connected with their community leaders and settlement service providers. The use of simple and plain English messaging in public communications from the government was another issue that affected the ability of many CALD communities to access COVID-19 resources during the pandemic.[9] Public

[8] Settlement Council of Australia, Communicating with migrant and refugee communities during COVID-19: Learnings for the future, SCoA, accessed 14 June 2022, http://scoa.org.au/wp-content/uploads/2020/11/Report-Communications-during-COVID-19-FINAL.pdf, 2020.

[9] Migration Council of Australia, Integrating culturally, ethnically and linguistically diverse communities in rapid responses to public health crises, MCA accessed 10 June 2022, https://migrationcouncil.org.au, 2022.

	health information should not require a high level of literacy to understand, even when communicating complex ideas such as vaccination program readiness. Images, animations and videos and audios been very useful to increase the understanding of healthcare information within CALD communities. This would be enhanced significantly when those materials are culturally sensitive and include representation of individuals and communities from their background.[10] It is also important to note that youth and young adults in Australia have significantly lower rates of health systems literacy as well as low levels of engagement with health services overall. When it comes to CALD young adults, this issue is multiplied both in terms of healthcare-seeking attitudes and access to healthcare.[11] Whilst the pandemic had a broad mental health impact on the Australian community, people in CALD communities, including young adults, face additional risks due to community stigma, compounded by a lack of understanding or trust in mental health interventions. This is because of a number of interconnected cultural barriers that prevent youth and young adults form CALD backgrounds to seek health advice and follow public health information. In addition, during the pandemic, having a local lens across the social, cultural, economic and geographic context of each locality was an issue of central importance to ensure that local CALD communities are able to access public health information and available resources tailored to their local needs. This highlights the importance of listening to local CALD communities to address their needs and concerns using a placed-based approach, as the needs and concerns of residents of each LGA is different from one another during crisis situations. Lastly, CORE's experience working with CALD communities during the COVID-19 pandemic highlights the importance of involving CALD community leaders and ethno-specific organisations in effectively distributing public health information, preventing the circulation of misinformation and facilitating the engagement of government and non-government organisations with local communities. This was particularly significant in supporting CALD communities to be vaccinated as they worked hard with the government and local service providers to advocate for materials in suitable languages and

[10] Migration Council of Australia, Integrating culturally, ethnically and linguistically diverse communities in rapid responses to public health crises, MCA accessed 10 June 2022, https://migrationcouncil.org.au, 2022.
[11] Migration Council of Australia, Integrating culturally, ethnically and linguistically diverse communities in rapid responses to public health crises, MCA accessed 10 June 2022, https://migrationcouncil.org.au, 2022.

	formats and ensure that vaccinations were provided for CALD communities in their localities.
Recommendations	We recommend that the NSW Government and the Parliament of NSW: 1. Allocate necessary resources that public health information and messages, including written materials, audios, videos and images, are translated equally and in all CALD community languages, covering both languages of existing and emerging communities. The translations need to be accurate, updated and consistent with the original English resources and should be displayed next to English in the areas where a significant number of the populations are people from multicultural backgrounds. 2. Ensure that public communications and health messages are written in simple and plain English so most people from CALD communities whose first language is not English can access and understand publicly available information. Text-heavy documents should be avoided as people are often unwilling to read long documents. Simple and plain English would also be translated in plain and simple community languages and wouldn't require a high level of health literacy from CALD communities to understand and comprehend translated information. 3. Ensure that public health information and messages, including written materials, images, posters, audios and videos, are designed and produced in a culturally appropriate manner and tailored to the needs and cultural values of potential recipients from CALD communities. This would increase significantly the level of understanding, acceptability and accessibility of public health information by CALD communities. 4. Allocate resources to produce and translate public health information and messages in both written and audio formats so those members of CALD communities who are illiterate are able to access information. To achieve better outcomes, voice talent in audio messages should be consistent, authoritative, calm and tailored to the tone of the message. The audio should also be produced in high-quality with a consideration of the dialect and relative in/formality of the languages of target groups.

	5. Recognise the importance of a place-based approach in preparing and distributing information and resources as an effective means of understanding and addressing the needs and concerns of local CALD communities. Adopting a place-based approach in communications and information-sharing would enable the government to work effectively in partnership with local non-government service providers and CALD communities to create localised solutions and adopt culturally appropriate practices to achieve better outcomes. 6. Work with CALD community groups and networks and local non-government organisations to use social media platforms to spread public health communications in a timely, reliable and concise way. This would enable CALD communities across the country to receive, understand and comprehend resources and information in both English and their community languages from reliable sources and prevent the spread of misinformation. 7. Design and produce public health information in a way that addresses the significant cultural barriers that prevent CALD youth and young adults from reading and following public health information. In doing so, the government should work with those local non-government organisations and settlement service providers that work with CALD youth and young adults to make sure the information is tailored to the needs of this group. 8. Involve CALD community leaders and representatives of ethno-specific organisations in emergency management of public health crises by establishing a panel of expert community leaders who would work with the government to facilitate the timely distribution of accurate and reliable public health information. They could also assist with checking and verifying translated resources – written materials, audios, videos and images – to ensure that CALD communities receive accurate, reliable and updated information during crisis situations. 9. Involve local non-government organisations that have established working relationships with CALD communities in the design, distribution and evaluation of public health information to make sure that the information is culturally appropriate and produced in away that respects cultural values of targeted CALD communities. The expertise and cultural competencies of local organisations, that have bilingual and bicultural workers, would enable the government to

	achieve better outcomes in addressing the challenges of public health crises.
Addressing racism and discrimination related to crisis communications	
CORE's response – the context and issues	During the COVID-19 pandemic, many CALD communities of Australia experienced racism and discrimination. A study by the Australian National University reveals that more than 80 percent of Asian Australians have reported discrimination, xenophobia and racism, including physical assaults and verbal threats, during the COVID-19 pandemic.[12] Other minorities and CALD communities also experienced COVID-19 related racism and discrimination. For instance, a Sky News journalist's misleading association of the 2020 outbreak in Melbourne to the South Sudanese community spread misinformation and reinforced racism.[13] Similarly, during the 2021 outbreak in NSW, Fairfield LGA and the rest of the South-West and Western Sydney communities were singled out by harsher lockdown laws and felt unfairly treated by the NSW Government. The media perpetuated the negative images of south-west and western Sydney communities by focusing on the small number of people doing the wrong thing. The media deliberately ignored the reality that the area had a high proportion of essential workers, teachers, nurses and aged care workers, and other sectors, such as manufacturing, logistics and construction, who could not perform their job from home. Despite the experience of discrimination and racism, many CALD community leaders and groups came together in partnership with local service providers to support those who were suffering the most during the pandemic. A CALD community leader who worked closely with CORE during the pandemic to respond to the needs of their communities said: *"Living at Fairfield during this time was very difficult and annoying. Everywhere you go, people start talking about Fairfield, the outbreaks and this kind of stuff. In Sydney, everyone else was allowed to go to work except for residents of Fairfield."*

[12] Phil Mercer, Asian-Australians victims of COVID-fueled racism according to Australian study, VOA News, accessed 15 June 2022, https://www.voanews.com/a/east-asia-pacific_voa-news-china_asian-australians-victims-covid-fueled-racism-according-australian/6197872.html, 2020.

[13] Zuleika Arashiro, Racism during the COVID-19 Pandemic, Ethnic Communities' Council of Victoria, accessed 14 June 2022, https://eccv.org.au/wp-content/uploads/2020/08/ECCV-Submission_Inquiry-into-COVID-19-response_final-version-1.pdf, 2020.

Recommendations	We recommend that the NSW Government and the Parliament of NSW 1. Recognise the issue of racism and discrimination against CALD communities as a long-standing challenge in Australia and take innovative and sustainable initiatives to address it by working with representatives of CALD communities. 2. Ensure that all communication departments in all tiers of government, recruit staff from CALD communities so they have a better understanding of the communication needs and concerns of multicultural communities during crisis situations. 3. Introduce multicultural awareness and cultural literacy training programs for employees of the NSW government so they have a better understanding of the nature of the multicultural identity of Australia and the important role CALD communities play in the Australian society. 4. Introduce programs to facilitate the employment of people from multicultural backgrounds by the NSW Government. Such programs would enable employers within the NSW public sector to address and overcome their reluctance to hire people from CALD backgrounds who do not necessarily fit their concept of the ideal employee. 5. Address the issue of media racism and discrimination against CALD communities during crisis situations and in other times. It is important to note that addressing the issue of media racism may lead to a better awareness by Australian society about CALD communities, as the media plays a significant role in educating and informing the public. 6. Work with the media to create an effective mechanism of providing practical pathways for journalists from CALD backgrounds to get into the industry to reflect the multicultural identity of Australia. This may result in a more diverse media industry in which CALD communities are seen and treated respectfully and fairly. 7. Reaffirm strong commitment to human rights and equality of all Australian citizens even under crisis and emergency situations such as

	COVID-19 lockdowns and outbreaks. This may prevent the spread of racism and discrimination during crisis situations. 8. Reform the NSW Anti-Discrimination Act 1977, making it more accessible to victims, strengthening the provisions for online vilification, and including an intersectional approach that recognises overlapping sources of discrimination. While legislation against direct and indirect discrimination against people on the basis of national or ethnic origin already exists at both Federal and State levels, it is clearly not sufficient to deal with the problem of systemic racial and ethnic discrimination, particularly during crisis situations.

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