

REPORT ON PROCEEDINGS BEFORE

LEGISLATIVE ASSEMBLY COMMITTEE ON COMMUNITY SERVICES

IMPROVING CRISIS COMMUNICATIONS TO CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

At Jubilee Room, Parliament House, Sydney, on Tuesday 16 August 2022

The Committee met at 9:40.

PRESENT

Mrs Melinda Pavey (Chair)

Ms Melanie Gibbons

Mr David Harris

Ms Jenny Leong

PRESENT VIA VIDEOCONFERENCE

Ms Trish Doyle

Mrs Nichole Overall

* Please note:

[inaudible] is used when audio words cannot be deciphered.

[audio malfunction] is used when words are lost due to a technical malfunction.

[disorder] is used when members or witnesses speak over one another.

The CHAIR: Welcome to the first hearing of the Legislative Assembly Committee on Community Services inquiry into improving crisis communications to culturally and linguistically diverse communities. Before I commence I acknowledge the Gadigal people, who are the traditional custodians of this land, and I pay respect to Elders of the Eora nation past, present and emerging, and extend that respect to other Aboriginal and Torres Strait Islander people present. I am Melinda Pavey; I am the Chair of the Legislative Assembly Community Services Committee. With me today are my fellow Committee members Jenny Leong, member for Newtown; Melanie Gibbons, member for Holsworthy; and David Harris, member for Wyong. Nichole Overall is joining us from sunny Queanbeyan today. She has informed us it's sunny, which is unusual by the sounds of Nichole's voice, so she's in a particularly fabulous mood. Trish Doyle is also joining us from the Blue Mountains via videoconference.

Mr FARHAD ARIAN, Stakeholder Engagement Manager, CORE Community Services, before the Committee via videoconference, affirmed and examined

Mr JOHN BURAHO, Settlement Manager, Multicultural Communities, CORE Community Services, before the Committee via videoconference, sworn and examined

Ms SELINA LEE, Marketing & Communications Manager, SydWest Multicultural Services, sworn and examined

The CHAIR: This is our first hearing and you're our first guests and witnesses. We very much appreciate the time that your organisations have put into making really valuable submissions and being here part of today's hearing. Our CALD communities trust organisations like yours. How can government agencies capitalise on this to promote messaging during times of crisis?

SELINA LEE: Government needs to consult with multicultural organisations like SydWest Multicultural Services more closely and earlier on in the process so we can better tailor public information because, from our experience, communicating to culturally and linguistically diverse communities requires a nuanced understanding of how people receive and comprehend information in their own language. We mobilised our established community leaders forum to connect, engage and refine messaging to their respective communities about the latest updates to ongoing COVID guidelines and restrictions. Our virtual doorknocking initiative to reach communities in language and disseminate verified information to push COVID-19 vaccinations proved to be a success, contributing to the Blacktown LGA recording 95 per cent of double vaccinations quicker than other areas.

We maintain the view that government must put in place a task force with representatives from multicultural organisations to leverage their existing networks and community groups so that we can better assist in the decision-making process alongside other agencies, including NSW Health; the police; emergency management agencies; and local, State and Federal MPs in areas with high representation of culturally and linguistically diverse communities. A regular seat at the decision-making table will allow organisations to play a more effective and responsive intermediary role between government, authorities and the communities.

JOHN BURAHO: From organisational SETS providers such as ours, particularly providing settlement services to newly arrived refugees and migrants, it is vitally important that the Government does indeed not only consult organisations such as ours in preparing and disseminating the information into CALD communities but, most importantly, reaches out to organisations such as ours to understand how to better communicate and disseminate such information into CALD communities.

From our evidence, we've realised that much of the information communicated by government to community leaders and community members is usually written in languages that are either in English, or those that are translated might not necessarily nuance the community's ways of communicating. So what we have noticed and recommended to the Government is to ensure that the messages to be communicated to the communities are provided in different ways, including audio messaging.

What we've heard from communities is that when they see information about COVID and COVID-related information on TV, it's in English, it's being presented by English-speaking people and, therefore, really does not represent them in any way. What they wanted to see—and this is the message they've given to us—is a representation of the message on their screens, on their local radios. The written information needs to be written in a plain, simplified English version.

We've seen how much was written in a way that even people like myself and others really struggled to understand the content and the context, let alone refugees and migrants, and so the message is that the information

is tailored to the community in a simplified version of the English language, in order to translate the materials. We understand that because of the diversity within multicultural communities, it is almost impossible for the Government to cover each and every language or dialect out there—there are so many of them—but we also understand that government working directly with service providers, particularly settlement service providers, is vitally important to then get the message to those hardest to reach pockets of the communities.

FARHAD ARIAN: In addition to what my colleague John was saying, seeing or looking at the issue through local lenses and other important [inaudible] from our perspective as service providers in south-west Sydney because during the pandemic having a local lens across the social, cultural, economic and geographic context of each locality was very important. It was important in the sense that each locality has their different needs and the local population—sometimes the needs and the issues and the challenges they are facing is different from one locality to another, so it's very important that government messaging and the health messages coming to these localities should be tailored and address the needs of those localities seeing from a local-based approach, and this is I think very important.

Another issue in this context is the people—newly arrived refugees and migrants in the areas. A lot of these people when they arrived in Australia, even though some of them spoke English, their local knowledge and the way to receive and understand the messages from the Government was very important. These messages coming from the Government not just to be translated but also to be a very true reflection of their culture, values or to be very culturally sensitive so that the reason of those people will be easily and comfortably will accept those messages and follow the Government orders. That was also another important issue.

In addition to that, looking at the younger adults and the younger generation of refugees and migrants, and from our own experience in south-western Sydney, particularly in Fairfield, there were a lot of issues dealing with COVID. The younger generation of the CALD communities, it was difficult for them to understand but also follow the orders and get the messages. So I think this is another important consideration: to prepare and to provide the messages and the health messages in a way that the younger generation and the younger adults from migrant and CALD communities—to understand that but also to accept it in a way that's tailored to their cultural needs and cultural values.

The CHAIR: I have a follow-up question for Ms Lee. You talk about the success in the Bankstown community of 95 per cent vaccination rates. Can you give me a good example of best practice where everything worked well with the health district, with the council staff, with your services, with emergency services? Is there an example that you can give that really fixed things?

SELINA LEE: I think that with the pandemic, it was a new experience for many of us and there was a lot of fear. With information being passed on through communication channels like WhatsApp, but culturally—there are different culturally driven channels where people communicate, for example, LINE, WeChat, Kakao Talk. What those funnel is misinformation being communicated to people and creating more fear around that uncertainty. Also, in terms of accessibility of information, when it comes to translated content, the challenge is that whilst it—sorry, apologies.

The CHAIR: No, it's a great answer.

SELINA LEE: One may speak or understand a foreign language with grammatical correctness, but sometimes the content can still remain foreign. So the essence of the messaging is about what the message is and why. When we were able to iterate that in the context of the pandemic and why vaccinations were important, it was much easier to have people embrace that messaging and adopt the compliance and the new measures that were put in place, understanding that it was a safety measure. By establishing communication through known and trusted community leaders, such as our doctors, priests and Sheiks, and other ethno-specific organisations, we're communicating with a broad array of language groups. It can be a challenge and therefore it is most important to ensure that meaningful information is communicated and embraced by those receiving that message. The virtual doorknock initiative that we were able to roll out during that period of heightened restrictions, the virtual doorknock campaign, allowed for these trusted leaders to also influence and contact their networks.

The CHAIR: How was the virtual doorknock carried out? Was it through social media or WhatsApp or—

SELINA LEE: It happened across a lot of virtual channels. So it did take place on regular Zoom meetings, through video calls but also through phone calls and text messaging for those who did not have the accessibility or the skill sets to be able to utilise those tools.

The CHAIR: Do you know how many people the virtual doorknocking reached?

SELINA LEE: I don't have the figures to say, but—unfortunately, sorry, no.

The CHAIR: No, that's fine. I might just add, even our own English language was really hard for a lot of communities to understand, including my own. Things were moving so quickly, to your points, Mr Arian and Mr Buraho. Can you also give us an example of best practice that you saw really worked and really connected?

JOHN BURAH0: Sure, thank you. In Fairfield—as we know, Fairfield was part of south-western Sydney's most affected suburbs or local government areas—we were in a situation where we actually had to come up with a locally tailored way of approaching the situation, as we were locked in or locked out from the rest of the world. So in Fairfield a number of not-for-profit organisations, including in collaboration with Fairfield City Council, we actually got together to look at how do we best communicate the messaging to the communities. As part of doing that, we actually started running forums with ethnic-specific community leaders and influential other figures within the communities.

At one time, we came up with what was called a COVID task force, and that was a community-led initiative, led by CORE Community Services and the Western Sydney Migrant Resource Centre, whereby we had to host regular information with those leaders, informal and formal, to ensure that the health message of the Government was being disseminated directly to the community leaders, faith leaders and directly to the community members. So that was one example where we were able to actually get the message right from the Government to the community leaders and to the people. But in another way, we're actually listening and actively listening to the community leaders and the key influential others, listening to their concerns: What are the people telling them in terms of what we should be knowing or what the Government is supposed to be doing? In many cases, we did invite the Government's representatives to those forums to present. I do remember at one particular forum we had the honourable former Premier Gladys Berejiklian attending and presenting to that forum.

But another flipside of the coin is that we worked closely with Fairfield City Council in delivering emergency service relief to those trapped in their homes because of panic everywhere, they were COVID positive or they had been ordered into isolation. So Fairfield City Council and us—CORE Community Services—had to basically coordinate food packages that were culturally appropriate to each and every individual. We basically understood that there was diversity within those isolating and therefore we had to come up with ways of tailoring our services in terms of getting to the doors of those locked in food that is culturally appropriate—of course within the safety measures.

So the collaboration between not-for-profits, the local government and the community leaders was a key success to actually—similar to Bankstown—seeing the huge number of COVID vaccine uptake in Fairfield. Again, I don't have the figures of how many people were vaccinated in Fairfield, but the record would suggest that it was a quite high number of vaccination in Fairfield as a result of direct messaging from a partnership of community organisations, Fairfield local council, community leaders, formal and informal, as well as the faith leaders. So that was a key ingredient in successfully getting the message out to the communities.

The CHAIR: That messaging and those forums were all virtual, weren't they?

JOHN BURAH0: The forums were virtual but sometimes we would actually provide our own venues, our offices, to communities, different ethnic communities getting together, and actually tailor that particular message and go out and about into the communities to actually spread the messages. So the forums were virtual because the sizes were quite large. At once, sometimes we would host 100-plus, 150 community leaders across south-western Sydney, actually covering most of Fairfield and Liverpool councils. But the information was being disseminated by those leaders in person through the churches, through the sports clubs, through engagement with the youth networks.

The CHAIR: Mr Arian, do you have an example that you came up with that worked really well and connected that we can learn from?

FARHAD ARIAN: An example was at Fairfield. We have an interagency called FMI, the Fairfield Migrant Interagency, and we have another agency called FECAP, the Fairfield Emerging Communities Action Partnership. During COVID we used these two interagencies. These interagencies have meetings regularly on a monthly basis and there are over 50 government and non-government organisations attending these interagencies on a monthly basis. As part of these interagencies, we created a working group addressing the challenges of COVID. The working group was a very good example of bringing together government and non-government players in the Fairfield area to work on these issues.

The interagency role was to coordinate these efforts and the responses from the locality of Fairfield and how to respond in the best way possible to that in the challenges of COVID. It was a very good example of these existing infrastructures, these interagencies, because these interagencies in Fairfield—it is a long time they are there and there is a very well-established network within these interagencies. Fairfield City Council and the community services convened these interagencies together and, as I said, over 50 organisations attended. This

was another good example to bring these people, these services, to see what challenges are there, to identify the needs of the community and then, as a collective action, organisations and leaders of these organisations coming together and suggesting their solutions to this problem. This was another example I can think of.

Ms MELANIE GIBBONS: I'm the member for Holsworthy, so I represent the Liverpool area. We are neighbouring areas. I want to thank you for all the work you did because I know how hard it was out in south-west Sydney to have all these messages communicated to everybody. I will say, as a native English speaker, I literally went grey trying to interpret what our rules and regulations were—literally. I can only imagine what it was like to translate that into many different languages. Can I ask—and it can be to anyone or all of you—what was the best area of government at getting the correct message to you? Was it at a council level, was it the Department of Health or was it Multicultural NSW? And why were they the one that you relied on for information? What made them the right one?

JOHN BURAHO: I am happy to go first. We relied heavily on information directly supplied by Multicultural NSW, which was health messaging, but also our own local council government had actually come up with their own ways of distributing the already available information. But, regrettably, most of the information we received would either be outdated by the time it got to us, and/or by the time we got the message across to the communities there was already a change in the information to be distributed. The timing of the information was critical for us to be able to pass on to community not-for-profit organisations, including the ethnic-specific, of which there are many in Fairfield.

We also did receive communication directly from the Federal Department of Health. That information was even much more outdated compared to the State Government messaging. Those were the two key sources of information we were relying on as we were trying our very best to combat against the misinformation that was being spread through social media platforms. Viber is one in particular that is useful within the Arabic-speaking communities in Fairfield, whereby they would be receiving information from overseas that was unverified. The sources were unverified and it was therefore mostly very misleading information. Our counterargument to that was to actually try to disseminate information provided by Multicultural NSW. They were very active in getting the information. But the timely manner of that information was and still is an issue moving forward, should there be a similar situation again.

Ms MELANIE GIBBONS: Just picking up on what you said there, and I do remember as well that—maybe you worked out where it came from for me—when communities overseas started opening up again, the message got very mixed in our community as we were going through a particularly hard lockdown point at that time. That may be where it came from, overseas social media channels saying, "It is safe again to leave your homes," but ours were saying, "No, it's time to stay inside." Thank you for that. I will take note of that.

FARHAD ARIAN: Just on this issue of inconsistency from the messages coming sometimes from the Federal Government—John was referring to that—and then from the State Government, sometimes one message was dated and another one was not dated, and that created some confusion for the community. Adding to that is the overseas messaging. Of course, people using social media were connected to their communities overseas. So all of these things—there was an issue with the inconsistency of the messages and that creates some confusion. I have seen that one of the reasons for the inconsistency was because there was lack of a peak body within the New South Wales Government to deal particularly with the CALD community, the multicultural communities, accessing particularly health messages.

If we could make an arrangement within the New South Wales Government in these cases, this peak body or this kind of mechanism could help CALD communities to receive the most updated translated information—but also receiving that information from the reliable resources because they are living in a world where people have access to overseas. Misinformation is a big issue, the circulation of misinformation. In these kinds of crisis situations, if there is an arrangement from the Government to send the messages from reliable sources in the community, focusing on and relying on that, so we as non-government organisations and service providers are already in a position to go and tell the communities, "This is the message," and, "This is a reliable source that you can rely on."

We faced that during the crisis when going to some of the CALD communities and saying, "This is the message coming from the Government." The people bringing their own source of messages and the information they got from overseas or other sources were saying, "No, the message I have is different to what you are saying." It was sometimes very difficult to convince the communities that this is the reliable one and you should rely on this because this is the one that everyone should rely on in Australia.

Ms MELANIE GIBBONS: On that point, how long do you think it took between you hearing something announced at the Government's press conference in the morning to when it came out in a translated

form that you would have received? Was there a significant time delay or was it fairly fast for you to have something translated to you?

SELINA LEE: I would say there would have been a bit of a delay, perhaps from days to maybe a week or two. I refer to, for example, the introduction of RAT kits that had been brought in place in January this year. There were no translated resources available for a period of time and therefore there was a delay in disseminating that information.

The CHAIR: We are hearing from SBS television later today. They talked about a portal that they got up and operating within four days as part of the information to their listeners and their viewers. Could you help us understand how important that resource was, or if it was at all important? Is SBS an example of where communities go to for information?

SELINA LEE: The portal?

The CHAIR: The portal and/or generally.

SELINA LEE: Yes. The NSW Health COVID information site has been our primary source of information that we have distributed and echoed. Translations is only one form of communication, and there are limitations to that with cohorts from certain groups who may have poor literacy skills in their primary language—makes it even further challenging when English is not their first language as well. We did work with the local police to communicate to young people through social media, setting the context of the COVID restrictions and communication campaigns that gave practical examples to young people so they were able to understand what was expected of them and why and how that related to their context. We also worked with NSW Health to communicate that messaging, to ensure that our staff were able to play a role in that engagement and communication process, to their clients and their communities, utilising our bilingual workforce to be able to make sure that communication was disseminated, not through just written and virtual forms of communication but personal contact, through phone calls as well.

The CHAIR: Mr Buraho?

JOHN BURAH0: In many aspects, the content of the message or the health information wasn't an issue. What was an issue was the dissemination mechanism, that is, how you get the message to the local community. I said in my opening remarks that most local communities within Fairfield—and I now restrict myself to some of Fairfield and Liverpool. The demographics is very much the same in terms of recently arrived refugees and migrants. Majority again is probably harder to generalise, but there's a big number of people who are illiterate even in their own languages. So reading written material or printed material is—probably a very, very tiny percentage of those people who would be able to read printed material. While some people were able to read local print, which there are newspapers such as *Al-Iraqia*, which is local Iraqi newspaper they print and people read, majority of people would be relying on visual and audio messaging—information from ABC Arabic radio, for example. There would be local channels, such as Iraqi radio, for example, or other local channels whereby they would actually broadcast information. Those were the best channels of getting the message out to the communities.

But most importantly, as I said again earlier, people were telling us and saying, "Why aren't we seeing the message on television? We're seeing 'COVID, COVID, COVID' over there. It's very much in English, in complicated English, but we're not seeing the same messages being broadcasted by people that we can trust." Therefore the source of the information did become critically important. There was one particular time a gentleman who was in hospital, hospitalised due to COVID, shared his own experience on the sickbed of how he basically came close to losing his life and encouraging people to go out and about and actually get vaccinated. The uptake of that message and the result of people actually considering getting the COVID vaccine or obeying the health orders—it was so interesting to see the number going so high, because people would relate directly to that individual saying, "Hey, this is me. You know me from the community. I'm not faking it. This is me. And this is what happened to me. I literally came close to losing it. So think of this being you. This being your family member. Think of this being a loved one."

It was all about how do you get the message to the people that most matters, not necessarily the content of the messaging, but which channel do you use to target those at risk most. So for me that's a sticking point around how to get the message to the people, rather than the content. We trusted the content from the Government, even though there were little bit of issues here and there, but mostly the content was okay. But it was about how do you get it to the people.

Ms JENNY LEONG: Thank you all for the work that you've articulated, particularly in your submission. I guess I wanted to turn to the idea of what you think your services could be supported to do now to prepare for future crises, because I think often the best time to prepare for a further crisis that we can't predict is just after we've had a crisis. I think in that sense, whether it be the virtual doorknocking or the highlighting on

issues of the need for audiovisual messages, the need for the ability to engage young people or to improve digital access and digital literacy, I would ask all of you to reflect on or to share what you think could be done now to support your local services to be better prepared and resourced in your community for future crises. Ms Lee, did you want to start? Then we can go to the video.

SELINA LEE: I think that the establishment of a committee for emergencies such as this, that include multicultural organisations, will be helpful. In terms of preparing for the pandemic or any sort of crisis, I think the learnings from that is essentially that the tactical execution must be left open to interpretation and implementation, so that it gives the flexibility to tailor the communication channel to the audience that we would be communicating with. I believe that, when it comes to the digital literacy, there needs to be a lot of training for many people—different cohorts, but seniors are one of them. Many of them who come from a background that speaks a language other than English at home was especially challenging, especially for those who are isolated, with family overseas. So investing in training resources and also the accessibility to digital equipment and electric devices would be also a key benefit for the community.

Ms JENNY LEONG: Can I just follow up on that briefly? In terms of the challenges around digital accessibility, would you identify that as the devices element, the internet access and wi-fi element or the sort of barriers to not understanding, or all of those? Is there any way that there's more information about each of those aspects? You might not have it on hand now, but maybe more detail can be provided around that. But any reflections you have now would be welcome.

SELINA LEE: Yes. It's a combination of the tools. Some families may not have access to laptops. Students don't have access to laptops at home. It can also be the ability to access information and utilise that technology. It is a combination.

Ms JENNY LEONG: Thank you so much. Do the others want to contribute?

FARHAD ARIAN: Can I jump in?

Ms JENNY LEONG: Please go ahead, Mr Arian.

FARHAD ARIAN: Thank you. Just quickly, in terms of the tools, I worked with other tools in addition to these technology and digital tools. There is another way of life, in the waiting rooms of the hospitals, in the billboards and that. A lot of these community residents [inaudible] in waiting rooms of the hospitals. That's a very good area. When the public messages are there, it gives a subtitle in those local languages. For example, if it's Fairfield, there are certain community languages—four or five of the major community languages from CALD communities—that could be distributed. They are located equally so people waiting there can look at those information. I just wanted to add that there are a number of other ways, creative ways that could be used in future, that people can access easily, not just relying on digital and radio and TV channels.

The other thing I just wanted to add here is that, for preparing for future, it's important for the Government, I think, to involve the non-government service providers but also CALD community groups and associations and community leaders in the design, distribution and evaluation of these programs, not just designing the programs, preparing everything and then sending to those people to go and distribute it.

I think it will be very important. It will have a positive impact in a way that will affect the community in a positive way to bring these players from different localities and work with them and to first understand what is the best way to distribute these messages to the public, to the CALD communities, and best from that, when you are designing that and then the distribution in relation of these programs. So that would be really important. Because sometimes these people they are receiving the messages but we don't know what is really happening, how they were designed. So that's why going to the communities and talking about those things, so they have that background information, to explain and convince their communities to follow consultants and receive those messages. Thank you.

JOHN BURAHQ: If I can also add from where Mr Farhad left it from. If I was to think of the future collaboration between the Government and everyone else, I would probably put it in the context of the human body, the function of the human body in a very simplified way. You've got the different parts, the head down to the legs and so forth. For answers to be prepared to be able to manage information in the way that is not only available but ready for distribution to the communities, the Government do need to understand that they can't do this on their own. They absolutely need to think of how do we regularly involve trusted local community organisations into their conversation on how do we prepare for emergencies. Western Sydney, Liverpool, Fairfield has a big population of refugees and migrants. Statistics suggest that 70 per cent of Fairfield local government residents are from countries other than—I guess they are speaking languages other than English, meaning that they are from overseas. So there is a big issue of the question around trusting the Government.

If I give you the context of myself. I came to Australia as a refugee about 18 years ago from the Democratic Republic of the Congo. If you ask me of my experience with my government back in the Congo, I would probably rate that a 0 per cent in terms of trust. So coming to Australia and then facing information directly coming from the Government, I would be receiving that with a great hesitancy because I don't trust the Government, even though the intention of the Government and the deed of the Government are absolutely in the best interests of many. But for me to get to the point where I absolutely trust in the Government, it does take much, much more work.

So one would say that for the Government to be trusted by those people, we do need the Government to work with the trusted local organisation that provide today our services to those communities. That's how they will be reaching them and they will be, I guess, receiving the messages. And that's how the Government will know that people are responding, by actually getting engaged with those organisations and saying, "How are we going? How are the communities going?" But also in doing so, the Government does need to engage—I probably should use the word re-engage with the media and ensure that the media does not play an undermining role in delivering such a message.

And I use an example on this. When Fairfield and Liverpool and a few other local government areas in western Sydney were locked in, the messaging or the way that the media portrayed this lockdown in the area were unfortunately not helping the situation. In fact, it was encouraging that Fairfield not trust in the Government. The media is usually seen as part of the Government, even though it's not. For the Government to refute such negative connotation coming from media is absolutely important for the people to say, "Oh, actually the Government is with us". But we didn't see that happening when the media was saying, "Oh, everything is bad in Fairfield". For example our mayor, Frank Carbone, had to go out on the radio, on television, refuting those messages and trying to bring about another positive image of Fairfield. So if we are in the future to prepare for emergencies like this or similar, we do need to ensure that the Government and trusted organisations are working hand in hand, the Government is working hand in hand with the media to ensure that the media is actually reporting accurately the situation on the ground. Thank you.

Ms JENNY LEONG: Thank you, that's really helpful. Just as a follow-up to that can I ask, do you think that given the very significant historical and real experiences of many coming as migrants and as refugees, the solution is to try and improve the way government does connect with communities or further support and build the relationship with existing groups on the ground? What do you see as the easiest way, if you like, to be prepared for a future emergency? If you would expand on that in relation to your last point?

JOHN BURAHU: Yes, absolutely. We were spoken to by a number of community leaders saying, "Why is the Government now engaging us? We haven't heard of the Government before. We don't have funding in any way to run any business of ours in terms of supporting the community. Why do we matter now to the Government than ever before?" That was a question of service or support continuity. So what we are looking at here moving forward is government presence—not necessarily a physical presence because that's not going to happen—but government presence in terms of resource availability to small ethnic organisations. Whether that is directly to them—which is probably a bit tricky—but I would say government resources being available and accessible to those ethnic organisations via trusted not-for-profit organisations. I am not advocating for CORE Community Services to be one of those. It is tied to the Government and to the site. But there are trusted, local not-for-profit organisations that do provide day-to-day, week-to-week, month-to-month support to ethnic organisations.

Mr Farhad, up on the screen, is our stakeholder engagement within the CORE Community Services and his job is to ensure that a trusted relationship between CORE Community Services and the ethnic organisations within Fairfield is the best as it can be. And therefore if it is the best, then we will be assured that messaging from the Government through us to those group or groups would then also be relayed, I guess disseminated and shared accurately and hopefully producing the best outcome. So it's about Government providing some sort of ongoing support to ethnic communities. However the channels or how they got out, that is not a question from me. But there has to be an ongoing presence of the Government. The question of "Why do we now matter more than ever before?", is going to be a question in the future if the Government disconnects itself to the people in between now and whenever there is another eventuality.

Ms JENNY LEONG: That's really helpful. Thank you so much for that.

Ms TRISH DOYLE: It has been a very interesting session. I thank all of our witnesses for offering up your expertise. It is incredibly important to reflect on what does work, what hasn't worked and what you have offered up by way of suggestions and ideas. We really appreciate that. I understand that in improving crisis communications, it is not just a linear experience. It is not just about providing and receiving. So it has been really

good to hear from all of you, talking about where you saw the gaps and what you suggest happens now in terms of organising.

Ms Lee, there has been mention of different cohorts, and all of you have covered off the fact that there are special needs for seniors and for youth. The cohort of women suffering domestic violence came to my attention, I suppose, during the fires and then again during COVID, when people were locked down in their homes. I'm just wondering, Ms Lee, whether that information that you might have received or heard about was passed back then to government and agencies, and shared with community organisations, as another layer of crisis that we need to take into account when we're considering communications and what communities might need and different cohorts might need?

SELINA LEE: In terms of domestic violence, we did see reports of victims fleeing domestic violence increase, not necessarily within the target cohort under settlement services, the requirement being that a new settler in Australia must have arrived less than five years to receive that support. What we did see is that outside even our western Sydney LGAs, women were coming to us seeking support who were not comfortable to reach out to other services that were available in their local areas. I think that with domestic violence in itself, it is an issue of its own.

Ms TRISH DOYLE: I just wondered whether Mr Arian or Mr Buraho wanted to offer anything in relation to particular cohorts and other layers of crises that arose for communities over the last couple of years?

JOHN BURAHO: In relation to the question around domestic and family violence, the first two years of COVID—2020 and 2021—were the most, I guess, interesting times when we saw a big spike in the number of domestic and family violence-related incidents. At CORE Community Services back then we were only funded for one single full-time role, which covers the whole of Fairfield, to provide case management. While the referrals were flowing in at an unprecedented level, we were unfortunately unable to meet the demand. We had to decline either self-referrals or those referrals being referred by others simply because we didn't have the resources, even though the funding body—in this case, the Department of Communities and Justice—had provided us a little extra. That was only to cover the emergency relief related to the fact we were already within the case management model.

The issue here was that referrals or incidents of domestic violence were becoming more and more and more relevant than ever before, but the capacity for us to respond was not there. Then becomes a question of a service that has an ability to—do we just sit by and watch this unfolding or do we try and deploy organisational resources from elsewhere within services to try and attend to that? That's what CORE Community Services did—that is, to acknowledge the demand and, therefore, try and mitigate that using our own internal resources, which were very limited.

On the question around different demographics, we certainly did see women from refugee and migrant backgrounds being particularly vulnerable during that particular initial, I guess, the first and second lockdown, 2020 and 2021. Men would be able to sometimes go out and about and enjoy the sunshine; women were the ones who would stay home with the children. When it comes to seniors, we actually had to start doorknocking on a range of, I guess, an increased number of seniors who were being reported as being so isolated because they couldn't be visited, up until when there was a lift on the ban to who can be visited. Some seniors did eventually have, I guess, nominating a single family member to visit them.

On the side of that, because of the way our CALD communities—refugees particularly from the Middle East and South East Asians, the way the culture operates is that people live in their groups. You would have a household that has more than one, two, three, four, five individuals. During the lockdown, the seniors found themselves in complete isolation. People were actually breaking the health rules by sneaking out to go and visit seniors who were reporting a significant increase of mental health issues because of that isolation.

By the time that we started seeing the reopening of that space we saw—we do run a range of social group activities. Among the people who confessed, there were a majority of seniors who were actually coming up and asking, on our different social media platforms, when are we reopening our group activities because they were so tired of being in that isolation. Seniors and women—particularly those with the younger children, the little children—were particularly hit hard by the lockdown because they were unable to actually go out. Even for a quick shopping centre, they wouldn't be able to because they would have to either be pushing a pram or have one or two little small kids walking side by side. It was risky for them to do so, I guess, compared to the male, younger cohorts.

The CHAIR: Thank you for that evidence. Did you have anything to add, Mr Arian?

FARHAD ARIAN: Yes, thank you. There is another group of members of the CALD communities which usually people don't talk much about during the crisis, and that happened during the COVID time: those

members of the CALD communities that are living in those LGAs or suburbs that are not predominantly or normally culturally CALD. Those groups of people are living, for example, on the northern beaches and those other areas. There are a small number of people from CALD and multicultural groups who are living there but are not really able to access the services which are tailored and specific for CALD community groups. During COVID there was another issue for those groups of people because they were not necessarily connected with a lot of different non-government service providers like CORE Community Services and other organisations in Fairfield because they were living far away from these areas. But, in the meantime, they are not very well connected to the community leaders of CALD communities.

As a result of that, these groups of people are very disadvantaged in these kind of situations. They are isolated, they are not well connected and also there is not a lot of tailored kinds of messages coming from the Government focusing on those kinds of people. That's what I wanted to bring to the attention of the Committee here—that group of people from different suburbs who were not necessarily living in the predominantly migrant and refugee areas. There needs to be some kind of mechanism in future so those people are not excluded and they can cover them and get advantage of what's coming about health messages, support systems and other kinds of assistance and support provided by the Government.

The CHAIR: Can we just drill down a little into the audio and video messaging? Mr Buraho, you very well explained to me, in particular, how important hearing and seeing a message is rather than just the written message. Could you just help us identify those channels—you may have already done it, but just to be clearer—where your communities listen to and see that messaging?

JOHN BURAH0: Different people watch different programs on TV. I watch ABC in the morning, pretty much every morning. There are people who watch SBS, and there is a big number of people from CALD communities who do watch SBS. They do actually listen to SBS—different programs in different languages. It wasn't a matter of one particular channel over another particular channel. It was a question of just seeing the message in your language or languages—or at least using the bigger languages—on the screen, whether it's the screen of Channel 7 covering one to three big [inaudible] or a video shared on SBS or ABC talking about hand sanitising, hand washing or this and that. It could be a prerecorded video talking about the importance of vaccination itself. It was a question of a message not being there to be seen.

There is an issue of trust here. If it can't be seen to be there, it can't be trusted. I used to be a community leader within my small ethnic community, the Congolese community. Because of that relationship with the people, they would literally be asking me on a daily basis to translate via audio what the Government is asking them to do. I would literally be sending audio records of the health message of that particular week. Or if any particular interesting or updated messages had just arrived, I would be sending that. So it was a question of just seeing things on the screen to be believed, remembering that we were fighting against misinformation coming from all directions. And so, seeing the message would be enough to be believed—that this is actually what I'm being asked to do. It's listening to the message audio-wise, whatever the channel might be but, most importantly, using the local channels.

In Fairfield there is Assyrian radio talk, so they would be able, on a regular occasion, to relay information in Assyrian language. That was available to the Assyrian-speaking community, but that is not the majority who are present in Fairfield. While the Vietnamese and others might have had isolated messaging, it wasn't widespread and a regular thing. It wasn't recurring very often. It was a question of a quick snap of what is happening today—how many numbers recorded in Fairfield today and what the is Government asking people to do—within a minute or two on a screen. It didn't matter which screen, as long as it was on screen.

Mrs NICHOLE OVERALL: It's a very interesting conversation this morning. We've touched on some of the groups as part of those cultural groups that were particularly affected, including seniors and women, but it was also observed in the submission that communicating with young people in CALD communities does require a different approach. I'm just wondering what that different approach might be, how that crisis messaging might be better communicated to the young people and if it does vary depending on the particular cultural community involved?

SELINA LEE: I think that engaging young people with local authorities, whether it is NSW Health or the local police—putting together communication campaigns and spreading them through social media would be an effective channel for young people. But it is most important that the practical application and the examples of how that relates to a young person's social and family context is important, in order for it to be more effective.

Mrs NICHOLE OVERALL: So engaging with authorities is actually a good thing for the young people, to be able to see that messaging coming from those types of leaders in the community? That is an effective tool?

SELINA LEE: Yes. Collaborating with young people and authorities together to produce that communication tool is recommended.

The CHAIR: Mr Arian has something to add there. Before I go to you, Mr Arian, further to Mrs Overall's question, what was the experience for students in lockdown doing their remote learning? I imagine that they were very big contributors to the family's information. To elaborate on Mrs Overall's question, can we talk to the important part that students played in getting information from their school, their leaders and their teachers, and what impact that had?

FARHAD ARIAN: I wanted to add also to how to connect better with young people. It's usually the young people in the refugee migrant communities—they are usually not that well connected with the community leaders or the seniors and others. There is sometimes a disconnection between the community leaders and the younger generation. That is why it's usually not that easy to approach and reach out to this group of people in crisis situations. One way could be through the school they are attending, through the school system, because that's the way that they can get regular, updated and reliable information, but also the trust. Because they are going to that school, they have the community of school there.

The other way is also through their families. But, again, the question is if their families are well informed. If their families are well informed and they get the right and updated information, then they will be able to deliver that to their kids. If not, then that is a challenge. In the meantime, for the young people—not for all of them, but for some of these people—they simply arrive from countries and their first language is not English. Also, in the first one or two years until they become able to learn English and speak English—this is another issue which I earlier wanted to bring up. I wanted to raise the issue that some of these people, especially migrants and refugees, belong to smaller communities. In the communication from SBS, from the Government and from the translated materials, these smaller or emerging community languages are overlooked. That is an issue.

Mostly when people are talking about CALD community languages—for example, in the area of Fairfield and Liverpool, Assyrian, Arabic and Vietnamese are the predominant CALD community languages. But when it's coming to very small communities like the Mandaean language or these other, smaller community languages, sometimes there is not much information and resources in those languages—translated or updated information. As a result of that, many of those people are disadvantaged. There is also a misunderstanding sometimes from service providers and the Government that most of these smaller ethnic groups—for example, when they are coming from Iraq, a smaller group like the Mandaeans, for example, should speak Arabic. But that is not always the case. Some of them don't speak Arabic because they are coming from villages in their own part of the country. Or maybe they speak a little bit of the Arabic language, but maybe they cannot necessarily read and write in Arabic. There are a lot of issues around that. I wanted to also raise that.

JOHN BURAHQ: If I can add quickly to that, as well, it's interesting that young people played a very interesting role within their family's dynamic. Either they played a constructive role by sharing information that they know, or they actually supported or spread the misinformation as they were receiving it on those social media platforms. Remembering that young people were—in most cases, refugee young people would be able to adapt to the culture and speak the language a little better and faster than their parents. And so while they were trusted by their parents to share information and in most cases translate the content for them, there were cases whereby information receiving or being provided by young people to the parents was unfortunately the misinformation they had acquired from untrusted sources. So it is a double-edged sword here. In a way, they were a good source of information; on the other hand, they were unfortunately, and not deliberately, sharing the misinformation. So that was another role they played.

But also young people were under pressure by, I guess, from the families in the way that they were seen to be the ones who can—those who could read English and understand better than the families. They were basically playing a role, a leading role in the family. So it was a reversal of the family order, the hierarchy—mum and dad and the kids. This way, and that is in this instance, kids were becoming on top. So they are the ones somehow relaying the information to mums and dads. And then mum and dad were, "Yeah, thank you very much." But, unfortunately, the information was not the information that is what the Government is hoping to achieve.

On the question of engaging young people, it's probably a little tricky because they are so diverse. But the best channel of engaging them is probably through the social media platform and through materials being sent out to the base course. If they are engaging with the school, primary and high school, material being disseminated through the Department of Education to the young people would probably be the most relevant and trusted information than the information they are receiving from YouTube and Facebook and Viber, and you name them.

And so it's a question of probably doing some sort of consultation with the young people's representatives and networks to understand the best way they want to be engaged in. But from our experience it was definitely a question of where are they getting the information from. Are they receiving other information from the Department

of Education? If so, then we would somehow hope that that information's being disseminated to the parents, particularly those who would not be able to read English content or English printed version, where in the absence of audio and visual messaging.

The CHAIR: Before I go to Ms Gibbons, do any of you have a line of sight on the process or protocols where the Department of Education was sharing information with their students to go to families? Was this an area that we relied on or maybe we could rely on more? I have no idea, so I am seeking your input.

JOHN BURAHO: I don't know how much and the frequency of information being shared about schools. But what I know, having primary school kids myself, was that the only information I would see coming from schools was information about COVID-positive alerts. If there was a case, it would be that, "This is what it is and so this is what the parent needs to do". Other information would be limited information on vaccination, but it was very limited. I'm not aware of particular channels of communication by the schools to the young people. There may have been plenty of them, but personally I'm not aware of particular channels that schools were engaging young people in, in communicating the COVID-related information.

Ms MELANIE GIBBONS: This might be a question for you, Ms Lee. The SydWest Multicultural Services submission suggests a task force with representatives from multicultural organisations that should be in place during times of crisis. What preparation or other measures would be needed to ensure that task force would be ready to act in times of crisis?

SELINA LEE: It is effectively a change management piece in itself, but engaging the right stakeholders in advance and having that existing relationship and collaboration will help us prepare for times of pandemic or any sort of crisis. Putting into place, I guess, making sure that the right stakeholders, we know who to communicate to and when to and that ensuring we have the resources to do that would also facilitate that process as well.

Ms MELANIE GIBBONS: In times of flooding or bushfires or other kinds of crisis, are you involved on the local council's emergency management committees? Or do you have a representative that feeds information back to your organisations?

SELINA LEE: I can't comment on that as yet, but I do believe there would be some sort of partnership or relationship in place for that information to be fed through.

Ms MELANIE GIBBONS: Is that the same with CORE? Would you have someone who communicates to you in times of flood or fire with information from those council emergency management committees?

JOHN BURAHO: We do not have representation to the council's management committee, but we do receive updated or regular information from the council. But also we do receive correspondence by emergency relief funding bodies, in this case being the Federal Government. That is pretty much limited to that basic information that, "This is the situation and this is what the reactions are". In terms of your question into how, I guess, the task force, if that's the case, or the body would engage or look like, for me it's really a question of proactively planning towards such situations as opposed to reacting to when it happens. So starting the conversation today is better than reacting tomorrow when it happens. And so that is starting to have a conversation with those trusted organisations that do have a relationship with the communities across and basically start looking into what it is that we need to be doing in response to emergencies when they happen.

We deliver emergency relief programs on behalf of the Federal Government. That's pretty much limited to that. So we get funding to say, "Yes, there is a crisis, there is flooding, there is a bushfire or there's a general emergency. Here is the grant. You deliver." We wanted to be involved in the pre-planning of eventualities and be able to then understand how and what the mechanism on how we go about providing support to the communities when such situations happen. So it's really incumbent on the Government to engage community organisations to start looking at a task force that is designed and ready and well equipped to provide support to the communities when situations happen. And I think that will be my strong recommendation, that is, to be proactively planning towards, as opposed to reacting to a situation when that forms.

Mr DAVID HARRIS: My question is along those lines that John was just talking about. I wondered how well were your organisations equipped to deal with a crisis like we had, even in terms of things such as were you regarded as essential workers? What I mean by that is that when the lockdown started, were your staff forced to be at home and you had to then scramble to try and organise yourself? You have done a fantastic job out there in the community, but how prepared were you and what assistance could government give to you to make sure that you are better prepared for future crisis situations?

JOHN BURAHO: Thank you for the question. In regard to whether we were regarded as essential workers, it was often clarified with the government-funded bodies. At the time we were not regarded as, and there was a change in the laws regarding powers of essential work. So we were then classified as essential workers.

And so yes, when the COVID hit we had to retreat and started working from home. But we had the ability to continue that relationship with the communities, I guess, through a range of means. We did a lot of COVID welfare check phone calls, asking people how they are doing, particularly those vulnerable ones like the seniors, the single mums and others.

CORE Community Services is fortunately a large not-for-profit organisation and so we do cover a range of services within south-western Sydney beyond Fairfield, Campbelltown and Camden areas—and Liverpool. We were able to rally our troops and be able to actually get on the ground. At the time we would be delivering ready-to-go frozen meals to those affected and in isolation. At the time we were able to deliver thousands, not hundreds, of school kits for kids who were trapped in their homes and who were either fighting over one iPad or one laptop over four or five siblings. Other times we were actually able to go and do grocery shopping and door-drop or DoorDash to those affected.

We were very fortunate that we are a large not-for-profit organisation, but I know that there are other small organisations that were not able to do that. So, even though we are such a large not-for-profit, we had to stretch our capacity beyond. We had staff members literally working overtime and on the weekend to try to meet the demand. But did we get an increase in government funding? No, we didn't. Should we have received additional resources? Yes, we should. So, it's definitely a question of resource availability to the community organisations and, therefore—be able to then provide timely service. That is the situation that we were facing.

As I said, again, we were lucky to be such a big not-for-profit, but there are small organisations that were unable—you know, less than 10 or so staff members that had to literally isolate themselves. That situation unfolded here in Fairfield. We were able to respond to the point where we actually did—I remember one particular time that we partnered with a local grocery shop here in Fairfield. We would actually purchase groceries tailored to individuals' needs and they were very, very generous to actually deliver for free. There was a cap: "If you purchase up to that much, then we will be able to deliver for free." Those were some of the mechanisms that we employed based on our pre-existing relationship with the store owners and also the communities at large.

The CHAIR: Mr Buraho, thank you very much for that answer. I join with all my Committee members to acknowledge, again, the work that you did in very difficult times. You further explained to us some of those difficulties in a very real way. And we're determined to use your evidence, information and testimony to ensure that we are better prepared next time. You have been very enlightening to us all. Thank you very much.

Ms JENNY LEONG: Thank you to Ms Lee as well. Thank you to all.

(The witnesses withdrew.)

Ms ELEANOR HARRIS, Acting Manager, Building Resilience for Emergency Responses, NSW Council of Social Service, before the Committee via videoconference, sworn and examined

Ms NEMAT KHARBOULTI, Manager, Linking Hearts Service, Muslim Women Australia, before the Committee via videoconference, sworn and examined

The CHAIR: I welcome you both. We've had excellent evidence this morning from representatives of south-west Sydney and look forward to a more umbrella view from the NSW Council of Social Service. In your submission, you have stated:

... effective engagement with NGOs and community groups at the local level should 'cascade up', to include representation on regional and statewide emergency management, planning and related committees.

That's a really good idea. Can you tell us what more is required to make this effective? Are there any examples of representation on emergency management committees dealing with these issues?

ELEANOR HARRIS: Yes. What we have seen during the COVID crisis but also our other disasters as well is there's that very broad process that we understand—that there is an emergency response, there has to be broad messaging, broad response. Often information comes out and then is cascading down to community organisations in the community. But we found that there were more challenges with feeding information back up. So, our multicultural member services—we convened at NCOSS a forum with our members because they were saying, "We can see issues on the ground. Things aren't working. There's a lot of pressure on our communities, a lot of fear, but we don't know how to link into decision-makers." So, through our forum, we linked back into government agencies—such as Mal Lanyon, who was convening the response at the time, and DCJ in terms of funding—just to link in back to those decision-makers. But we found that there was no ongoing mechanism there.

We did have some great examples during COVID of government and our multicultural services working well together to meet the needs of the community. We had the Fairfield City Council, for example, and the Fairfield CEOs group, which is a group of multicultural services in Fairfield, who were already meeting. They had that ongoing connection. When they could see the need rising for their community members around COVID and isolation, they were able to quickly work together to meet some of those needs. There are other examples as well. Where there was an existing relationship between government, usually local government, and the services in the area, some needs could be quickly met. But that is quite exceptional. It's sort of ad hoc. Whether the local government has invited the community sector in or whether the community sector has asked to be invited in and there is that ongoing relationship, there are some very good results, but that doesn't happen all the time. We recommend a more formalised process where the community sector is involved in disaster responses.

The CHAIR: Before I go to Ms Kharboutli, are there specific examples of community and language diverse—CALD members working on emergency management committees? Emergency management committees are usually run through a local government area. Do we know if we have actual community representatives sitting on those emergency management teams participating in an emergency event?

ELEANOR HARRIS: I don't have any examples. We did have one of our services in western Sydney mention that they worked closely with council on their multicultural policy. So it is an avenue that they have already got to link into the emergency management committees. Potentially, there are examples out there, but I don't know of them.

The CHAIR: Ms Kharboutli?

NEMAT KHARBOUTLI: From my understanding, working at the local level and a grassroots level, the emergency management committees specifically are more formal structures involving police, other emergency services and council. So interaction with the social services sector or NGOs on the ground happens at the periphery and is not specific to the emergency management committee themselves. Whether that happens at the State emergency operating command level or the LEOC at the local level, it's much more as a peripheral form of advocacy and engagement as opposed to a central form of advocacy and engagement.

The CHAIR: Do you think it needs to come off the periphery and be more formalised at the table at the time in an emergency?

NEMAT KHARBOUTLI: Yes. Specialised expertise in relation to multicultural communities, I think there should be some flexible mechanisms in which a more formal arrangement of representation in CALD, particularly, where there is a granular and grassroots knowledge and expertise to inform some decision-making, noting, however, that these existing mechanisms do form part of broader structures and hierarchical structures. So there is a need for a ground-up and a top-down approach. Where the New South Wales police, for example, is involved, it is a higher level order of thinking that has spilled all the way down through local area commands and other structures. I think that there does need to be more two-ways flexibility, not just waiting for the grass up, but making sure there is a level of thought leadership that comes around strategic planning in those instances as well.

The CHAIR: Great answer.

Ms MELANIE GIBBONS: If I can just follow up on what you said then because that was a really great considered answer. Obviously we don't want too many people around that table during a crisis because it is meant to be fast-acting and with those decision-making bodies, but is there someone or an organisation or a department whose job it is to communicate that information to you, particularly in times of a flood or fire or other emergencies, not just COVID, to make sure that you know, and you can then translate and get that information out to your community?

The CHAIR: Or council.

Ms MELANIE GIBBONS: Or council, yes.

NEMAT KHARBOUTLI: I do feel that Multicultural NSW and the Department of Communities and Justice specific to CALD communities and also to the special services sector did play an exceptional role in doing that. My criticism is that it was an afterthought and it wasn't really from the outset as it should have been. So there was an element of catch-up and there was an element of structural barriers, access and equity that came into place. But I do think that as things developed and we improved our responses across national, State and local jurisdictions, there was an improved process in doing that. However, I think if we're serious and considered about the quality of care and the duty of care that applies to all New South Wales residents, then we need to make sure that that is central to disaster recovery across whole of government and that it's there from the outset and not as an afterthought.

Ms JENNY LEONG: Thank you for your submission and all of the work that you do. Just building on that, we heard from previous witnesses as well and it is very clear in the submissions the need to establish those relationships and lines of communication pre-crisis rather than reacting to crisis. Given it was just identified then in terms of the comments you were making, Ms Kharboutli, what improved? You said the processes improved over time as everyone got better. What improved, and has the way that that improved been captured anywhere? Is there any work that could be done to resource and support you and NCOSS and other organisations to capture the best practice that was happening at the end that started off as an afterthought?

NEMAT KHARBOUTLI: Yes. I think it specifically around—and I can give some examples—Muslim Australia has been doing this work for 39 years. We've been very established within the local communities, across districts in south-west Sydney and Sydney districts. We have a multifaceted approach of consulting within our organisation across various teams, including the Community Development team, our specialist homelessness service, our community housing provider portfolio and across our communications teams as well. We extend that moving forward into how we exist with our existing partnerships and external stakeholders around both religious groups, around working with peak bodies such as NCOSS, DV NSW, Homelessness NSW.

We're quite uniquely positioned, also being a medium-sized organisation, being able to be flexible and accommodating. So we leverage off our existing partnerships to do that really well. I think what's important is a focus also on granular details that policymakers and decision-makers need to be aware of, otherwise the data is misunderstood or distorted. I can give some examples of that. We had, through our Linking Hearts family violence service, a referral that was made to our Community Development team where Pacific and oceanic communities were looking for capacity-building around supporting clients with complex needs. We had a family of six whose mother had contracted COVID and died at home right from the onset, and she was also the main breadwinner for that family. What we had to do was not utilise the general network, but we needed a formalised case management plan that needed to be linked in with the social services sector. We provided six months' rent assistance as well as six months up-front disability support for the youngest child, who wasn't yet on the NDIS, and who wasn't yet getting support.

What we need to do is reframe communications and clash of communications, not just in that information sharing and information dissemination, but how do we utilise it in terms of mitigating access, equity assistance issues, as well as making sure that we are building in referral escalation pathways and capacity building pathways along those processes. I have to also acknowledge that, on the ground, as we were dealing with the lockdowns, the LGAs of concern, the police checking on community members and some of the social cohesion issues that were arising from that, we were picking up the phone at 11 o'clock at night and contacting the CEO of Multicultural NSW. We were advocating at all the district levels of DCJ and through our peak bodies. This is an example of how that got better. It was also a matter of listening to other experts on the grass at the community level who were operating CALD clinics, GP clinics. We did a focus group with women professionals that accessed MWA as well as our MWA youth advisory committee to see what was happening in different spaces for different employers, for different professions as well as for young people as they navigated the challenges of their own learning and supporting multicultural and intergenerational families. These are just some examples.

ELEANOR HARRIS: I just wanted to mention at NCOSS we are doing a project called Building Resilience for Emergency Responses. So that was, as you were asking, trying to build that evidence of how our community is community-sector involved in emergency responses in that very short term and in the long term as well. This is only a short-term project, and there are other projects similar that are trying to find out how we are involved in disasters. We find that most of the services based locally are involved either in that early response phase or over the longer term recovery as well. They also find that their case management, their normal services, they either have more cases or the complexity increases. So they're involved at every level. But we don't always capture this information, or it's very sort of ad hoc as we can get the funding to do that. So we are advocating for a more formalised recognition of the community sector in emergency responses, so in that early phase but also in that longer term as well.

There is a very clear plan around emergency responses in which agencies are involved. We believe the community sector could be involved in that as well, based on some of this research that we and other organisations are doing that show how we're involved. But there is no sort of formal plan for that longer term recovery as well. So looking at the plans that we've got in place now for emergency response, looking at what the community sector is doing as well, and then formalising that more into that government plan that we have.

Ms JENNY LEONG: Thank you, Ms Harris. That's really great additional information and really helpful. I'm guessing the timing of that research and report will be a longer term project than the time line of this Committee. But maybe if you're happy to take on notice if there are any additional details you can provide about that so that it is captured in the report, that would be great.

ELEANOR HARRIS: Yes, will do. The project funding finishes in October, but we do have an interim report as well.

Ms JENNY LEONG: Great. Thank you so much for that. Most appreciated.

Ms MELANIE GIBBONS: Can I ask about your thoughts into how government agencies can capitalise on longstanding trust and relationships between local place-based social services and the communities they work in?

ELEANOR HARRIS: How governments can capitalise?

Ms MELANIE GIBBONS: Yes. You obviously have some longstanding trust and relationships with your social services and the communities you work in. How can we best capitalise on those in times of crisis?

ELEANOR HARRIS: I think it's a matter of having an ongoing relationship. We're living in a time where there are a continuous sort of almost crises happening at the larger scale as well. So we have to have an ongoing connection with government and ongoing relationship that looks at, you know: What is the next crisis? What are we preparing for? What do we need to do? What is the community saying on the ground? How can we support them with what they're working through at the moment? What are our processes? So having a closer relationship.

It seems at the moment that there's the government process for crisis management and then there's what the community sector and the community does. And there is sort of no mechanism for those to connect together, either during the crisis or ongoing. We get some really good responses where there are those connections and they meet immediate needs, but then that's kind of lost and we have to do it again, start again when something else happens. So I think a mechanism for an ongoing connection and more formalised will really help to build on those good relationships that we already have and create more learning and more readiness for whatever happens next.

Ms MELANIE GIBBONS: When you just said "more formalised", that's the important part there. We all relied on our own networks and our own relationships, and when presidents or key leaders in the community change position, we then have to scramble to start again. Obviously, it can be hit and miss on accessing people in the community. So I think that formality is very important. I don't know if there's a way to do that, whether it's a task force or how we can bring that into a way that we press "go" in times of flood, fire, pandemic, that we're ready to go with.

ELEANOR HARRIS: And starting to think more too about disaster risk as well. So perhaps that's the platform on which you do it. You get together and think about, unfortunately, what's going to happen next. What can we learn from what we've already been through? What are the resources we've got? What do we need in thinking about what challenges are coming?

The CHAIR: Before we go to Ms Kharboutli, I'd like to put an overlay on that in terms of what people are thinking and feeling in your communities. I'm a regionally based MP, and I could only imagine what some of your communities were feeling as I watched those helicopters go over the community at the height of the event. As a regionally based MP, I worried about that trust and what many in your communities have gone through before they've even arrived here in this country. Have we restored it? How do we restore it? What advice do you have for us on that front?

NEMAT KHARBOUTLI: Thank you. I think it is really important that the language of trust is really understood, not just in terms of how we share and disseminate information but also in terms of clarifying where the points of contact are and sort of, you know, I think where you go, what's included and what's not included in that language of trust. I think when we talk about crisis communication for multicultural communities, we really need to understand the diversity of our communities, not just culturally, linguistically and religiously but also in terms of residency components and residency status and in terms of various levels of employment make-up. So high levels of sole traders, of casualised workforce, of shift workers, of those who engage in the care economy, higher density dwellings and different overcrowding structures and familial and caring responsibilities.

But it also needs to be contextualised in terms of existing and prior experiences of trauma and the othering and securitisations that some of our communities have experienced. And that's right across the spectrum of whether they're newly arrived refugee communities and migrant communities right through to second- and third-generation Australians. I think it's really important to also understand that you can have all of those elements and all of that spectrum of needs within one household.

So when we're talking about decision-making, policy implications and what that data looks like, how we engage and how we don't engage, we need to resource on the ground existing groups. We don't need to parachute people in. We need to build it from the ground up and work with what we already know, what already exists. That's why I spoke about the ground up and the top down. Because we need to meet in the middle. Sometimes in

the way that we do our policymaking and the way that we do our communication, it always needs to be so high level that the detail gets missed and that's where the substance gets lost.

So, yes, we do need to look at formalised structures but we also need to look at substance and outcomes and not just engaging for engagement's sake but making sure that we're actually being quite targeted. So those broader-based national campaigns really need to have multi-tiered strategic objectives in who are the cohorts that we're trying to engage, what is the outcome we are trying to achieve, and what is the harm that we're trying to mitigate.

Ms MELANIE GIBBONS: For me it's more of a statement really, because this has brought up a lot of memories of being a representative of the Liverpool area and of what we all went through. One of the things we talked about earlier, and it's picked up from what you just said, was for a lot of our people from refugee backgrounds or people who have come from areas that have had a distrust in their government, it's important that we build up those trusting relationships. But also one of the things I found was that we brought in the army, obviously, because we needed extra feet on the ground for doing PCR tests and to man the traffic jams around there. What we found was that people were driving away once they saw the army because they were getting some post-traumatic stress from that.

So we talk about how to communicate, how to translate and how to put things in language and keep people home. But then when it came down to actually needing a test when you thought you were sick, the communication by just having the army present was given the wrong way. The army's presence may have been far more welcomed and not noticed in other areas. But for a very strong multicultural community, I think that was tough going. And that, I think, needs to be remembered when we talk about how to communicate, that we're not just talking about communicating in words but also in the way we engage. And helicopters and the like were something that was quite traumatic for a lot of people. For me in the Holsworthy community, we didn't notice it quite so much because we live with Black Hawks over our heads every day. But once you move into more of the Liverpool community and the other south-west Sydney regions, I think it was quite significant. It had more significance.

Mr DAVID HARRIS: You recommended multicultural awareness and cultural literacy training for New South Wales Government employees. Do you have any examples of best practice in terms of what other States might be doing or any suggestions about where government might look to find good programs in that area?

ELEANOR HARRIS: I have heard of a project that VCOSS is involved with in Victoria, working with multicultural organisations to inform emergency management planning. I can provide more information on that as well if that would be helpful.

Mr DAVID HARRIS: Yes, thank you.

NEMAT KHARBOUTLI: I also think that we do have existing practices in New South Wales where we do that really well. It just needs to be translated across whole of government. We often advocate for a human rights [inaudible] intersectional framework when dealing with multicultural communities. That's to balance between cultural responsiveness measures and also not fall into cultural stereotypes and demonising. We work within that framework very closely in the domestic violence and homelessness sector that we work with. I think that can be replicated across social cohesion and multicultural spaces as well. It should be embedded in disaster planning.

Mr DAVID HARRIS: If you've got a link to some specifics about that, it would be really helpful for the committee to supply that to us.

NEMAT KHARBOUTLI: I will take that on notice, thank you.

The CHAIR: Our time has been eaten up so very quickly. Have I missed any members online?

Ms JENNY LEONG: I'm okay for now, thank you. I think the submission is really strong and it has been great to hear.

The CHAIR: Trish Doyle in the Blue Mountains?

Ms TRISH DOYLE: I will be quick. I want to thank Nemat and Eleanor for representing the organisation very well indeed, putting forward a couple of extra ideas and reiterating the positions from your submissions. The question I put to the last lot of witnesses goes to what you were just speaking about earlier, Nemat. That was about particular cohorts and trauma around crises, and the different layers of crises that communities are already experiencing. That communication that we are looking to improve in crises is not just linear. It is not just providing information and people receiving that information but it happens in all sorts of different ways. There are particular cohorts of people who do struggle and there are organisations who need to

step in to deal with other crises—for example, domestic violence and families with children, particularly, dealing with crises. Did you want to mention anything about the need of communities for that extra support from government in dealing with those other layers of crisis?

NEMAT KHARBOUTLI: Yes, I would love to. Thank you for that question. I think it is really important that we do—we have multicultural communities and we've got specialist providers of frontline services and we also have generalist providers. I think it's important that we contextualise the expertise of existing partners on the ground and the vulnerabilities of women and children. We provide crisis and transitional accommodation. Managing a pandemic and managing the safety, health and wellbeing in crisis and shared accommodation settings was exceptionally difficult. Also, because of the challenges around the securitisation and the shift from a community policing approach to more of a corrections approach meant that there was increased fear and anxiety, and so just providing practical solutions around carrying ID and services being available on the ground, and, like I said earlier, around small complex case management. We are doing this.

I think government has only so much reach into communities, and community organisations and social services have a much more detailed reach. Our caseworkers and our board members and our advisory committees are embedded in the communities that they serve. All of our teams live and work in the communities that they serve and so there is ability to be much better resourced to provide our existing work as well as provide all of the advocacy and crisis communications work. Right now it's very much done at a pro bono level, so I think that does need to speak into disaster planning. I also think that it needs to be done within a healing and therapeutic framework moving forward for response and recovery.

I would like to add one thing around digital literacy and centralised communication, and how that can be distorted in how the data then looks, reading up, and how that can then demonise multicultural communities. So there is a digital literacy component and a centralised service delivery component that really needs to be thought through because then, when it looks up, it looks like there's a lack of engagement or there's hesitancy. But really it's an access issue and supply issue and it's a barrier issue to digital literacy. I think we don't want to demonise multicultural communities. They have a lot of strength, they add a lot of value, and we want to work with them to make sure that we keep their dignity and their agency in place.

The CHAIR: Thank you very much for your evidence today. It's been very important to our considerations and thinking. Again, on behalf of the Committee, I genuinely thank you for your leadership in your communities during what was a very difficult period for our State.

(The witnesses withdrew.)

(Short adjournment)

Mr ANTHONY PANG, Deputy Chairperson/Secretary, Chinese Australian Services Society Limited, sworn and examined

Ms JANE LU, Executive Officer, Chinese Australian Services Society Limited, affirmed and examined

Ms ERIN WEN AI CHEW, National Convener and Co-Founder, Asian Australian Alliance, before the Committee via videoconference, affirmed and examined

The CHAIR: To representatives from the Chinese Australian Services Society, you encourage the Government to work closely with community organisations like CASS.

ANTHONY PANG: Yes.

The CHAIR: And you distribute information in relevant languages and improve communication with our CALD communities. How do you think that should work best on a practical level, given what we've just been through? Give us your best ideas.

ANTHONY PANG: Right, okay. I think basically the recent COVID experience was a very good indicator of how this Government, as well as the Federal Government, can improve themselves in getting the message across or helping the community. For a start, in my submission we talk about who we are. We basically serve the East Asian community and also to some extent the multicultural community, and we deal with the Vietnamese, Singapore—mainly South-East Asia, northern Asia. In fact, our clients consist of a high number of Korean people too. We have about 500 staff, basically, about 100 of them are Korean seniors. Some of them are very senior staff within our organisation. It's multicultural, in a sense. It's within the Asian context that I'm speaking about.

The CHAIR: Did you say you have around 500 staff?

ANTHONY PANG: Yes.

The CHAIR: Wow, it's a big organisation.

ANTHONY PANG: Yes, it's probably one of the biggest Asian community organisations in terms of delivering services. We are involved in childcare centres. We have a lot of home-care services in terms of health, and aged-care services. We are building aged care in Asquith now. Basically its foundation is being laid, so we should complete by late next year. That's 97 individual modern beds and 11 independent living. We could be using that for disability too because there's nothing up in the northern area for disability services. In terms of disability, we also have a few group homes in the south-west area, so hopefully trying to expand into the northern part of it. If you look at the suburbs within the last survey, East Killara itself has 48 per cent Chinese; the same thing, but comparable, with Hurstville.

In terms of Eastwood, there's over 40 per cent Asian community there. We are trying to concentrate in that area. Even Hornsby is changing. I keep telling my local MPs, both Federal and State, "Look, your electorate is changing." The recent revelation—you can see that in terms of Ku-ring-gai, where I live, Paul Fletcher lost 15 per cent of his vote. That's how strong it is. There are various reasons for losing them. Some of them are geopolitical issues, some of them are green, some of them are teal, some of them are not happy with the PM. Sorry, but I am trying to explain to you what direction we are actually approaching in terms of service delivery.

The CHAIR: Thanks for that advice. I will pass that on to the Treasurer. Ms Chew, did you have some comments to make on the learnings and how we can do better?

ERIN CHEW: Yes. When we talk about how to communicate, particularly about the situation of COVID-19, I think a lot of mistakes were made over the last couple of years. Those mistakes have actually caused a lot of anti-Asian racism in Australia. It was mixed and melded together with the geopolitics. The Asian Australian Alliance, in collaboration with a research fellow from the Per Capita think tank, Osmond Chiu, launched a survey called the *COVID-19 Racism Incident Report Survey*. The reason why I am mentioning this is to give you a bit of background. Basically we launched our first comprehensive report, which I attached to the submission, in 2021. We measured the results from June 2020 to June 2021. We received over 500 reports of COVID-19-related racism. A lot of that was due to how successive governments, State and Federal, as well as the media, communicated about the pandemic and about the crisis of the pandemic.

New South Wales had the highest reporting of all States at about 37 per cent. That is quite concerning as well. If you think about it, over 500 may not seem to be a lot, but considering Australia's population of about 24 million or 25 million-plus, it is quite significant when we see it that way. In terms of how things can be done a lot better, I think a lot of it has to do with very intensive and comprehensive community engagement, looking at a grassroots level, not just going to the typical go-to or token representatives. You really have to get down into the community, those who are working in those communities, and really talk to them about how to communicate about this information so as to not cause any racism or any racial collateral to that community.

Of course COVID-19 impacted particularly on all sectors of the Asian-Australian community, but it can happen to any community in Australia. When people say COVID-19 only impacted those of Chinese background, we know that not to be true because we know that anybody of an Asian background, whether they are East Asian or South-East Asian, even South Asian and Central Asian backgrounds, were all affected by this. I think it is all about how we communicate, and communication needs to start really at a grassroots level.

The CHAIR: In your submissions, Ms Chew, you mentioned that a steering committee could be formed and managed for local regions. What sort of size are we talking about? Do you think it should replicate local government regions, local government jurisdictions? Is that the best way?

ERIN CHEW: Yes, I would say so. It should be on a local government level. The reason why is because those who totally understand what is going on in the area are those who are the local unsung heroes, those who are working in the communities, in community services for those communities, who understand how to communicate, particularly with language and in language—brochures or information to those communities. Yes, I think it needs to be at a local government level.

The CHAIR: In relation to the society, you suggested that sharing should be presented by reliable agencies, which are accessible and trusted by the targeted CALD communities. What are those agencies that are respected and trusted in your view?

ANTHONY PANG: We use various platforms. You elaborated on the platform we are using. Certainly the Government uses a number of platforms that we use. How can the Government message get across to the community if they don't use the platform? For example, WeChat is used by the Chinese community. At the start

of COVID, the Government avoided it because it is connected to the CCP. But when you are dealing with the community, it does not matter whether it is the CCP or not the CCP, you have to use the platform that is used by the community. But they didn't want to use it. Just lately Multicultural NSW started to use that platform, which is a shame. They should be addressing that. For example, in the Chinese community we use three, four or five platforms. Koreans use about two and the Vietnamese use Facebook and WhatsApp. Obviously the Chinese also use WhatsApp and all that. But the Government is not tapping into those services.

The same thing, we use Zoom to educate the community. In other words, we are having a Zoom session if you can't come to the function. We actually take the message from the Government and deliver that to the community. We are not paid for that, by the way, but we see that as part of our job. For example, the mental health area, which is very serious, was a result of COVID. They were locked up. They have three-generation families living in one house. It was quite terrible. We set it up. We invited some of the MPs to come and actually open it up. David Coleman was one of them. What happened was that we had a professional person on the telephone and we get calls coming through. The messages that we get are very wide. For example, people using our platform—there is about 20,000. That is how big it is. In terms of the activity group itself, we get about 30 in our activity group. Roughly about 2,000 use it weekly. Overall we have about 4,000 a week of family connection. That is really big, and it is a non-profit organisation too.

Certainly the COVID experience was an eye-opener. There was a lot of racism, like Ms Chew was saying. The Scanlon report proved that and the Lowy report proved that too. We have relayed that message over to the Government, to the extent that I think the racist issue came up very prominently. I was actually abused five or six times myself. My wife, who is a third-generation Chinese Australian or half Chinese, she cops it too. Her father served in the military. He served and fought for this country in New Guinea in the armoured division. Her uncle served in Borneo. She was really upset. This time it cannot go on forever. Parliamentarians, whether it is Federal or State, should be stepping in as soon as they can. The only people I can think of who spoke up for the community was Jenny and Shaoquett. I think parliamentarians should be speaking up openly, helping the community, to the extent that the feeling within the community is, "Look, forget about trying to invite a Federal Government MP come to the function because they won't come anyway." That is the feeling we get, that they just ignore us. Hopefully that will improve before the next crisis we face.

The CHAIR: Come and live in my electorate. I will be friendly.

ERIN CHEW: Madam Chair, may I add some comments to that as well? I think what Mr Pang said is also correct. I think when we talk about where we find these groups, these agencies, these leaders, these people, it has to be a few different approaches. I have been going online, and social media is one way, yes. A lot of people of Chinese background, particularly those who speak Chinese or are of mainland Chinese background, use WeChat. Whether we like it or not, that is an outlet that needs to be accessed. But the Chinese diaspora—if we talk about Chinese specifically—is very broad and very diverse, and they all use different things. All of the traditional modes of social media is a good way, but we also need to get to the ground and ask the local councils which groups they are in communication with. If you talk about Asian communities, what kind of Asian groups are in the local area who are doing things? Then you can find a lot of groups like us at the Asian Australian Alliance. Obviously we do a lot more on a national level, but we do a lot of work in the media. So a lot of our work is not too difficult to find with just a simple Google search. So I think it has to be that two-way kind of response.

Like I said, I think what the pandemic has shown is that a lot of the communication in regards to COVID-19 was not done very well. When we look at our own report, where we collected actual, real responses, we would look at—take gender for example. Over 61 per cent of those who reported into our survey identified themselves as female. The majority were Asian females who were attacked. When we read a lot of the stories—a lot of them were also the elderly and those where English is not their first language. Those groups are the most vulnerable because, first of all, they don't get that information that those of us who are articulate in English get because there's no way for them to access that.

Secondly, the other approach that you also need to take is how do you converse and engage with the different Asian media? There's a lot of different Asian media. There's TV, there's radio and there are online versions. They're also good mediums to go through but, when you do relay these messages, particularly about crisis management, about COVID-19—whatever it may be—it needs to be contextualised because different communities will absorb different messages very differently. It's not all about taking the English information and just doing a simple Google translate. It's about what messages you can take out of that and contextualise it for those relevant communities so that community leaders, community advocates and those working in those communities can relay that information.

JANE LU: Can I also add that you already mentioned some directly or indirectly when we mentioned the communication skill. Directly, probably, as Tony mentioned, in the senior groups, because as community organisations they already have a good database and a good link with the local residents. When we promote the information directly, we need to approach the community centres or the community service providers like CASS. They have a good directory or community service provider list in each council or in your list. And also regularly arrange some roundtable meetings because, like you mentioned, how to pick up these organisations—through the roundtable definitely you will know who is doing what and if they're doing good or not.

Also, bilingual workers are another way for direct communication. Because a lot of governments we work with can't provide a language-appropriate service, we still need to engage with interpreters. But during COVID we already see lots of problems with interpreter services. So bilingual workers or CALD service providers, like CASS, also one of the settlement service provider—our clients increased more than 50 per cent during COVID, both these years. So definitely if Government works with the community workers we can pass the information directly to our clients, which will be a very good way. You don't need to create another new service to do this job; just work with who is already in the community who already does the job. I think we can do better.

Indirect way—we mentioned the social media platform and the radio. Also I want to add for the seniors—because with a lot of seniors we also have the issue that they can't access the social media platform. So, like CASS, we have the connect call service. Lots of seniors do only have a landline at home, or they don't have a smartphone. So our volunteer can message them. "What's the new COVID restriction in your area? Can you go to read it to your friends?"—we had lots of this kind of request during COVID. I think this is probably one of the other ways we can approach the clients.

Ms JENNY LEONG: Thank you, that's really helpful, Ms Lu. I guess, building on that, one of the things that I'm really keen to focus on is the idea of learning from this past experience to improve the communications for future crises. I wonder, from your experience, what do you think the things are that the Government in New South Wales could be doing now to actually support building those connections and make sure that we're better prepared next time to connect with CASS and other organisations that, obviously, have huge existing networks to community and have that trust? What things would both of you suggest in that context that could be done now to work for future crisis preparedness?

JANE LU: Probably just recently, because I also attend lot of roundtable meetings, I found it really useful. The governments first, I think, probably can take initiatives to organise these kinds of roundtable meetings or network meetings because this is the first we start to listen. We need to first know the service gap here and know who we are engaging with. So probably, I think, first, we should continue to do that, even after COVID—like DCJ, Multicultural NSW, to organise more summits and workshops for the whole community.

The second one, is probably the service gap. During COVID we also got a lot of funding from different departments, but we found it very time consuming, especially for small organisations like us. Even we already have more than 500 staff. But, as a case worker, we are only funded about two and a half workers, but we provide more than 3,000 clients each year for settlement team, not including our volunteer service. So I hope the Government can, as Ms Chew mentioned, reach the community to know the service gap here. The current settlement service only provides service to people living in Australia less than five years and some selective temporary visa holder. That makes the service gap. We can't help the bridging visa, the temporary visa or if people live there for 10 years. If we can't provide service to this group, how can we connect when we have a crisis? So we need to probably extend the service to this group so, in the future, if something happens, we can reach them.

ANTHONY PANG: The other thing is that a lot of activity we get involved in, in improving communications between CASS and our clientele, is not front of mind of government—for example, child care. We run Zoom session for a child who's not attending child care, at home, to stay at home. The mother is working at home. The child is at home. So it's a bit difficult for them. So we actually run Zoom sessions, like the fun games and all that. It's having staff to actually carry out that function. We're not paid to do that, but we see it as part of our clientele loyalty, that we got the service. We're not funded by the Government for those extra services that we promote.

Like Jane was saying, I think the lesson learned for the Government is important from the past COVID. I think looking forward the other issue is that this is getting worse, in terms of geopolitical issues that nobody can control. How are you going to improve that area? That backflip will be on racism and all that to come back again in the height of COVID. How do you prevent that? I don't know. I don't have the answer for it. But the other issue that I think in future the Government should be addressing is the area of—COVID, to the extent that racism rose to hatred in a letter addressed to four council level. For me I can handle that, but it upset me a lot in terms of being asked to get off, go away, four, five, six times. But to address those nasty letters, some of them twice, to four

councillors—one of them now is the deputy mayor—is disgraceful. The Government should be addressing the issue. From what I gather, I don't think anything happened to that. I'm not too sure.

Ms JENNY LEONG: Thanks for that, Mr Pang. I guess it leads into my question for Ms Chew because I think in the submission from the Asian Australian Alliance you talked about the need to address the sort of intersection, particularly impacting on the Asian and Chinese Australian community, of this particular crisis around COVID, given the broader kind of increases in racism and discrimination. We've heard from other witnesses this morning in relation to people's experience in home countries where there's a lack of trust in government or in authorities because of a whole range of issues, and then they have come to this country as migrants or refugees, and then therefore, when you see government messages or the defence force or others stepping in, that can have unintended consequences in terms of a lack of trust.

In relation to the Chinese and the Asian Australian community, given the increase in racism and discrimination that occurred during this crisis, what specific things do you think need to be done to address what was the damage that occurred as a result of this crisis, to rebuild some of that faith and trust to make sure we are in a good, strong position in future government communications, given the silence that was present around any of the Asian hate that was being perpetrated during the pandemic?

ERIN CHEW: Thank you, Jenny, for that. Just to address your question, I think first of all there needs to be an actual address or a symbolic gesture of acknowledgement that a lot of damage, a lot of trauma, and a lot of fear was caused in Australia to the Asian Australian community as a result of how COVID-19 was spoken about at both a State and a national level. Without that acknowledgement I think a lot of that trauma will still exist and it is going to be very difficult for communities to move on from there as well. I think that's the first thing that's really important. It's not saying that it's the Premier's fault, it's the Government's fault, but it is actually making that gesture that is extremely really important to do. And that really kind of heals some of those wounds, I think. There are some lessons that can be learnt from how previous communications were done. I think, as you already referenced, we did also mention understanding the intersectional make-up of the Asian community.

Particularly when we are talking about the geopolitics, talking about the Chinese government and the Chinese diaspora and the domestic community in Australia, there are a lot of differences. Unfortunately, a lot of these will meld all into one. So everybody, every person who looked Chinese was looked at suspiciously, looked at as a potential spy or looked at as being disloyal. We saw that quite early on where Chinese Australians were questioned in a Federal inquiry on something quite similar to this, and their loyalties were questioned. All these things compounded don't make the situation any better.

We really have to learn about: How do we better communicate with the community? What labels should we use? So really it is about asking those—whether those are Chinese Australian or Asian Australian academics who research and talk about stuff like WeChat, talk about the geopolitics on a very objective level and ask them, "What language should be used when we talk about the situation?" It's not saying that we need to hide and skirt away from the situation when we talk about that growing influence of the Chinese Government. It's about the language that you use. It's really important and it can really change that angle. So in moving forward I think the language is one of the most important things.

The other thing is that we need to remove a lot of red tape. When we talk about applying for grants or applying for funds or getting funds from government or getting information from government, it can be very confusing for a lot of community services groups and a lot of different CALD communities. When we are talking about the Asian community, even myself, who reads and reads this kind of stuff, it's still not easy to get around a lot of the things when you want to apply for something or you want to get information from the Government. How can the Government remove a lot more of that red tape and make it a lot easier for people to access that information, or to apply for those funds?

Some of those funds have very stringent requirements, understandably so. But also some of that needs to be removed because that deters a lot of communities who do need that money or do need those funds and those resources to actually apply. It's all about how you, I guess, empower those communities. Whether the Government can offer smaller funds or grants and resources for smaller community groups who create their own information based on certain principles or certain requirements about any type of crisis management situation, whether that be some type of virus like COVID or other things later on, how do you empower them to provide those resources so they can create their own? Because it is those community groups here today like CASS, for example—I'm pretty sure if you give them information about COVID they'll know the messages of what to put out to their own community—whether it's the elderly, whether it's those newer arrived migrants—and the language and the message that needs to go out.

It's not about the Government information just measly translated and given out. I think a lot more thought and time needs to be put to that. I guess the responsibility is also on the relevant departments in the Government

and those who are working in those community engagement roles to have more of those offices around to engage effectively with those community members, with those community groups, those service organisations and those advocates. That's when you really can understand how best to communicate information. I think there's kind of two things that really need to go together.

Ms MELANIE GIBBONS: She just answered mine within that, so that's great.

The CHAIR: You have answered the member for Holsworthy's questions.

Mrs NICHOLE OVERALL: I had a number of questions but those answers have been very comprehensive. They have pretty much covered what I had indicated anyway. Thank you very much.

Mr DAVID HARRIS: Probably the only question I had, and we asked some witnesses earlier today, was: During COVID where did you get your information from? Was it through the Department of Health? They said they had difficulties from the Federal level and the State level. There were differences in messaging. Was there one place you were getting your information from or were you taking it from multiple sources and trying to work out the best message to give the community?

ANTHONY PANG: Well, in terms of messages, we get both from Federal, State and council level, whatever we can get, and then we translate into the language that we target. Vietnamese or Indonesian or whatever, we translate that. We have quite a lot of staff within the corporate area that can do that sort of work. We have a special area that's corporate relationships in terms of CASS and the community. We have done that. Yes, there is a lot of conflicting information in terms of the effectiveness of Pfizer and all that. Some of the stuff you will read from the social media contradicts what the Government is saying. So we put the question to them but we are not getting the right answers coming through. For example, does the Pfizer damage your DNA? They couldn't answer that question. To the question of how much testing the drug company, the producer of Pfizer, did and the results of testing as to how effective, we were told by some of the social media, "They haven't tested it that much, so you take the risk." So why take the risk when they can't guarantee that everything is fine?

There's a lot of question marks behind the effectiveness of it. Even now today I have got three jabs. I have to because I am working in the industry. But I cannot do the fourth jab. I said, "Well, why should I do the fourth jab?" Because if I take the fourth jab I still get it anyway. I am questioning the effectiveness of the fourth jab. Someday there will be maybe a fifth jab eventually. It seems very continuous. How effective is this one? The other one that was quite interesting was that the Federal Government, there was an interesting case around the lack of knowledge in terms of the drug we use. For example, "We are going to encourage more Chinese students to come to Australia." I said, "That's great." We are actually examining it. I said, "Well, what test do you base it on?" "As long as they are vaccinated." I said, "On what basis? Is it Pfizer?" I said, "Are you aware in Singapore people are lining up, queueing up to pay for Sinovac?" That is the Chinese product and it's not recognised in Australia. In Hong Kong it is the same thing.

So the Federal Government wasn't aware of what was happening in Asia. I said, "Why don't you know about that?" So a week after that they change the ruling in terms of the requirement for Chinese students to come over here to study, because that's a big income for the universities of Australia. There was a lot of communication mix-up in that COVID period. I'd like to support what Erin Chew was saying: I think the next wave of racism will be a geopolitical issue and I hope the Government will address that issue, whether it is State or Federal. I would like to thank Jenny, who is the MP for Newtown, for speaking up on behalf of the Chinese community. Because she is the only one who spoke up during the COVID period that so much racism was happening. I would like to thank Jenny personally—

Ms JENNY LEONG: Thank you, Tony.

ANTHONY PANG: —for the community because that message was circulating within the WeChat group or other social media throughout the community. I hope that parliamentarians both State and Federal will speak up in future to support—how do you promote multiculturalism when MPs don't speak up for the citizens? That's a question I put to the MP. Why are they not speaking up? You are there to represent the people. They should be speaking up.

ERIN CHEW: Could I add some comments just on that as well, very quickly. I think I concur with everything that Tony Pang has mentioned in terms of, I guess, where information is received. We've got a lot of our information that we relay to our people from government websites, from the health department, but also from medical professionals—the AMA and other places—where they do talk about that. To get that information—the right information—is extremely important.

The CHAIR: Ms Chew, can I just interrupt? One of the important bits of information we got from the previous witnesses was that it's very important for us as a government to understand it's not always about the

written form. Particularly for some of our south-west communities, their own language, let alone the English language, is not a strong suit. Could I just get a sense from you, if you have any idea, what percentage was hearing, watching and reading? What is the most effective communication? Is it the sound, the visual and the sound, and/or the writing?

ERIN CHEW: I think visual and sound is extremely important because when we talk about reading information, it can be quite tedious for people to read and understand, particularly a lot of the technical terms. But if, for example, you have a video with people from those communities talking about the vaccine, the effectiveness or how to protect yourself, say, from COVID—wearing a mask and all that type of stuff, very simple stuff—I think that goes quite a long way. Then you also need to look at, particularly in our Asian communities, we don't just have cultural considerations; we also have religious considerations as well. People come from different religious backgrounds. How males and females see different things is also very different.

Also, it's important to ensure that if information is going out in different languages, it is the right information. There should be some type of reporting mechanism, whether there may be already, where if there is some fake news spreading around—which has been common, particularly over different social media platforms like WeChat, for example, about COVID—how do you report that fake news to the Government so that people in the department in the government know what to do?

In terms of getting information, aside from medical professionals, I also did get a lot of information from different parliamentarians. I wanted to note Jenny Leong for being quite supportive of, particularly, a lot of these things. One thing I did want to mention before I end is that the burden should not be on people like Jenny, who is of Chinese background and an MP, to always come out and speak up for these things. All MPs of any background should be able to speak out on this. That burden should not just be on her or any other Asian background MP, whether it's State, Federal or even local government. There needs to be more of a cohesive and united approach on this. It doesn't matter what side of politics you are from. It should be about how do we best address this issue?

Mr DAVID HARRIS: Can I just ask a follow-up question about communication? Obviously COVID is still quite rife through the community. How is your community coping with, if they test positive at home, going through the Service NSW app to register? Is that a difficult process? Do you think people may be under-reporting because they don't know how to access Service NSW?

JANE LU: I think, especially for seniors, definitely they will have difficulty to register with Service NSW. Also about all the technology stuff, a lot of seniors still don't have the fancy phones or the Service NSW app needs an email to register. Not only is it the registration about the testing positive but we found that even with some service vouchers delivered through these years, a lot of seniors can't understand or never know this is a voucher they can use until our caseworkers let them know. Definitely we need to still have some back-up plan, like how to register yourself through caseworkers, through community workers or through the centre or a phone call, not only through the app.

ERIN CHEW: I think having a phone-call hotline where people can select the language that they're comfortable speaking in actually does service a lot of things. Obviously that should work hand in hand with having the Service NSW app, but also a phone call. I think, like what Ms Lu said, basically a lot of elderly people, particularly, don't have access to smartphones or social media so they're just very reliant on caseworkers, community advocates, the media that they see on TV—whether it's their own language media—and their landline. Someone like myself may not use a landline anymore but a lot of people still use that because that's what they're used to. It needs to be a two-pronged approach.

The CHAIR: Thank you all for your evidence, and especially acknowledge your comments in relation to some of the pain and the challenges you faced as communities. I apologise for that. I appreciate your forthrightness but also acknowledge, as a country-based MP, the incredible work and history that our Asian neighbours have throughout regional New South Wales in particular. Thank you for talking with us in the way you have.

ANTHONY PANG: Thank you very much. Thank you for the opportunity given to us.

Ms JENNY LEONG: Chair, I just put on record an appreciation of the fact that there have been, in recent times, really confronting attacks on Chinese Australians that have appeared in Federal committees and acknowledge that it does take a particular commitment to want to improve the situation in New South Wales for Chinese Australians to now feel comfortable to appear as witnesses in front of inquiries. I think that's a real shame because it means that we don't always get those contributions. But I just want to acknowledge the fact that these witnesses were willing to appear before us to contribute to trying to solve these problems, given the kinds of attacks that we've seen on Chinese Australians and the questioning of their loyalties during Federal committee

hearings. I express that on record and say thank you for taking that risk so that you can then contribute to this committee process.

The CHAIR: There was no risk here, Jenny!

Ms JENNY LEONG: I don't think there was a risk here, but there is a risk more generally.

Mr DAVID HARRIS: We're a lot friendlier than the feds.

Ms JENNY LEONG: Indeed.

The CHAIR: We're seeking your guidance to make things better, so thank you.

ANTHONY PANG: Thank you. If you like, we can table some of the information we have on what we use in terms of CASS and the groups that we deal with in terms of the statistics. We'll hand it over to you; it's a separate document.

Ms JENNY LEONG: Thank you.

(The witnesses withdrew.)

(Luncheon adjournment)

Ms APRIL PAN, Co-convenor, Canterbury-Bankstown Multicultural Interagency, affirmed and examined

Mr NATHAN HAGARTY, Chair of Board, Western Sydney Migrant Resource Centre, affirmed and examined

Dr ARCHANA VOOLA, Policy Officer, Western Sydney Migrant Resource Centre, affirmed and examined

The CHAIR: Good afternoon. Welcome back to the inquiry into improving crisis communications to culturally and linguistically diverse communities. We very much thank participants from this morning. We have all learnt a lot, and it is going to contribute strongly to our report, as I suspect our witnesses now will as well. Thank you very much. Ms Pan, your submission discussed the need for a single source of truth for COVID-related information. Could you elaborate on this further?

APRIL PAN: Can I just start by saying that I work for Metro Assist. We are a community organisation, but I am here today representing the Canterbury-Bankstown Multicultural Interagency. We are an interagency of more than 50 organisations and over 400 individual members receiving our emails and getting information from us.

What we meant by that was—at that time, there was a lot of information coming out from different government agencies, and that was an incredible effort from them. It had to be done fast and furiously, trying to get all the information—the public health orders, vaccine information, health information, business support; you name it—to the community. They were all doing their part. However, there was a lot of information coming from different sources. At that time, the constant changing of the public health—

The CHAIR: Could I get you to explain what those "different sources" mean? Do you mean from—

APRIL PAN: Health itself, obviously, and then there are also different levels of government. Services Australia had the information about support for people who lost their jobs and support for small business as well. Multicultural NSW was doing their utmost best to try to translate information and also getting all the other information out. So there were different sources from different government agencies and different levels of government. There wasn't a single place, I suppose, a core information hub or otherwise, for people to go and get all the information or truth.

The CHAIR: Yes, and each of those agencies had their own responsibilities?

APRIL PAN: Yes, that's correct.

The CHAIR: You also had police.

APRIL PAN: They were involved as well.

The CHAIR: Some of the evidence today suggested that even Education could have potentially played a bigger part with young children, who are often the translators at home and understand the nuances. Do you have a view on that?

APRIL PAN: Dr Voola, jump in any time you see fit. Translation was another issue we raised in our submission. There was translation done in different languages; however, it does not cover all the languages. Sometimes the quality of information was questionable as well. We recommend simple, plain translation in different forms. Written is not enough; it also needs to be done in oral forms and communicated through different video channels.

The CHAIR: That's some very strong evidence that we've had today. It is not just about the written; in particular, oral and visual is really important. Could you share with us those platforms, orally and visually, that we need to focus on or even be better at?

APRIL PAN: The use of different media, the old and the new—the traditional media, community radio, and also social media.

ARCHANA VOOLA: I can take a crack at that. In terms of different formats, what we heard from the communities on the ground was about the messenger, not just the message. In many ways, if you had CALD-specific media infrastructure—whether it is community-based or larger at the local government level—I think the percolation of communications through the lens of that media infrastructure would assist the ability to take in the information and then act upon it.

NATHAN HAGARTY: Yes. We had the outbreak on the northern beaches, and then there was the outbreak in the eastern suburbs. That was effective at being shut down because, for want of a better description, it was through well-educated, upper middle-class people, and it was through mainstream media channels. When that was applied to the western suburbs, it just wasn't getting through. I think that's something that even Kerry Chant acknowledged in some of the hearings as well. And so it was based on organisations like ours to have these "informal" Zoom meetings where we had two to three hundred people in there—community leaders. That's when the message started to get out.

The CHAIR: I think that's really valuable and honest testimony. Today has been about bringing back a lot of those memories. I'm a country-based MP, so I've got no sense of—only what I saw was happening in western and south-western Sydney. Nathan, could you talk a little bit more about how you all came together really well and really quickly to fill that void? That is something we should actually celebrate and learn from.

NATHAN HAGARTY: Yes, and every opportunity I get, especially in front of members of Parliament, I do give the staff their due thanks. They went above and beyond. They worked extraordinary hours outside of what they were scheduled to do, to do what they had to do to get ahead of this thing. Essentially, Western Sydney Migrant Resource Centre has been around for 40 years. We are a trusted institution in the local community. We have very good relationships with the local council. We have very good relationships with the other MRCs, with other similar organisations and with Health. We have a very strong community network and if need be, we get a call from a Minister saying they are going to be here next Friday, we can usually pull together 40 or 50 people. When everyone's focus was on COVID, we were able to send out to our networks that we're going to have an emergency meeting—I think this was in a week or two once it got out to West Hoxton. We were able to pull—I think the numbers were extreme—something like 400 or 500 RSVPs, but on the day we got 200 to 300.

ARCHANA VOOLA: We also had a gatecrasher.

NATHAN HAGARTY: And we had a gatecrasher, the former Premier, but she was very welcome. I think that showed how important it was. This was within the 48-hour time frame. The invites had gone out. We had got hundreds of invites. The next morning the Premier called to say she was coming and that was an extremely effective way to get that message out to multiple communities in multiple languages through multiple formats, because we know from there, they would then go out and communicate with their families, with their communities. It was, I guess, a "train the trainer" type situation where it went out from that point.

The CHAIR: That respect for her arriving, was that because of her position as Premier? Or was it because she was particularly respected through the multicultural community?

NATHAN HAGARTY: I think we would have gotten those kinds of numbers had she not agreed to come, because the invite had gone out. So, it's probably the reverse. I think the Premier understood the gravity of the situation and as someone of Armenian background, she had a much better understanding of what needed to be done and she had to be there and had to answer those questions.

Ms JENNY LEONG: Thank you so much. We all echo your thanks and recognition of the efforts that went above and beyond from a number of direct community service organisations during the pandemic. I wanted to ask, whether it's talking about having one point of entry or one source of information, or whether it's about how communication is happening—Zoom calls, other things that you responded—how much of how you went about then taking what was given to you and communicating with diverse communities that you're connected with—

how much of that has been captured as to the processes that happened? And are there things that you could share with us about what you think we've learnt so that we could capture those as recommendations to prepare for future crises?

ARCHANA VOOLA: I might do that one. There were a lot of learnings, and one year, or 18 months since, we can see the difference in how the communication now is being relayed specifically on the floods. There are a lot of in-language resources available, which is fantastic. But, still there are gaps and there's nuance in what the message is and who's receiving the message. A very recent example I can give you is around the COVID booster program the Federal Department of Health is at the minute rolling out. Because of all these gaps we found and talked about it—we need in-language resources through trusted community organisations—they have come to us to roll it out. But what we have learnt is if you are not connected to the local communities on the ground, you lose the nuance of what's happening.

In the Liverpool LGA, the top five languages other than English spoken, the fourth one is Serbian, and there are Serbian resources available, which is fantastic to quickly talk about booster information sessions and things like that. But, talking to Serbian community leaders on the ground, we realised that the information in Serbian is in Cyrillic script, but the community members in south-west Sydney and Liverpool use the Latin-based Croatian or Bosnian script. There are those levels of nuance. So, I said, "Can you give me feedback on these resources before we roll it out?" And he was, like, "Actually I can't because I can't understand it. I could check with my older generation folks to give feedback." There are these layers. It's not a block; it's just about knowing which area you are dealing with and potentially going forward. You make avenues for that other script as well. Or, maybe you have a particular person who's able to translate in that language, not specifically written material but maybe somebody to come and do it. Those kind of, I think gaps, we are just going deeper in, like we've met that.

It is also about that tone of the message, not just the content of the message. The tone is definitely moderated by who is giving the message. We always go with the community leaders that we are connected with. Another example I can give is around how communities feel validated and seen through language. An example I can give is around Chaldean groups and Arabic-speaking groups. Chaldean is more of a spoken language. Most community members understand Arabic, but there is also a written form of Chaldean languages. When we tried to roll out workshops, the efficiency part of it was: Let's just do Arabic and invite them. And they are okay with it, but at the same time they feel how come you take the extra effort to make resources available in Arabic, but not Chaldean? There are these things which I think if you have interagency groups, like where April is from, you can discuss those and clarify to the community leaders whatever the limitations are. But that ongoing engagement I think is very important.

APRIL PAN: I just wanted to add, organisations and inter-agencies like ourselves can play a key role in any future crisis information, like to recommend on those nuances and ways to reach certain communities. Another example is the Rohingya community, which lives in the Canterbury-Bankstown area. It's a big community. The Rohingya language is not in a written script, so the community relies a lot on what they know from other community members and they hold their community authority figures, like medical practitioners, in high regard. So, at that time we organised a big community forum, where we invited five Rohingya medical practitioners to convey the information to the community. It worked really, really well. So, examples like that would be helpful for any future communication.

Ms JENNY LEONG: To follow up on those comments, because I think that's really powerful to know—we have heard other testimony today suggesting that rather than the Government attempting to try to create their own communication channels through every possible avenue, but having an understanding of what are the services, where are the networks of communication that already exist and making sure that those networks are supported. One of the other things I guess I wanted to draw out, which is taking a slightly different approach, was in terms of the multicultural interagency submission reference specifically to the concerns or the need to be more thoughtful around terminology and the impacts of use of phrases like "LGAs of concern" and "hotspots" as negative messaging.

You also highlight the triggering nature of some of the use of the defence force and police in terms of trauma and communicating. Going on the point that you were making just then in relation to the messenger being as important as the message, I know from my perspective, when I watched the New South Wales press conference every day and you'd get the health update, I felt so relieved. It was about three weeks in, and all of a sudden they had a person of Chinese background giving the health update on the press conference. I was, like, "Thank you", because now you are not seeing on the news all of the alleged positioning of Chinese people giving everybody COVID. You're actually repositioning it to say that these people are working in our health system. It made a huge difference to me. I wonder if you could talk a little more about expanding on the challenges around how those

messages are happening, but also the other kind of impacts of the trauma associated with who was delivering the messaging?

APRIL PAN: Yes. Unfortunately, the media narrative or discourse around the whole pandemic sent the very strong sort of racism message from the very beginning, from targeting certain communities from the Chinese and the Indian and then the Sydney south-west suburbs. Going back to the point of having that very negative terminology or sending the police and defence force to police the community, not just their presence but what we were hearing on the ground was also their attitude and behaviour as well, really triggered a lot of trauma and didn't help getting the community together.

And also for certain communities—for example, the Arabic-speaking community—some of them just would not listen to government. They've told us that they want to hear from their own, again, community figures—doctors and faith leaders and other community leaders. There was definitely room to engage more with these community figures or authorities to send out that information, and also working with GPs as well. Within the Chinese community, there's a big population of elderly people who live alone and they're quite disconnected from the outside world. Often they go to their GP who they have known for decades for information. We also hear from these GPs that there wasn't enough support or information getting to them so that they can, again, convey that message to their patients.

Ms JENNY LEONG: Did the other witnesses want to contribute as well? Feel free.

NATHAN HAGARTY: Yes, just on trust in institutions.

ARCHANA VOOLA: I think it's interesting. The example you gave of giving the messages three weeks into it to culturally diverse people, that's interesting. At the same time, I think, apart from that representation, you need to have them at the policymaking table, at the communications-strategy table. A very good example I can give is around the idea of what is a household. From a very nuclear, individualistic Western society, I think home is the four or five people in your home—mum, dad, kids. But for multicultural families with multi-generational cohorts living, even if they're not in the four walls of your home, there are still responsibilities for care connection for those who live outside and that's what family is. So "household" became very tough for some of our families to understand.

I can give an example of one of the community leaders who mentioned to us that she was responsible for her 90-year-old father, who doesn't live in her home. But then that five kilometre rule, "Stay in your home, in your bubble", meant she couldn't give that care and the effects on mental health from that. So I think when we're thinking of these communication strategies, if you can have some kind of CALD champions or some kind of a way to screen that, if it's culturally appropriate at least in those areas where you see a larger proportion of them, perhaps then compliance will become easier versus resisting and all those other fractures around trust that happen.

NATHAN HAGARTY: Yes, I can't remember why I jotted this down. But just in relation to translations, during that community meeting we had with 200 or 300 people in there, I think I asked the deputy commissioner of police a question about—it was when they announced the additional troops. My question was, "Okay, where are these troops?"—not "troops". But that was the word he used anyway.

Ms JENNY LEONG: I think they were called "boots on the ground".

NATHAN HAGARTY: Boots on the ground, troops. And that was sort of very triggering language. But the question was basically, "Do these guys and girls have"—"Where are they from? Are their patrols from areas that have high multicultural populations? Do they understand that you have to approach things differently based on culture?" His response was, "My troops do", blah, blah, blah, but the word "troops" was, again, a little bit triggering. During the phase of the vaccination, I think there was this cute marketing term about sort of "take up arms" or "get your jabs".

ARCHANA VOOLA: "Jabs in arms."

NATHAN HAGARTY: Again, it doesn't translate well into Arabic and can be triggering. Even recently during the floods when evacuation centres were set up, when you translate that into Arabic and you say—essentially the message is, "Drop everything. Grab what you've got and rush to the evacuation centre." That is very triggering language and is reminiscent of, "The troops are about to take your village. Get as quickly as you can to the refuge"—it's very difficult. But I guess it's having the people in the room that can sort of call that stuff out and go, "Hey, perhaps we can nuance that language slightly to make the same point but not potentially trigger people."

Ms JENNY LEONG: I appreciate that. I think it's a really great perspective to have around not just the messaging but also around who's at the policy-setting tables. Because we would balk at the idea that you would have a room full of men deciding how we addressed women's health issues. Yet you might have a room full of

people that have no connection with diverse communities sitting around deciding how communication is going to happen in parts of the community where 70 per cent of the community is from a migrant background. It's really important to put that on the table, because I think we've moved in some spaces around who should be at the decision-making table and not necessarily in others. Thank you for that.

Ms MELANIE GIBBONS: I will start also by saying thank you particularly to the Western Sydney Migrant Resource Centre. We worked particularly closely. You were the main organisation I contacted all the way through the pandemic. You talk about the Zoom meeting that you held with 200, 300, 400, 500 people. That was just one of the many you held. I know you then broke it down into smaller ones for our African community or for the Pasifika community. You had many different evenings of Zoom. Thank you for all you did to contact everybody to make sure they were safe, they had meals and they were able to pay their electricity bills and keep going. It was a huge undertaking. In some ways, I feel like I could've written your submission because we worked so closely together. You've covered so much in that.

Moving on a little bit from the pandemic, you just mentioned floods and we do live in a flood-prone area. How do we talk to people from non-English speaking backgrounds during a crisis like that, which is fast and is talking about evacuation often and keeping safe? How do we get the SES, the RFS, the police to know who to call and how to call and how to communicate to those communities? I found it very helpful—your CEO and I have each other's mobile numbers and we were able to communicate and get that message out through both our social media channels and what have you. During a crisis like that, how do those bodies access those people that need it on the ground, particularly if they don't have a computer or a mobile phone? How do we get to them?

NATHAN HAGARTY: I'm also a councillor at Liverpool City Council, as you're aware. One of the things that we changed—I think it was after the flood in 2020—was to put someone in the SES headquarters at Liverpool there. It changed the game. Because there was someone there that was communicating through council and people weren't getting on phones. They were sitting next to each other and talking to each other. Having someone actually physically in the room at the SES headquarters that is a designated CALD liaison officer or something like that would make a major difference. The question then comes about: Who is that? How is that resourced? Who pays for it, effectively?

ARCHANA VOOLA: Just to add to that, I think in crisis moment that's good but it's quite ad hoc. We need something more thought through, meaningful and more ongoing in terms of what that preparedness or crisis is. I also think it's not just about these entities being prepared. It's also how do you build the muscle of the communities on the ground? Digital literacy is a huge problem in the communities that we deal with. We saw this with the families, and the mums especially, absolutely petrified with online schooling because language is an issue. Then using gadgets is an issue. Lack of access to gadgets is an issue. But we realised that the future is digital, right? All our services we get are digital. We need to find a middle ground where we can build the capability, train the families in understanding those digital means but at the same time have that liaison officer ready to help out. I think we just need to move towards it anyway. But some kind of capacity building around that would be quite useful.

Ms MELANIE GIBBONS: I think you raised an interesting point when you talked about the triggering nature of the word "evacuation" and having to flee with whatever you've got. I've been evacuated four times in the last two years. It is confronting even when you can follow social media channels. To just suddenly get that knock on the door to say, "It's time to go", must be even more confrontational for a person who doesn't speak English and who has had those kinds of experiences in earlier years.

NATHAN HAGARTY: Yes, but the difference between floods and COVID was COVID was new. We were making it up as we went along. We were learning stuff. We know what happens in a flood—don't drive through waters; we know which areas flood first. And so there's no reason why we couldn't have a set of resources ready to go, translated, that certain community organisations could have access to, to grab. At the moment, it's a push. We're waiting for them to come in, so then we can check them and go, "Actually, they're really badly translated. Let's do our own", and then send them out.

ARCHANA VOOLA: We made our own. Our in-house staff translated them into Arabic because that's the primary speaking group. We made our own repository.

NATHAN HAGARTY: Yes. We ended up having to make our own repository.

The CHAIR: Who attempted your translations? What agency?

ARCHANA VOOLA: One of our staff members.

The CHAIR: No, yours were good. Who provided you with the translations?

NATHAN HAGARTY: These were the—

ARCHANA VOOLA: For the flood stuff? Initially in March it was all in English, so we were trying to use one-pagers to translate for ourselves.

The CHAIR: What about COVID?

NATHAN HAGARTY: Health.

ARCHANA VOOLA: There was many from—Multicultural NSW had a lot of translated resources. Health had quite a few. SES had a few, but you had to dig in a lot to know where the in-language resources were.

The CHAIR: That's a big conversation itself, isn't it?

ARCHANA VOOLA: Yes.

The CHAIR: I mean, there are not that many translators.

ARCHANA VOOLA: No.

The CHAIR: Potentially we should even be contracting or outsourcing or having you do it at the beginning rather than the trickle down.

ARCHANA VOOLA: Yeah, and the resources already exist. We have those communities with that language skill, so it's a matter of almost linking in or using the services to formalise in many ways the service.

Ms MELANIE GIBBONS: So, waters are rising, the fire is coming closer. Where does someone who does not speak English as their first language go to find out what to do? What is their first point of call?

ARCHANA VOOLA: During the pandemic we asked 155 families in a survey this exact question: Where would you like to get your health communications from? Forty-seven per cent said from our local place-based organisation or a GP. As April Pan mentioned earlier, they trust their GP, they trust their local organisation. So even if they're hearing things on the news, they won't act upon it per se unless it's come from somebody they know or hear. We also asked them: What format do you want to hear health comms in? More than 50 per cent—53 per cent—said, "We want to hear it one to one. Either you text us, you pick up the phone and call us, or tell us in person." I think that kind of tells us where the focus needs to be in a crisis. Maybe we go to adjust the channels, but as we are moving forward and we are prepared early on, then there may be more channels to use.

Ms MELANIE GIBBONS: Which is the beauty of both your organisations, that you become that source of truth and you are able to disseminate that information out to those channels that they can access.

APRIL PAN: Yes. Can I also add that even crisis communication can be proactive instead of being purely reactive. There are community mechanisms in place, like the interagency and multicultural committees across the board, whereby any government agency can take advantage of ongoing community education, crisis education. Bushfire season is coming in the summer. What can you do? And when things happen, you need to evacuate. So when it does happen it's less confronting, so people are prepared.

Ms MELANIE GIBBONS: The question I asked an earlier witness was that obviously we have the local emergency management committees and I guess with what your council had on, you may understand, but is there someone who sits on that committee that makes sure that information gets out to our multicultural communities? Is there someone who sits on the local emergency management committee who may then ring up the Migrant Resource Centre or other groups and say, "This is the message we need to get out"?

NATHAN HAGARTY: It happens, but only because I'm making phone calls—

Ms MELANIE GIBBONS: We're lucky to have you.

NATHAN HAGARTY: Kamalle is making phone calls and making sure it happens, but officially is someone accountable for that? No. I think it was an NCOSS submission to the budget that said, "Let's trial different arrangements for emergency management where you've got local councils, SES and these local community organisations in the room on the LEMOs or the REMOs—or whatever they're called. But, again, I come back to that sort of idea of locals that are CALD—

ARCHANA VOOLA: Champion.

NATHAN HAGARTY: Champion, yes.

Ms MELANIE GIBBONS: And whether or not they're sitting in the meeting, it needs to be someone's responsibility, surely, to pick up the phone and start that chain of communication?

ARCHANA VOOLA: Yes.

NATHAN HAGARTY: Yes.

The CHAIR: Or have a view that, if you have a LEMO set up, there needs to be someone from a CALD background representing either the council or emergency services to understand what needs to happen.

Mr DAVID HARRIS: Yes. That was a significant issue in western New South Wales when there was no Aboriginal Medical Service representatives present on any of the LEMOs.

The CHAIR: And that might not have been because they weren't invited, either.

Mr DAVID HARRIS: No, they weren't. The land council was but not the medical service.

Ms JENNY LEONG: I just want to say on that, it's useful just to make that observation in terms of the planning and just to pick up on that point, Ms Pan, that you made around being prepared for crisis communications. I think it's really key to look at what we know—we might not be able to determine what the crisis is, but everyone knows the existing networks that were used and activated during COVID and during the floods, and being able to undertake a review of those to be able to look at where the points are to ensure there is the level of diversity on those groups. That is work that could be done now, right?

ARCHANA VOOLA: Absolutely.

Ms JENNY LEONG: And then you know that connection then exists for whatever future communication and policy decision-making is needed. I think it is powerful to have that perspective.

Mr DAVID HARRIS: I am interested in the Western Sydney Migrant Resource Centre. Your submission recommended dedicating media infrastructure for south-western Sydney. Do you want to give us a little bit more detail about what that might involve?

NATHAN HAGARTY: Yeah. It goes back to my earlier point about when you saw that there was an outbreak on the northern beaches and there was an outbreak on the eastern suburbs and the way that was communicated through mainstream media channels, it was effective, and then it wasn't effective in western Sydney. We had a long hard think about it. While western Sydney is part of Sydney, Sydney is now this big metropolis of three cities, as your planning Minister will tell you, but that doesn't seem to have flowed through to other functions of the Government, right? In the same way you have regional media for the Illawarra or the Hunter, it's time that it's recognised that western Sydney and south-western Sydney is a distinct culturally, socially different part of New South Wales, Sydney, Australia—whatever you want to call it—and that there needs to be dedicated resources.

Mr DAVID HARRIS: I am just trying to get in my head what that might look like. Do you mean if there was an emergency or something there could be, say, a dedicated YouTube channel that people could tune into for specific information to your area?

NATHAN HAGARTY: No, I think it's just generally media. I'll have a go at the Herald here, but when the Herald has a list of the top 50 restaurants in Sydney, it very rarely goes beyond Strathfield, right? There needs to be a western Sydney Herald that is written by us, to us, about us and so if you have that sort of TV, print media, radio infrastructure that is specifically by western Sydney for western Sydney, in an emergency—in the same way ABC Radio works out in regional areas. You know, you flick on the radio and it's in your language and there are emergency—or you go to a website, the news website, and that stuff is being disseminated that way. So there is a trusted media source from western Sydney that the community is aware of and knows about.

Ms TRISH DOYLE: I thank our multicultural agency representatives for speaking to us and speaking truth, which is very important at this particular time. There has been talk about trust in communication. There has been talk about different methods of communication, and a very proud representation of communities that need to hear from community. I have mentioned a couple of times to other witnesses that there are different layers of trauma and different layers of crises within a crisis. I am just wondering whether we could hear from you and your particular view about cohorts within your communities that need to be identified in terms of other resources, other community organisations that need to step in. I'm thinking particularly of families in domestic violence situations but you may be able to point to other examples of cohorts within communities that need extra support from government and that we should identify for the purpose of this inquiry.

APRIL PAN: Definitely women escaping domestic violence and women with young children is one of them.

ARCHANA VOOLA: I also think young people. There is a lot around mental health and young people, especially in the clients and communities we serve, which is refugees. Often being new to the country, trying to build—or what belonging means for them in the context of a lockdown, or any crisis, if they need to be—not

going out and about. I think it's very tough, so the crises within the crises for them is where I would say young people need a bit more support.

APRIL PAN: And older people who often don't speak English, who live by themselves and who are quite disconnected from the outside world in many ways.

NATHAN HAGARTY: Just to speak further on the young people, I think I raised it in a meeting with yourself, Ms Gibbons—at one point there during the Delta outbreak, it just felt that they were almost going to tear the community apart. There was this undercurrent of—social cohesion was just falling apart. And if lockdown was extended another month or more police were sent in or more troops were sent in—this stuff was being exploited by people on YouTube, and there was a real feeling here that if there was one more incident or one thing got out of hand that happened to be captured on a TV camera and became viral, I don't think it's an exaggeration to say that we could have had riots on our hands. I was trying to send that up the chain and warn people. Although we've got through it, I think some of that residual angst and trauma is still there. To be perfectly honest, I think it was exploited during the Federal election amongst some political parties in the local area. It's still there. It's still beneath the surface, and I don't think we should consider that it's done and dusted and we've all moved on.

Ms MELANIE GIBBONS: Just picking up on your comment there, I noticed the difference in how areas were treated with the media. As you know, my electorate has one-quarter of the Sutherland shire in it, so I got to see the difference between the lockdown area and a non-area of concern. When that extra police presence was announced, the fact it happened in western Sydney made national media attention. It then happened a few days later in Illawong in the Sutherland shire and it made a small column in the local paper. So I think that adds to the fear and the stress that was going on. There is a responsibility that I think also needs to be brought into how situations are handled into the future, not just by government and organisations but also by the media, in trying to help people through a crisis. It was an eye-opener to see how different areas were treated.

NATHAN HAGARTY: Yes. As a proud, lifelong westie, it certainly feels over the last 10 or so years that, with things like the airport, Western Sydney University and a whole bunch of other institutions, we were moving on from that stigma. But with a couple of very quick decisions by the Government and the way it was spun by the media, again there was the tale of two Sydneys. We're back where we started from, trying to overcome this stigma of what it is to be a westie and all the connotations associated with it.

Ms MELANIE GIBBONS: Talking to our local superintendent, I think it was something like five extra police that we ended up with in Liverpool. It was a handful that we ended up with, for such an aggressive media campaign.

NATHAN HAGARTY: In terms of trying to stop the problem, I think it was quite clear they had slapped maybe five or six of those orders on people and they'd slapped those orders on them because they were out and about, but they were probably drug users and it was easier to slap that order on them than your normal move on stuff. They were using them in lieu of other orders because they were more effective. So, from what I understood, there wasn't really a problem that needed to be solved.

Ms MELANIE GIBBONS: When we're talking about communication, once again, talking to our local superintendent, his thing to me was that it was mainly about discussing with people what the public health orders were at the time and asking them to go home—communicating to people who didn't know and who hadn't heard, that they should be at home. So most of it was not about putting fines on people but having those conversations. Maybe that's another way that we need to stress into the future—fines aren't the quick and easy way to go but conversations are, because these people innocently didn't know that the best thing for them to do was to stay home.

NATHAN HAGARTY: I can remember when the essential workers—I think most of us spent 12 hours trying to work out what that actually meant. I had people on the phone crying to me saying, "My husband can't go to work tomorrow because he's a garbageman"—phone calls back and forth. And so there was this strange period of 12 to 18 hours.

Ms MELANIE GIBBONS: It changed.

NATHAN HAGARTY: I think the order was cleared up at just before midnight. If I'm struggling with it, and if you're struggling with it, someone who's from a non-English-speaking background in their sixties or seventies and out for a walk—how are they going to try and get their head around it?

The CHAIR: Can we go to our member for Monaro, Nichole Overall, who probably comes from one of the most ethnically diverse regional communities in Australia?

Mrs NICHOLE OVERALL: Yes, I do. That's quite right. It is indeed and has historically been so for some time. I'd actually had a similar question to Trish, so I think we've been covered in that. One thing that I would be interested in hearing a bit more on, though, and we have touched on it but expanding a bit further—I'm

particularly keen to know more about the role of our community organisations, particularly in our regional and rural areas where we probably have fewer such community organisations that have that opportunity to reach out to our multicultural groups. For example, both in Queanbeyan and Cooma, we had our multicultural centres, but that's really probably the extent of it. But the role, and just how important it is, that these organisations and our community faith leaders play in both producing and distributing these crisis communications and support services during these types of emergencies—how much more from a regional-rural perspective could we be doing to support them being able to do that?

ARCHANA VOOLA: I think it's the same as it would be in the city, in south-west Sydney, the amount of focus we have given to garner the trust. I think you need to have that level as well in the regional areas. Actually, one of the strategies in the settlement sector, as we call it where we work—settlement of refugees and asylum seekers or migrants—there is a push towards encouraging people to move to the regional areas. So if there's good infrastructure of multicultural services already existing there, you will get more people willing to move there, add to the economy there and add to the richness of the area there. So I definitely think there's value in building the muscle in regional communities of specialist organisations like these.

NATHAN HAGARTY: Just to supplement that, we were recently awarded the settlement contract for Macarthur. So effectively we're starting to straddle urban and rural-regional Sydney, and we are happy to have a chat there and impart our 40 years of experience and knowledge in any way we can.

Mrs NICHOLE OVERALL: That'd be great, because one of the things that was mentioned earlier this morning was that we also experience, to a degree, a greater difficulty in the regional, rural and more remote areas when the population is wider spread. It is even more difficult to be able to get that messaging out to those who might need it most, particularly if they are not digitally literate, and to know how we can do this more effectively the wider spread our multicultural communities are and make sure that they're not being left to feel even more isolated in these types of situations that we've faced. So, yes, I'm quite keen on being able to further that conversation about that for my electorate and how I might be doing that better from a government perspective as well.

The CHAIR: Thank you very much. Members and members of the Committee and the communities before us, we appreciate very much your input and all that you did.

(The witnesses withdrew.)

Mr DAVID HUA, Director, Audio and Languages Content, SBS, before the Committee via videoconference, affirmed and examined

Mr MICHAEL COONAN, Head of Regulatory and Government Affairs, SBS, before the Committee via videoconference, affirmed and examined

The CHAIR: Mr David Hua and Mr Michael Coonan, thank you for joining us. Do you have any questions before we start?

DAVID HUA: None from me, thank you.

MICHAEL COONAN: No, thank you.

The CHAIR: Thank you very much for your submission. It was a really good submission. Two Committee members are joining us from their electorates in the Blue Mountains and Monaro in southern New South Wales. As a first question, can you tell us about the four days in which you created your app and how that worked? What agencies did you work with? It seemed to be very collaborative. What was its reach? Could you tell us about that journey and that story in an emerging emergency situation?

DAVID HUA: Sure, I can certainly make a start on that. The COVID portal that SBS continues to publish to has actually reached about 11 million unique visitors over the course of its life over the past few years. It publishes content about COVID from multiple perspectives and in multiple languages—over 60 languages. It did get started—you're right—in about four days' turnaround. It was a moment where, as an organisation, pretty much everybody in the organisation worked to that purpose, which was to fulfil a community need at that time. SBS, being a multilingual, multicultural broadcaster, certainly felt its purpose very clearly at a moment when there was a need for as much information that was trusted about the coronavirus at that time. That continues to this day as the needs of the community actually evolve as well. I make the point that while we certainly worked extraordinarily hard to turn around and create the portal in that very early, scary stage of the pandemic, we

certainly haven't taken our foot off the pedal with regard to the need for timely, accurate information about the virus, the vaccine and how it affects all of us as a community.

The CHAIR: Not being one of those 11 million people who have viewed the portal, I have two questions: one, how much of it is oral and video, rather than the written word, and two, did you take learnings from other media organisations throughout the world as we were going through COVID? Did you collaborate with any other networks and learn from them in development of this portal?

DAVID HUA: It's fair to say that there wasn't a road map on what was best practice at a time like this, especially in terms of handling a pandemic. But what SBS is good at is listening to communities, understanding the needs of the communities and having a relationship with communities. SBS is fundamentally of the community and for the communities that we serve, and that's across the over 60 languages that we produce content in. I can give you a flavour of what we're sharing with audiences right now from the portal. That includes stories about why you should consider vaccination for your child, how to be travel ready, stories about why it's worse the second time round with COVID infections, checking eligibility for antiviral pills and booster shots, questions around what an end to the pandemic might actually look like, and differences between symptoms for COVID-19, the flu and a common cold.

There's just so much rich and necessary information in this space. But what we've certainly learnt over the past couple of years is the importance—to the point that you're making—of audio in the mix. There are, in amongst the culturally and linguistically diverse communities, people who are not fluent in English but also people who are not able to read and write in other languages as well. The role that audio plays in this space, both in terms of broadcast audio and on demand as well—podcasts—and distributed through social media in particular, is really important.

The other point that I make is that the power of storytelling, in terms of changing behaviours, is something that really works. We have had an enormous amount of data around COVID-19. But when it comes to our audiences actually speaking with each other, facilitated through SBS, talking about their experiences with the virus—I will give you an example. During the live interpreting that we did of the Premier's press conferences at 11 o'clock, which ran for months last year during the Delta outbreak, we had on Facebook conversations that were triggered by the community in relation to what was being presented by the Chief Medical Officer and by the Premier at the time. It went along the lines of—this is across the 10 different languages that we did the live interpreting for—"Hey, look, the vaccine in Australia is free. In Vietnam, people have to pay an enormous amount to be prioritised to get the vaccination. What are we waiting for?" It was those sorts of comments within the community, in language, that actually was very motivating for people to understand more about the vaccination and to be driven and moved towards vaccination.

The CHAIR: That is a really powerful bit of insight and information. Could I also ask, in terms of other portals and other engagement SBS has had, how does the 11 million compare to anything else you have done? Could you give us a perspective in terms of that community engagement?

DAVID HUA: It was absolutely huge. You know, 5½ million Australians speak a language other than English and we work towards engaging with them on social media platforms, on audio and on broadcast channels as well. But something like that figure is very significant for our whole organisation, and it's ongoing.

The CHAIR: Could you give us a perspective on what would be the next biggest consumer engagement you have had to the 11 million?

DAVID HUA: To give you an idea, on a monthly basis we have about 1.5 million unique visitors to our language websites, so it exceeds that by a factor of 10.

Ms MELANIE GIBBONS: A lot.

The CHAIR: I'm a regular viewer of iview—just saying. I love it. Best drama in Australia.

DAVID HUA: And SBS On Demand I hope as well.

Ms JENNY LEONG: I think the Chair means SBS On Demand.

The CHAIR: That's ABC iview, isn't it?

Ms JENNY LEONG: She can correct the transcript after.

The CHAIR: Thank you for the latest series of *Borgen*. I just love her.

Ms JENNY LEONG: Thank you so much to both of you. I want to acknowledge and dig in a little bit around the live press conference translation. As you may know, I had a direct interest in this happening and it was one of my favourite petitions that I was never able to launch. Basically we made a video in multiple languages

calling on the Premier to live translate the press conference. In the process of us making that video, I also put in a call to the Premier's office at the time and various conversations were happening. It is great to see that the live translation happened as a result of that discussion. That came out of a conversation we had with a constituent in an emergency department in western Sydney who expressed serious concern that a whole lot of misinformation had been coming about and the important need to be able to get information directly to people in real time.

I wonder, how does SBS handle the challenges around misinformation and interactions on your sites? Because obviously they are happening in multiple languages and it is a real challenge in this kind of crisis. I feel like you as a media outlet, doing communication in multiple languages, probably have some good tips or recommendations to share around how you handle that or how you go about mitigating it. The second part was if you could talk about what potential you see for the use of live translations of press conferences more generally in other types of crisis situations, but also in terms of engaging communities on a range of significant issues of the day—democracies et cetera—and expand on that?

DAVID HUA: Sure. Thank you for the role that you had in terms of getting that up and running. We had over two million views of those videos and millions of minutes consumed of that content too. It came at a very critical time. It was about this time last year when we were all setting our alarms to 11 o'clock to have a listen and to have a watch as to what was going on. At that time, my job was actually to air check what was going on. You can imagine what it looked like to put together not only the technology but also the team behind it to do the live interpreting because it is a real skill. It demands a lot of attention in terms of listening as well as speaking at the same time, and certainly addressing accuracy points too. There continues to be so much misinformation about the pandemic and about COVID-19. I think the learnings that we've had from SBS is to be prepared as much as possible for what the community needs might actually be and some of those questions that might come.

We really value and see ourselves as being a trusted source for the community. It's so important, where there is an enormous amount in terms of sheer volume of misinformation—some of which is very deliberately seeded—to be on the platforms where some of this misinformation might actually exist and to therefore be a counter voice to that, be it on WeChat, Facebook or other social media platforms. There is a moderation load when it comes to the comments that might actually come in from the community, and that needs to get built into our services. That can come at any time of the day and from a multitude of sources as well. Sometimes you just need to block out the times where moderation can actually occur.

We've found ourselves during the pandemic to be a bit of a fact-checker function for communities. This comes from people who actually called in to our live programs on radio or who inboxed us on social media to ask questions about what they are seeing about the pandemic and then to help us determine what might actually be real and what might actually not be real. We actually see that as being part of our role at SBS. In fact, it is a great tool for us as content makers to be able to listen and to be able to know what the conversation, what the gaps in knowledge might be within the community, and then to harness those questions and then pose them to experts, do the journalism, get the answers and then play that back to our audiences.

To the question you raised around live interpreting, I most definitely see a role in that. Since the press conferences we did for COVID, SBS did live interpreting of the leadership debates for the Federal election. We did that in a few languages too—that really increased the accessibility of the conversation—to present the leaders in language and to share what they had to say to our diverse audiences. There most certainly is a place for live interpreting. I would like to see how it could work in other contexts as well, and I am open to conversations on that front.

Ms TRISH DOYLE: I'll just echo the comment you made not so long ago, member for Oxley and our Chair: Thank you for SBS On Demand. I'm going to switch seats a little bit. I think that there's so much that government and agencies and emergency services can learn from what you do, in terms of collaboration and partnership—SBS—with the community. Where there is an expectation of sorts that you've stepped into and filled the gaps, what can government agencies learn from that collaboration and partnership you have with community?

DAVID HUA: I think the key thing to consider is that SBS has been in the business of storytelling and being engaged with communities for decades. It does take decades, sometimes, to build that trust and that rapport with communities. Therefore it is about leveraging that and understanding it. I think sometimes it can be a point of potential frustration, that assets might be presented or translated into languages, but it may not reach the audiences or the people that you're endeavouring or agencies or bodies might be endeavouring to reach. That's largely because it doesn't have a natural home. It's not a content destination necessarily, in which case that's a relationship that SBS might be able to support.

A place like the COVID portal and also a place like SBS's settlement guide, which is a destination not dissimilar to the COVID portal that I've just earlier described but really helps new migrants to settle into Australia, and that has got, in a multitude of languages, information about floods, about fires, about sun safety, about how

to volunteer to be part of the SES, about when to use and not use the triple zero number—all these sorts of material, in language, with links through to agencies and websites and assets that are produced by other organisations. I think the power of SBS as storytellers is something to be understood and to be leveraged as well because we live in a world where we can be inundated with facts and information and the like, but the role of trusted voices—they include some of our presenters and broadcasters and producers, who, I might say, are absolute rock stars within communities—really helps to land a message.

MICHAEL COONAN: David, I might just add, with respect to the settlement guide, I think there's similarities about the partnership and collaboration that we can take to amplify the reach of that. As David said, it's very practical. It helps for emergency preparedness in the ways that David mentioned but also how do you engage with a GP when you migrate to Australia, how does the tax system work, how does the childcare system work. I think taking SBS's trusted brand with audiences and in the reach of other agencies, whether they be government or community, can really expand the impact of that. That's something we're keen to do in the coming period.

The CHAIR: Great idea. I really appreciate your contribution, gentlemen. It's clear you do have a trusted brand within the community. I think your points are well made. There are some real opportunities to focus that work and collaborate with some of these people on the ground that we've had before us today. That's the message. It's about just making sure we're collaborating from the ground up as well as the top down. I think you're a great portal for that. Thank you.

(The witnesses withdrew.)

(Short adjournment)

Mr TIM WARK, Manager of Community Partnerships and Population Programs, ACON, affirmed and examined

Ms LUCY WATSON, Policy and Development Officer, ACON, affirmed and examined

The CHAIR: Thank you very much for coming. In your submission, you said that New South Wales embedded community organisations in its response to HIV—you were able to embed in communities with great success. What lessons can be learnt from this experience for future crises, events, in producing and distributing crisis communications for culturally and linguistically diverse communities?

TIM WARK: One of the reasons that we were so successful in adapting to COVID messaging was that we've had a 37-year partnership with NSW Health. That has had bipartisan support throughout that time. That partnership has meant that, for 37 years, we have been able to adapt mainstream health messages and actually tailor them to our communities. So when COVID hit, we were immediately able to tap into our existing networks and ways of communicating with community to actually focus on COVID. The most important part of that is we've been funded for 37 years.

The CHAIR: But also really important to that and to what we're looking at, could you give us some specific examples of where you were able to communicate with non-English speaking—culturally diverse—

TIM WARK: Yes.

The CHAIR: Just a couple of really positive examples how they were able to jump on and you were able to help make that happen better and faster.

TIM WARK: A really quick context, the HIV epidemic is a divergent epidemic. So we're seeing more notification in overseas born. What that's meant is we've been developing programs in language, so in Mandarin. When the epidemic hit, we had staff that actually developed programs, what were called COVID chats, and we actually had people who speak Mandarin come to those online sessions and actually talk about COVID, what the rules were, but also focus on broader issues that came up throughout the crisis, which was mental health, social connection and so on. Because we've been doing health work that is evidence-based, we could immediately create programs to service community in language but also programs that were tailored to the communities at the intersection of, say, their background, so where they're from—in this case, if they're Mandarin speaking, predominantly China—and things like their gender and sexuality.

The CHAIR: Did NSW Health use your networks, your grounding and your ability to help more broadly during the pandemic?

TIM WARK: What do you mean by "more broadly"?

The CHAIR: Did they say, "You guys are good at this. Can you help us with some other communities that we haven't been a big part of"?

TIM WARK: Yes. They worked with us to really focus on the LGBTQ community. Within that, they asked us to—so we're connected. We look at LGBTQ and the intersection of, say, multicultural communities. They did ask us to specifically work with multicultural communities, especially within western Sydney. So, yes, we did do that because we have a history of working with multicultural communities as part of the HIV response, so we tapped into existing networks. We have an established trust with community after 37 years.

LUCY WATSON: I would just add to that quickly as well. I think one of the things that makes perhaps the resources and the programs more successful with the communities that we are trying to reach is that we can leverage off of the translations, but also our history of being a peer-based, peer-led, peer-run organisation with a huge history of peer education. A lot of the translated resources are then reviewed by peers to make sure that the language makes sense in our communities and isn't offensive as well, because there are some things that get lost in translation—a kind of combination of established translator and interpreting services and the peer review.

The CHAIR: Can we go down into the weeds a bit more with that in terms of your peers, just so I have a better understanding of how that works.

TIM WARK: The way it works with our HIV response is that we have community health promotion officers that train volunteer peers. So in my work those peers do seven hours, five days of training, 35 hours all up. They are trained on how to actually talk about health, how to actually facilitate discussions around HIV and sexual health. They are trained around broader health and wellbeing issues. What that meant was that we had peers who are trained to do workshops and to actually have conversations about health. When COVID hit, we invited all of our volunteers. I think in the first session we had 30 volunteers come. We trained those 30 volunteers on how to talk about COVID, what the latest rules were and what this meant for our communities. What happened then was we actually used those volunteers to run online sessions for community. Community members could come and discuss what the health mandates were, what the rules were but also, I would say more importantly, discuss what the impacts of the crisis would be on just the immediate COVID rules—also, how do we connect, how do we look after each other and things like that.

Ms JENNY LEONG: Thank you so much and thank you for your submission. It's really great to have this perspective that shows that the work that ACON has done collaboratively actually sets a really good model for potentially other community organisations that haven't been as well resourced or well funded to be able to do this in other ways. It's really great to have that perspective. I just want to touch on a couple of things. I appreciate that everyone was working in a pandemic situation, so things were tough.

You mentioned in terms of the challenges around the funding opportunities through Multicultural NSW and some of the short notice that then didn't allow for staff to be remunerated and how that worked. One of the things that I am really keen for us to draw out in this report is basically how we can learn from what was an unplanned crisis, if you like, to being better prepared next time. What are the main takeaways from your experience dealing with those ad hoc funding streams that you think could be good recommendations to improve future ways of intersection between government agencies and services and organisations like your own?

LUCY WATSON: I mean, it's tricky, right?

Ms JENNY LEONG: Yes.

LUCY WATSON: I think what's interesting—I think we can in some ways look at the emerging MPXV (Monkeypox) virus situation where that is not HIV or sexual health but does affect a particular community that we work with all the time. Rather than creating ad hoc short-term grants to roll out some information about MPXV, NSW Health has come and worked with us again because we have those connections with those communities. I wonder whether it's about building up more long-term relationships before any kind of unplanned crisis and then reaching out as a first point to those organisations that have already got established partnerships with the government, with Multicultural NSW specifically, so there isn't that scramble to then pivot to divert resources into writing a grant application.

You can go straight to the organisation, have a person from Multicultural NSW and a person from the organisation at the table discussing ideas and get straight into it as opposed to having to divert resources and provide more in-kind support because those sorts of short-term agreements don't often cover all of the work that goes into the behind-the-scenes and the report writing after the grant has been finished. I think we have a bit of flexibility where we can have these ongoing models and reports that we all know how to write now because we have been writing them for so long. It's a very long-term solution, right? I think having to divert the resources is what makes it quite tricky.

TIM WARK: I would just add to that, that long-term solution also means that the community controlled organisations you are going to have a history and the expertise to actually do that work immediately. Often with the short funding, one of the things that was really difficult—for one of our funding rounds we worked with, I think, 29 community groups that are LGBTQ and multicultural focused, but all of those groups are volunteer based and they don't actually have the skillset to immediately implement a response to COVID-19 or any other health crisis. What we did was we actually used our expertise in health to do that part, worked with them to make sure the information was tailored to the various multicultural communities and then distributed it through those community groups. In effect, we were able to tailor it to many different groups but we also have a history of health messaging. Because ACON was formed in a crisis during the mid-eighties, we have been doing this and that approach for 37 years.

I would really say one thing is those communities were already disproportionately affected by COVID and then trying to give ad hoc funding to them added more work to groups that weren't always in a position to do it was quite difficult. I would also say that with some of the funding that we even received, to implement \$10,000 worth of funding we had to provide \$17,000 of in-kind support. We could do that because we are ACON but any small community group just wouldn't be able to do that. I believe we ended up giving 300 hours of in-kind staff time and that was to deliver food hampers and vouchers for those that were financially impacted by COVID.

Ms JENNY LEONG: It's great to get that perspective to know where we can look. The other question I wanted to ask is if you could talk a little bit more about your internal multicultural engagement plan. The reason for that is because I think one of the things that we have heard in some of the testimony today, particularly from some of the migrant resource groups and other community service groups in western Sydney particular, in south-west Sydney, has been the need to have people sitting at the table where those decisions are made in government before we get to the point of communicating around a crisis. I wonder if you could talk a little bit more about that plan as a way to potentially give some ideas or insight into how policymaking might happen and communication trails might happen.

LUCY WATSON: I got it so I can table it for you as well.

TIM WARK: We literally brought you all a copy.

Ms JENNY LEONG: Amazing, thank you.

TIM WARK: Absolutely. We developed this plan—

Ms JENNY LEONG: That wasn't set up by the way. That was totally not set up.

LUCY WATSON: It felt like it.

Ms JENNY LEONG: It felt like it was set up. I wondered why you are grinning while I was asking. It was not prearranged.

The CHAIR: Your work is done, Committee!

TIM WARK: We developed this plan because within health policy often we take one part of a person's identity and we create a policy around that. For instance, we have the LGBTQ strategy and we have improving the health and wellbeing of CALD communities. But what we found is that within those strategies, within the LGBTQ strategy, CALD populations are always kind of an added-on extra. Within the CALD strategy, the LGBTQ populations are an added-on extra. For us it was really important to actually develop an internal strategy at ACON to ensure that the work we are doing with and for community is actually aimed at the intersection of identity, rather than one or the other. That's what we found within the crisis response as well. For messages to actually reach multicultural communities, it needed to be tailored to multicultural communities. We have also found throughout doing this intersectional work—we talked about translation earlier, for example—at ACON we have had to develop different ways of translating to perhaps what would be the standard because when we receive translation back, it's often not great.

An example would be that we might use "the queer community" as a catch-all to talk to our community. When I received a translation back, that was changed to "the pervert community". If we don't actually go through a process of then checking that with three peers in the community who speak that language, it actually requires us to implement our own strategies. I do think that is one area throughout that we found was a bit of a gap. Yes, translation is necessary, but how we do that translation cannot just be straight translation. It actually has to be reviewed by peers to know whether it's culturally appropriate and that it's tailored.

The other thing I would just add is that even with our approach around that, we tend to take different tiers. Tier one would be a straight translation and getting peers to check it, but a much better approach is to actually take the messaging and have the community write it in their language and not translate it from English. Often in

health messaging it's created around our understanding of English, and when you translate it all of that understanding is lost. For us, that approach tends to be much better in communicating complex messaging.

The CHAIR: That comes back to a big part of our conversation today, which has been the written word over the heard and the seen, visual word. Do you have a policy or a principle in relation to that within ACON?

TIM WARK: In terms of which approach we take?

The CHAIR: What do people pick up their information from, mostly? Is it heard or is it written? Some of the evidence, in terms of the multicultural community, is saying the heard and the visual is far more effective to deal with those nuances.

TIM WARK: In my work in multicultural communities at the intersection, we have to approach all three. One thing that is very noticeable is that if it is written and it's in your language, it's almost like when you see a flag. You suddenly go, "Wait, that's for me and I know that's for me." Within our work, especially around COVID, we actually took all of the approaches that you've mentioned. We developed the online peer sessions for community to come to. We had written information, with some translated as well. In terms of visuals, we actually always make sure—as best we can within funding constraints, we tailor the visual to different communities. The icons that might resonate with, say, the LGBTQ community of Oxford Street are very different to when we go to western Sydney for the LGBTQ community. For us, it's always taking all of those approaches.

One thing I would add to that, though, is that throughout the COVID communication a really important role we played was to actually take the mass of messaging and the very confusing messaging—especially when it felt like there was messaging from Federal Government and State Government—and actually bring in experts and run things like community forums. On those forums we had an epidemiologist, we had a local GP from Newcastle, we—

The CHAIR: And they were online forums?

TIM WARK: Yes.

The CHAIR: Just to be clear.

TIM WARK: Sorry, yes, all online forums. The reason we did that was to take that messaging and break it down, not have it through mainstream media, where it gets politicised, and just focus on the issue. The community could go, "Hey, I don't understand this. What does this mean for me?" Or at the time in Newcastle, "Hey, I'm trying to get a vaccine. Where can I do that?" We've literally got a GP on that panel who goes, "Hey, we're rolling it out here." By going through community groups to take that complex messaging and break it down, we're able to do that and community goes, "Oh, I get it now, and you're actually targeting me." It's not a one-size-fits-all approach.

LUCY WATSON: I think a big part of that is two-way conversations with the communities we're speaking with and co-designing resources. One approach that works for one linguistically diverse community might not work for another one. It's about always having those ongoing communications and conversations with community about what works best, and adapting based on our evaluations of our programs and what works and what didn't work.

TIM WARK: And understanding, especially in relation to health, that different cultural communities have different ideas of health, different levels of risk assessment around health and different concerns in relation to COVID as well. I also think one of the things that we had to really do—we've been doing crisis communication for two years around COVID. Community was fatigued after the first lockdown. So we also had to pivot and focus on the effects of the crisis. That way, by going, "Look, we're holding an online session for yoga," or, "We're holding an online session for art," we still create that social cohesion and help create those protective health factors. But it also means we're connected and we can still weave in COVID information.

I think one of the things that was difficult was that community just got fatigued. Where someone like me who works in health loves the everyday 11.00 a.m. update, for community that was too much. For us, we had to go, "Well, if this is impacting your mental health, we'll run a mental health session and weave it in. If this is impacting your sex life—because we're literally telling you not to have sex—then we'll run a session that gives you ideas of how to do that in a way that isn't going to spread COVID." For us it's really about adapting to community. But again, I'd say we could do that because we've done it for so long.

The CHAIR: For 37 years.

TIM WARK: Exactly! See?

Ms JENNY LEONG: Can I just jump in? This is probably a question to take on notice, but I think it's really helpful to understand, given the close connection over many, many years with different political persuasions, the relationship between ACON and the New South Wales Government. It would be really helpful to know what those formal communication lines are, and at what level, between ACON and Health. There's obviously many of them and they happen in different ways, but just thinking in terms of some of these western Sydney community groups and ethnic community groups, to know where your regular lines of communication are and what could be recommended for other groups to be able to have similar lines with government agencies could be quite useful.

The CHAIR: Like a road map of your agency—

Ms JENNY LEONG: Yes, because if ACON is connecting and having twice-yearly meetings with the Dep Sec or whatever it is, what does that look like that means that communication flows well, and how would we then take that as a way to map out with some other of those organisations?

The CHAIR: It's a really good question. There's a lot of work in that, and you've got about a week to get us an answer!

LUCY WATSON: We'll take it on notice.

Ms JENNY LEONG: I'd back that there'll be someone at ACON that can answer that question.

LUCY WATSON: Yes.

TIM WARK: We'll take it on notice. We can definitely answer it. I would just prefer to give you a document rather than an off-the-cuff answer.

Ms JENNY LEONG: Yes, totally. Also, obviously a lot of it is probably informal relationships that have been built over those 37 years.

The CHAIR: But if we're going to get to the grassroots, we're going to get to the grassroots with the good people on the ground within our agencies as well.

Ms JENNY LEONG: Totally.

TIM WARK: Just to build on that, I do think part of that is that we are a community controlled organisation. I am both a gay, queer man and from a mixed background. That means when I'm speaking to, let's say, people of colour who are LGBTQ, that peer element immediately creates a connection. That connection point means that we can actually start talking about health issues. It overcomes any sort of barrier immediately. That's kind of the beauty of us being community controlled. We are literally embedded in the community. The staff, for instance, in my team are very diverse, and half of them are from western Sydney.

The CHAIR: But then you have to travel to Surry Hills every day.

TIM WARK: I work from home a lot since COVID.

Ms JENNY LEONG: Let's not attack Surry Hills, shall we?

The CHAIR: No, no—

Ms JENNY LEONG: I was joking!

Mr DAVID HARRIS: Mr Wark, the other end of what you're talking about is awareness in community about where to go to find your information. Is there any advice you could give in terms of how you create that awareness? Is there a one-stop shop where people go, or are there multiple platforms that people visit to access the information you provide?

TIM WARK: An example would be that throughout COVID a lot of the translated information, for instance, was embedded on English websites and quite hard to navigate to. What we did was create social media posts which were in language and just directly linked to where people needed to go, so they didn't have to navigate there. I would say a one-stop shop would be fantastic but, again, the only thing I would worry about is making sure that we don't clump too many communities together because then the website itself becomes too big, too cumbersome and it's, again, a one-size-fits-all approach and not quite tailored.

For us, again, it's really about how we can use the methods we have—social media—during the crisis to directly connect people to credible information, but also making sure for our communities that information is safe. As I said, with translation and interpretation services, because there is no training around LGBTQ people and experiences, what we get back is quite horrifying—many things, like what I've said earlier—so we actually do those checks as an organisation to try to prevent that from happening.

LUCY WATSON: I think perhaps broadly, beyond COVID, in terms of reaching our community in different ways, we're at every pride festival. We'll have a stall. We'll be handing out free condoms. We have an alcohol and drug safety team that goes to nightclubs and hands out water. There are signs up at parties with health promotion information and our website on it. We're sort of trying to find community wherever they are, to give them a branded condom so they can come back to us later—oh, and sex-on-premises venues.

The CHAIR: Trish, have you got a question? Is that your hand up?

Ms TRISH DOYLE: Yes, that's my hand, Chair. Thank you very much. I'm sure Nichole might agree with me; sometimes we feel like we're part of this on the periphery, and that goes to my question. Thank you very much, Tim and Lucy, for coming and talking with us, for your submission and for the work you do generally. If we're talking about communication and improving communications with communities, what have you learned about the recent crises from ACON's point of view—whether it's fire, flood, COVID and then back to flood—for the LGBTIQ communities outside metropolitan Sydney?

There's social media, of course, but how do you tap into people's experience where there are extra needs? Dovetailing particular information, as you said—fine-tuning that information for communities that are in regional and rural areas. I'll jump in and say that the Blue Mountains don't consider themselves to be part of Sydney even though we're often grouped in as though we're just Greater Sydney. There are many in our community who don't, have the services that you would find, so who they reach out to and who they trust is very important. What are you able to share, guys?

TIM WARK: We have an office in Lismore and an office in Newcastle. We also run a regional and rural outreach team, which means, as Lucy mentioned—yes, we have prides in Sydney, but there are also prides in many regional towns all across New South Wales. ACON attends every single one of them and supports them. We also ran regional-specific events online that spoke to the needs of LGBTIQ people in those areas, because those needs were quite different to, say, a Sydney-centric approach, which is where I work. We actually made sure that we had sessions that were regionally focused and addressed the needs of people in those regions.

An example would be that recently, with the Lismore floods, ACON took a really active approach in communicating to our community in Lismore. Because we have an office there, we have people on the ground who are a part of the community and who were also experiencing that, so they had firsthand knowledge of what the community needed from us. As a community controlled organisation, we will step in and help where we can. I can't remember who said it, but by actually having people in those communities doing the work, it shortcuts that approach. It means you immediately know what the community needs and what support they're after.

LUCY WATSON: We actually had a couple of people in the Lismore office in the evac centres providing counselling on the ground while also providing themselves short-term accommodation, I believe. Providing counselling services very much on the ground, which—we've now gratefully been funded to do a proper resilience counselling service in Lismore for the next two years.

Ms TRISH DOYLE: Can I just jump in and say that I'm more than aware that the community up here are very engaged? The Pink Mountains crew obviously make themselves available at times where there is some sort of information-gathering, whether it was myself and the mayor and the Federal member, who pulled the community together with their emergency services during fires and then floods. I just hope that what you have captured from outside the Sydney Basin is fed into what we need to learn from your experience in terms of that collaboration and sharing of information beyond where there is a plethora of organisations in the city. That's not always the case outside. Thank you.

Ms MELANIE GIBBONS: I've just got a brief question, because I think you've probably covered it. Just to condense it a little bit, thank you for your Multicultural Engagement Plan. That was very well timed. It's a 2021 onwards plan. Is there anything that changed in the way you relate to people and communicate to people since the pandemic? You were brilliant at responding to it because you had that experience, but is there anything that you added or that you would do differently—

The CHAIR: That you've fixed.

Ms MELANIE GIBBONS: —with the experience you've just had?

TIM WARK: That's a hard question.

Ms MELANIE GIBBONS: Sorry.

TIM WARK: Anything that we would have done differently?

Ms MELANIE GIBBONS: Or that you have changed in your plan from this point on because of the experience of that year before?

TIM WARK: I would say, reflecting on being community controlled, a big push for us is having a much bigger presence in western Sydney. While we did things online and we had everyone accessing our services all over the State, a lot of ACON has traditionally been focused on what have been called "gay community areas". But, as we know, LGBTQ people live all across the State, especially in western Sydney.

Ms MELANIE GIBBONS: They're very isolated in western Sydney.

TIM WARK: Yes. For us, part of that plan is going, "Well, we've come out of this pandemic. Everyone has Zoom fatigue. If I try to run an online session now, I'm not going to get anyone there."

Ms JENNY LEONG: Especially these two on Zoom right now.

Ms MELANIE GIBBONS: All day on Zoom.

Ms JENNY LEONG: They can't even hear.

TIM WARK: Yes. For us, it's also making sure that we do have a physical presence there; making sure that within western Sydney, which is half of Sydney's population, we are more present; and making sure that the staff that are going there understand western Sydney and look like western Sydney and the diverse backgrounds that are made up there. The other thing I would say that came out of this, which I'm sure was discussed today, was addressing racism. Racism drastically increased. We have a number of private Facebook groups. One of them is for gay Asian men; there are about 700 members. Throughout the pandemic, there were lots of experiences shared of experiencing verbal racism and experiencing being threatened physically when going to supermarkets and things like that.

What we did was run some resilience sessions and support sessions around that in particular, because that's an outcome of the crisis. For us, it's also going, "Well, if racism has been amplified from this crisis, that needs to be reflected in the strategy because racism impacts health outcomes. We're a health organisation, so we now need to deal with that." Racism exists in all communities. Whether you're gay, straight, queer or whatever, it exists. As an LGBTQ organisation, we have to recognise that and deal with that in our community. I would say that has been a bigger focus since then.

The CHAIR: Good answer.

Ms JENNY LEONG: Chair, can I just jump in with one more quickly? We haven't really touched on it. Because you brought up Lismore and the impact of the floods, one thing that doesn't come out so clearly in your submission—because of the fact that it is very much focused on crisis communications and how that works—is what other considerations need to be factored into crisis response-related work from the Government from an LGBTIQ+ perspective. I'm thinking particularly about specific needs around bringing a whole community together into an evacuation centre that may have gendered toilets and other things like that.

It might be too big to touch on here, but I do think it's probably worth looking to what things we need to be doing to be prepared for crisis. I know the DV sector was really strong in feeding into risks around bringing whole communities together if people had AVOs and other things happening in their communities. Are there any comments you'd like to make now? Also, just to flag that if there were other thoughts around that which you wanted to feed in, I'm sure the Committee would be very welcoming.

LUCY WATSON: I would like to put that one on notice because I think there would be a lot of things that I would like to go away and think about, and come back to you with.

Ms JENNY LEONG: Great. In the context of the floods, I thought it is useful to feed that in now as well.

TIM WARK: I think in the context of the floods, if we could take that on notice. In the context of COVID and our current crisis of MPXV within our community, a big part of that is also recognising that the crisis affects many aspects of your life and you actually have to talk about all of those aspects as well, and then weave in some of that crisis information. Often, if we just focus on COVID, there is only so much attention span someone has to focus on that when they're having a mental health breakdown. So, for me, it's also protective factors in advance, like community connection, funding community groups, and—I'm trying to think. I guess for me they're the main things, just understanding the crisis impacts so many areas and that communication has to actually address those. Also, where that communication comes from, making sure it is from a community controlled organisation.

Ms JENNY LEONG: Thank you. That's great.

The CHAIR: We've gone over time.

TIM WARK: Thank you for having us.

The CHAIR: Well done.

(The witnesses withdrew.)

Ms RANDA KATTAN, Chief Executive Officer, Arab Council Australia, before the Committee via videoconference, affirmed and examined

Ms YAMAMAH AGAH, Group Manager Newcomers, Settlement and Integration, Settlement Services International, before the Committee via videoconference, affirmed and examined

Ms TONI BEAUCHAMP, Social Policy Lead, Settlement Services International, before the Committee via videoconference, affirmed and examined

Ms TÜRKAN AKSOY, Secretary, Local Government Multicultural Network, before the Committee via videoconference, affirmed and examined

The CHAIR: Thank you for joining the Committee hearing so that we can improve crisis communications to culturally and linguistically diverse communities.

Mr DAVID HARRIS: Thank you for joining us today and for your submissions. We've heard a lot of evidence today about the interaction between different government agencies, including the Federal Government, and how that relates and gets back to the community. Can you talk to us about your experiences in being able to filter the information from different sources and being able to then direct it as necessary to your community? That's open to anyone.

RANDA KATTAN: I'll start. At the beginning of the pandemic, or at least the lockdown, what our experience was, it was quite like we were all scrambling trying to get the information from here, there and everywhere to try and put it through to the community. The methods that we used would be social media, emails, but also disseminating as much information—hard copies—to our community. Our experience at the beginning, particularly of the lockdown of south-west and west, was that not all material was translated immediately. We were trying to find as much as possible from—there was a great deal of delay at the beginning. Eventually it caught up but it still was behind the English.

Our experience also with members of the community happens to be that people were sourcing information from overseas. They were sourcing from interstate, where the rules were different to here, and they were sharing information from their friends and families from all over the world. So there was a lot of confusion, a lot of discrepancy, if you like, between the laws that applied in New South Wales and those from overseas and interstate, of course. That became a bit more complicated when the lockdown became much more selective or inconsistent, where you had 12 local government areas locked down, the rest of Sydney was not. So that creation of the two Sydneys was quite distressing for people, distressing for all of us who were listening to what people were telling us. That also caused a great deal of obstructions and challenges for us to try and put the messages through. I'll leave it to the others to comment.

The CHAIR: In your opinion, where did most of your community that you represent pick up their messages? Was it WhatsApp, Facebook, SBS, radio? What was the most consistent multicultural voice that your community got their information from, Ms Kattan?

RANDA KATTAN: People like WhatsApp; however, having said that, Facebook is a massive—it's the main platform that people use from the Arabic community. But also they rely on us to do it through the radio, SBS, other community radio as well. Also they rely on community organisations—those they're connected with, like our organisation and others on the ground. They rely on them to disseminate information. We connect with hundreds of people on a daily basis. Obviously, not during the lockdown so much when it was over the phone and remotely. But, yes, I would say Facebook would be the main one. The other one that members of our community tend to use quite frequently and obsessively would be WhatsApp.

The CHAIR: So Facebook, SBS and WhatsApp?

RANDA KATTAN: And the community organisations.

The CHAIR: And the community organisations. That's great. I also just saw Ms Aksoy nodding in furious agreement with Ms Kattan. Did you have anything you wanted to add there particularly?

TÜRKAN AKSOY: Yes, I had two points. Thank you, Randa, for outlining all that. That was very accurate and experienced on the ground. I represent the Local Government Multicultural Network, which is a lot of council officers who support diverse communities within their LGAs. What we first found was that the

communication—we used our regular channels of communications, so your council's Facebook pages, webpages, interagencies, emails. That was activated straightaway, but because the messaging was quick, it was fast and it kept changing often, a lot of our diverse communities really relied on what Randa was saying around Facebook. Facebook was our larger area of where information was being disseminated, but smaller groups on WhatsApp were very active.

A lot of our workers on the ground—our gatekeepers, those people who are quite strongly connected with diverse cohorts—were literally on WhatsApp making sure that any updated information was hitting home and was being able to connect with the community cohorts that they were representing. Randa is correct; there was a lot of miscommunication coming from international media. A lot of people would look at their own countries' websites, getting information that wasn't always aligning with what was going on in New South Wales or Australia at large. We had to always make sure that, whatever information was being disseminated, it was coming directly from our department of health, it was coming from reputable resources.

We had to constantly not just hand over right information but also move away information that wasn't related to what was going on in New South Wales. So there was a lot of managing—a lot of workers were literally responding to text messages via WhatsApp or Facebook Messenger at 10 o'clock, 11 o'clock at night. I would be getting things left, right and centre trying to make sure that, if there were any changes happening with any health orders or any restrictions that the community had to adhere to, that information was going out straightaway. It did cause a lot of exhaustion for the sector but we were really active in making sure the information and the correct information was going to the community.

The CHAIR: That story concurs even in regional New South Wales and the mid North Coast. I have 15,000 Facebook followers. My team was constantly updating and still today people thank my team and myself for the posts that we were doing that kept them informed.

Mrs NICHOLE OVERALL: We've heard a lot today about bespoke, tailored communications and that a one size doesn't fit all when it comes to the things that we're looking at at the moment. My question is for Settlement Services International. Your submission stated:

Care should be taken to ensure that extra efforts to reach and support communities ... are not interpreted as singling out particular groups ...

Could you elaborate on that a bit further, please?

YAMAMAH AGAH: So we work with and focus more on newcomers and the refugees and asylum seekers because we work with a lot of people who have just arrived in the country and need a lot of support. During the pandemic we had almost 6,000 or 7,000 people on our books that we were supporting and people who are newcomers to Australia. It was really difficult to make sure that they did understand, because they take you through orientation and information, making sure that they are informed about the system, about Australia and everything else, and added to that was the pandemic, that they had to be isolated. As Randa mentioned, in some areas the lockdown was stricter than others. That led to people not having access to different services or to case managers and caseworkers who supported them on a day-to-day basis during their initial settlement. So it was really difficult to make sure that people were receiving the right information.

One of the ways that we relied on is the direct contact. We were going back to really old school, where we were worried about the communications and the messages changing on a regular basis, that people couldn't keep up on Facebook and WhatsApp and all this. So we wanted to make sure that people were receiving the right information and relied on our staff contacting the clients—hundreds and thousands of clients on a daily basis—to give them updates on what's happening, the latest updates. There was a lot of reliance on community organisations as trusted sources of information to provide the information and updates to our communities. In terms of singling out, we did feel that our clients and families felt a bit stressed and different when in certain areas the lockdown was stricter. In some areas where they had helicopters coming to monitor, it created a lot of fear and triggered the trauma amongst the refugee groups who are really traumatised. Seeing helicopters in their areas, they were running home not knowing if they did something wrong or not. The message was mixed and confused people.

The CHAIR: Yes. We've heard testimony to that today and we can only imagine—well, I can only imagine because I was in a regional community, in a country community. The vision was difficult to watch.

Ms JENNY LEONG: Ms Aksoy, your submission raised the need for government agencies and those in leadership positions to reflect diversity in our community. We've heard that the importance of who is saying or communicating the message is one thing, but it is also who's sitting around the table to make the policy decisions or deciding the strategies to communicate. There's also a need for diversity there. I wonder, in pointing out the need for more cultural sensitivity and awareness around communications in times of crisis, do you have

suggestions for how that could be approached? What is the Local Government Multicultural Network doing and are there any lessons that maybe the State Government could learn from your work as a network?

TÜRKAN AKSOY: It's really important to make sure that there's a diverse pathway to even being part of those committees and reference groups. It's really important that there is an open pathway that doesn't only single out just the same key players in our diverse spaces and that we actually diversify even in how we ask people to come and join and contribute to this process. Sometimes these processes are a bit structural in the way they work. There are formalised pathways. You need to put in an application, make sure you've got all your credentials—to even support some elders who might not be tech savvy along that pathway if they did still want to contribute. We need to give those voices a space as well. I find that, because the pathways in how we recruit are really structured, it doesn't allow for other people to enter in. Once you do enter in as well, the safety in being able to speak up can be an issue—about when do you speak up, how can you be heard? Sometimes these kinds of structures don't really create that kind of safe space for people to speak up. But when they do, it needs to be acknowledged and it needs to be implemented. It can't be a consultation which is to extract information, but, "Yes, we'll make those decisions."

Unless there is a co-design element of it where we have people with lived experiences—and I know you might have heard me speak about this often, about creating co-design or joint sort of agreements and decisions on this—we're not going to be able to hear them and have their statement implemented in our strategy and our way forward. I think that the State Government can learn about really diversifying pathways in how we recruit committee members and steering committees or reference groups, but once we have them in these spaces to create safety around how do they speak up, what can they say, do they need additional support to understand some of the language that's even used in some of these meetings?

It would be great to be able to access some of that and to see if we can start recruiting some diverse voices because crisis is going to come. It's come in such a massive way with COVID, but we don't know what future events are going to take a hold. We've just gone through floods. We've had fires. The more that we can get community on board and to make sure that we understand safety practices, to make sure that we work with some of our emergency and first responders, we're not going to have community as part of that. We want them to be part of that so that way we don't put any further risk into the community. So there's a lot of learnings to be had, but I think that there are definitely steps that the local communities can support State Government in creating these kind of policies and procedures that can help us all work together.

Ms JENNY LEONG: Thank you so much, Ms Aksoy. It's really useful to get that perspective and it really feeds into a lot of what we've heard today. If I can turn to you, Ms Agah. In relation to your submission, you mentioned the online community portal that SSI established in 2020. I wonder if you could tell us a little bit more about how that operated and also what the sort of usage was like and what the interaction was like, and if there are lessons around how that was set up that could inform preparing for future crises? We heard earlier that we know the instructions are the same if you're dealing with a flood or a bushfire almost every time, so there's a lot of work that could be done preparing that in advance. I wonder, are there other things from your perspective, having set up for that community portal? Is there support they could be given from government to be able to assist in either maintaining that or looking at other things that are useful or increasing engagement to it?

YAMAMAH AGAH: Definitely the platform or the portal that we tried to put together was one of the ways we tried to communicate to our communities and clients that we work with and the broader community. What we tried to do is look at some of the resources and sources that are simple to understand and, if they change, they can change and be updated in a way that people can understand, and look at different information in different languages, but also try to use it to send it to our clients and different partner organisations and so on to use and access. The portal was accessed by so many people, which was good. They're the sort of things that we can do to enhance and develop it further, including various ways and methods of communication because one size does not fit all. Even some of the translated information is not useful for people who speak their own language because some people don't read their own language or it's a little bit different when it's translated.

There's a need to include in any portal or such a portal some videos or some ways that are suitable for different groups and cohorts. Younger groups are tech savvy and they can follow instructions, technology and information in different languages. But through a survey we did with our clients, we found right at the beginning of the pandemic that the older group, they are the ones that struggled with getting our information or didn't really think that COVID is a big thing that they need really to follow the rules around, and so on. So we needed to target that older group and make sure they were provided with information through Health and so we brought Health to deliver information to them and got interpreters to interpret to make sure they understood exactly what the information is about and how to follow it.

Ms JENNY LEONG: Can you just touch on briefly, because it hasn't come out in relation to other submissions, the intersection between the gap that you recognised around communicating with people living with a disability, and culturally and linguistically diverse communities? I guess talk about how you identified that gap and if there's anything that you think need to be specific recommendations to consider in relation to the intersection between people living with disabilities in CALD communities?

TONI BEAUCHAMP: I might take that one. I think the thing that stood out—I wasn't with SSI at that time but, from my understanding, the thing that was important was involving people with disability in community education well before a crisis or disaster. That applies more broadly as well, but in particular in this case to people with disability. I'm not completely sure how that was identified, but I imagine it was through our program managers and staff.

YAMAMAH AGAH: Service delivery staff are people who work directly with their clients in trying to prepare, and we also had a grant for recovery from the State Government that we worked with people to find the gaps directly through information sessions and educational sessions, and basically preparing people for disasters. That worked really well. I think preparedness and being ready well before a crisis or something like that happens is key to successful outcomes.

Ms TRISH DOYLE: I thank all you wonderful women for the work that you do and not just for our benefit with this particular inquiry but every day in your community. You were just speaking about and there has been talk of the Government grant that assisted in communication. I am just wondering, with all of you with organisations that are always needing extra funding for resources to communicate not just in crises—that's what we're talking about today—but to produce, to distribute, to fine-tune after an event for the next time, to gather feedback. What else do you need from the Government by way of support with funding or resources to reach out and continue to support culturally and linguistically diverse communities?

RANDA KATTAN: For culturally and linguistically diverse organisations—ethnic-specific multicultural organisations and so on—they're particularly ethnic-specific, I'd say. We're in a unique spot where we become the experts for our communities. So the demand on us is so great that everything under the sun comes to us, okay? It's not just specifically like you would have an organisation that is mainstream; they have got a specific role to play. For us, we need to know about everything. I think what we need from the Government is, first of all, that understanding and acknowledgement that ethnic-specific organisations, and organisations like SSI, we do have our ear on the ground. We know our communities; we understand them—SSI and the Multicultural Network as well, I should say.

We are connected to our communities, so there has to be an understanding of that, very much taken on board, but also when the funds come through to organisations, particularly—Ms Doyle, I know you said not just in crisis but let me deal with the crisis first—during crisis, for us to start writing submissions in the middle of a crisis when we are all inundated, that's a big ask, and yet we did it. But we started off from not having any funds at all to funds being given to us, eventually. And there was an acknowledgment by the Government that the organisations are in need of more resources, because most of us were doing it off our own back just within existing resources.

So more resources need to be given, acknowledging the fact that we get inundated by everything they're asking you to go through. We get asked for that. The other thing too is having organisations, particularly credible organisations—and local members would know who they are and local councils would know who they are—and connecting with those organisations from the outset, not in the middle of the crisis and not at the end of the crisis but from the very beginning. Engage the community as much as possible through their community organisations. We're experts on the ground when it comes to stuff like that.

TÜRKAN AKSOY: If I may add, yes, agencies did some incredible work and the funding does help, but also a lot of these agencies became the face of a lot of this messaging, particularly around the restrictions. So they took a lot of the brunt of the sometimes negative social media that was coming their way. They need to be safeguarded. They're relaying messaging from Health or other departments that are issuing these health orders and health measures to make sure the community is safe. They need some more training around how to safeguard themselves, particularly when they are relaying really complex information that is concept altering. That sometimes has implications with law agencies and law enforcement agencies.

So it would be great to, yes, provide support financially, but there needs to also be capacity-building training and making sure that there's sustainability. I saw a lot of incredible workers have to take a step back because they would get so much backlash on social media, and these are communities where they have built so many years in building that trust and cultivating those strong relationships and linkages. We don't want that to be severed. We want to make sure that, yes, the messages are going out, but we want to make sure the person, the people and the agencies that are doing that are also protected. So any kind of training that could help around

communication but also safeguarding themselves and protecting the messaging that's going out would be really useful.

RANDA KATTAN: I need to add—Türkan just triggered something. We are not a health organisation. During the crisis, when it was happening, we ran a lot of seminars. A lot of doctors put their hands up for something like that voluntarily. What I asked from Health was to approve the doctors who could deliver, because we have no way of determining whether it's the same messages as what the Government was releasing or not, and we don't know. Even though we trusted the doctors, at the same time it's not our role to disseminate information that is not coming directly from Health. So we did ask for Health to either approve the doctors or approve presentations so we know that they are credible and that the information that is being given is consistent with what NSW Health want. We never received that. The requests were ignored. There is a little bit of lack of trust.

I understand that Health needs to control messages, for example. We understand that. But if we are all working together during a time such as that, it will be great. Not just great; it's beneficial for all of us that there is a level of trust—to take us on trust. We've been around for a very long time as organisations. So work together with us on how best to do this as opposed to all of us working in silos. Not that we did. We eventually got there. But initially it was pretty much like doctors had to do it without any—there was no protection, if you like. Doctors had to do it of their own volition. They volunteered without anything coming from Health to say, "Yes, these are the messages that we want to put out there."

So it would have been helpful if there were in-language doctors who have been approved by Health and who could disseminate that information, or at least approve the existing doctors, who are great. They are fabulous. They are working in the system. They could have approved those doctors to go out there and speak, not just on simple messages on videos but more entering into a dialogue with community members. That would have been quite helpful.

Also support. We all did videos. We appeared on videos, and rightly so. As Türkan was saying, in our life we became targets. When we put out some of ours, some people did not like what we had to say when we called for people to wear masks or isolate and so on. Yes, we put out videos through Health, not just our council. Through Health we put out videos, but they're not sufficient to engage communities. It has to be like a seminar form. Where we're running things online when we were in lockdown, people were attending, but it shouldn't be like that. It should be a bit more organised ahead of time, with all of us prepared, all of us together and government and community organisations alike working together well ahead of time.

I think in my submission I did point out how you can find out which are the credible organisations, who they are—because I've read enough papers that criticise community leaders. Like we're going to have to know—we're going to have to know whether there is limitation. Of course there's limitation but there are community organisations that are well connected. Local members know who they are. Local councils know who they are. Other organisations would know them. And funding bodies, can I add, do know who they are.

Ms TRISH DOYLE: Excellent. SSI, did you want to add anything about funding for particular resources in communication?

YAMAMAH AGAH: Yes, sure. Most of the work that we have done as a community organisation, as Randa and Türkan mentioned, we didn't have resources for. So contacting a thousand clients a day, or more than that, we didn't have enough resources. So we used our staff, not interpreters, who speak different languages. It was a lot of pressure on resources for different community organisations. SSI is a large organisation, but we have other smaller organisations that, even moving to work remotely from home, didn't have the resources to take the equipment to work from home. Small community organisations which are embedded in the community, which are a source of trust for the community, are seen as first responders to really work with the community.

One of the things that we've noticed during this crisis response is that the community organisations who are embedded in the community and have the trust of community members were ignored in a way and their skills, their trust and the expertise they had were not leveraged enough or adequately, because different government departments were going straight to community leaders. And all these organisations and departments were going to the same community leaders to reach out to them to disseminate the information. So there was a lot of additional pressure on a number of community leaders who have trust in the community to deliver information with no resources allocated to them. And that led to burnout for all these people who were really relied upon by so many different departments and organisations. So the community organisations are embedded in the community. They have their trust and they have the expertise, and I think this is something that needs to be leveraged in future to plan and prepare.

Ms MELANIE GIBBONS: A final question, and it should be a brief one really because it is picking up on what you just said then. A few of you have talked about trust, and we know that a lot of people who come from

other countries come with a fear of government and a distrust of government. How do we improve that so that when we are giving a message that's important and timely, it is heard and responded to? And how do we also make sure that there are other groups, as you were saying, not just some community leaders but many people and many groups, that are able to have that information and share it out to take that burden off? You were saying a thousand calls. I know what I went through in my office. I think we had similar experiences with my team. How do we ease that feeling and that pressure and rebuild the trust or earn the trust?

YAMAMAH AGAH: I think lavishing on existing services—we are connected to the community—is one of the ways. The other way is developing resources and tools that are tailored to different groups, not one way to disseminate information. You have some translated material, you have videos, but use people from different communities who are trusted in the community to deliver a message. That was one of the great ways to really disseminate information—when we actually made videos for some of our staff who speak certain languages delivering health information. We tried to translate in different languages exactly what Health was saying. That was really well received by our clients. So use a number of different ways and methods, not only one way.

RANDA KATTAN: I'm going to take the question differently—[inaudible], not just from a service point of view—although I agree with Yamamah. I think just based on our experience late last year of what happened, the restrictions, the way they occurred, the consistent restrictions, really created a massive breakdown in trust, if you like. Particularly when it came to particular areas like Bankstown, Lakemba, places like that, where it's clear they are all besieged areas. They've had the law-and-order approach for so many decades. Historically, it's been like that for a long time, so they're quite easy to pick on.

Having the police on the ground, having the police part of the press conference, if you like, having the boots on the ground in terms of the army, although they were knocking on doors and helping people, that's not what people see. People do see that it's extremely—very much it's discriminatory and it's racist. I would say that to build trust, you need to treat people equally. They need to be treated fairly and they need to have the same access applied across, not just to some areas and not others. What was created in the minds of people was that in those areas they are criminals and we need to release the police. Although people did see police down at Bondi, it wasn't the same because those communities, those areas, have a label on them: "It is so clear that there is a lot of crimes in that area, so let's release the police". As soon as we don't speak somebody's language, we release the police. That should never happen. If you want to have the trust of the people, then you need to treat them equally and fairly.

TÜRKAN AKSOY: I feel that we're all on that trajectory. When you look at the first wave compared to the second wave compared to the third wave, the first wave really gave those voices to the heads of departments, whether it was the department of health or the police commander who was speaking. But as the waves came through, we started seeing the faces and language of people we knew and trusted. I felt that that was a fantastic way to see people who are heads of departments to move and stand on the side while people who were trusted were the ones relaying those messages. Both Multicultural NSW and SBS have done incredibly in relaying language messaging. But what the community has done is say it's not just about the translation and the language, it's got to be about the trust and the relationship building because only then do they connect. Already we're moving into departments where they're taking on a lot of these learnings and they're starting to pose messaging ahead of Eid celebrations, Easter celebrations and Christmas celebrations. They bring these messages aligned with community when the community is ready to absorb and take on the messages. It's been incredible to see that play out.

Ms MELANIE GIBBONS: They were three very different but all useful perspectives on the same question.

The CHAIR: Thank you all for joining us today and for your contributions. It has been really positive and has provided a lot of learnings. I'm sure you will see those learnings in our report.

(The witnesses withdrew.)

The Committee adjourned at 16:05.