

# Roundtable Summary – Experiences of culturally and linguistically diverse communities

**Date:** Wednesday 19 June 2024

**Host:** Robyn Kruk AO, Commonwealth Government COVID-19 Response Inquiry

**Participants:** This roundtable brought together a range of participants including multicultural community leaders, industry peak bodies, public health and medical experts, and Commonwealth, state and territory governments.

## Purpose of this roundtable

- Australia is one of the most culturally and linguistically diverse (CALD) countries in the world. The inquiry has heard the Australian Government's COVID-19 pandemic response had a significant and disproportionate impact on many people in the CALD communities.
- This roundtable provided CALD community representatives with the opportunity to share their views on the experiences of the culturally and linguistically communities during the pandemic, what the Australian Government did well and what could be improved for a future crisis.
- The inquiry has also received views and experiences through a range of other engagements including individual interviews, submissions, and focus groups.

## What we heard at the roundtable

- CALD communities were disproportionately impacted in many areas by the COVID-19 pandemic. Since the onset of the pandemic, the total age standardised death rates for people born overseas is much higher compared to those born in Australia. The mortality rate varied considerably over the course of the pandemic.
- Disparities extended to non-health supports. For example, some international students, temporary migrants and people seeking asylum were ineligible for income support payments and were more likely to lose employment. Pandemic planning needs to build in a gender lens given the inequitable impacts on women in some CALD communities.
- The focus and enforcement of public health orders also disproportionately impacted CALD communities and some groups were fearful of reporting COVID-19 symptoms due to employment insecurity. The lockdown of public housing tower blocks, with a highly visible police presence, coupled with a lack of tailored health messaging and initial supports exacerbated negative impacts including trauma.
- While tailored initiatives for CALD communities were introduced over the course of the pandemic, the initial response was not quick enough or shaped to respond to the

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diversity of experiences and needs of CALD communities. Many actions came long after they were first needed, amplifying underlying inequities.

- In a future emergency, it is vital that tailored responses are developed at the outset. Representatives of CALD communities should be included throughout the process of designing and implementing response measures. These advisory groups should have the ability to provide advice across a range of government areas.
- Trusted advocacy groups, community organisations, community leaders, local governments and bicultural and bilingual workers stepped up to support CALD communities. Initiatives included development of translated and culturally-appropriate resources, in-reach and wrap-around support services and assistance navigating the health system. The pandemic shone a light on how effective community-led measures can be. Consistent support is needed to build on the capability and preparedness of community organisations.
- Some local governments did well – those that were in touch with their communities, already had systems set up and knew what needed to be provided. Capacity needs to be built and maintained in local government to provide culturally appropriate services and provide clarity on where people should contact for support.
- Publication of accessible, tailored and accurately translated information was too slow early in the pandemic, and there was significant duplication across governments. This increased distrust of government, confusion about how to comply with public health orders, reliance on informal information sources, and the spread of mis- and disinformation. Existing community communication channels should be better leveraged to share information with CALD communities in future crises. There is more to effective communication than translation.
- Changes to Medicare Benefits Schedule items to support the COVID-19 vaccine rollout were helpful and enabled conversations between individuals and general practitioners about vaccinations.
- There were positive developments in the collection and linkage of vaccination data for CALD communities during the pandemic that helped governments and communities tailor the vaccine rollout to different communities. Better collection and linkage of data in all acute and primary health care settings needs to be prioritised to improve delivery of tailored responses that address individuals' needs. Consistent collection of country of birth, language spoken, interpreter requirements, ethnic/cultural background and year of arrival should be prioritised.