



**Health**

Hunter New England  
Local Health District

# Refugee community pandemic research

Multicultural Health Service/Refugee Health Service, HNE

And

Public Health Unit, HNE

Healey SJR, Ghafournia N, Massey PD, Andrich K, Harrison J, Taylor K, Bolsewicz K.



- CALD groups disadvantaged
- COVID-19 government health communication inadequate
  
- Not just about language
- Partner with leaders

**Ezidi voices:**

**The communication of COVID-19 information amongst a refugee community in rural Australia- a qualitative study**



# Methods: group interviews



4

*Community members  
(influential)*



6

*Community members  
(general)*



3

# Common sense results:

1. The refugee experience influences the communication of COVID-19 messages
2. Cultural, social and gender norms influence responses to COVID-19
3. Trusted individuals and service providers are key
4. Problems with available government COVID-19 information
5. COVID-19 communication can be improved



# Participant suggestions for government sharing of official COVID-19 information

- **Listen** to community
- Provide clear, consistent and culturally **appropriate** messages
- Recognise **diversity** within the ethnic group
  - E.g., language, religion, literacy ability, English proficiency
- Translate using **dialects** specific to community groups
- Choose **multiple** methods to distribute official information
  - E.g., direct telephone calls, written handouts in language and social media videos
- **Identify and consult with key Ezidi contacts**
- **Delivery** via trusted and known community members and service providers
- Utilise highly frequented and familiar spaces to deliver messages
  - E.g., TAFE, school, medical and dental clinics, multicultural supermarkets, social media





*“...the brain is tired, so we can't learn”*

(Ezidi influential community member)

- Healey SJR, Ghafournia N, Massey PD, Andrich K, Harrison J, Taylor K, Bolsewicz K. **Ezidi voices: The communication of COVID-19 information amongst a refugee community in rural Australia- a qualitative study.** *Int J Equity Health.* 2022 Jan 21;21(1):10
  
- Healey, S.J.R., Ghafournia, N., Massey, P.D. *et al.* **Factors contributing to the sharing of COVID-19 health information amongst refugee communities in a regional area of Australia: a qualitative study.** *BMC Public Health* **22**, 1434 (2022). <https://doi.org/10.1186/s12889-022-13850-1>
  
- Healey, S. J. R., Ghafournia, N., Bolsewicz, K., Andrich, K., & Massey, P. D. (2022). **The role of leadership among a Congolese community in Australia in response to the COVID-19 pandemic: a narrative study.** *Western Pacific Surveillance and Response*, 13(2).
  
- Healey SJR, Ghafournia N. **Lessons from pandemic research with refugee communities.** *Public Health Res Pract.* 2022;32(4):e3242236.