



# Western Sydney Community Pulse Report on COVID-19

August 2020

# Executive Summary

As a community organisation providing settlement and a range of other social services, including foster care, employment and disability services, Settlement Services International (SSI) is experiencing the impacts of COVID-19 on some of our most vulnerable individuals and communities. The identification of pockets of Western Sydney as COVID-19 “hotspots” has brought increased attention by SSI, our members, partners and collaborators as to how people and communities are experiencing the pandemic.

Against the challenges of COVID-19 and Victoria moving to Stage 4 restrictions, SSI draws deeply on its service delivery expertise and community connections to advocate for the people and communities it serves and in this case with communities from diverse cultural, language and religious backgrounds. Through the work we do, we empower people to change their lives and this aspect of SSI’s work has been heightened during COVID-19 to ensure their health and the public’s health is not compromised.

With the onset of the pandemic we built a COVID-19 website in nine languages and an intensive social media pictograph campaign (also in nine languages). One of the first COVID-19 multilingual response sites developed, it is now attracting over 8000 people each month.

Following the first and second waves of the COVID-19 pandemic in Australia, in particular the second wave in Melbourne, SSI is concerned with public and media commentary blaming migrants in the crisis. Should there be a Melbourne-scale outbreak in Sydney, CALD communities do not want to be scapegoated. SSI has stayed connected to community leaders and can see evidence that they have taken the initiative and are exercising leadership to make sure their communities are COVID-19 safe.

## **It has been very important for SSI to listen to how communities we support have experienced the pandemic and to this end SSI has:**

- Consulted over 25 community leaders and representatives in metro and regional NSW via structured one-on-one consultations and virtual roundtables. We listened to the community’s experience of the pandemic, how community members have helped each other, what they perceive as the challenges and listened to their hopes for recovery.
- Conducted a survey of over 800 clients in the Humanitarian Settlement Program (HSP) residing in Fairfield, Liverpool and Campbelltown LGAs to understand the experiences and perceptions of clients in relation to COVID-19 and to ensure clients are receiving up-to-date information.
- Through the NSW Settlement Partnership, brought together over 45 community leaders, health practitioners, settlement services providers and government officials in a virtual forum to discuss how newcomer communities are dealing with the pandemic and what else might need to be done to assist.

From the above client, community and community leader engagement initiatives, SSI has a strong sense of whether the resources and tools available are accessible and has robust data to advocate for CALD communities and to respond to any myths or issues arising from the current situation in Western Sydney. This Community Pulse Report provides a summary of outcomes from these engagement initiatives and it is clear that:

- Community leaders and representatives of grassroots associations are a vital asset serving as ambassadors in keeping newcomers and other diverse communities COVID-19 safe and are stepping up in community-led and peer-to-peer ways.
- COVID-19 health messages are getting through to people in case management arrangements like the Humanitarian Settlement Program. This affirms the need to utilise existing settlement workers and other trusted pathways to reach communities whose first language is not English.
- Responses to the pandemic need to be tailored, not with a one-size-fits-all approach, and this is evidenced in the community survey, with people over 56 years and those in Australia for less time likely beneficiaries of tailored messaging.

## Western Sydney Community Pulse Report on COVID-19

- Physical distancing has increased social isolation, particularly for people new to Sydney without social networks, so mental health responses and funding enhancements need to expand to address this.
- Newcomers and members of more vulnerable communities are more likely to follow government advice when delivered through someone or an organisation they trust.
- Working more closely with trusted community organisations and diverse community leaders will enhance the efforts governments are already making to inform and keep their communities safe.
- SSI, its members, partners and collaborators possess invaluable social and community infrastructure that governments should utilise more purposefully in Western Sydney and other target locations.

### SSI recommends:

That the social capital and trusted community relationships SSI, its members and partners possess be fully utilised in place-based responses designed by governments to assist in the management of Western Sydney COVID-19 hotspots.

That a Multicultural COVID-19 Coordinating Committee be established by the NSW Government (with relevant community representation), to ensure the issues being seen in Western Sydney are managed taking a community led and informed approach.

That the value of peer-to-peer community engagement and education be acknowledged as a very valuable asset in health messaging, behaviour change and ultimately in maintaining the health and safety of all.

The experiences of humanitarian entrants aged over 56 and those who have been in Sydney for a short amount of time be afforded targeted COVID-19 health and social distancing information using mediums and languages that meet their needs.

### Authors:

Stephen Webb, Esta Paschalidis-Chilas,  
and Kathleen O'Neill  
August 2020



### 1. Context

Following the first and second waves of the COVID-19 pandemic in Australia, in particular the second wave in Melbourne, SSI was concerned that migrants were being blamed for the crisis.

Media commentators and politicians across the political spectrum were accused of scapegoating migrant communities.

A Victorian health executive said “laying blame at the feet of people who are already highly marginalised is especially damaging at a time when we need to be engaging all people to comply with testing and lockdown measures.”

Some commentators said, rather than focusing on ethnicity, more attention should be paid to the economic pressure on people working in insecure jobs.

Nevertheless, people, including leaders from migrant communities, said pandemic restrictions and dangers could have been better communicated to linguistically diverse populations. Leaders from locked-down “hotspots” argued that communication of public health orders was insufficient for non-English speakers.

The acting Minister for Immigration, Alan Tudge, noted that Sydney was just as multicultural as Melbourne, yet had no recent outbreaks.

SSI, its members and partner organisations are in close contact with newcomer communities and are listening to community experience, responding in a place-based manner and advocating to governments to ensure this remains the case.

### 2. How did SSI respond?

As a settlement services organisation also providing a range of social services, including foster care, employment and disability services, SSI is experiencing the impact of COVID-19 on some of our most vulnerable communities.

With Victoria moving to Stage 4 restrictions, SSI has turned to newcomers and communities to listen to their experience of this wave of the pandemic. We have heard that communities are taking the pandemic seriously and are practising new ways of keeping connected and safe.

By understanding their concerns and behaviours, SSI can draw deeply on its expertise to advocate for them. Through the work we do, we empower people to change their lives and this aspect of SSI’s work has been heightened during COVID-19 to ensure the public’s health is not compromised.

We reached out to over 25 community leaders and representatives in metro and regional NSW via structured 1:1 consultations and virtual roundtables. We listened to the community’s experience of the pandemic, how community members have helped each other, what they perceive as the challenges and listened to their hopes for recovery. This has helped shape SSI’s response to COVID-19 and will continue to inform the organisation’s advocacy efforts. Leaders were especially concerned about the effects of isolation, loneliness and trauma being re-triggered.

Leaders and community organisations were extremely proactive in engaging their community and addressing misinformation. They engaged health experts that were able to share information in-language directly in ways that were best suited to their communities (for example, virtual health sessions and phone call trees). Many focused their efforts on old people as they were less likely to have the tech skills or confidence to seek out information from institutions.

#### **We’ve done our best to keep people connected.**

With the onset of the pandemic we built a COVID-19 website in nine languages and an intensive social media pictograph campaign (also in nine languages). One of the first COVID-19 multilingual response sites developed, it is now attracting over 8000 people each month.

In addition to fulfilling contractual commitments, when the second wave hit Western Sydney, case managers phoned all their clients to ensure they were COVID-confident, aware of risk, knew how to see information or advice and were safe in how they kept their children occupied throughout the school holidays.

SSI's Welcome 2 Sydney Project has sustained virtual connections between ambassadors and newcomers, SSI's community arts and cultural development activities have been sustained through virtual platforms, Refugee Week engaged newcomer communities across settlement sites in NSW through social media and virtual exhibitions, plus SSI is currently hosting fortnightly Freedom Sessions on YouTube showcasing artists and cultural practitioners as part of the New Beginnings Festival.

SSI's volunteers have all transitioned to provide virtual engagement to ensure people stay connected with their community. Volunteers and students are currently supporting our resettlement teams, employment programs, Ignite Small Business Start-ups, foster care and the Clinical Practice Unit. We are responding to the heightened need observed by case managers for additional support for those in the community who might be more vulnerable due to COVID-19. SSI is introducing specialist training for volunteers so they can provide additional pathways for client check-ins and support under the case manager's supervision, complementary to contracted settlement and social services.

While COVID-related job loss affects populations across Greater Sydney, a proportion of migrants who are new in Australia are left without established social networks or capital to draw on in times of need and some are not yet entitled for Government assistance. Through community support, donations, small grants and partnerships with organisations like Oz Harvest, SSI distributes care packages of food and gift vouchers twice a week from our Parramatta Office.

Should there be a Melbourne-scale outbreak in Sydney, CALD communities do not want to be scapegoated. SSI has stayed connected to community leaders and can see evidence that they have taken the initiative and are exercising leadership to make sure their communities are COVID-19 safe.

### a. SSI conducted a client survey

**Due to the emergent COVID-19 situation in Western Sydney, SSI sought to:**

- Understand the experiences and perceptions of clients in relation to COVID-19
- Ensure clients are receiving up to date information and that messaging is delivered in their preferred format
- Assess clients understanding in relation to information provided by the Health Department and other sources including translated materials
- Understand if the resources and tools available are easily accessible and easy to understand and follow
- Use robust data to advocate for CALD communities and to respond to any myths or issues arising from the current situation.

SSI conducted a survey to which there were over 800 respondents – clients in the Humanitarian Settlement Program (HSP) residing in Fairfield, Liverpool and Campbelltown LGAs.

#### Key Findings

**The data overwhelmingly suggests that the cohort interviewed takes the current pandemic very seriously**

- 100% of respondents are aware of COVID-19
- 94% engage in 3 or more COVID safe practices (e.g. social distancing, washing hands)
- 87% view COVID-19 as a major health threat
- The majority of respondents feel they are well informed about COVID-19
- 95% mentioning they were receiving adequate information
- 90% reporting that the information provided was helpful and easy to understand
- The majority of respondents (87%) are happy with their access to information via resources provided by SSI and other government resource tools
- Clients prefer to receive important information via their case worker and by phone
- 87% of respondents reported that they were getting enough services and support from SSI in relation to COVID-19
- Older clients (over 56) and those with the shortest tenure were least responsive to COVID health warnings

The survey results debunk much of the racist stereotyping seen in the media in recent months. The data suggests that respondents are engaging in all the recommended safety measures including using sanitisers, washing their hands and practising social/physical distancing.

Respondents are taking active measures to ensure their safety and the safety of the community at large, and treating COVID-19 seriously as a health risk.

Through their case managers, newcomers supported by SSI feel they are receiving adequate information regarding COVID-19 and the information they are receiving is helpful and easy to understand but there is room for improvement.



# 95%

mentioning they were **receiving adequate information**



# 90%

reporting that the information provided was **helpful and easy to understand**

Clients prefer to receive important information **via their case worker and by phone**



# 94%

**engage in 3 or more COVID safe practices** (e.g. social distancing, washing hands)



### b. SSI listened to community leaders

Since the emergence of COVID-19 in Australia, SSI's Community Engagement function has engaged community leaders and representatives of grassroots associations to better understand community experiences throughout the pandemic. SSI's engagement practitioners conducted [structured consultation](#), including one-on-one interviews and two virtual roundtables that focused specifically on women's experiences of the COVID-19 pandemic. Participants in these conversations were from a diverse backgrounds and settlement experiences and their feedback is outlined below:

#### Community aspirations:

The community has expressed a need to receive trusted in-language information that is appropriate for each stage of the pandemic. It also wants mental health and wellbeing support. This is connected to the community's greatest aspiration, which is to find new ways to create social connection. They want to learn better ways to engage virtually and new ways to have safe in person connection. To aid with this they want technological education that is culturally and linguistically appropriate and coupled with greater access to devices and data. Community members want to return to work so they don't have to rely on government assistance.

#### Community concerns:

- Social isolation and its impact on mental health
- Increased family pressures that can lead to domestic and family violence
- The loss of income and people's ability to meet their basic needs
- People being forced to pause their education due to inability to study online
- Misinformation regarding the pandemic

#### Community Assets:

Communities have used social media and phone calls to connect and reduce isolation, with some people using virtual meetings and information sessions to support community activities and information sharing.

Across communities there are numerous examples of asset and resource sharing, demonstrating a strong willingness to help others through the pandemic.

#### Leadership:

The priority in the community at the moment is to help people back into employment.

Community Leaders also want to help community members stay connected, safe and 'mentally stable'. Leaders acknowledged the limited capacity of some community members to connect virtually, due to either technology skills or access to devices. This is an area leaders requested support in.

Leaders emphasised the need to ensure the community is kept up-to-date with ongoing changes, especially around government policy, health, travel, support and wellbeing. It is important to community that this information is in-language and updated as Australia moves through various stages of the pandemic.

Women, in particular, identified priorities to support their leadership.

### c. SSI convened an NSP Community Leaders Forum on COVID-19

The NSW Settlement Partnership (NSP) is a consortium of 20 migrant resource centres, multicultural and generalist community organisations, led by SSI, delivering the federal government's Settlement Engagement and Transition Support Program (SETS) program in areas of NSW, including Western Sydney. The SETS program aims to equip and empower humanitarian entrants, other eligible permanent migrants and their communities to address their settlement needs in order to improve social participation, economic well-being, independence, personal wellbeing and community connectedness.

The COVID-19 crisis has seen significant commitment by NSP partners in supporting and educating the communities they work with. As the crisis intensified with the emergence of a second wave in Western Sydney, the NSP organised a forum to address the experiences and concerns of people in newcomer communities.

The forum was attended by 45 participants, including community leaders, NSP staff, medical experts, representatives from government bodies and other interested professionals.

The forum addressed the emergence of Western Sydney hotspots and emerging concerns held by community leaders and service providers, including a sense of denial in relation to the pandemic and how serious it was, conspiracy theories, heightened levels of tension and mental health impacts. Discussion reaffirmed the importance of peer-to-peer communication and community engagement, not just broadcasting information. For example, one leader suggested that to make more people aware there needed to be more in the mainstream media in different languages, in audio-visual formats.

## 3. Examples of community leadership and community-led solutions

**The Australian Iraqi Graduates Forum** led virtual health sessions and individual phone calls with health experts who were also from their community. They aimed to counteract misinformation, reduce social isolation and connect with people who fell through the gaps of institutional and service provider efforts to communicate health information. They had a focus on women and older people but all of community were connected.

"Twice weekly I call people from my organisation that I feel that are in need. It makes such a difference, they feel supported, there is someone taking care of them, socialisation, let them speak, they speak up we reassure them. Encouraging people to get flu vaccine, simple advice makes a big difference."

**Africa Health Australia** ([africahealthaustralia.com.au](http://africahealthaustralia.com.au)) has taken the advice of NSW Health seriously and has been watching Victoria and its second lockdown with a mix of disquiet and hope. As a community, African Australians believe they have a clear duty to seek out their friends, family and colleagues and ensure they have the most current and most correct information about COVID-19. This has included NSW Health advice about patrons of the Crossroads Hotel in Casula and for family and peers of suspected patrons.

The Australian newspaper quoted Dr Vincent Ogu of AHA saying many African-Australians in Sydney accessed information through community leaders, Facebook, WhatsApp or Viber groups -- rather than the mainstream English news. "People will often listen to media in their home countries where there is a lot of scepticism about whether the virus even exists," he said.

AHA has held "Health Diary of a Community" forums on Zoom to keep the conversation going and provide support, providing a contact address for information about upcoming forums or other events, plus COVID messages on YouTube and Facebook. The May 2020 forum was a moving and informative expression by the African Australian community. "In the end we are all black and African. What happens to one of us will happen to all of us. If we give attention to the data, we can say to our MPs, 'Here, this is our data and our community.'"

Throughout the pandemic the **Australian Mesopotamian Cultural Association**, led by OAM nominee Bashar Hanna, brought the community together online. He collaborated with the creative community to develop Arabic videos to support wellbeing and reduce stress during COVID-19. He has continued this, developing online in-language content, expanding the focus into English language learning.

NSP member **Lebanese Community Council of NSW (LCC)** started engaging with its elderly cohort in late February (before public measures began) and began activities and messaging on social media (Facebook, WhatsApp). Its biggest concern was how rapidly information was changing and the difficulty of keeping up with this. It found community members wanted to see community leaders speaking about the issue. It was a matter of trust. It was better if you knew who was speaking. The information was more accessible.

NSP member **Core Community Services (Core)** has been using a holistic strategy focusing on managing various aspects of isolation, including the impact on youth, increasing domestic and family violence, and food distribution. It is working closely with Fairfield City Council and the Local Health District to develop strategies that ensure health messaging on COVID-19 is getting through to the community.

The key has been listening to the community and finding out what its issues, challenges and concerns are, then escalating those to the relevant agencies/stakeholders. Core has been working with community leaders who expressed concerns about the mental health impact on young people who are spending more time online. It worked with youth services to co-design and deliver online activities for their young cohort.

Core addressed challenges in the domestic violence space; for example, most of the clients who had DFV issues were temporary residents whose employment had been affected and were relying on partners' incomes, so Core lobbied for more funding for temporary residents. That funding is now being distributed through Multicultural NSW. Core is also working with the Department of Communities and Justice and has increased brokerage support to provide tablets to clients who do not have devices at home.

Food banks are heavily reliant on volunteers, many of whom are elderly, so there has been a drop in volunteering. Core recruited volunteers internally and partnered with other local organisations to keep food banks open.

## 4. Recommendations

### SSI recommends:

- 1) That the social capital and trusted community relationships SSI, its members and partners possess be fully utilised in place-based responses designed by governments to assist in the management of Western Sydney COVID-19 hotspots.
- 2) That a Multicultural COVID-19 Coordinating Committee be established by the NSW Government (with relevant community representation), to ensure the issues being seen in Western Sydney are managed taking a community led and informed approach.
- 3) That the value of peer-to-peer-community engagement and education be acknowledged as a very valuable asset in health messaging, behaviour change and ultimately in maintaining the health and safety of all.
- 4) The experiences of humanitarian entrants aged over 56 and those who have been in Sydney for a short amount of time be afforded targeted COVID-19 health and social distancing information using mediums and languages that meet their needs.

### Community leaders recommend:

- 1) Supporting the provision of culturally and linguistically appropriate technological education and explore ways to support access to low-cost devices and data for women and kids.
- 2) Supporting community groups and organisations to innovate new forms of connection.
- 3) Funding to restart engagement programs that provide social connection.
- 4) Sharing with women's groups creative and safe ways to connect virtually and in person and provide access to an ongoing virtual space for the community to connect
- 5) Establishing a virtual community centre.
- 6) Enhance the profile of employment programs for newcomers in the community.

### The NSW Settlement Partnership will:

- 1) Advocate where possible for more in-language audio/visual programming for multicultural communities.
- 2) Explore greater use of video recording in language by community leaders and sharing those through social media.
- 3) Continue to work closely with community leaders and community members to ensure information is shared as effectively and rapidly as possible.

## 5. Conclusion

SSI has an ongoing connection to community, not just during the COVID-19 pandemic. We are connected through our case managers, bi-lingual staff and volunteers speaking over 80 languages, our partnerships and collaborations, our Community Engagement program, and Community Innovation Fund.

SSI believes its infrastructure and staff approach are playing a critical role in social inclusion and keeping people in NSW safe.

SSI has activated its resources and been agile on the ground, targeting messages to diverse communities.

Our clients are COVID-free. New arrivals are staying healthy.

Newcomer communities are also stepping up.

SSI is well-connected to these people trying to keep our society safe.

We need to keep responding to the bespoke needs of the population, not with an autocratic or bureaucratic response. We need to communicate with our communities as SSI communicates with its clients: as people who look and sound like them, peer to peer.

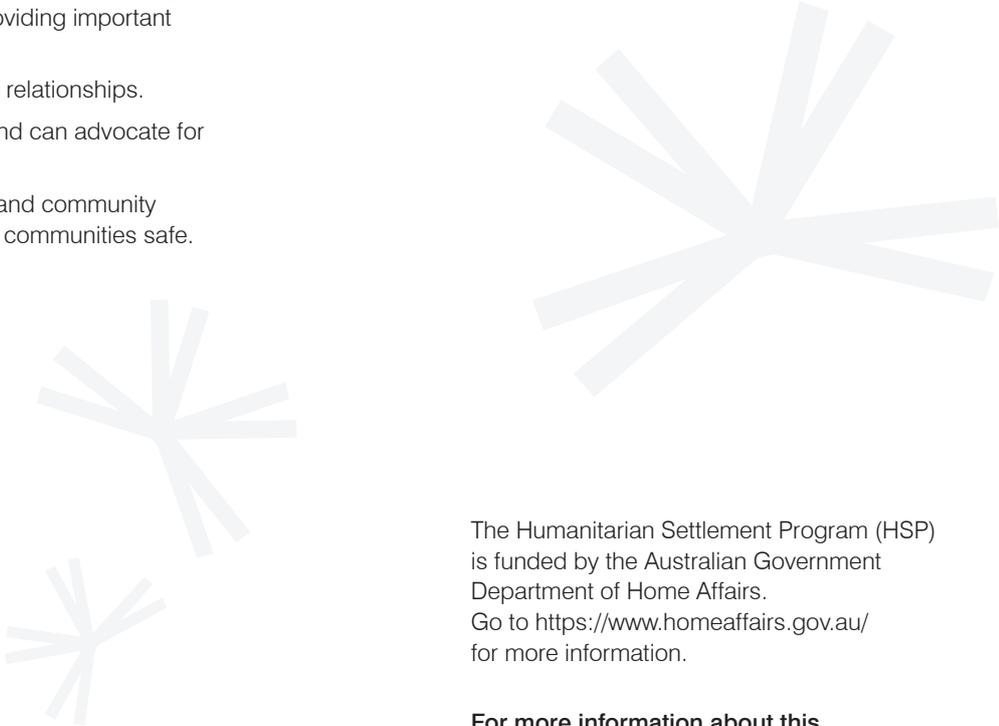
Our case managers are deployed purposefully, have a good sense of what's happening and are providing important health messages.

We value this expertise and our trusted relationships.

We reflect the communities we serve and can advocate for them.

Our members, partners, collaborators and community leaders are doing their bit to keep their communities safe.

**Here we are in action.**



The Humanitarian Settlement Program (HSP) is funded by the Australian Government Department of Home Affairs. Go to <https://www.homeaffairs.gov.au/> for more information.

**For more information about this report please contact:**  
**Shannon Kliendienst**  
**[skliendienst@ssi.org.au](mailto:skliendienst@ssi.org.au)**

**[ssi.org.au](https://www.ssi.org.au)**