

7 December 2023

COVID-19 Response Inquiry Taskforce  
Department of the Prime Minister and Cabinet  
PO Box 6500  
Canberra ACT 2600

## Submission to the COVID-19 Response Inquiry

National Seniors Australia welcomes the opportunity to make this submission to the Commonwealth Government COVID-19 Response Inquiry. The submission is relevant to three of the review areas specified in the Inquiry's terms of reference:

- Broader health supports for people impacted by COVID-19 and lockdowns.
- Community supports in areas of Commonwealth Government responsibility.
- Mechanisms to better target future responses to the needs of particular populations.

### Summary of key points

This submission is based on an assertive COVID-19 outreach program that ran from mid-2020 to mid-2021. It provided information, referrals, and other assistance to older Australians from new and emerging CALD communities in Melbourne, Sydney, and regional Victoria, via direct contact with people in need.

Based on this program, National Seniors recommends that future crisis responses:

- Recognise the unique situation of new and emerging CALD communities and older people within them, compared to other communities and younger people.
- Establish an **assertive outreach program** for older people in each community.
- For each community, employ an active, embedded, empathetic community member with leadership history, in the capacity of Community Liaison Officer.
- Resource Community Liaison Officers with regularly updated information, training, a balance of structure and autonomy, mental health support, channels for communication with their peer Officers, and quality pay and conditions.

### About National Seniors Australia and the COVID-19 outreach program

National Seniors Australia is a not-for-profit organisation that aims to give Australians aged 50 and over a strong national voice through our advocacy and research activities. In 2020, National Seniors partnered with the CALD Alliance Advisory Group of mutual company Australian Unity to create a COVID-19 outreach program. This program was initiated and overseen by (then) Australian Unity executive Elleni Bereded-Samuel AM, who herself has a refugee background and is a widely respected CALD community advocate.

The CALD Alliance Advisory Group contributed the program vision, expertise, and community liaison personnel. National Seniors was the administering host organisation. The program received funding from the Commonwealth Department of Health.

### Program vision: Assertive outreach into new and emerging communities

The core aim of the program was to address the COVID-related needs of older people in new and emerging CALD communities. Most obviously this meant providing accurate, up to date information about COVID transmission, policies, and services in linguistically and culturally appropriate ways.

Topics included lockdown and quarantine rules, masks, contact tracing, QR codes and associated technologies, vaccine access and risks, COVID misinformation, and more.

The program also entailed wellbeing checks, talking and listening to socially isolated people, and building ongoing relationships of trust with older community members.

This mattered because new and emerging CALD communities have needs that other Australians do not. They frequently have:

- Poorly resourced community infrastructure due to relatively recent arrivals
- High dependence on family links, which were often disrupted during lockdowns
- Limited English, and often no (or poorly translated) resources in their languages
- Limited confidence to navigate the Australian system
- Limited confidence to engage with call centres open to the general population.

These issues often affect older community members much more than younger people. Therefore, to engage with older people in these communities, programs must take an assertive outreach approach. This entails actively building direct, trusted, interpersonal relationships with older individuals in need, to tailor responses to their specific circumstances, as opposed to generalised community outreach via groups and leaders.

The program's assertive outreach model centred on a network of Community Liaison Officers (CLOs). All were active community leaders who had proven their commitment to their people through years or decades of volunteer leadership work. Most were older themselves. They used their community connections to raise awareness of the program and to actively approach older individuals to find out if they needed assistance.

A 2020 pilot with the Melbourne Filipino community was so successful that, in early 2021, we expanded it to the Melbourne Afghan, Chin (Burmese), and Spanish-speaking (South and Central American) communities, the Sydney Cambodian and Arabic-speaking communities, and regional Victorian CALD communities.

It was soon clear that COVID could not be addressed in isolation. Community members often faced a raft of other issues that had not been adequately attended to, hindering their ability to respond to COVID's impacts effectively. Conversations with CLOs therefore broadened to topics such as general health and illness, aged care, disability support, financial struggles, housing needs, domestic violence, lack of food, and scams.

CLOs assisted older community members with paperwork, appointments, and other processes, so they could access support via My Aged Care, Centrelink, or elsewhere. They frequently acted as translators or interpreters, explaining things or writing out instructions in community languages. This included translating COVID information into understandable, everyday words. This was needed because translations governments had produced using blunt instruments such as Google Translate were often too formal, full of medical and scientific jargon, and sometimes nonsensical.

### **Results: Thousands of older people contacted, assisted and referred**

During the short project duration of the project, team members initiated over 12,000 phone calls or emails to community contacts. They also delivered more than 550 community meetings and presentations. These were high-quality, tailored, and often time-intensive communication endeavours, designed for meaningful impact.

In total, CLOs directly built relationships with, and assisted, 1923 older individuals among the six communities. A total of 1573 older people were directly referred to other support services to meet unmet needs. CLOs supported them throughout these processes and followed up to ensure there were no outstanding problems.

These numbers do not include the countless community members who were indirectly assisted by the program through the development of culturally and linguistically appropriate resources, community capacity building, and knowledge sharing. The intangible benefits of feeling seen and heard, understood, and supported by empathetic people with useful expertise, cannot be captured by these numbers either.

The program was highly successful and widely praised by its target communities. It only folded because funding was withdrawn in mid-2021.

### **Suggestions for future pandemic responses**

These many benefits only eventuated because of the assertive outreach approach by Community Liaison Officers who were already committed, active community members.

The program resourced CLOs with guidance as needed, but also with autonomy, training, CLO group communication, debriefing support, and good pay and conditions.

During future pandemics and other crises, programs on this model must be introduced early, and funded adequately, to support new and emerging CALD communities.

Shortcuts will not work, as our experience showed. For example, employing community workers from outside the target communities will not be effective at reaching vulnerable older people inside them. Similarly, setting up call centres and expecting older members of these communities to call into them is highly unrealistic given trust and language barriers. Direct, assertive outreach from people on the inside is the key.

Our CLOs possessed intimate, nuanced, experience-based knowledge of what is culturally and linguistically appropriate within their own community. They spoke community languages. They understood culturally inflected daily and weekly routines that enabled communication at the right time and place, rather than a hit and miss approach. They were embedded within community networks so were able to gain contact details of people in need and encourage word of mouth information sharing.

The CLOs were also chosen for their ability to engage in natural conversations on many topics with vulnerable older community members. This was essential to build the level of trust needed for community members to confide in them about sensitive matters, from depression to incontinence to elder abuse, and beyond.

A full report to guide future policy makers and program providers can be found at <https://nationalseniors.com.au/research/covid-19/all-australians-care-assertive-covid-19-outreach-into-new-and-emerging-cald-communities> and is also attached to this submission.

Yours Sincerely



**Chris Grice**

Chief Executive Officer

*Prepared by National Seniors Australia in conjunction with Ms Elleni Bereded-Samuel*