

Culturally and Linguistically Diverse Communities Health Advisory Group Meeting: 3 December 2024

The Culturally and Linguistically Diverse (CALD) Communities Health Advisory Group (Advisory Group) held its final meeting for the year on 3 December 2024.

DISCUSSION AND CONSIDERATION

The Department of Health and Aged Care (department) welcomed members to the third and final meetings for 2024.

The Honourable Ged Kearney MP, Assistant Minister for Health and Aged Care and Assistant Minister for Indigenous Health, provided opening remarks and expressed appreciation for the valuable contributions made by members. She also announced the extension of the Advisory Group for an additional 3 years. This extension will provide an opportunity to refine the role and strategic focus of the Advisory Group and will include annual reviews to ensure continued improvement of the health and wellbeing outcomes for multicultural people and communities.

Members discussed the outcomes from the roundtable and priority areas for improving health outcomes for multicultural communities held on 15 October 2024. Priority areas identified were:

- Improving health equity
- Strengthening community engagement
- Improving emergency preparedness
- Enhancing cultural competency and safety
- Improving data collection and utilisation
- Advancing health and systems literacy and recognising language
- Fostering community-led, co-designed approaches

A coordinated approach to achieving the priority areas and working collaboratively across Government were recommended by members. These will be reflected in revised Terms of Reference for the Advisory Group to be finalised in 2025.

Members discussed a proposed pilot project for 2025 on AI-supported translations for web content which aims to improve translation efficiency and maintain quality. Community feedback options will be included to evaluate content. Members were provided information on a recent pilot from the Department of Home Affairs who have launched a website translation service for <u>settling in Australia</u>.

Members were presented data on mental health service uptake and barriers to accessing mental health services in CALD communities. Data suggest that individuals from CALD communities are less likely to access MBS mental health services than non-CALD individuals. This gap also exists among CALD individuals for other conditions but is more pronounced for mental health conditions. This suggests stigma may be a barrier to access mental health services among CALD individuals. The department will continue to explore what factors influence CALD individuals' ability to access mental health services.

NEXT STEPS

The Advisory Group will hold its next meeting in the new year.

See <u>Culturally and Linguistically Diverse Communities Health Advisory Group</u> and <u>terms of reference</u> for more information.