



8 Principles for culturally inclusive and sensitive data practice

These principles were developed in consultation with the **Multicultural Health Advisory Group**

Accurate and accessible data is essential to improve health equity and outcomes for people and communities with CALD backgrounds.

“Without accurate and adequate data, these [CALD] communities risk becoming invisible, making it increasingly challenging to address their unique needs.”

– Federation of Ethnic Communities’ Councils of Australia

Data collection about CALD communities is still a significant challenge. These principles take into account the needs, interests and fears of specific populations.

Following these principles helps embed cultural sensitivity into our data practices and improve CALD data collection.

CALD Data Principles

Understanding cultural differences

- Take time to learn and understand the cultural nuances of the individuals or communities you are focusing on.
- Recognise the range of cultural norms, values and communication styles that might impact data sharing practices.

Privacy and consent

- Different cultures may have varying expectations regarding privacy. You

must consider different cultural norms and legal frameworks related to data privacy.

- Clearly communicate the purpose of data sharing and use data only for its intended purpose.
- For informed consent, an individual or community must have an adequate understanding of what they are agreeing to. You need to understand and consider their:
 - o cultural preferences for consent processes
 - o research literacy
 - o access to interpreters.
- Data custodians should assess each individual request for data, using the internationally recognised [Five Safes Framework](#).

Trust and relationship building

- Trust is essential for successful data sharing. Take time to build relationships with people and communities to understand their needs and concerns.
- Individuals and communities have a right to know how their data has been used. Share results and findings directly with participants. This builds trust, shows respect, and helps individuals and communities to feel valued.
- In communities with a history of exploitation, recognise this context and potential distrust related to data sharing.

Tailored communication

- Customise communication for each community and check it is culturally

safe. Consider language, tone, and the format of information sharing.

- Avoid stereotypes and assumptions. Remain open to feedback about the cultural safety of your communications.

Transparency

- Be transparent when communicating data sharing policies to build trust.
- Share information on how data is being used, who has access and how long it will be retained.

Inclusivity

- Ensure your data sharing practices are inclusive and consider diverse perspectives by seeking input from a range of stakeholders.
- Acknowledge power dynamics between different individuals and groups. Consider how to create an inclusive environment that values and enables contributions from all parties involved.

Flexibility

- Different cultures may have unique preferences for data sharing methods and tools. Offer flexible options to meet diverse needs.
- Allow data sharing agreements to be customised to align with cultural views.

Bias and fairness

- Regularly check data practices for potential biases and proactively address issues related to fairness and equity.
- Maintain ongoing communication with stakeholders to stay up to date with their concerns and experiences with data sharing.

The COVID-19 pandemic showed that public health responses were more effective when data collection and linkages were strengthened and informed by local knowledge.

Learn more about the Multicultural Health Advisory Group at [health.gov.au](https://www.health.gov.au) or contact the secretariat at MulticulturalHealth@health.gov.au

EXAMPLE OF PRINCIPLES IN USE

The COVID-19 pandemic exposed pre-existing gaps in planning and engagement with CALD communities. Mortality statistics for CALD communities were significantly higher than for the broader population. Analysis of COVID-19 vaccine uptake data showed lower rates of vaccination amongst CALD populations. Increasing vaccine uptake in CALD communities became a focus of national health and COVID-19 response plans.

Effective engagement and response strategies recognised the diverse needs of different cultures. They showed an **understanding of cultural differences** informed by **relationships and collaboration** with multicultural and community organisations, intermediaries and community leaders.

Tailoring communication was vital for success. Within the Greek community of Greater Melbourne, the main source of information on COVID-19 was word-of-mouth between family and community groups. However, some information being shared was incorrect, causing confusion and fear. To address this, public health agencies worked directly with community and religious leaders to provide accurate health messaging in their language of origin (Greek).