# Culturally and Linguistically Diverse Communities COVID-19 Health Advisory Group

**Update: 21 July 2022**

The Culturally and Linguistically Diverse (CALD) Communities COVID-19 Health Advisory Group (Advisory Group) held its 18th meeting on 21 July 2022. Members include leaders from culturally, ethnically and linguistically diverse communities and their representative organisations, health experts and medical and public health practitioners. The Advisory Group meets monthly and publishes a communique after each meeting. It has three Working Groups: the Communication Working Group, the Vaccination Strategy Working Group and the Data Working Group.

The Advisory Group plays a main role in supporting the Australian Government to provide an evidence-based response to the COVID-19 pandemic. It builds on the Department of Health and Aged Care’s long engagement with culturally, ethnically, and linguistically diverse stakeholders. The Advisory Group gives advice on the experience of multicultural people and communities during the COVID-19 pandemic. It recommends options to lessen the health impacts of COVID-19 on people and communities from multicultural backgrounds.

**Updates from the meeting**

Professor Michael Kidd AM, Deputy Chief Medical Officer, gave an update on the COVID-19 situation in Australia. COVID-19 cases and hospitalisations have been increasing in recent weeks, driven by the BA.4 and BA.5 subvariants of COVID-19. On 7 July 2022, [the Australian Technical Advisory Group on Immunisation (ATAGI) expanded eligibility](https://www.health.gov.au/news/atagi-updated-recommendations-for-a-winter-dose-of-covid-19-vaccine) for a fourth dose of COVID-19 vaccine. On 19 July 2022, [the Therapeutic Goods Administration (TGA) provisionally approved](https://www.tga.gov.au/media-release/tga-provisionally-approves-moderna-covid-19-vaccine-spikevax-use-children-6-months) the Spikevax (Moderna) vaccine for children aged 6 months to 4 years of age. ATAGI are considering the use of Moderna in this age group.

Paxlovid® (nirmatrelvir and ritonavir) and Lagevrio® (molnupiravir) are 2 COVID-19 oral treatments for patients with mild to moderate COVID-19 who have a high risk of developing severe disease. To access these treatments, patients need a prescription from an authorised prescriber such as a GP. Information on eligibility for these treatments is available on the [Department of Health and Aged Care website](https://www.health.gov.au/health-alerts/covid-19/treatments/eligibility).

Professor Kidd discussed working with the Advisory Group to support elderly people from multicultural backgrounds, including those in residential aged care facilities, to access COVID-19 vaccines and treatments.

Professor Kidd noted that the monkeypox virus was identified for the first time in Australia in May 2022. The population risk in Australia is low. National expert groups have developed guidelines about monkeypox. The department is focusing on public health messaging and is working with state and territory counterparts for a coordinated response.

The Hon Ged Kearney MP, Assistant Minister for Health and Aged Care, acknowledged the work that the Advisory Group and peak multicultural organisations have done to ensure multicultural communities are prioritised in the COVID-19 response.

Assistant Minister Kearney emphasised the importance of focusing on multicultural health and looks forward to working in partnership with the Advisory Group throughout its extension to 31 December 2022.

The Hon Andrew Giles MP, Minister for Immigration, Citizenship, Migrant Services and Multicultural Affairs, addressed the Advisory Group. Minister Giles noted the pandemic has shown that a ‘one size fits all’ approach does not work in healthcare. The Australian Government is taking a strengths-based approach to supporting multicultural communities. Minister Giles emphasised the government’s commitment to improving data on diversity in Australia’s population and to being closely connected to the Advisory Group.

Members discussed access to COVID-19 testing and noted difficulties for some large households in accessing rapid antigen tests. GP Respiratory Clinics and some state and territory clinics continue to provide free PCR testing. Members discussed incentivising the use of interpreter support in healthcare settings. Members welcomed the government prioritisation of mental health and noted the importance of integration across the health portfolio.

The Department of Home Affairs gave an update on COVID-19 vaccination for recent humanitarian cohorts. Home Affairs is using arrival and pre-departure medical checks as opportunities to offer COVID-19 vaccination to clients. Home Affairs is working with the United Nations High Commissioner for Refugees and the International Organisation for Migration to address vaccine hesitancy and with humanitarian settlement providers to distribute translated information on COVID-19 vaccination.

The department discussed preventive health measures for multicultural communities and the [National Preventive Health Strategy 2021-2030](https://www.health.gov.au/resources/publications/national-preventive-health-strategy-2021-2030). The 2022-2023 Budget includes $10.6 million over two years (2022-23 to 2023-24) to support a tailored CALD preventive health communications campaign. The department welcomed Advisory Group members to advise on the approach to engagement.

The Advisory Group discussed COVID-19 positive case data in the National Interoperable Notifiable Diseases Surveillance System (NINDSS). The fields ‘Country of Birth’ and ‘Main Language Spoken at Home’ were added on 28 October 2020 on advice from peak multicultural organisations. Representatives from state and territory health departments discussed how their jurisdictions have been collecting this data. The department and Data Working Group will work with the jurisdictions to strengthen data collection and consistency.

The department presented the latest analysis of COVID-19 vaccine coverage among CALD populations, using 2021 Census data for the first time. The new data shows higher uptake of first and second dose coverage. However, broad trends in vaccine coverage did not change with the switch from 2016 Census data. Uptake of third doses is slower than first and second doses for the general population and is more acute in some CALD population groups.

The department discussed COVID-19 communications for multicultural audiences. The department launched a COVID-19 oral treatments campaign and continues to translate and adapt communications for multicultural audiences. Messaging on COVID-19 vaccination and COVID-19 safe public health behaviours continues to be priority. Members discussed increasing distribution of messaging, including through childcare networks and schools. Members discussed strengthening messaging about rapid antigen testing.

The Multicultural Centre for Women’s Health (MCWH) presented the national COVID-19 vaccine bicultural health educator program, ‘Health in My Language’. MCWH has worked with partner organisations to recruit and train 44 bicultural health educators. MCWH is working with partners to deploy the educators to conduct community engagement activities and have culturally safe conversations about COVID-19 vaccines with people of all ages and genders across Australia.

The National COVID Vaccine Taskforce (the Taskforce) will work out-of-session with the Advisory Group to update the Advisory Group work plan to include priorities up to 31 December 2022.

The Taskforce thanked members for their time. The Advisory Group will hold its next meeting on 19 August 2022.

See [Culturally and Linguistically Diverse Communities COVID-19 Health Advisory Group](https://health.gov.au/committees-and-groups/culturally-and-linguistically-diverse-communities-covid-19-health-advisory-group)and [terms of reference](https://www.health.gov.au/resources/publications/terms-of-reference-culturally-and-linguistically-diverse-communities-covid-19-health-advisory-group) for more information.