



The Ethnic Communities' Council of Victoria

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Mental Health and Wellbeing for
Victoria's Multicultural
Communities Under
COVID-19

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The immediate and long-term wellbeing impacts of the COVID 19 pandemic have been widely recognised by both the Commonwealth and Victorian State Government. A whole-of-community approach that considers well known social determinants of health and pandemic-related stressors and continued reforms towards culturally responsive mental health systems, will be vital to ensure that individuals and communities from all backgrounds are safe.

Introduction

Beyond physical health, social and economic implications, the COVID-19 pandemic has created a major challenge to mental health systems worldwide^[1], with people experiencing fear, anxiety, loneliness, financial and family stressors associated with the pandemic and the measures needed to contain it. In Australia, the rise of mental health as a priority in the public agenda has been evident through the Federal Government's January announcement of a \$500 million package of measures to support mental health and suicide prevention. An additional \$48.1 million was recently announced to support the Mental Health and Wellbeing Pandemic Response Plan.^[2] The Victorian Government's \$59.4 million coronavirus mental health package has seen a further \$19.5 million in funding to deliver essential reform recommendations from the Royal Commission into Victoria's Mental Health System (RCVMHS) interim report and to help flatten a potential second curve of mental ill-health.^[3] As we prepare for cycles of lockdown, economic downturn, and worsening conditions in the labour market - all stressors of mental health - it is critical to plan for a context in which mental health remains a central focus in public policy.

This Issues Brief focuses on the immediate consequences for groups within Victoria's culturally and linguistically diverse (CALD) communities, especially in regard to implications for mental health and wellbeing. New migrants and people of refugee background, for instance, are known as groups who experienced barriers to access quality mental health care prior to the pandemic. With the COVID-19 pandemic, this gap has been amplified. The emergency responses from Commonwealth and Victorian State governments, at times by design (as in the Federal decision to exclude temporary visa holders from emergency financial assistance) and, in other cases, unintentionally, have accentuated existing inequities.

Mental Health Impacts of COVID-19

As the whole community faces the challenge of managing multiple stressors simultaneously, there has been a surge in research looking at the varied impacts of the pandemic on mental health.^[4] While for many individuals, this will be mild and transient, for others, this can manifest in short-term mental distress or long-term decline in mental health and wellbeing.^[5] It is well known that Victorians from culturally and linguistically diverse backgrounds are affected by a number of systemic barriers when seeking and accessing mental health assistance.^[6] People's experiences of the pandemic are likely to differ depending on environmental, demographic, social, cultural and individual factors. The pandemic has amplified some of the existing barriers for CALD communities due to challenges in access to accurate, timely information, disruption in trusted community networks, and lack of culturally responsive mental health services and supports.

Community experiences vary under COVID-19

People from migrant and refugee communities may experience specific mental health needs relating to their pre and post migration experiences of traumatic events, discrimination based on various identity markers or social locations; to language and communication barriers; to economic inequity and psychosocial stress, to the impacts of acculturation and to community attitudes towards migration and settlement.^[7] People who have experienced past hardship, such as food shortages or isolation, may be vulnerable to heightened negative psychological impacts of the pandemic. At the same time, concerns with and ability to support vulnerable family members overseas often impose an additional pressure. People on temporary visas, for instance, may be worrying about how they will be able to support themselves as well as their family and relatives at home.^[8]

The intersection of being young and of a migrant or refugee background has also meant the economic impacts on these young people have been disproportionately severe. According to a recent survey by the Centre for Multicultural Youth, many of the young people who were searching for employment prior to COVID-19 also reported a loss of confidence and lack of motivation in the current labour market and negative impacts on how they see their future aspirations.^[9] Moreover, for some young people from refugee and migrant backgrounds the pandemic led to an increased level of responsibility in their families, including translations, care roles, and financial pressure.^[10]

Under COVID-19, concern for older family members has been high, and this can build on some existing disadvantage for older CALD Australians because of language barriers, lack of awareness of available services, a mistrust of government institutions, limited access to the internet, and lack of both skills in, and access to, information technology.^[11] ECCV has heard from various groups how social isolation has interrupted many community-based initiatives that used to function as the fundamental source of social connectivity for many ethnic groups, including seniors but also families to whom these gatherings offered a deeper sense of belonging.

Women

Women are bearing a large brunt of the stress in the home as well as other gendered impacts of COVID-19. Women disproportionately represent those who under the pandemic have experienced an accumulation of duties, such as those related to working from home, care responsibilities, home schooling and working simultaneously.^[12] Women and children have also experienced increased domestic violence and abuse during the pandemic. InTouch, which provides services to migrant and refugee communities in Victoria experiencing family violence, have reported increased demand for their support under COVID-19; and have noted difficulties reaching women who are under restrictive conditions at home with abusers; as well as challenges with changing and limited referral pathways. Women who are on spousal/partner visas, skilled workers or dependents, student visas, and tourist/visitor visas in Australia, face additional layers of disadvantage when they experience family violence, with barriers to accessing support services ranging from eligibility, connection with local institutions, language and in some situations, full dependency on perpetrators due to their visa terms.^[13]

Temporary visa holders, including International students

For people seeking asylum with insecure visas, the state of prolonged uncertainty is often related to poor mental health outcomes.^[14] Temporary visa holders have not been able to access support packages from the Commonwealth government (see also - ECCV Employment Issues Brief). This includes approximately 200,000 international students who choose to study in Victoria. In April ECCV hosted a meeting with local councils, student associations and unions, ethnic and community groups, and education providers, students and governments, to discuss the fragile situation international students are facing. Lack of political leadership, loss of casual employment, accommodation insecurity, social disconnection, concerns with visa termination, combined with the restrictions to travel that impede them from reuniting with their family overseas, were all identified as stressors for these young people. Whilst some education providers provide access to counselling services, international students are not eligible for many government services and packages that can support mental health needs.

Access and equity issues relating to information and service provision

For people whose English is not proficient, regular access to clear and timely information has been a challenge. From the outset of the pandemic, providing official updated information in various available languages and connecting it with those channels most likely to reach out to different community groups, requiring government to work closely with community organisations and associations, community leaders, faith leaders, schools and youth groups, has been uneven.^[15] The transition to digital service provisions has also meant that access to telehealth, including online mental health services, is not always easily accessible when an interpreter is required. ECCV also heard that many households do not have adequate internet access or computers. With public libraries closed, limitations on access increased for some groups, there is rising concerns about their disconnection from information.

Racism

Racial discrimination is well known to damage mental health.^[16] Reports of racism and xenophobia have increased under the pandemic with racial abuse and other unfair treatment on the street, directed to workers, people on public transport or online, and targeted at specific communities in the media.^[17] Racism is insidious and systemic, with psychological impacts felt individually and collectively by affected communities. Racism adversely affects people's relationships, careers, health, and sense of belonging. The psychological impacts of racism can be cumulative and experienced personally or collectively over time, and can hurt all facets of community life.

Responses to mental health under the pandemic

Victorians of migrant and refugee background already experience limitations to access of quality mental health care. A major concern for the community is that even before the pandemic, the mental health system was described as 'broken' - borne out through the Productivity Commission and the RCMHS evidence and interim reports. While there have been specific mental health responses, such as the Commonwealth and state mental health packages, it is important that government initiatives continue to meet mental health needs in the community.

Similarly, State and Commonwealth funding schemes for employment support need to be maintained, as employment is a key determinant of mental health. The Victorian Government has provided additional funding to the RCMHS^[18] to start implementation of its interim report recommendations. ECCV sees the recommendations for mental health system reform flowing from the RCMHS as the best opportunity to ensure the government targets reforms for the delivery of equitable, inclusive and culturally safe mental health services.^[19] We hope that the Royal Commission takes on board for its final report the submissions by ECCV and others, such as those cross-sector organisations who, as part of the Victorian Transcultural Mental Health Reference group, recently made concrete recommendations at a roundtable focused on the transcultural mental health context.

Whilst many people have experienced the adverse impacts of the pandemic to their daily lives, there are also experiences of emerging psychosocial community supports and sources of resilience. Amongst Victoria's multicultural communities, there have been a range of collective responses offering informal support to one another. For example, a diverse range of activities from education support, food relief and legal support, have been set up to try to help international students and other vulnerable groups in our community, with many community groups and associations, as well as small business and local councils, have turned their efforts to food security and other relief efforts such as in Moreland^[20] and Whittlesea.^[21] It is challenging to coordinate relief initiatives with other local actors and agencies in any one area, hence demonstrating the central role local councils can play.

Where people have adequate internet access, people's mental well-being has been supported through the creation of online support groups and social communities to share important information, reinforce social connectedness, to disseminate positive messages of hope and unity, and to mobilise community volunteers to assist those who need help. Many community initiatives are self-funded and rely on voluntary contributions. Some community associations, like the Women's Association South East Melbourne Australia (WASEMA), made adaptations to the group to provide connections that supported mental health and wellbeing, offering online information sessions on keeping well and connected, dance and other health related activities.

Preventing a long-term upsurge in people experiencing mental health problems is needed as impacts are likely to continue to challenge our communities and the system that supports opportunities for recovery and resiliency. It is important, now more than ever, to strengthen supports to community, especially for priority groups to help prevention, and positively promote community mental health and well-being. It is well known that community organisations and leaders can be invaluable partners in the work to address stigma and to promote mental-health literacy, and they should be engaged both in policy debates and service design.

ECCV Recommendations

ECCV recommends that:

- 1** Federal and state governments fund and increase engagement and collaboration with community groups, representatives and other trusted intermediaries for the community, in communication strategies relating to public health information.
- 2** The Federal Government extends Coronavirus emergency relief support eligibility to people currently on temporary visas.
- 3** The Victorian Government prioritises implementation of those recommendations by the RCMHS that promote equity for Victoria's migrant and refugee communities to ensure a trauma-informed and culturally responsive mental health system for all Victorians.
- 4** The Victorian Government and service providers work with members of different communities, ensuring the meaningful participation of CALD community members in the design and delivery of mental health services.
- 5** Federal and state governments provide ongoing financial support to community-led initiatives that are aimed at reducing the stigma around mental illness in migrant and refugee communities and improving knowledge of mental health services; as well as psychosocial programs that are initiated by community to support well-being.

Endnotes

- [1] UN 2020, website, <https://www.un.org/en/coronavirus>
- [2] See: <https://www.health.gov.au/ministers/the-hon-greg-hunt-mp/media/covid-19-481-million-for-national-mental-health-and-wellbeing-pandemic-response-plan>
- [3] See: The Victorian Premier - Mental Health, <https://www.premier.vic.gov.au/tag/mental-health>
- [4] See for instance the Transcultural Mental Health Centre website: <https://www.dhi.health.nsw.gov.au/transcultural-mental-health-centre-tmhc/news-and-events/research-on-the-impact-of-covid-19-on-mental-health-and-wellbeing>
- [5] McGorry, P. (June 29 2020) We all need to work to flatten the mental health curve. The Australian; National COVID-19 Health and Research Advisory Committee (19 May 2020) Mental health impacts of quarantine and self-isolation. Australian Government.
- [6] In its submission to the Royal Commission, ECCV noted a number of systemic barriers: Psychological impact of systemic discrimination; stigma and shame about mental health difficulties; lack of accessible translated information about mental health services or lack of provision of interpreters routinely when needed; culturally responsiveness and trauma informed care practices are not embedded in routine practice, processes and procedures of the mental health system; and lack of consultation and collaborations with communities.
- [7] VTMH Reference Group, May 28 2020, Roundtable discussion on transcultural mental health with the RCMHS, VTMH.
- [8] VTMH Reference Group, May 28 2020, Roundtable discussion on transcultural mental health with the RCMHS, VTMH.
- [9] Centre for Multicultural Youth (2020), Locked down and locked out? The impact of COVID-19 on employment for young people from refugee and migrant backgrounds in Victoria, Melbourne, CMY.
- [10] Ibid.
- [11] FECCA (2015) FECCA's 2020 Vision for Older CALD Australians. Federation of Ethnic Communities' Councils of Australia.
- [12] True, J. Why gender matters impact and recovery of Covid-19. The Interpreter, The Lowy Institute, <https://www.loyyinstitute.org/the-interpreter/why-gender-matters-impact-and-recovery-covid-19>
- [13] See: March 2020 report prior to the pandemic; and InTouch, April 2020,
- [14] Angela Nickerson, Yulisha Byrow, Meaghan O'Donnell, Vicki Mau, Tadgh McMahon, Rosanna Pajak, Susan Li, Amber Hamilton, Savannah Minihan, Candy Liu, Richard A. Bryant, David Berle & Belinda J. Liddell (2019) The association between visa insecurity and mental health, disability and social engagement in refugees living in Australia, *European Journal of Psychotraumatology*, 10:1, DOI: 10.1080/20008198.2019.1688129
- [15] ECCV and FECCA have been advocating to and working with government departments for improved multilingual information and community engagement. This issue was also raised by the NCHRC May 21 2020 report 'Risks of resurgence of Covid-19 in Australia'. <https://www.nhmrc.gov.au/about-us/leadership-and-governance/committees/national-covid-19-health-and-research-advisory-committee>
- [16] See: Blair K, Dunn K, Kamp A, & Alam O, 2017. Challenging Racism Project 2015-16 National Survey Report. Sydney: Western Sydney University. <https://www.westernsydney.edu.au/_data/assets/pdf_file/0009/1201203/OMAC1694_Challenging_Racism_Report_4_-_FINAL.pdf>; Ferdinand A, Paradies Y, Kelaher M, 2015. Mental Health Impacts of Racial Discrimination in Australian Culturally and Linguistically Diverse Communities: A cross-sectional study. *BMC Public Health*, 15 (401), p.12.;
- [17] Victorian Human Rights Commission 2020; ECCV 2020
- [18] The Royal Commission into Victoria's Mental Health System (RCVMHS) website, <https://rcvmhs.vic.gov.au>
- [19] See: <https://www.premier.vic.gov.au/59575-2/>
- [20] Moreland Council website, <https://www.moreland.vic.gov.au/community-health/advocacy-services/housing-and-employment/food-relief/>
- [21] Whittlesea Council website, <https://www.whittlesea.vic.gov.au/coronavirus>; & Whittlesea Community Connections website, <https://www.whittleseacommunityconnections.org.au/emergency-relief-and-casework.html>;