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# Rapid qualitative assessment of COVID-19 health needs in urban Sydney Aboriginal communities: report 1

## Why we did the research

- » Rapid qualitative research methods are commonly deployed in complex health emergencies to identify the health and service needs of populations. In NSW, Aboriginal community-controlled organisations, and other Aboriginal services, have responded rapidly and effectively to the COVID-19 threat by drawing on the strengths in communities to care for each other. This research was funded by a NSW Ministry of Health COVID-19 extension grant, as a way to provide rapid evidence to support community and other responses, using strengths-based research approaches.

## How we did the research

- » Data were collected using a peer-led interviewing method in which Aboriginal young people were trained to conduct interviews with others in their community about their experiences of and perspectives on COVID prevention and health needs.
- » The findings reported are based on 30 in-depth interviews, which include 18 interviews with Aboriginal young people and 12 follow-up debrief interviews conducted by researchers. Data are collected as third person accounts and are intended to describe the experiences and opinions of the Aboriginal people and families in the networks of participants. Further information about the research method is available in a substantive research report available from the Centre for Social Research in Health.

## Where we did the research

- » The research was based in the Campbelltown area in southwest Sydney, NSW. Local Government Area (LGA) data from this area tells us that 3.8% of the population is Aboriginal or Torres Strait Islander, but this varies throughout the LGA, with 17.6% of people identifying as Aboriginal in one suburb<sup>1</sup>. The socioeconomic status of the area varies, too. The LGA is slightly below average for the whole of Australia, being in the 4th lowest decile in the SEIFA<sup>2</sup> index, but some suburbs are ranked in the lowest 10% in the country.
- » There is a well-established Aboriginal Community-Controlled Health Service in the area that partners with other local health services to provide high quality care to Aboriginal people in the area.

## Who we included in the research

- » The 18 participants were aged 16 to 24 years and included 13 young women and 5 young men. 12 were attending high school at the time, and the others were studying at a tertiary level. Seven were engaged in employment and for most this was casual part-time work. 13 of the young people were living with family members. The number of people in their households ranged from 2 people to 9 people.

## When we did the research

- » The interviews were conducted through July and August 2020. At the time, the south western Sydney area, which includes Campbelltown, was experiencing a COVID-19 outbreak linked to the high and escalating case numbers in Melbourne. There was concern that the outbreak in south western Sydney could escalate as it had in Melbourne.

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<sup>1</sup> Australian Bureau of Statistics, Campbelltown Local Government Area Census Community Profiles and Aboriginal and Torres Strait Islander Peoples Profile, 2016.

<sup>2</sup> Socio-economic Indexes for Australia: Index of Relative Socioeconomic Advantage and Disadvantage, from Australian Bureau of Statistics, 2018, Socio-economic indexes for Australia, 2016, cat. no. 2033.0.55.001

## What does the research tell us we need to do...

Develop health promotion messages that say, "It's OK to go out" and that give people strategies to be COVID safe while out

When asked how people in their communities protect themselves from COVID-19, the participants all mentioned staying home.

*Staying home is probably your most effective protective measure, just try not to go out if you can.*

But staying home also has had strong, negative consequences. Participants told us that being connected with their families and communities, and being part of community events like NAIDOC, are important. The hardest aspect of COVID has been the disruption to these social connections.

*How do you feel about COVID? Um well, my family, they absolutely hate it. They were social butterflies and now they're not really social anymore. Yeah. I think just Aboriginal communities, they're very social and they love to be out and about. And due to COVID that's not really been - like you can't do that. I think everyone has struggled with it.*

Some participants were particularly concerned about the potential impact on mental health if community members continued to remain isolated.

Participants took COVID safety very seriously and described how strategies such as wearing masks, social distancing and hand hygiene were all important. However, staying home was seen to be the main protective strategy.

Health promotion messages that explain how to go out safely would help community members maintain their important social connections. In addition, hosting COVID-safe community events would help promote this message, and provide examples for how to be COVID-safe in the community.

Develop health promotion messages that assure people about the safety of health services and clinics and continue telehealth services

Participants told us there was widespread caution in their communities about visiting health services during the COVID-19 outbreak. People were concerned there would be a higher likelihood of contracting COVID-19 in a doctor's surgery, hospital or clinic, because there they would be most likely to encounter people with the virus.

*I thought I might be getting sick and my mum wanted me to go to the doctor's. But at the same time she didn't, because the doctor's is where everyone that has corona is, you know.*

By way of response, health promotion messages could explain that health services are COVID-safe, and how community members can visit clinics safely. This is especially important due to the higher levels of care needed and provided by Aboriginal people in the Campbelltown area. The LGA data identifies that 10% of Aboriginal people in the area said they needed assistance, and 16% said they provided such assistance<sup>3</sup>. This compares to 6% and 12.5% respectively in the whole of the Campbelltown community.

Participants reported that some community members, particularly younger people, have found telehealth to be a useful alternative to face to face visits. But many also thought that telehealth was a poor substitute for in-person health care, and for some, entirely unworkable due to a lack of trust, limited access to technology, the importance of interpersonal interactions which were not so well expressed via telehealth, and a belief that doctors will be unable to make proper diagnoses remotely.

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<sup>3</sup> Australian Bureau of Statistics, Campbelltown Local Government Area Census Community Profiles and Aboriginal and Torres Strait Islander Peoples Profile, 2016.

Help people travel safely by providing community transport for vulnerable people and strongly encourage mask wearing on public transport

Participants observed that attending medical appointments and social gatherings were particularly difficult for older people and more vulnerable community members who rely on public transport. They regarded public transport as a particularly risky environment for contracting COVID-19.

*Buses in particular are a huge, huge vehicle for bacteria, so, there's obviously a lot of, a lot of just being scared.*

Community transport could help people travel to essential health services. Providing free masks at key public transport hubs in low income areas, such as major train and bus stations, would simultaneously improve access to appropriate masks and send a message that mask use is expected on public transport.

Provide easily accessible testing at trusted services, and promote testing as a way for communities to protect themselves and keep each other safe

Of all the health promotion strategies that participants discussed, COVID-19 testing was described as the most confusing and complex. The participants explained that they believed most people understand where and when to seeking testing, but that

- » Testing is unappealing because of the process:

*I think people are more worried about getting the test, like no-one wants a stick up their nose.*

- » Arranging to be tested is logistically difficult because of caring responsibilities, transport and transport costs, waiting times etc:

*[They have] to try and figure out transport or if they have kids [...] they have to figure out who's going to look after them and, you know, how long it's going to be or if they need to have money [...] and that person can't go because of all these things they need to figure out.*

» Some are concerned they could contract COVID-19 at testing facilities:

*Because of COVID people have been too scared to actually go to [for testing at] medical centres and hospitals to actually contract COVID. So, you know, the drive-in ones are okay.*

Testing facilities in local, easily accessible, and trusted locations are the most likely to be used. Some participants reported that community members did not trust mainstream health institutions, preferring Aboriginal controlled services.

*Indigenous people are already pretty sceptical of going to doctors, at least I've found. A lot of people are sceptical until like um they're aware of like an AMS within the area.*

The participants explained that community members particularly valued the drive-through testing clinic that had been set up at the local Aboriginal Medical Service because of the mutual trust and understanding they experience there:

*Even like the AMS have a testing facility for COVID [...] and I think that was a good thing to have as well. [...] because it's an AMS they understand like, a little bit more about their patients because, you know, it's people that have been going there for years. And it's Aboriginal identified, like, so, they know what, like how our bodies are and how they react to certain things..*

Promotional campaigns such as the AH&MRC's #swabformob are important for keeping testing rates high in the community, especially because they draw on sentiments of collective care and the need to keep Elders and culture safe and strong. Ensuring that such campaigns are widely disseminated will be important.

Develop communication campaigns that explain how to isolate while waiting for test results

There was confusion around the need to isolate while waiting on test results. Participants explained that isolating within the house was usually impossible:

*It's just like, as much as it's we need to be able to self-isolate, it's essentially impossible. After my COVID test when I came home, like there was no way I would be able to separate myself from [my housemates], like we live in the same house. Like what, what am I meant to do? I don't have a separate ensuite and a separate kitchen.*

Communities need clear messages about how to isolate in a busy house with one bathroom. The households in which Aboriginal people live in the Campbelltown area are, on average, larger than non-Aboriginal households, and, the Australian Bureau of Statistics estimates that 10% of Aboriginal dwellings need an additional bedroom compared to 5% of non-Aboriginal dwellings<sup>4</sup>.

In addition, there was concern about the impact on the employment of other household members, if many people needed to isolate.

*Being able to self-isolate is definitely something that I think like everyone may be concerned about. Especially when you have heaps of people underneath your roof, like in an Aboriginal community. I know it's like an acute worry in my opinion. Because I've seen people, they've had to provide for their family members in that time, and had to help them out with that medical complications.*

Health guidelines currently require only the 'suspect case' to isolate while waiting on test results<sup>5</sup>. Education is needed for community members, health services and testing staff to ensure this is clearly communicated, and adapted as and when these guidelines change.

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<sup>4</sup> Australian Bureau of Statistics, Aboriginal and Torres Strait Islander Peoples Profile, 2016.

<sup>5</sup> <https://www.health.nsw.gov.au/Infectious/factsheets/Pages/advice-for-suspected.aspx>

This report was prepared by Dr Megan Blaxland and Associate Professor Joanne Bryant.

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Research team: Associate Professor Joanne Bryant, Dr Megan Blaxland, Ms Kristy Gardner, Mr Mitch Beadman, Professor Reuben Bolt, Dr Michael Doyle, Dr Simon Graham, Associate Professor Christy Newman, Dr Dean Murphy, Dr Stephen Bell, Ms Karen Beetson, Ms Jess Wilms, Ms Kaysan Penning.

Organisations: UNSW Sydney, Charles Darwin University, University of Sydney, University of Melbourne, South Western Sydney Local Health District, Nepean Blue Mountains Local Health District

For more information about this project, visit:

[arts.unsw.edu.au/csrh/our-projects/covid-19-health-needs-aboriginal-communities-nsw](https://arts.unsw.edu.au/csrh/our-projects/covid-19-health-needs-aboriginal-communities-nsw)

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