STRATEGIC DIRECTIONS FOR THE
NSW MULTICULTURAL HEALTH
COMMUNICATION SERVICE

2012-2015
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Foreword

The NSW Multicultural Health Communication Service (MHCS) fills an important role in the NSW health system. It increases access to health services for people whose first language is not English by providing them with the same health information as the rest of the NSW population. The Service’s website receives over 5 million hits per year from consumers seeking good practice information about accessing Culturally and Linguistically Diverse (CALD) communities and searching for multilingual health resources.

The NSW Multicultural Health Communication Service provides leadership and expertise in the development, implementation and evaluation of various good practice multilingual social marketing and health communication initiatives, such as the establishment of the first Multilingual Quitline in Australia.

Strategic Directions 2012-2015 presents a coordinated approach by the MHCS which will create new partnerships while consolidating those already in place. These partnerships will be critical in the development of culturally appropriate communication strategies to improve access to information and services for CALD Communities.

The Service ensures that all people from CALD communities in NSW have access to high quality information about using the health care system, including the diagnosis, treatment and self-management of significant health problems and ways to prevent illness/injury and premature death.

I endorse this document and recommend its strategies.

Mary Foley
Director-General
NSW Ministry of Health
January 2012
Message from the Chief Executive

Whilst the NSW Multicultural Health Communication Service (MHCS) is a state-wide service hosted by the South Eastern Sydney Local Health District, MHCS can only achieve its aims through a close working relationship with the newly established Local Health Districts (LHDs).

It is pleasing to note that this document reflects a commitment to close collaboration with LHDs. LHD Multicultural Health services and LHD staff who work directly with non English speaking patients/clients utilise the resources of Multicultural Health Communication, and are in the best position to ensure that those patients/clients receive information about important health issues and health services. By involving LHD staff in both the developmental stage of information as well as the implementation of social marketing and communication strategies, MHCS will ensure that its products and resources are of most value to its consumers.

South Eastern Sydney Local Health District is pleased to host this important Service and I endorse its Strategic Directions 2012-2015.

Terry Clout
Chief Executive Officer
South Eastern Sydney Local Health District
January 2012
Message from the Director

I am pleased to present the *NSW Multicultural Health Communication Service’s Strategic Directions 2012-2015*. NSW Multicultural Health Communication Service (MHCS) is charged with the responsibility of ensuring that Culturally and Linguistically Diverse (CALD) communities in NSW have access to high quality multilingual health information. It does this by undertaking social marketing campaigns, developing new communication models, providing a translation service, project management and social research in conjunction with key tertiary institutions. MHCS also runs a multilingual website with health content in 50 languages. The site receives at least 5 Million hits per year.

MHCS also works in partnerships with the Ethnic Medical Associations, CALD organisations, the media and the Local Health Districts (LHDs). The service has in place feedback loops from and to CALD communities. A Multilingual Information Committee and the Service’s Advisory Committee also serve in providing direction and ongoing advice to ensure MHCS relevance and concentrates on key focus areas.

The reorganisation of the Area Health Services into LHDs, the development of the new Pillars and the restructuring of the NSW Ministry of Health, presents MHCS with great opportunities to strengthen existing links and forge new partnerships.

Over the next three years MHCS will ensure that a comprehensive framework of partners is established with CALD communities, including emerging communities as well as Government and non government services and organisations.

I also wish to thank the MHCS Advisory Committee, the Multilingual Information Committee and the MHCS staff for their input, commitment and creativity when it comes to working with CALD communities in NSW.

Thank you!

Peter Todaro  
Director, Multicultural Health Communication Service  
January 2012
Executive Summary

The NSW Multicultural Health Communication Service (MHCS) works with health services across NSW to ensure that non English speakers have access to appropriate information about health. MHCS improves the access of Culturally and Linguistically Diverse (CALD) communities to health information and services, and informs non English speakers about the health priorities of the NSW Ministry of Health (MoH).

Since the establishment of MHCS in 1997 there have been some major achievements including:

- Expansion of the MHCS website to include audio visual information in languages other than English.
- Establishment of the Multicultural Health Communication Awards, a biennale award that recognises good practice in the development of multilingual health resources across NSW.
- Regular production and publication of new material, together with a review system to ensure currency.
- Australian Institute of Interpreters and Translators Excellence Award (AUSIT) for the development of guidelines towards good practice adapting English language radio commercials.
- National Multicultural Marketing Award (Government Category, 2007) for MHCS’s work on “Raising Kids Together” campaign targeting emerging communities from Afghanistan, Iraq and Sudan to reach families with a child or young person with a disability.
- National Multicultural Marketing Award (Advertising Category, 2006) for MHCS’s work with the National Breast Cancer Centre on a breast cancer awareness campaign in Arabic, Chinese, Greek, Italian and Vietnamese communities using testimonials from women from CALD groups who have survived breast cancer through early detection (mammograms).
- Establishment of the first multilingual Quitline in Australia in 7 languages.
- Campaigns to increase calls to language-specific Quitlines from 20 calls a year to 550 calls.
- Successful bids for competitive research projects including joint national research work with the Dementia Collaborative Research Centre of University of NSW on Dementia Awareness and recognition with first and second generation communities from Chinese, Greek and Italian backgrounds.
- Coordination of the NSW Multicultural Health Week.
- Partnerships with the State Library of NSW and Local Government and Shires Association to disseminate multilingual health resources.
- Provision of advice and delivery of projects to a range of Government agencies including Andrology Australia, Cancer Institute NSW, Ageing, Disability and Home Care, Council for the Ageing, Commonwealth Department of Health and Ageing and NSW Ministry of Health.
- MHCS administers the Resource Distribution Unit on behalf of the Centre for Health Advancement, NSW MoH.
Key Goals of the NSW Multicultural Health Communication Service

The current plan identifies 7 key goals which the NSW Multicultural Health Communication Service (MHCS) will focus its core business activities in the next three years.

The goals are to:

i. work with the newly established Local Health Districts (LHDs) to improve the access of CALD communities to relevant and timely multilingual health resources and social marketing initiatives at a local and state level,

ii. develop and consolidate the relationship with individuals, policy units and relevant structures within the newly restructured MoH to ensure the inclusion of CALD issues in all workings of the Ministry,

iii. create or maintain partnerships with significant state-wide government and non government organisations (NGOs) to develop and implement multilingual initiatives for CALD communities in NSW,

iv. expand strategic relationships with ethnic/non English language media and groups interested in working with ethnic media, including social media to deliver health related information to CALD communities,

v. identify, document and distribute the principles and processes which ensure best practice standards in developing communication strategies for health and CALD communities,

vi. build the capacity of the MHCS by seeking additional resources and reorganising the service to be streamlined and complementary to CALD service across the state, and

vii. continue to seek evidence to ensure CALD communities are represented and included in local and state initiatives.
1. Introduction

Strategic Directions for Multicultural Health Communication Service 2012-2015 sets out the activities and initiatives of the NSW MHCS and the rationale for the directions of its work in the next three years.

It begins with a history of MHCS including the achievements since the last plan, the rationale for this type of service, and an outline of the work undertaken in the development of this document. It is followed by a list of the goals and broad strategies for realising these goals over the next two years.

The document is intended primarily for public health practitioners and health service managers within the MoH, Local Health Districts LHDs and relevant NGOs. Business plans will also be developed for each financial year and annual reports will follow the terms specified in the business plan.

MHCS has 8.5 full time equivalent positions including a director, a marketing and communication manager, a systems manager, a senior project officer, three full time project officers, a part time project officer and an administration officer.

MHCS has a state-wide brief, is located on the grounds of Gladesville Hospital, and is hosted by the South Eastern Sydney Local Health District. The Director of MHCS is administratively responsible to the Director of Operations, Ambulatory and Primary Care who in turn reports to the Chief Executive.

The service is advised and guided by an Advisory Committee in relation to MHCS’s directions and outcomes.

The Committee reflects the state-wide focus of the service and includes Area Multicultural Coordinators, representatives from the MoH, Central Sydney GP Division, Diabetes Australia NSW, Australian Chinese Medical Association, and the Director of Primary and Ambulatory Care, South Eastern Sydney Local Health District.

MHCS also takes advice from a subcommittee (Multilingual Information Committee) that has state-wide representation from staff working in multicultural health. The role of this committee is to ensure MHCS is always well informed on the needs of CALD communities in relation to multilingual information.
2. Policy Context and Rationale of the Service

2.1 Policy context

The rationale for the establishment of the NSW Multicultural Health Communication Service (MHCS) was based on recommendations from the 1995 Health Services for a Culturally Diverse Society. The plan identified the need for the development of a co-ordinated state-wide approach to reach people who speak languages other than English, particularly those living in rural areas. MHCS commenced its operations in December 1996 with a charter to ensure that non English speakers would have quality information that would allow them to make informed choices and changes for better health, and proper access to existing health facilities and services. MHCS’s role today is reaffirmed by one of the key multicultural health principles as stated in the Policy and Implementation Plan for Healthy Culturally Diverse Communities 2012-2016 (NSW Ministry of Health, 2012) which states that “people from culturally, religiously and linguistically diverse backgrounds will have access to appropriate health information”.

MHCS has become the central point for the collection and exchange of multilingual health resources, and the MHCS’s website provides shared access across the state to these resources.

2.2 Ongoing Needs in a Multicultural Society

Almost 30% of the population of NSW was born overseas, over a quarter from non English speaking countries. People of non English speaking background have migrated from over 100 different countries. A language other than English is spoken at home by 24.12% of people over the age of 5, but many of these have limited English language proficiency with 15% reporting that they spoke English ‘not well’ or ‘not at all’.

In responding to this linguistic and cultural diversity, MHCS sets priorities for delivering information, as it would not be possible to respond to all the needs in CALD communities. The criteria for establishing priorities are:

- the expressed needs of the health system to provide services to particular groups
- specific health issues of particular language groups
- financial resources
- availability of health workers to deliver the resources
- English language proficiency
- population size
- recency of arrival
- priority populations and issues set in NSW Health policy.

Health literacy can be defined as the cognitive and social skills which determine the motivation and ability of individuals to gain access, understand and use information in ways that promote and maintain their health. Given that English is the language of mainstream service provision, those individuals with limited proficiency in English are not able to attain optimal health literacy without additional support. By providing multilingual resources MHCS contributes towards improved health literacy for CALD communities, through enhancing communication between health providers and their clients. Clients who prefer to speak English will have a valuable reference in their own language, and will be able to share the information with carers or family members; those who are not proficient in English can take the resource away for reinforcement after the consultation.

1Policy and Implementation Plan for Healthy Culturally Diverse Communities 2012 - 2016:

MHCS also facilitates discourse around health through working directly with CALD communities. Campaigns undertaken for the NSW Ministry of Health make use of a whole range of networks or groups, both formal and informal, to reach non English speakers. MHCS works with ethno-specific community and welfare organisations and community media outlets to deliver health-promoting information through channels such as:

- Churches
- Community television
- Ethnic organisations
- Language schools
- Migrant service organisations
- Newspapers
- Radio

By using established networks to target individuals within a community, MHCS seeks to develop strategies that encourage, reinforce and assist individuals to make use of the information provided.

In the next three years, MHCS will explore the potential and use of social media and new technologies.
3. Achievements

3.1 Website

The NSW MHCS has established and maintains a unique website - www.mhcs.health.nsw.gov.au. With over 500 publications covering 40 subjects in 45 languages (including English), it can be accessed through both the LHD intranet and the internet.

All publications on its website have been reviewed for accuracy and a system for period reviews is in place.

All publications are available free to download from the MHCS website. Having downloadable publications has been a cost effective way of producing resources in a variety of languages and has addressed issues of storage and distribution.

Best Professional website

In 1997, when the website was first launched, the MHCS was awarded “Best Professional Site” at the Australian Financial Review/ Telstra Australian Internet Awards.

The website was also selected in July 2002 as one of the 26 most prestigious sites in the NSW government and MHCS was invited to present a case study in the eGovernment First Conference at Technology Park in Sydney.

Since then, the MHCS website has expanded to include:

- Audio visual materials, links to websites that contain multilingual health resources – audio and video materials
- Good practice guidelines in the production and checking of multilingual resources
- Frequently Asked Questions on multicultural health communication issues
- Collection of resources that demonstrate best practice in the production of multilingual resources by various government and non government organisations
- Updated news on MHCS

During the last three years, MHCS has added to its website 200 new resources produced by other services. These include LHDs, clinics and hospitals, sections of MoH, NGOs and other state government departments.

In 2011 the site received 5 million completed hits and an average of 20,000 individual resources (of the most popular) are downloaded every month.

MHCS also established and maintains the NSW Multicultural Health Week website - www.multiculturalhealthweek.com. This site attracts an average of 2,000 hits during Multicultural Health Week.

MHCS’s websites adhere to the NSW MoH web style guide.3

3.2 Multilingual Publications

Prior to the establishment of the MHCS in 1997, the production of multilingual health resources was not coordinated and it was common to see duplication of resources. There were also varying standards in the quality of multilingual health resources. Some multilingual health resources were not used as health workers were unsure of the accuracy of the information found on these materials.

Since its establishment MHCS has aimed to coordinate the development and publication of new multilingual health resources. Through MHCS’s website, it has become a central repository for the collection and distribution of health resources often in conjunction with other organisations including the NSW MoH.

As previously mentioned, an ongoing review system to ensure accuracy and currency of all publications found on its website has been established.

MHCS has also contributed to policy guidelines on the production and checking of multilingual health resources in the NSW Health system (see Policy and Protocols in Section 3.3)

3.3 The NSW Multicultural Health Communication Awards

Since 2003, the Service has also established the MHCS Awards or the “Multicultural Health Communication Awards.”

This biennial event aims to recognise good practice in the production and distribution of multilingual health resources in NSW. In addition, the Multicultural Health Communication Awards helps reduce duplication resources by hosting a list of resources that have been produced around NSW.

In 2010, the Multicultural Health Communication Awards introduced a new category – “web-based resources” to reflect the use of technology for health communication.


3.4 Policy and Protocols

MHCS has developed and promoted a Policy for NSW Health Multilingual Health Resources by AHS, DoH and NGOs Funded by NSW Health (Guidelines for Production), to ensure that appropriate resources produced in any LHDs will be shared across the state, and therefore maximise the benefit to CALD communities while reducing duplication.

Guidelines and protocols related to the production of translations, ways to develop multilingual texts and guidelines for checking translations, have also been developed and promoted.

MHCS has produced a range of policy and good practice guidelines on multilingual health resources including:

- Guidelines for the production of multilingual resources
- Standards for the production of documents to be added to a website
- Programs and services in NSW for Multicultural Health
• Translation and Checking Guidelines
• Back-translation and other options for checking translations

Full copies of the policies are available from:

**Australian Institute of Interpreters and Translators (AUSIT) Excellence Award for Guidelines in adapting radio advertisements**

In 2007, AUSIT Excellence Award recognised MHCS’s work in the development of guidelines towards good practice in the adapting English radio commercials into languages other than English.

### 3.5 Health Communication and Social Marketing Campaigns

The Service has worked on a variety of multilingual health and social marketing campaigns on variety of health topics including food safety, injury prevention, obesity, physical activity, nursing recruitment, smoking cessation, cervical cancer, healthy eating, diabetes, problem gambling, parenting and others. For a full list of campaigns visit:

In the area of multilingual health communication and social marketing campaigns, some of MHCS’s achievements include:

- **National Multicultural Marketing Award (Government Category)**
  MHCS developed the marketing strategy and managed an initiative that won the 2010 National Multicultural Marketing Award (Government Category): “Raising Kids Together” campaign targeting emerging communities from Afghanistan, Iraq and Sudan.
  - Developed social marketing communication strategy for “Raising Kids together” – a joint project with the Multicultural Disability Advocacy Association and Information and Culture Exchange to produce a DVD resource kit and reach families from emerging communities/refugees from Afghanistan, Iraq and Sudan with a child with a disability. Target languages – Arabic, Assyrian, Dari, Dinka, English and Juba Arabic

- **National Multicultural Marketing Award (Advertising Category)**
  In 2006, MHCS worked with the National Breast and Ovarian Cancer Centre, (former National Breast Cancer Centre (NBCC) on a national breast awareness campaign to develop a campaign using testimonials from CALD women who have survived breast cancer through early detections (mammograms). This campaign reached out to Arabic, Chinese, Greek, Italian and Vietnamese backgrounds nationally and won the Advertising Award.

- **Arabic, Chinese and Vietnamese smoke alarm campaign**
  Developed and implemented an eight-week campaign to increase purchase and installation of smoke alarms by Arabic, Chinese and Vietnamese speaking households in NSW, resulting in significant penetration of the target population in that time period. Campaign results were published in the *International Social Marketing Quarterly* (Volume VIII/1) and has been reviewed one of few CALD campaigns that demonstrates good practice (Milat, et.al, 2004).4

For a full list of recognition and awards of the Service visit:

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3.6 Consultancy Work for Other Organisations

In the past few years, MHCS has developed expertise in the field of health communication and multilingual social marketing initiatives. MHCS is often asked to provide advice and has been invited to submit proposals for work and/or commissioned by a range of organisations.

MHCS has provided advice to and delivered projects for a range of Government agencies including:

- Department of Sport and Recreation
- NSW Cervical Screening
- Department of Community Services
- Australian Federal Police (Missing Persons Unit)
- Diabetes Australia
- Heart Foundation
- NSW Refugee Health Service
- Responsible Gambling Fund
- Cancer Institute NSW
- Quitline NSW
- Council for the Ageing
- Ageing Disability and Home Care
- Cancer Council NSW

For a full list of past projects and organisations visit:  

Recent achievements in specific projects include:

- NSW and Australia increased calls from CALD smokers handled by Quitline NSW from 20 calls in 2006 a year to over 550 a year.

- Developed CALD response to Cancer Institute NSW Strategic plan 2011-2015 facilitating the inclusion of CALD issues in the revised version as well as embedding MHCS in the strategic plan.

MHCS is currently completing the following projects:

- CALD Problem Gambling Campaign in Arabic, Chinese, Greek, Italian and Vietnamese
- Get Healthy Information and Coaching Service – promotion of the telephone-based help line to CALD communities
- CALD Volunteer Research and Recruitment campaign (Chinese and Italian communities)
- Multilingual Quitline and CALD smoking cessation grants
- Coordination of a CALD Tobacco Community Grants programme for the Cancer Institute NSW
- Andrology Australia - pilot workshop targeting Chinese and Vietnamese GP associations to increase awareness of men’s reproductive health issues.

A more detailed list of current projects of MHCS is found on:  
3.7 Research

In addition to the health communication and social marketing campaigns, MHCS also has expertise in all aspects of research with CALD communities and health issues. Some recent research projects include:

- **Older CALD Volunteer research**
  
  Joint research project with the Council for the Ageing, and University of NSW to identify enablers and barriers for older Chinese and Italian speakers to become volunteers for not for profit services.

- **National Research on Dementia Awareness and recognition with Chinese, Greek and Italian-Australians.**
  
  Joint national research project with MHCS and Dementia Collaborative Research Centre, University of NSW – Dementia recognition and awareness amongst first, second and third generation Chinese, Greek and Italians in Australia.

- **Department of Ageing, Disability and Home Care**
  
  Won a bid to conduct research on the communication needs of Arabic, Chinese, Italian, Turkish and Vietnamese community members of Home, Community care and disability services.

  Initiated both by MHCS and on contract to other agencies, a range of research projects has also been conducted by MHCS since 1997. More information on the range of research projects conducted by the Service is available on: [http://www.mhcs.health.nsw.gov.au/services/research/research.asp](http://www.mhcs.health.nsw.gov.au/services/research/research.asp).

3.8 NSW Multicultural Health Week

In 2009, MHCS was appointed by the NSW MoH to coordinate the events for the NSW Multicultural Health Week, a yearly event that provides a platform to raise awareness of CALD issues in the health system.

A major outcome that have resulted from past Multicultural Health Weeks have been the strengthening of strategic partnerships between MHCS and major stakeholders such as the Local Government and Shires Association in 2010, NSW State Library and libraries across NSW to increase the distribution of multilingual health resources in 2011.

MHCS has helped raise the profile of Multicultural Health Week by getting the NSW Multicultural Health Week on the NSW MoH’s Week Calendar, and actively promoted it on the MHCS website, media and partner networks.

For more details of past activities, resources developed and reports of past multicultural health weeks visit: [www.multiculturalhealthweek.com](http://www.multiculturalhealthweek.com).
4. Development of the Plan

4.1 Health System Organisational Change

Since 2010, the NSW Health system has undergone a significant structural and organisational change. Geographic area boundaries have been changed and replaced by LHDs.

Four major institutions, called the “four pillars” have recently been created to drive major changes in the health system. These include: the Agency for Clinical Innovation, the Bureau of Health information, the Clinical Excellence Commission and Clinical Education and Training Institute.

As such, a significant part of the development of this strategic plan involved consultations with existing and new stakeholders to establish and redefine priorities as well as exploring opportunities for collaboration by MHCS with other organisations.

4.2 Consultations

Multicultural Health Directors and their teams in various LHDs were consulted via face-to-face discussions by an external consultant (Evolve Social Solutions) and followed up by meetings with a team from MHCS. The consultations revealed a high level of support for work undertaken by MHCS but a need to renew partnerships and collaboration at a local and state level.

Key stakeholders such as Health Promotion Directors’ through the Health Promotion Director’s forum were also consulted.

4.3 Surveys

Email and web-based surveys were also made available on the MHCS website to gather feedback from the individuals and organisations that on the email list of Polyglot, MHCS’s newsletter.

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4.4 Planning

Core business for MHCS include:

• Looking after the state-wide communication needs of health workers with CALD communities patients, clients and communities.
• Production of resources with state-wide applicability and distribution.
• Providing advice on communication strategies and social marketing campaigns.
• Facilitating distribution across the state through new technologies.
• Collecting resources, acting as a clearing house for multilingual resources.
• Promoting communication strategies for CALD communities to NGOs.
• Seeking opportunities for the development of communication tools for CALD communities, utilising other government departments, NGOs or LHDs.
• Providing consultancy services for communication with CALD communities on health related issues across NSW government.
• Provide expert and strategic advice to the NSW MoH in relation to communication with CALD communities and health, including media events targeting CALD communities.

To consolidate this core business, this plan will concentrate on:

• Identifying partnerships and organisational approaches.
• Focusing on what MHCS can do to ensure that there is a sustainable system to ensure that all CALD patients, clients and communities receive high quality information.
• Continuing to raise the profile of the service.
• Continuing work on improving communication strategies with CALD communities.
• Being included as part of the debate on health directions.
• Becoming more closely integrated with key policy areas within the NSW MoH.
5. Strategic Goals 2012-2015

Goal 1  Work with the newly established Local Health Districts to improve the access of CALD communities to relevant and timely multilingual health information.

The NSW MHCS will continue to work with both multicultural health workers and non-ethno specific / mainstream health services staff on identifying and developing communication strategies to respond to the needs of LHD network staff and their clients.

This approach is aimed at linking MHCS’s production of multilingual resources more closely with both the needs of health staff to provide information for their non English speaking clients and the perspectives of the CALD communities for whom these communication strategies are being developed. These partnerships will enable MHCS to be better informed of communication issues.

MHCS will bring to these partnerships expertise in the development production and evaluation of multilingual resources.

A key role for MHCS is also alerting other lead agencies in health, including the NSW MoH, about resource requirements and pursuing opportunities to attract alternative sources of funding.

MHCS is also interested in developing partnerships with LHD staff in order to improve access to existing resources by both staff and their clients, and monitoring the use of these resources.

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<th>Objectives</th>
<th>Outcomes</th>
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| 1.1 Improve collaboration and initiate partnerships with LHDs to improve coordination of health communication initiatives at LHD areas and state levels. | • Production of a report that maps out health initiatives targeting CALD communities at both LHD level and state level from 2012 to 2014.  
• Production of a communication plan that identifies strategies to improve coordination of multilingual / multicultural health campaigns and initiatives for local, state and national levels.  
• Continue coordination of annual NSW Multicultural Health Week celebration as a platform to increase awareness of CALD issues in health. |
| 1.2 Improve the coordination, distribution and communication of multilingual health resources in NSW.                     | • Increase in the number of publications distributed by health workers in LHDs to CALD communities.  
• Increase in the number of health workers distributing multilingual resources. |
Goal 2  Develop and consolidate the relationship with individuals, policy units and relevant structures within the newly restructured NSW Ministry of Health to ensure the inclusion of CALD issues in their work.

This consolidation will be focussed around the following issues:
- Identifying opportunities for MHCS to be involved in the development of communication strategies and social marketing initiatives.
- Providing input in policies and procedures that relate to CALD groups.
- Improving the process for development and approval of multilingual publications and initiatives.
- Continuing the implementation of multilingual campaigns and initiatives commissioned by Centre for Health Advancement (Get Healthy Information and Coaching Service).

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<th>Objectives</th>
<th>Outcomes</th>
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<tr>
<td>2.1 Expand the number of policy and service areas with which MHCS has established working partnerships.</td>
<td>• An increase in the number of service or policy areas within the NSW MoH with whom MHCS has a working relationship with.</td>
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<td>• Working relationships and inclusion of CALD issues established with the four pillars: the Agency for Clinical Innovation, the Bureau of Health information, the Clinical Excellence Commission and Clinical Education and Training Institute.</td>
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<td>2.2 Organise the multilingual component of state-wide health promotion and health communication, social marketing campaigns in accordance with the funding provided by the MoH.</td>
<td>Campaigns are implemented as requested by the NSW MoH.</td>
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<td>• Completion of two year CALD Get Healthy Information and Coaching service campaign funded by Centre for Health Advancement.</td>
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<td>• Tasks identified for MHCS in the <em>NSW Health Policy and Implementation Plan for Healthy Culturally Diverse Communities, 2012–2016</em> and progress report completed.</td>
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<td>• Completion of the Macedonian health and tasty recipe resources for 2012 – funded by the Centre for Health Advancement.</td>
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*NSW Ministry of Health (unpublished – draft 2011) Multicultural Health Policy and Implementation Plan*
Goal 3 Create or maintain partnerships with significant state-wide government and non government organisations to develop and implement multilingual initiatives for CALD communities in NSW

MHCS will continue and strengthen partnerships with key government and NGOs that have either identified MHCS in their respective strategic plans, are project partners or have provided commissioned work.

These organisations include the Cancer Institute NSW, NSW Responsible Gambling Fund, Andrology Australia, Ageing Disability and Home Care, Council for the Ageing and the University of NSW.

MHCS will also identify opportunities to collaborate on multilingual initiatives with new partner organisations.

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<th>Objectives</th>
<th>Outcomes</th>
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| 3.1 Provide leadership and collaborate with key stakeholders that have identified MHCS in the development, implementation and evaluation of social marketing and health communication campaigns or research targeting CALD communities as priorities. | • Increase in cancer awareness and screening amongst CALD population as indicated by NSW Cancer Institute’s Strategic Plan\(^7\).  
• Increase in the number of CALD smokers ringing the multilingual quitlines as indicated by the Cancer Institute’s Tobacco Plan\(^8\).  
• Increase in awareness of problem gambling as an issue in Arabic, Chinese, Greek, Italian and Vietnamese speakers in NSW through the Responsible Gambling Campaign 2012-2013 funded by the NSW Responsible Gambling fund.  
• Increase in the number of CALD GPs and CALD men who are aware of male reproductive health issues through Andrology Australia’s CALD GP campaign for 2012. |
| 3.2 Increase the commitment from major NGOs to the development of initiatives and provision of health information/ education in languages other than English. | • An increase in the number of NGOs with which MHCS has worked in partnership to provide health information in languages other than English. |
| 3.3 Organise the multilingual component of state-wide health promotion and social marketing campaigns. | • Completion of multilingual campaigns, as per commissioned work. |

\(^7\)NSW Cancer Plan 2011-15 Cancer Institute NSW, Sydney, November 2010  
\(^8\)NSW Cancer Institute Tobacco Plan 2011-2016  
**Goal 4** Expand strategic relationships with ethnic/non English language media and groups interested in working with ethnic media, including social media to deliver health related information to CALD communities

This is a major strand of the MHCS’s work involving regular liaison with key players in various media and dissemination networks available in CALD communities: electronic, print and social media to increase the coverage of health issues. This will focus on:

- The promotion of health information available in languages other than English on MHCS’s website to SBS and other significant community broadcasters and newspapers.
- Management of the multilingual component of state-wide campaigns.
- Exploring the potential of the use of social media in CALD communities to increase discussion on health issues.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Develop and trial strategies to advocate for an increase in health related issues to ethnic/CALD media.</td>
<td>• Increased media discussion and delivery of health related messages.</td>
</tr>
<tr>
<td>4.2 Continue/increase the provision of health information in the ethnic media.</td>
<td>• Increase in the number of non English language media agencies directly receiving multilingual health information from MHCS.</td>
</tr>
<tr>
<td>4.3 Develop and trial strategies to explore the use of social media in CALD communities for health.</td>
<td>• Report on the implementation of pilot project with one CALD community on the use of social media in increasing discussion on health issues.</td>
</tr>
</tbody>
</table>
Goal 5 Identify and document the principles and processes which ensure best practice standards in developing communication strategies for health and CALD communities

The documents proposed below will be an important communication tool for those both inside and outside MHCS. They will also provide the basis for ongoing discussion and review of the work undertaken by the service.

MHCS will also advocate for the improvement in data available on CALD communities and their health.

<table>
<thead>
<tr>
<th>Objectives</th>
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</tr>
</thead>
<tbody>
<tr>
<td>5.1 Establish benchmarks against which the work undertaken by the Service will be evaluated.</td>
<td>• Communication strategies developed can be demonstrated to be of a high quality.</td>
</tr>
<tr>
<td>5.2 Contribute to knowledge about excellence in communication.</td>
<td>• Information about communication strategies is widely available.</td>
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<td></td>
<td>• Collection of examples of good practice in development of multilingual health resources through the biennial Multicultural Health Communication awards promoted throughout the health system and CALD networks.</td>
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<tr>
<td>5.3 Contribute to the knowledge on the use of social media and new technologies for health communication and social marketing to CALD communities.</td>
<td>• Report produced on availability of new technologies and social media and their potential for working with CALD communities and Health.</td>
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<td></td>
<td>• Inaugural conference on new technologies and social media for CALD and Health held.</td>
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<tr>
<td>5.4 Improve the availability of demographic and health specific data for CALD communities.</td>
<td>• Data on CALD communities and health specific issues is widely available and accessible.</td>
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<td></td>
<td>• Data on CALD communities and health is up-to-date, relevant and representative of current trends in migration.</td>
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</tbody>
</table>
Goal 6 Build the capacity of Multicultural Health Communication

Crucial to improving the quality and capacity of MHCS’s work are the external project work, website development, staff training, and the guidance provided by key personnel in the health system.

In 2011, MHCS has taken over the management of the Resource Distribution Unit\(^9\). As such, in the next few years, MHCS will also work to improve the capacity of the Resource Distribution Unit which provides warehousing and distribution for all health resources from the Centre for Health Advancement.

<table>
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<tr>
<th>Objectives</th>
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<tbody>
<tr>
<td>6.1 Complete or attract consultancy assignments from other government</td>
<td>MHCS has an increased number of financial resources available for its core business</td>
</tr>
<tr>
<td>departments and NGOs that will either increase the knowledge and skills of</td>
<td>• Completion of a two year joint consultancy research project on Volunteering and CALD communities with UNSW and Council for</td>
</tr>
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<td>staff or add resources to the Service.</td>
<td>the Ageing funded by Disability and Home Care.</td>
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<td></td>
<td>• Completion of a two year consultancy assignment from the NSW Responsible Gambling Fund: Problem Gambling Campaign targeting Arabic,</td>
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<td></td>
<td>Chinese, Greek, Italian and Vietnamese communities.</td>
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<td></td>
<td>• Completion of a 4 year campaign to increase awareness of cancer prevention and treatment information for CALD communities funding</td>
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<td></td>
<td>from Cancer Institute NSW as per the Cancer Institute Plan 2011 to 2015(^10).</td>
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<tr>
<td>6.2 Develop partnerships with other government departments or academic</td>
<td>• Communication strategies for CALD communities in relation to health undertaken by the NSW government are informed by the shared expertise</td>
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<td>bodies that increase the knowledge and skill of staff or facilitate the</td>
<td>and knowledge from both MHCS and academia.</td>
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<tr>
<td>goals of the service.</td>
<td>• Increased number of multilingual resources downloaded from the intranet and internet.</td>
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<td></td>
<td>• Improved functionality and features of MHCS website.</td>
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<tr>
<td>6.3 Maintain and increase the effectiveness of the Service’s website.</td>
<td>• MHCS has a highly trained and effective team.</td>
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<td>• Implementation of recommendations based on an Internal staff development plan(^11).</td>
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<tr>
<td>6.4 Increase the skill level of MHCS.</td>
<td>• MHCS receives regular information and advice from Multilingual Information Subcommittee and other relevant stakeholders.</td>
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<td></td>
<td>• All administrative procedures are conducted in accordance with South Eastern Sydney Local Health District.</td>
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<tr>
<td>6.5 Ensure that MHCS’s work is guided by expert advice on a formalised</td>
<td>• Increased efficiency of fulfilment and distribution system of the Resource and Distribution Unit through information systems and e-commerce (e.g. improve website functionality).</td>
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<td>basis.</td>
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<td>6.6 Provide the infrastructure necessary for the Service to run efficiently.</td>
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<tr>
<td>6.7 Increase the efficiency and management of the Resource Distribution</td>
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<tr>
<td>unit to handle requests for health resources in English and languages other</td>
<td></td>
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<td>than English.</td>
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\(^10\)NSW Cancer Plan 2011-15 Cancer Institute NSW, Sydney, November 2010

\(^11\)Report on Organisational Stress and Internal Skills Audit of MHCS (Evolve Solutions 2011- internal document), NSW Multicultural Health Communication Service
Goal 7 Provide evidence to guide and assess the MHCS’s work

The key focus of evaluation will be to provide information to guide future activity with respect to the most appropriate communication strategies for specific communities, and the effectiveness or utilisation of multilingual resources.

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>7.1 Maintain and update profiles of the individual communication needs for selected CALD communities in NSW. These profiles will identify the best access points for each community.</td>
<td>• The selection of resource formats for individual communities is based on knowledge of the communities.</td>
</tr>
<tr>
<td>7.2 Evaluate the effectiveness of health communication strategies/resources developed by MHCS.</td>
<td>• Reports and publications on the effectiveness of MHCS campaigns and initiatives published.</td>
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<td></td>
<td>• Recognition of MHCS initiatives through industry awards (e.g. Multicultural Marketing Awards).</td>
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<tr>
<td>7.3 Monitor the distribution and promotion of multilingual resources across LHDs.</td>
<td>• Improved distribution and promotion of multilingual information.</td>
</tr>
<tr>
<td>7.4 Develop mechanisms for monitoring the utilisation of multilingual resources by health services staff.</td>
<td>• Data is available to describe the utilisation of multilingual resources by health services staff.</td>
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</tbody>
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