

Translated COVID-19 Vaccination Glossary Launch

Date: Friday 16 July 2021

Time: 1:00 – 2:00pm

Zoom webinar

Welcome and Acknowledgment of Country

Dr Marianne Gale

Director

Population and Community Health

South Eastern Sydney Local Health District

Background to the Development of the Glossary

Lisa Woodland

Director

NSW Multicultural Health Communication Service and Priority
Populations SESLHD

Research Team

- ▶ **Associate Professor Holly Seale**, UNSW Sydney
- ▶ **Associate Professor Anita Heywood**, UNSW Sydney
- ▶ **Lisa Woodland**, Director, NSW Multicultural Health Communication Service
- ▶ **Associate Professor Ben Harris-Roxas**, South Eastern Sydney Research Collaboration Hub, UNSW Sydney
- ▶ **Dr Abela Mahimbo**, School of Public Health, UTS Sydney
- ▶ **Ikram Abdi**, UNSW Sydney

Two page summary available at:

<https://sph.med.unsw.edu.au/sites/default/files/sphcm/News/Enhancing-supporting-COVID-19-vaccination-program.pdf>

Enhancing and supporting the COVID-19 vaccination program - focusing on Culturally and Linguistically Diverse Communities

Aim:

To investigate engagement with people from Culturally and Linguistically Diverse (CaLD) backgrounds during the pandemic and identify strategies to improve communication about the COVID-19 vaccination program.

What we did:

In-depth interviews with stakeholders across Australia including: Government agencies, government funded community-based organisations, CaLD community peak bodies/Councils, migrant resource centres, refugee health services, settlement services, translation services, women's support groups and community groups.

What we found:

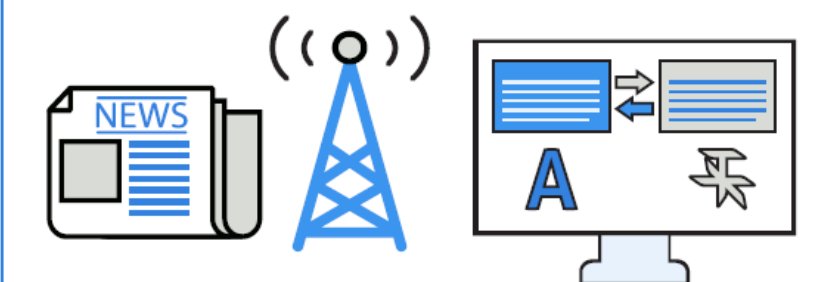
Opportunity: Pivot to virtual environment

1. Zoom, emails and social media are widely used to connect with the community.
2. WhatsApp and WeChat are key communication channels.
3. Audio-visual materials are favoured. However, hard copy documents and phone calls have been used to capture 'hard to reach' people.
4. Government materials are being tailored at the local level by services.
5. Virtual community forums and leaders' zoom meetings have been great ways to keep connected and share information.



Opportunity: Supporting local community ambassadors

1. Settlement staff, case workers, bilingual staff, and community leaders all play a role in synthesising, and disseminating information.
2. Community leaders play an important role and must be given the opportunities to co-design messages, to provide feedback and convey concerns from community.
3. Draw on "natural leaders" where appropriate. These include health workers and others who do not necessarily identify as a community leader.
4. Not every leader has a wide network, and some may act as gate keepers. Work with community organisations to identify the best strategies for information dissemination. This could include social media, via WhatsApp groups, phone calls or community group meetings.



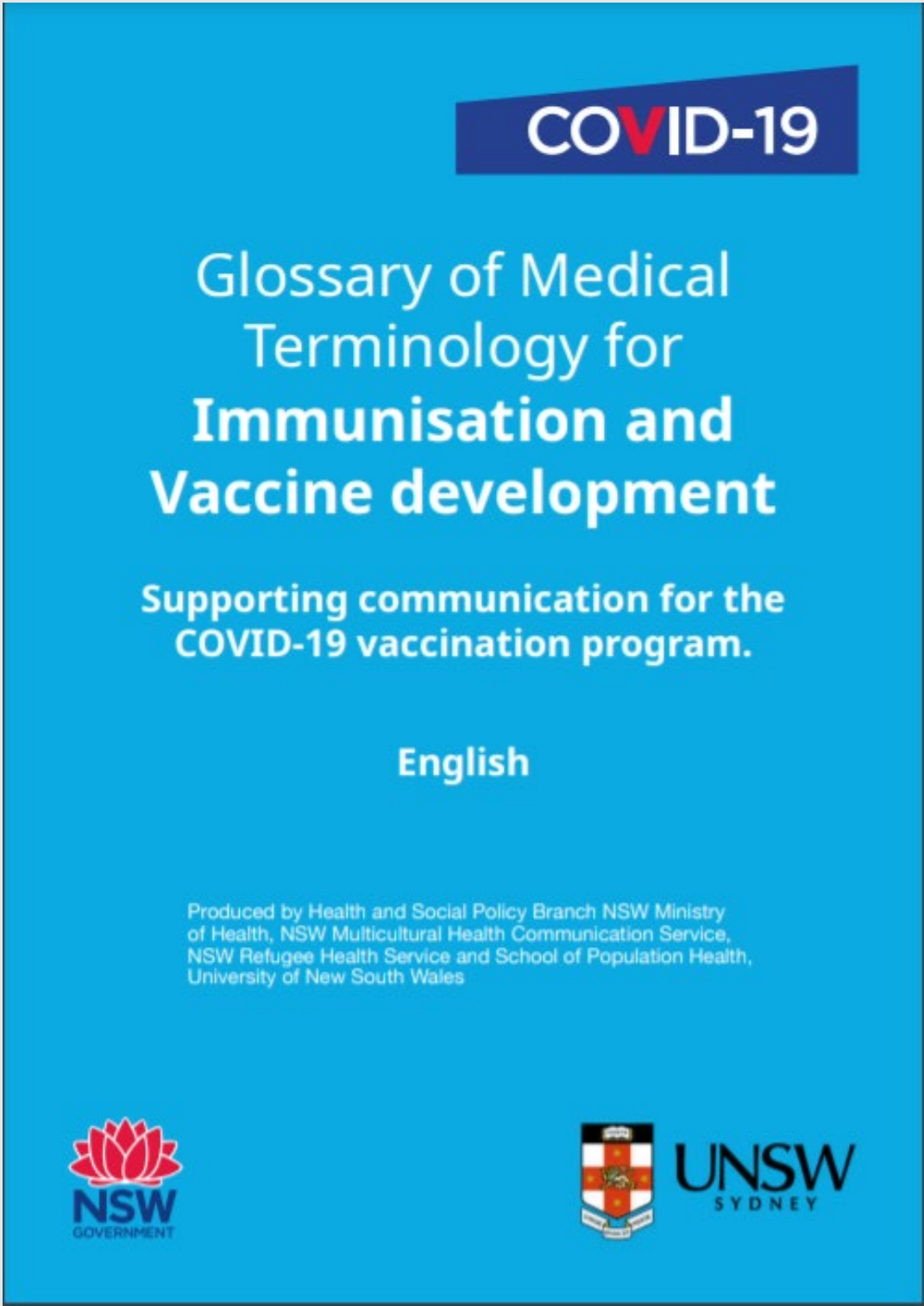
Barrier: Information gaps

1. Translated information has been slow and not available in all languages. Gaps are being filled by information from country of origin.
2. Ethnic newspapers have not been effectively used to disseminate messages.
3. Resources have not always been appropriate for people with low literacy or health literacy levels.
4. Can't rely on the limited reach of English language mainstream news and radio programs.
5. Not all community members are part of a virtual community or are social media literate. People experience issues with navigating government websites.
6. Government materials are being tailored but there are concerns about accuracy and consistency of messages.
7. Important to acknowledge that there are variations in health literacy levels amongst community leaders and interpreters and translators.
8. Issues with duplication of materials occurs when States/Territories have different recommendations.
9. Newly arrived migrant communities are most in need, as they don't have the established networks/community organisations to support them.

Key actions

- ▶ Enhance tailored COVID-19 messages to multicultural communities
 - Audio-visual messages, community radio, social media,
 - SMS, What's App groups
- ▶ Develop training packages for community and faith leaders (“community ambassadors”)
- ▶ Develop a glossary of COVID-19 vaccination terms - to support communities about the vaccine and the vaccination program
 - 31 languages and English
 - Social media tiles in development

Translated COVID-19 Vaccination Glossary



English

D	DEFINITION	SIMPLIFIED DEFINITION
Deltoid	A muscle in the upper arm where vaccines are usually administered given.	A muscle in the upper arm where vaccine is given
Dose	A quantity of a medicine or drug taken or recommended to be taken at a particular time.	An amount of a medicine or drug taken
Dosing error	When medications are administered in the wrong amounts, at the wrong frequency or to the wrong person	When medicines are given in the wrong amount, at the wrong time point or to the wrong person

Italian

D	
Deltoid A muscle in the upper arm where vaccine is given.	Deltoide Un muscolo nella parte superiore del braccio dove viene somministrato il vaccino.
Dose An amount of a medicine or drug taken.	Dose La quantità di medicinale o farmaco somministrato.
Dosing error When medicines are given in the wrong amount, at the wrong time point or to the wrong person.	Errore di dosaggio Quando i medicinali vengono somministrati nella quantità sbagliata, nel momento sbagliato o alla persona sbagliata.

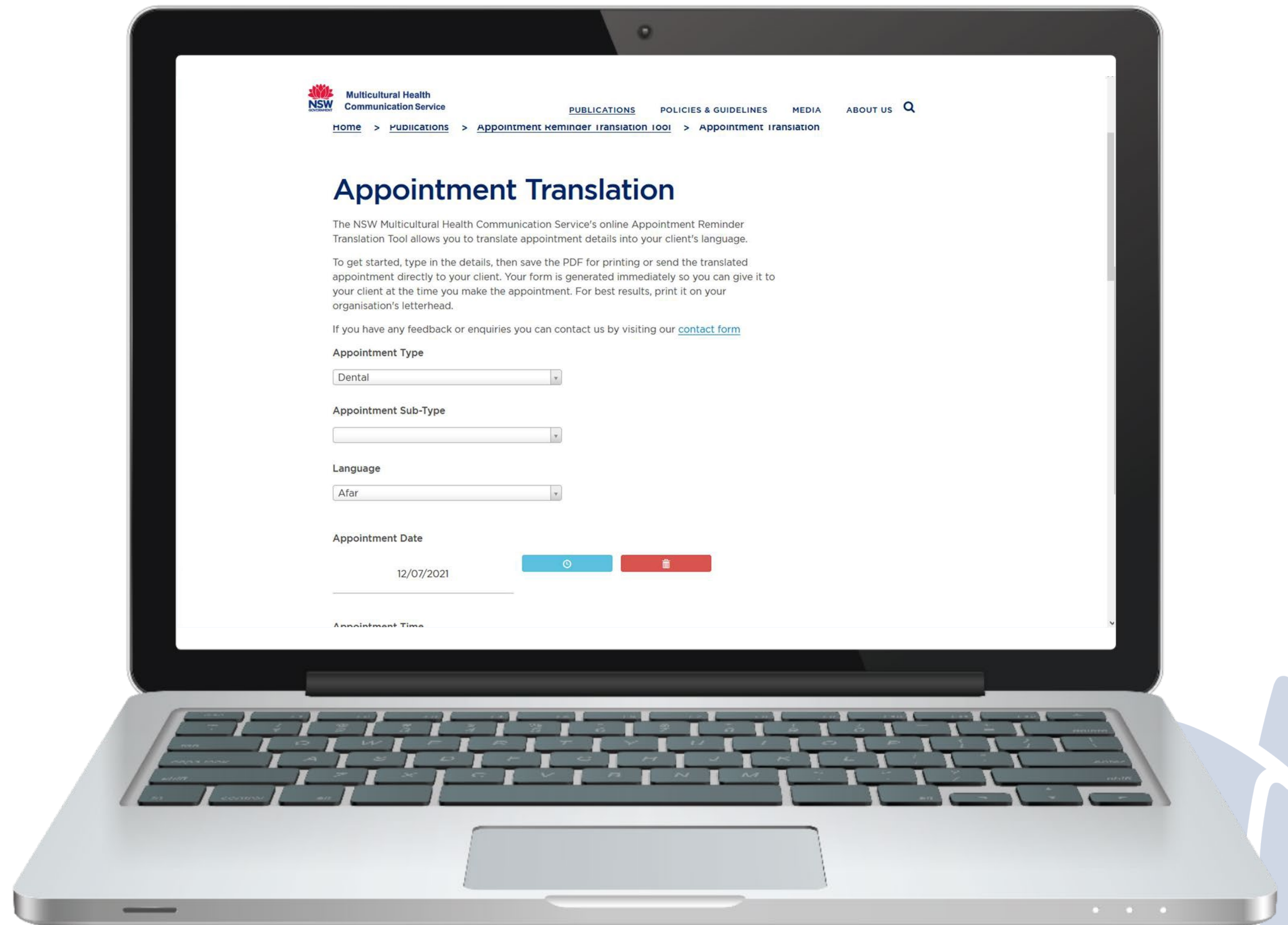
Languages

- ▶ Arabic
- ▶ Chinese (Simplified)
- ▶ Farsi
- ▶ Indonesian
- ▶ Kurdish (Sorani)
- ▶ Portuguese
- ▶ Swahili
- ▶ Tibetan
- ▶ Assyrian
- ▶ Chinese (Traditional)
- ▶ Greek
- ▶ Italian
- ▶ Macedonian
- ▶ Punjabi
- ▶ Tagalog/Filipino
- ▶ Urdu
- ▶ Bengali
- ▶ Dari
- ▶ Hazaraghi
- ▶ Karen
- ▶ Mongolian
- ▶ Russian
- ▶ Tamil
- ▶ Vietnamese
- ▶ Burmese
- ▶ Dinka
- ▶ Hindi
- ▶ Korean
- ▶ Nepali
- ▶ Spanish
- ▶ Thai

Translated Appointment Reminder Tool

Translated appointment reminder tool available at:

<https://www.mhcs.health.nsw.gov.au/publications/appointment-reminder-translation-tool/>



Thank you

Contact details:

Lisa Woodland

Director, NSW Multicultural Health Communication Service and Priority Populations SESLHD

E: lisa.woodland@health.nsw.gov.au

Two page research summary available at:

<https://sph.med.unsw.edu.au/sites/default/files/sphcm/News/Enhancing-supporting-COVID-19-vaccination-program.pdf>

Translated COVID-19 Vaccination Glossary available at:

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Overview of the Glossary

Associate Professor Holly Seale

School of Population Health University of New South Wales

Deputy Chair, Collaboration on Social Science and
Immunisation (COSSI)

Enhancing and supporting the COVID-19 vaccination program: Focusing on Culturally and Linguistically Diverse Communities

Associate Professor Holly Seale

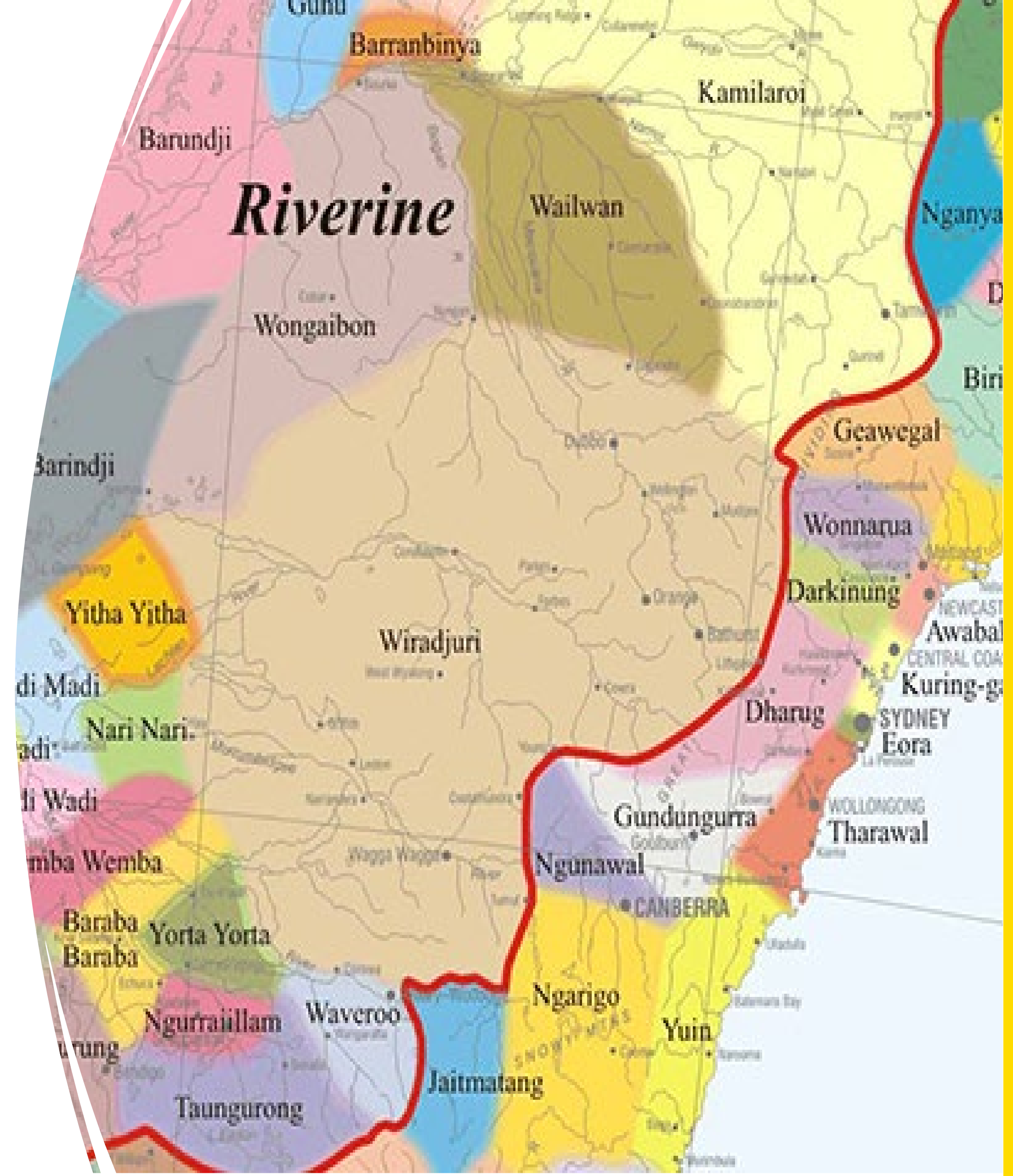
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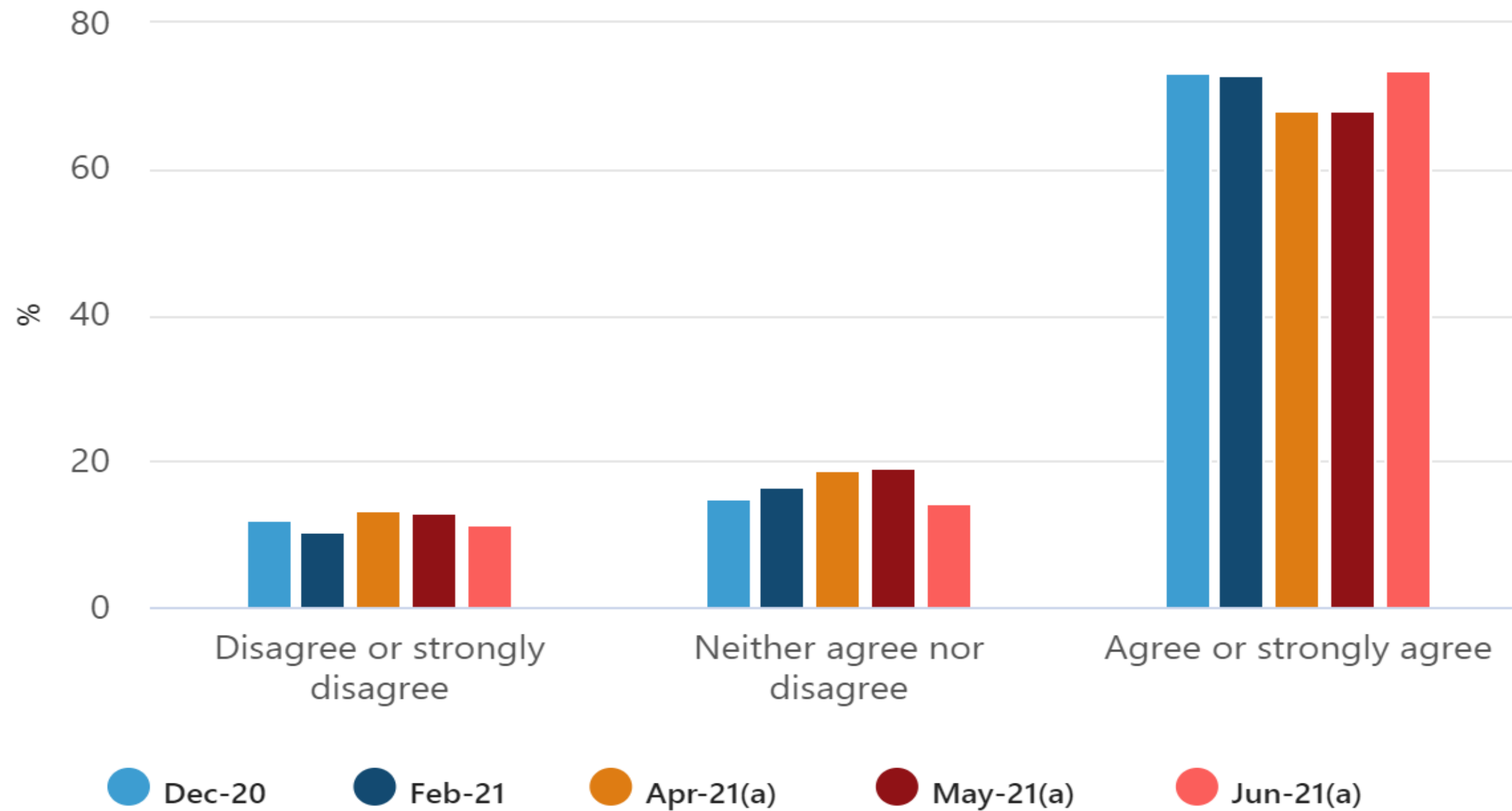


“I would like to acknowledge the Bedegal people that are the Traditional Custodians of this land.

I would also like to pay my respects to the Elders both past and present and extend that respect to other Aboriginal and Torres Strait Islanders.”

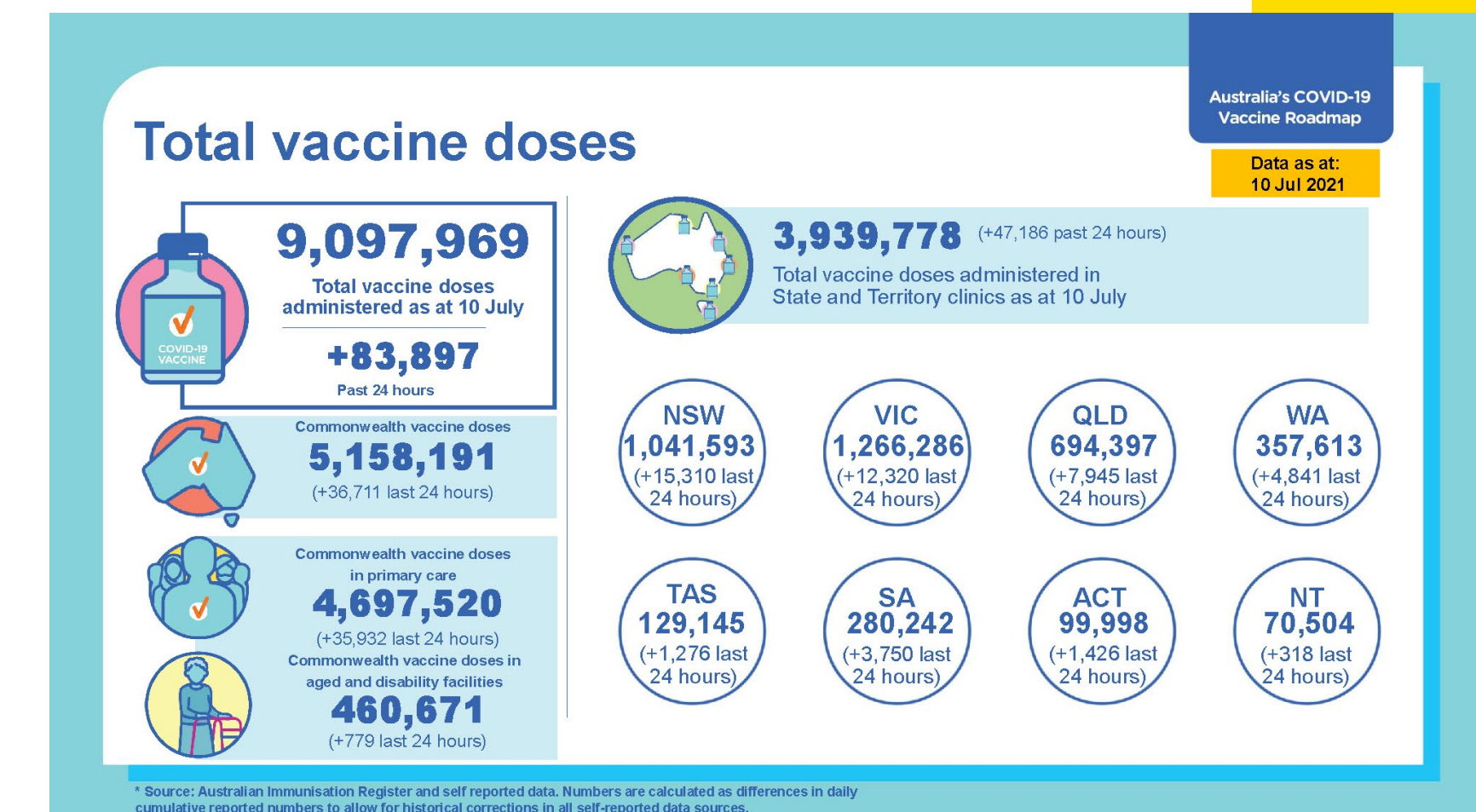


Persons aged 18 years and over, whether would get a COVID-19 vaccine when it becomes available and is recommended, by time of reporting



a. In April, May and June 2021 respondents who indicated they already had a COVID-19 vaccination were coded as 'strongly agree'

Source: Australian Bureau of Statistics, Household Impacts of COVID-19 Survey June 2021



Vaccine acceptance

Less willing to receive

- Females
- Age 25-34
- Language other than English at home
- < Yr 12 education
- Outside capital city
- Financial distress

Most common concerns



Safety



Access



Serious
reactions



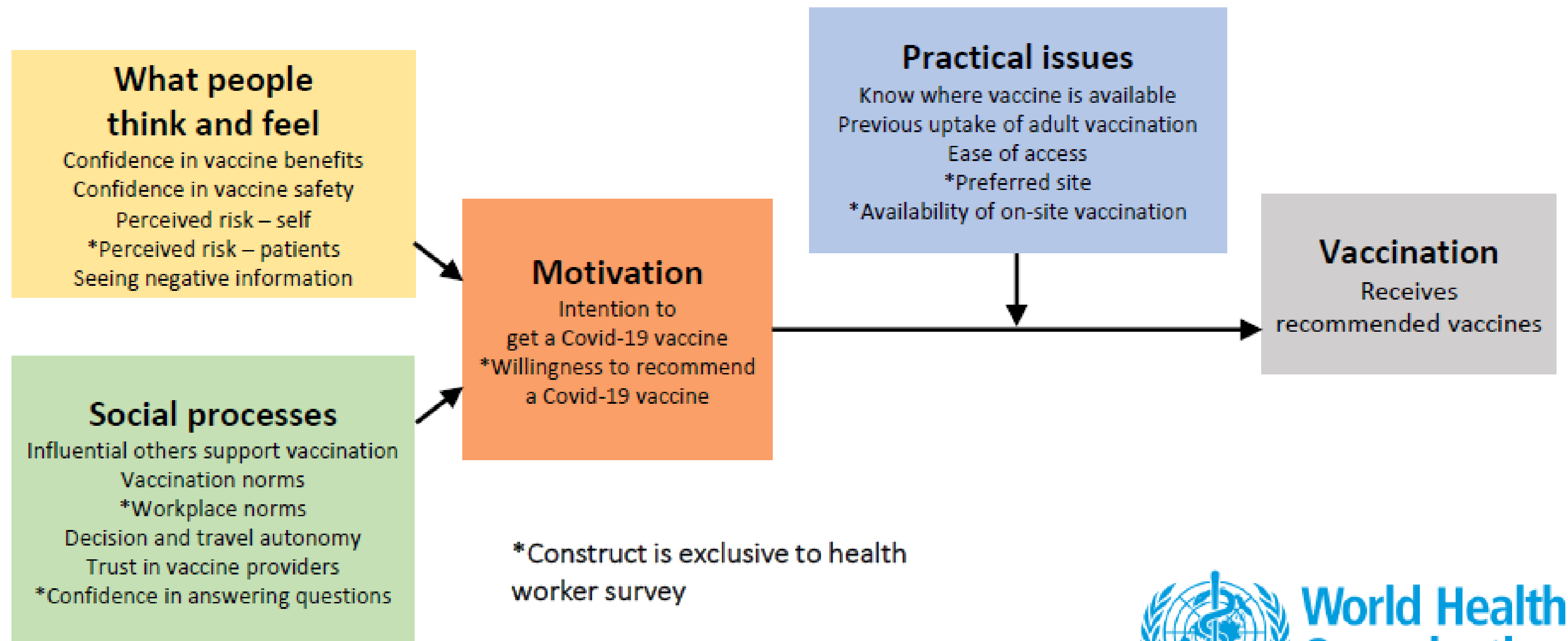
Long-term
effects

SOURCES:

- MCRI Vaccine Preparedness Study, May 2021
https://www.mcri.edu.au/sites/default/files/media/infographic_vp_study_28_5_21.pdf
- NCIRS, Factors influencing COVID-19 vaccine acceptance
- ANU Centre for Social Research and Methods, Feb, 2021

Slide acknowledgement: A/PROF MARGIE DANCHIN & DR JESSICA KAUFMAN

Increasing COVID-19 vaccination model constructs



Source: Unpublished, The BeSD expert working group.

Based on: Brewer NT, Chapman GB, Rothman AJ, Leask J, and Kempe A (2017). Increasing vaccination: Putting psychological science into action. *Psychological Science for the Public Interest*. 18(3): 149-207

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pg 1/2

In-depth interviews

46 stakeholders

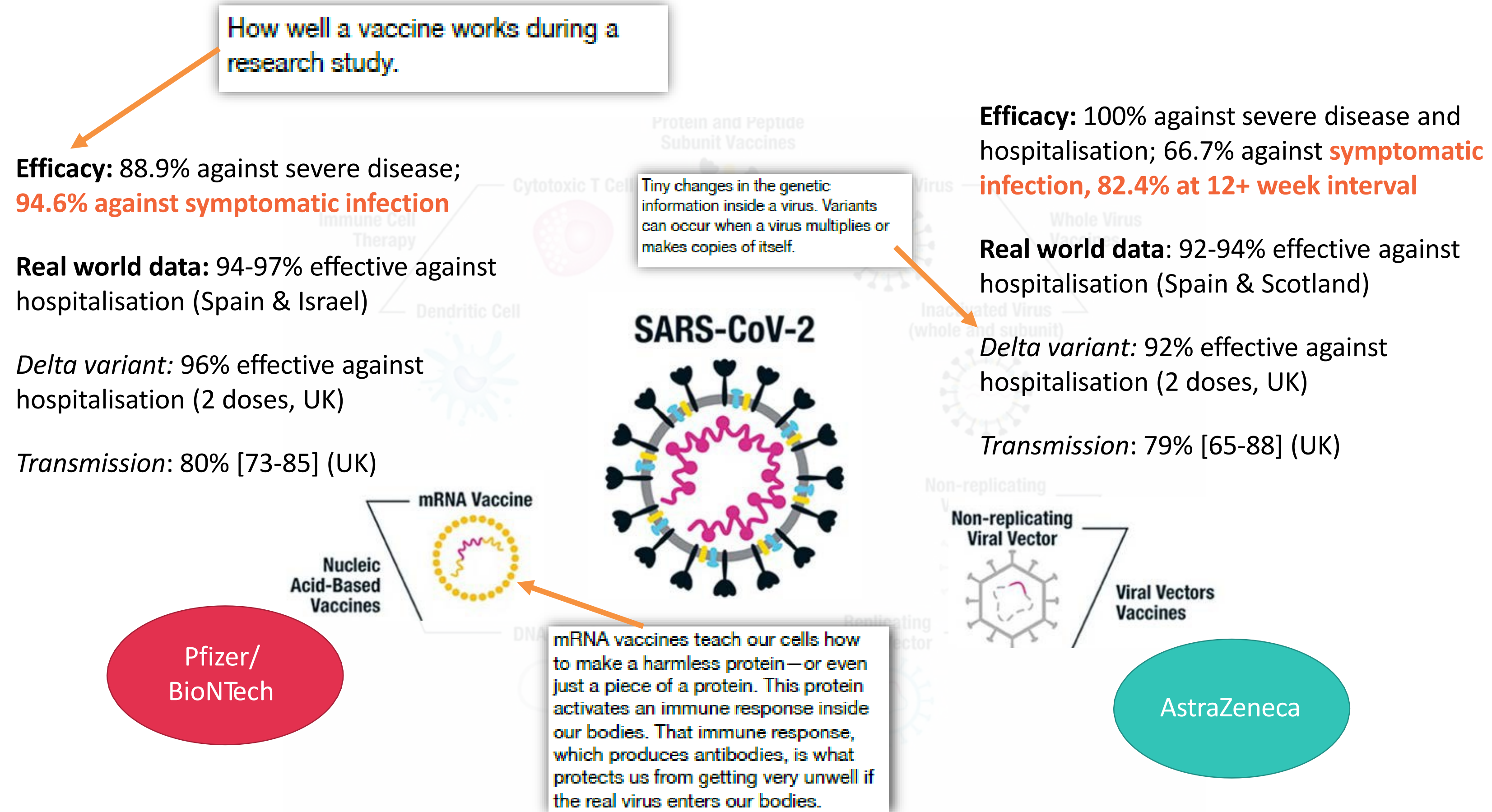
17 community/faith leaders

Government, NGOs, Refugee services, settlement services, translation services

Key theme: "Talking COVID"

- Bilingual health workers, case workers and community leaders = key 'go-betweens'
- Variations in health literacy levels
- Misinformation circulating/gaps
- Zoom sessions to help with understanding about the COVID recommendations
- **Resources** to help community stakeholders address vaccine questions/develop materials

Talking COVID: Simplifying the SARS-CoV-2 vaccines terminology



Flanagan et al, Front Immunol (2020)

https://medicine.unimelb.edu.au/data/assets/pdf_file/0007/3820696/Melbourne-Childrens-Campus-Weekly-COVID-19-Vaccine-Updates-17-June-2021.pdf

Slide acknowledgement: A/PROF MARGIE DANCHIN & DR JESSICA KAUFMAN

Supporting communication for the
COVID-19 vaccination program

This glossary was developed to help community organisations, translators and interpreters, bilingual workers, and community leaders to better understand and communicate words and terminology about vaccine development and implementation.

If you would like to provide feedback or add a new word or term to the list, please contact Associate Professor Holly Seale on h.seale@unsw.edu.au or +61 (02) 9385 3129.

Acknowledgments

This resource was developed by:

- Associate Professor Holly Seale, School of Population Health, University of New South Wales
- Lisa Woodland, Director, NSW Multicultural Health Communication Service
- Dr Kylie Quinn, School of Health and Biomedical Sciences; RMIT University
- Dr Sabira Shrestha, National Centre for Immunisation Research and Surveillance (NCIRS)
- Vicky Jacobson, Coordinator, Refugee Health Network Queensland
- Dr Carissa Bonner, The School of Public Health, University of Sydney

Special thanks: We would like to thank the following people for reviewing the glossary

- Associate Professor Christopher Blyth, Wesfarmers Centre of Vaccines and Infectious Diseases, Telethon Kids Institute.
- Dr Nadia Chaves
- Benine Muriithi, Patricia Argüello de Avila and Mariam Elliott, Refugee Health Network Queensland
- Fartih Karakas and Ismail Akinci, All Graduates

Thanks to The Health Literacy Lab for testing the glossary using their online real-time editor (Ayre, J., et al. (2021). *Sydney Health Literacy Lab (SHLL) Health Literacy Editor*). Available at <https://hdl.handle.net/2123/24642>

Disclaimer

This glossary aims to provide plain language meanings to complex immunisation and vaccine development words and terms. The information is to be used as a reference tool only.

Development of the glossary

Immunisation

Dr Kylie Quinn, School of Health and Biomedical Sciences; RMIT University

Dr Sabira Shrestha, National Centre for Immunisation Research and Surveillance (NCIRS)

Associate Professor Christopher Blyth, Telethon Kids Institute.

Health Literacy

Dr Carissa Bonner, The School of Public Health, University of Sydney

Sydney Health Literacy Lab (SHLL) Health Literacy Editor

Multicultural Health

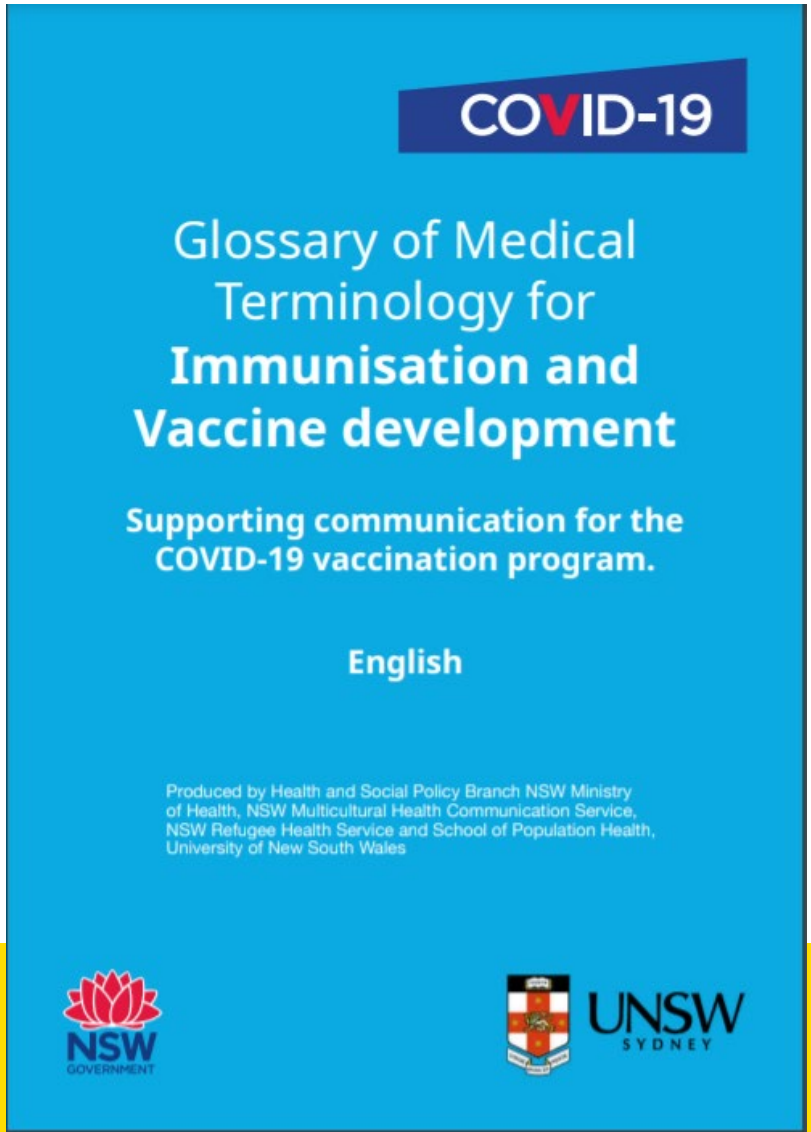
Vicky Jacobson, Coordinator, Refugee Health Network Queensland

Dr Nadia Chaves

NAATI Certified Professional Interpreter/Translators

Fartih Karakas and Ismail Akinci, All Graduates

Benine Muriithi, Patricia Argüello de Avila and Mariam Elliott, Refugee Health Network Queensland



Thank you

Research team

Associate Professor Anita Heywood, UNSW Sydney



Lisa Woodland, Director, NSW Multicultural Health Communication Service



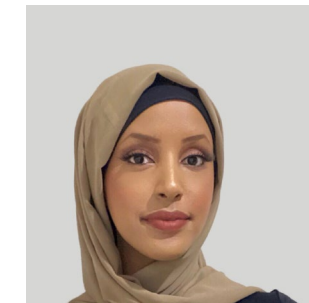
Associate Professor Ben Harris-Roxas, UNSW Sydney



Dr Abela Mahimbo, School of Public Health, UTS Sydney



Ikram Abdi, NCIRS



Funding: NSW Multicultural Health Communication Service

Questions and Answers

Facilitated by **Dr Marianne Gale**
With **Associate Professor Holly Seale**
Professor Kristine Macartney
Lisa Woodland
Thomas Camporeale

Question 1: How will the glossary be promoted to multicultural communities?

- ▶ The NSW Multicultural Health Communication Service has a wide distribution network for translated information, including:
 - ▶ Multicultural health services;
 - ▶ Community organisations;
 - ▶ Multicultural media such as SBS; and
 - ▶ Multicultural NSW



Question 2: What were some of the key findings from the research?

- ▶ Misinformation around COVID-19 has increased with the emergence and use of vaccines.
- ▶ Understanding of the mRNA component of some vaccines is especially misunderstood
 - ▶ mRNA technology is not new – it has been around for many years.
 - ▶ mRNA vaccines cannot change your DNA.
- ▶ Technical vaccine language needs to be broken down in order to be effectively communicated
 - ▶ A community-based approach is best e.g. engaging community and faith-based leaders to have conversations around vaccination.



Question 3: How can health services simplify messaging around COVID-19?

- ▶ Messaging can be particularly confusing for people who speak English as a second language
- ▶ Simplifying messaging doesn't address the key difficulties of communication. When develop a message, we need to consider:
 - ▶ In what format the message is being delivered e.g. print, radio, forums etc.?
 - ▶ The person who delivers the message, e.g. community members, health staff etc.?
- ▶ A community-based approach is the best way to deliver messages to CALD communities
 - ▶ Rapport and trust are needed to deliver messages in a meaningful way
 - ▶ Communities want to be a part of the conversation, not spoken to or lectured

Question 4: What are some of the concerns people have around vaccination?

- ▶ In order to understand concerns, it is important to listen to what communities are saying
- ▶ Perceptions around vaccines include that they:
 - ▶ Were developed quickly;
 - ▶ Might be experimental; and
 - ▶ Are using new technology.
- ▶ It is hard to process the large amount of information about COVID-19 and vaccination
- ▶ It has been hard to communicate the safety and benefits surrounding vaccination
 - ▶ Concerns around safety may be due to the amount of reporting and focus on vaccines
 - ▶ Serious side-effects are very rare and are treatable
- ▶ Young people may be motivated to get vaccinated due to factors such as participation in work and study, travelling, protecting themselves and others etc.

Launch of the Glossary

Tish Bruce

Executive Director

Health and Social Policy Branch, NSW Ministry of Health

COVID-19

Glossary of Medical Terminology for Immunisation and Vaccine development

Closing

Dr Marianne Gale

Director

Population and Community Health

South Eastern Sydney Local Health District