

## Element 2.2 Identify Strategies to engage new and emerging refugee communities

### Fact Sheet 9 Community Contacts

This table summarises the experiences as related to the development of the Good Food for New Arrivals Project. It provides insight in to the advantages/disadvantages of working with various groups and/or individuals in strengthening community participatory processes.

Community Contact	Advantages	Disadvantages	Comments
<b>Community Leaders</b>	<ul style="list-style-type: none"> <li>• Often a single point of contact</li> <li>• Opinion leader aware of program with ability to influence individuals to attend</li> <li>• Experience in bridging in to the community</li> <li>• Ability to increase capacity and spread of the Project.</li> </ul>	<ul style="list-style-type: none"> <li>• Gate keeping - one person controls information that enters and leaves community</li> <li>• Lack of availability - community leaders have many demands made on their time and hence may be difficult to access</li> <li>• Frequent changes of leadership especially with new and emerging communities</li> <li>• Risk of limited access to all groups if relying on one community member</li> <li>• Potential burnout</li> </ul>	<ul style="list-style-type: none"> <li>• Essential to ensure that community pathways are followed, due respect is given to those in positions held in high esteem, the community executive are aware and supportive of the program and the gendered roles are respected.</li> <li>• Consideration of gender roles is important to consider, e.g. in some communities the men defer to the women on many issues especially around infants and parenting, but it may be important to seek 'permission' from men to speak with the women of the community. Strategies required to facilitate involvement may include, e.g. training, payment for time, employment of bicultural workers.</li> <li>• Contact is facilitated if the community leader is aware of the auspicing organization. However, it is only maintained once the individuals involved generate trust.</li> </ul>

Community Contact	Advantages	Disadvantages	Comments
			<ul style="list-style-type: none"> <li>Community leaders can act as gatekeepers, contacts need to be established with a number of people within the community hierarchy. Some community groups have diversity of ethnicities. E.g. South Sudanese is made up of over 20 different tribes. Many individuals may only be comfortable associating with their own specific ethnicity and not prepared to mix.</li> </ul>
<b>Adult Migrant English Service (AMES)</b>	<ul style="list-style-type: none"> <li>Familiar with attending most weeks</li> <li>Facilitated by someone trusted;</li> <li>Trust of other participants</li> <li>Familiar with transport, venue and timing</li> <li>Crèche usually available</li> <li>Integration of health information with education.</li> </ul>	<ul style="list-style-type: none"> <li>Mixed language groups, bring possible need for multiple interpreters</li> <li>Mixed migrants and refugees -a variety of experiences, concentration and needs</li> <li>Time restriction</li> <li>May be seen as an inappropriate forum for consultation</li> </ul>	<ul style="list-style-type: none"> <li>English teachers use visitors to expand their students' opportunities and to discuss other subjects.</li> <li>Visiting the same classes on a number of occasions assists in building relationships.</li> <li>Knowledge of the English level and literacy of the class is essential.</li> <li>The different environment of classes dictate the types of clients attending. E.g. community classes attended mainly part-time by mothers of young children, whereas TAFE held classes are often full time and of mixed genders.</li> <li>Facilitation needs to be prepared but flexible. In mixed language groups, one-to-one consultations or pairs rather than group work allow all to participate.</li> </ul>

Community Contact	Advantages	Disadvantages	Comments
			<ul style="list-style-type: none"> <li>Bicultural workers can greatly assist with facilitation especially if from the same communities as those targeted, this helps to form a bond and build trust.</li> </ul>
<p><b>Established groups</b> (E.g. sewing groups, coffee mornings, playgroups, women's and men's groups as well as information sessions.)</p>	<ul style="list-style-type: none"> <li>Familiarity with timing venue and transport;</li> <li>Facilitated by someone that is trusted;</li> <li>Crèche facilities often available;</li> <li>Integration of health information familiar in this setting;</li> <li>Often attend for other reasons but will participate fully as comfortable in that space</li> <li>Time/flexibility</li> </ul>	<ul style="list-style-type: none"> <li>Inability to change room set ups or programming;</li> <li>Other priorities may take precedence and discussions can take tangents not relevant;</li> <li>The group may have preformed group dynamics and a hierarchy that may be difficult to manage;</li> <li>Some participants may have formed strong bonds which could make full group participation difficult.</li> </ul>	<ul style="list-style-type: none"> <li>Make strong and specific arrangements with the group facilitator to ensure understanding of how the group operates.</li> <li>Ensure that the facilitator has informed the group that you will be coming and briefed them about what you plan to do and how you wish to achieve it.</li> <li>Meet the group prior to your facilitated session if possible, so that you have an idea of what to expect.</li> </ul>
<p><b>Community groups established by other Service Providers</b></p>	<ul style="list-style-type: none"> <li>Community is familiar with this service provider</li> <li>Facilitated by someone trusted;</li> <li>Crèche often available</li> <li>Familiar with transport venue and timing</li> <li>Integration of health information is familiar in this setting</li> <li>Often the facilitator of the group will provide interpreting services or knows those attending well</li> <li>Creating partnerships and showing reliability and goodwill in participating across services raises awareness of Projects and ability for joint working.</li> </ul>	<ul style="list-style-type: none"> <li>The service provider may not have a good understanding of the Project and your role or capacity</li> <li>Service provider may consider other points of greater importance and wish to influence the session to meet their needs more effectively</li> <li>There can be other pressing influences on the service provider's time and you may have been asked to a group that is not well formed or briefed on the purpose of your visit.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure good communication with other service providers.</li> <li>Consider showing them your session plan.</li> <li>Gather demographics and other useful information about the audience prior to attending;</li> <li>Do not be afraid of asking for assistance and being clear about what each facilitators role will be on the day;</li> <li>Complications may arise from alternative agenda and expectations to that which you are providing.</li> </ul>

Community Contact	Advantages	Disadvantages	Comments
<b>Refugee Clinic</b>	<ul style="list-style-type: none"> <li>• Families transported to and from their clinic appointments</li> <li>• Interpreters (known to the clinic) available</li> <li>• Demographic information available on family size, living arrangements, children's ages and state of health</li> <li>• Families attending on multiple occasions understand the system and engage more with the health professionals;</li> <li>• Information on dietary issues can be gathered through dietary assessments</li> <li>• Generalizations in dietary intake and nutrition issues can be formed in small communities due to volume attending clinic;</li> <li>• Enables a service provider perspective of the consultation process and how the pressures of a busy clinic influence services;</li> <li>• Enables review of dietary advice given assessing effective communication strategies;</li> <li>• Opportunities for incidental nutrition advice through talking in the waiting area, availability of information from nutrition professional for the whole family.</li> </ul>	<ul style="list-style-type: none"> <li>• A hospital environment can be intimidating for many families new to Australia</li> <li>• Travelling distances and times from some of the outer suburbs can be problematic</li> <li>• Availability of interpreters is often pressured, resulting in long waiting periods</li> <li>• The waiting room can be very busy, it can be a stressful environment for parents</li> <li>• Volume of information that needs to be retained is high due to variety of disciplines accessed.</li> </ul>	<ul style="list-style-type: none"> <li>• A comfortable environment for service providers, it is not familiar for community members. Highlights the time pressures both the service providers and the clients face within the clinical situation.</li> <li>• Possibility to obtain information on perceived importance and relevance of nutrition information, review how well or otherwise this information had been put into practice.</li> <li>• Often the male head of household will attend medical appointments leaving the female in the waiting room, it is important when discussing food to have the attention of the person who cooks</li> <li>• Useful when both parents are present as the person cooking may not be in charge of budgeting, and the budget holder must understand the need for dietary manipulation.</li> <li>• Although a useful method of seeing many clients, time not available to build a trusting relationship. Client may not feel confident to ask questions for clarity.</li> <li>• Provides an opportunity for incidental nutrition education, often information given relevant to the whole family.</li> </ul>

			<ul style="list-style-type: none"><li>• Fruit made available for families to take home. A donation from the Ministry of Agriculture and occurs on a weekly basis. This helps to reinforce messages around fruit intake for all.</li></ul>
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