

# Remembering and recovering from COVID-19

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Multicultural experiences in  
Melbourne during the pandemic



# Neighbours Every Day

Relationships Australia is a leading provider of relationship support services for individuals, families and communities. They aim to support all people in Australia to achieve positive and respectful relationships.

This project was made possible through a collaboration between Lendlease VIC, Merri-bek City Council and Relationships Australia National. We would also like to thank VICSEG New Futures for their support.

## Further information

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# Project outline

Relationships Australia is the home of the Neighbours Every Day campaign (formerly Neighbour Day) which promotes the importance of social connection. This project sought to understand the unique effects COVID-19 and associated restrictions have had on multicultural communities in Melbourne, especially in relation to their social connections.

The findings from this research add to the growing body of knowledge around social connection in multicultural communities, supporting Lendlease, Merri-bek City Council and Relationships Australia to build and foster communities that are more connected, accessible, and respectful. Melbourne was chosen as the focus for the project due to the uniquely strict and lengthy lockdowns that occurred from 2020-2021.

## Project Aims

- 1 Explore the ongoing effects COVID-19 is having on multicultural communities, especially in relation to social connection and social cohesion, relationships and mental health.
- 2 Compare the perceived and actual issues affecting communities and provide solution-focused recommendations to address these issues.
- 3 Incorporate the research findings into our practice and support relevant partners to do the same.

# Key Findings

Culturally and linguistically diverse communities (CALD) communities faced unique pandemic challenges which led to higher levels of grief, trauma, and stress.

Multicultural communities have high rates of frontline workers. Frontline workers and their spouses experienced intense working environments, information overload, and mental health issues during the pandemic.

New parents felt isolated and were especially anxious about the risks of catching COVID-19. Parents of multiple children were stretched to their limits resulting in reduced school attendance - something which continues today. However, families also noted improved family connections and closeness.

Many moved during the pandemic. Moving houses or countries disrupted social networks and left people feeling isolated and lonely. New migrants found it almost impossible to meet people and did not understand where to acquire information, especially in relation to the pandemic.

# Key Findings

continued

Multicultural communities experienced significant bereavement, something which was exacerbated by geographic separation. Those who hadn't lost someone still found it difficult to keep in touch and missed important family occasions. Experiences with bereavement left people with ongoing fears about their families' health and safety.

Despite widespread experiences with mental ill-health throughout the pandemic, intensified by the higher levels of grief, trauma and stress, mental health remains a taboo topic in many multicultural communities. Multicultural communities also find the Australian mental health system difficult and non-intuitive to access.

Most have not had the opportunity to debrief on their pandemic experiences, especially in a group setting. There is an ongoing need for safe spaces to talk about the experiences people had throughout the pandemic, especially with others who have had similar experiences.

People felt that any attempts to support their recovery would be most successful if led from within the community. Support is needed to enable people from within the community to take on sustainable leadership roles.

# Literature Review

For a variety of reasons, CALD (culturally and linguistically diverse) communities were the topic of much discussion throughout the COVID-19 pandemic. The higher case numbers in CALD communities, their increased likelihood of working in [frontline work, precarious work or multiple jobs](#), experiences with [pandemic-related racism](#), disproportionate COVID-19 [prevalence and mortality rates](#), the enhanced need to [communicate public health advice via trusted channels](#), [higher density households](#), and other issues meant COVID-19 had a unique effect on the many CALD communities. The term CALD refers to a wide catchment of people across a variety of cultural, social, and economic spectrums. This study connected with people from a variety of cultural groups, many of whom were born overseas and had moved to Australia within the last 15 years. Most owned their own home, had higher education, and regularly visited their family overseas.

Previous research has found unemployed CALD people were more likely to [perceive worse impacts](#) from the pandemic than employed CALD people. Other research has shown CALD communities were more likely to experience [financial hardship and more significant mental health impacts](#). Mental health was shown to be one of the [key issues placing pressure on Australian relationships](#) in 2022, with 13% of Australians saying their health was terrible in the past six months and 22% of Australians saying their mental health had placed pressure on their relationships. However, Embrace Mental Health's research found [increased levels of stigma](#) (both self and social stigma) during the pandemic, and few clear pathways to talk safely about mental health in preferred languages.

Although research is emerging about the effects of COVID-19 on CALD communities, especially in relation to financial or mental health struggles, this work had a particular focus on the nexus between family and community relationships and mental health.

# Methodology

## Council Survey

**February - March 2022**

Merri-bek City Council (formerly Moreland City Council) ran a survey of residents exploring their thoughts about social connection and cohesion. These findings helped clarify the knowledge people had about social connection campaigns and their importance and helped inform the design of the focus groups.

## Focus Groups

**13th-18th of September 2022**

We conducted 6 focus groups with multicultural communities across Melbourne. We ran:

- two focus groups with pre-existing women's groups in established Melbourne suburbs
- four focus groups in outer Melbourne suburbs, which were developed between 5-15 years ago

The researchers included:

- Senior Research and Project officer at Relationships Australia
- National Neighbours Every Day campaign manager
- two psychology students from the Australian National University interning with Relationships Australia

# Methodology

## Recruitment

We used a variety of online and peer-to-peer recruitment methods – including placing flyers in the community centres and other public spaces in the suburb, online promotion using Facebook, council newsletters and contacting community leaders for support. Participants in the focus group were incentivised with \$50 VISA gift cards for their time. They were also provided with food from a local café. Survey participants were not incentivised.

The focus groups took place during the day in local community centres, libraries or similar spaces. The online focus was held in the evening. The groups went for 40-60 minutes. The survey included 40 questions and took approximately 15 minutes to complete



**40 Survey Questions**




**124 Survey Completions**



**6 Focus Groups**



**27 Participants**



**5 in-person  
1 online**

## Sampling

The sample provided a nuanced perspective of the local areas, especially because some participants were community leaders, or worked in community development, giving them greater perspective on the community's experiences. However, as is the case with qualitative studies, it is not necessarily useful to generalise to the population. While the focus groups reached data saturation, some communities may not be represented in the data. For example, we did not hire translators, however some facilitators were able to provide casual translations during the focus groups.



# Survey Snapshot

53%

agreed they often  
feel lonely  
compared to 20% national average\*

18%

have been struggling  
with their mental health  
compared to 14% national average\*

84%

had never been involved  
in a social connection  
campaign run by the  
Council

83%

think its important to know  
your neighbours and would  
be interested in meeting  
their neighbours

40%

felt they had the skills  
/confidence to meet new  
people in their  
neighbourhood

18%

knew how to  
maintain  
these connections

\*national average numbers taken from [Relationship Indicators 2022](#)

# Research findings

## **‘Ignorance is bliss’ - Frontline workers feeling over-informed**

*Multicultural communities had high rates of frontline workers, who experienced unique levels of burnout and exhaustion during the pandemic, while their partners and families faced significant challenges at home.*

Many of our participants, or the participants' spouses, were employed as frontline workers during the pandemic. They described the intensity of the early weeks working in hospitals. They were given a lot of information about the virus, but they felt there was almost too much to wade through to understand how to effectively respond and keep their family safe. They described going to great lengths to sanitise their clothes and bodies when returning home from work, as well as groceries and other deliveries. As the pandemic progressed, frontline workers and their families described exhaustion and fatigue from long hours and stressful work. For partners staying at home, they expressed feelings of isolation.

**“I would like them to [work from home] to support us, to see us”**

In contrast to other reporting on CALD communities, our participants who worked in healthcare felt extremely well informed on the pandemic – in some cases, ‘over-informed’. One participant had to resign from her position as a nurse and from her public health degree, explaining she felt obsessed with the information and so overwhelmed that it was “affecting [her] personally” and made it difficult to switch off. Another nurse said that two of her colleagues had similar experiences, leading to their resignation.

**“Mentally I was overwhelmed with the information...I understand how the lungs work, I understood how to set-up a ventilator... the environment, and the news, and the people and the sadness was so scary.”**

## Parenting in a pandemic

*New parents felt isolated and were especially anxious about the risks of catching COVID-19. Parents of multiple children were stretched to their limits resulting in reduced school attendance - something which continues today.*

### First-time parents

Several of the participants became parents throughout the pandemic and found this experience to be extremely challenging. Those who were pregnant during the pandemic said they noticed they were much more paranoid about catching COVID-19 after they became pregnant, something which continued once they had a baby to look after. One mother experienced post-natal depression, something which she said the pandemic contributed to significantly.

**“I waited in shopping centres, with [my baby] just hoping someone would talk to me.”**

Mothers felt the loss of key moments and other supports. People spoke about the isolation of birthing alone, or losing important moments as first-time mothers.

**“Not having my partner be able to go to ultrasounds, it was just super frustrating. Knowing that people weren't doing the right things, and that we were sort of suffering.”**

A new father said that he still felt like there wasn't enough support even since the lockdowns had finished.

**“What I find challenging is that there's not much support for the supporting parents, you know, in this case, being male. No one's ever asked me if I need some support.”**

## Pressures on parents with multiple children

During lockdowns, parents said they had no time or energy while home-schooling to attend to all their children. One parent who was home-schooling her older children while pregnant said “I was crying almost every day...my husband was working; we were just stuck at home.” Women spoke of the pressure on mothers to keep the home running and to avoid getting sick, or continue caring for people if they did.

**“The difficult thing was to keep yourself healthy, mentally, physically and family, husband, wife.”**

Some felt that the pressure to uphold the family was a culturally-specific experience. Another mother said the loss of support workers for her adult children placed great pressure on her and her partner’s relationship, and she felt pressure to step up and look after both children and her husband.

Families who had just moved from overseas said their kids just stopped attending online school as they didn’t speak English. The mothers of families that had been in Australia for longer said that home-schooling was beneficial for their own learning. While home-schooling their children their English had improved, but they thought their children’s education had suffered as they didn’t understand the Australian schooling system “because it was so different to what [they] did at school”.

Parents of teenagers noted that while they had very supportive schools who required the students to log onto Zoom lessons and called the families regularly to check on them, the teens still retreated into their rooms and online. They said their children had used the free counselling services at the school to help manage their distress.

The requirements to isolate made no sense for one larger family and ultimately, they all caught COVID-19 once one child brought it home.

**“How could I leave [my son] in his room on his own? He was crying, his body aches, he was six or seven....How could I just leave him in the room alone? That’s how we all caught it.”**

## Recovering as a family

After the lockdowns, parents said that their younger children's social development was noticeably different to their older children's. Many felt that their children were less excited about going out and needed more encouragement to attend school. This was made worse by the perception that schools were experiencing a lot of staff turnover following the end of lockdowns.

Despite these challenges, they also felt that "a lot of people had a bit of a timeout, to sort of spend time with your family and engage a bit more". Some felt they had changed their family life for the better. Their children had met other neighbourhood children who would typically have been out doing co-curricular activities. Families felt more connected to each other and their family overseas, as parents had learnt how to use technology with the help of their children.

**"Covid taught us that life is short...you've gotta get out and enjoy it."**

**"It's made a lot of people's live easier, but then obviously, a lot of other people's lives were harder, a lot of disappointments and financial issues."**

## Benefits and pitfalls of moving during a pandemic

*While the pandemic offered many an opportunity to buy their first home, moving during this time left them isolated and lonely. Families who moved to Australia during the pandemic found it almost impossible to meet people or understand where to acquire information, especially in relation to the pandemic.*

Many of our participants moved during the pandemic, especially from rentals to outer suburbs where they could afford to own their home. For some, having a new house made life easier. They had more space and 'something to work on' during the long months at home.

Others said that the issues with supply chains and restrictions meant their houses were unfinished, but money issues forced them to move in before they were ready. One mother said that because their garden was not completed before the pandemic her children had no yard to play in, and so were stuck inside for almost 2 years.

Those who moved away from established networks said that when they did contract COVID-19, they had little local support as they hadn't created new communities yet. In fact, several still returned to their old suburb for groceries and to join their women's group, even now.

**"Majority of the multicultural people are just moving because, you know, we wanted our house because we can't live in an apartment. Houses are finally possible for us, so we all move"**

Some of our participants had moved during the pandemic from overseas. They described the challenges of hotel quarantine with 4 or more children in one room. One said that when she left she called her friend and "chat with her for almost three hours without stopping". They then completed several more lockdowns with their family but they found this easier as they could prepare their own food and open the windows or go outside.

People who had just moved to Australia felt very disconnected from the healthcare system and didn't know what to do if they contracted COVID-19, where they should report the case, or where to get vaccinated. But many reported that being connected to just one community activity, such as the women's group, gave them access to all this information.

**"If you are new in Australia, you don't know how to hear from the government, how that information should come to you. It's only something being part of something like this [the group] that gets you to know"**

Many women said their qualifications were nullified when they moved to Australia for their partners work, so the combination of no work and 'no school' left them feeling extremely isolated.

**"My children say 'why did you bring us to Australia? We don't have friends'"**

Their children were also then very scared to go to school for the first time, as they had not learnt any English while at home. Again, these participants felt that their involvement in community activities had really helped with these feelings.

**"I had just moved to Australia, everything was closed. I had no friends, not even any family. So this was the main place from where I interacted with people, got the information, how the system in Australia works, how is the healthcare reaching out to the people. Everything. I just got that information from here."**

**"I was here two years and I didn't know anyone I was just in the house. Then at the playground I met [my friend]. When I know [my friend] I know everything"**

Once settled in their new community, many had created very strong bonds with the suburb, describing the supportive community, great facilities and culturally appropriate shops. They felt that moving to a new area was especially challenging for them as they needed specific shops or facilities which catered to their culture.

**"But still, we had tears in the eyes, like we are leaving this suburb, you know, so many memories"**

## Geographic separation from family and friends

*Multicultural communities experienced significant bereavement, something which was exacerbated by geographic separation. Experiences with bereavement left them with ongoing fears about their health and safety.*

While geographic separation of families is not unique to multicultural communities, the effects geographic separation had throughout COVID-19 was palpable in our focus groups. Participants spoke about missing out on their yearly visits to see their loved ones, missing important family occasions, and being inundated with visitors from overseas when the restrictions finally lifted. One family spoke about having her mother stay for three years, after she was caught here during March 2020.

**"Everyone's parents here, all the time. Everyone's in-laws here...it's a cultural thing."**

Adult children stuck in Australia said they felt very worried about their family overseas, especially in higher density living with less reliable or affordable healthcare. In some cases, this led families to share health information about the pandemic or wire money overseas to receive treatment. Unfortunately, many had experienced bereavement, with one participant losing nine family members to COVID-19.

**"...every month we lose someone in India."**

**"I tried to call a few days later and say, like, do you need money. But it was too late, he had died already."**

**"It was a very terrible time. Very bad."**

This led them to have ongoing fears about contacting their family, as they feared bad news was always on the horizon.



Other participants who had lost overseas family members from other illnesses said that missing out on their funerals still affected them. This, produced a unique grief where they would sometimes forget they had lost their relative – the opportunity to visit their families more recently had help assuage some of this.

Another participant said that when their area was a hotspot, it caused their family overseas to become worried, despite the fact that they felt very safe and “for [them] nothing actually changed.”

**“[The news] was everywhere, that was making them more terrified though.”**

**"They were there strangled, we were here strangled"**

## **Growing awareness but persistent stigma of mental health**

*Awareness of mental health and mental illness has grown as a result of the pandemic, but encouraging help-seeking is still an area for improvement.*

Mental health received significant emphasis in all the focus groups we ran. Each group had at least one participant who revealed significant struggles with their mental health during the pandemic and all groups gravitated towards discussing this topic. Depression, anxiety and post-natal depression affected different participants, as well as more general feelings of sadness, anger, fear, loneliness and isolation.

**“I’ve never felt lonely...I’ve never felt scared, but you know, in these two years I felt scared.”**

**“I’m not that bad, I’m not that angry, I’m not that stressed.”**

**“It was the toughest time I’ve ever seen in my life, ever.”**

One Sikh participant who had significant struggles for several years said that her partner and family had been an important source of support, but the entire group acknowledged that she was “lucky”. They all agreed that the concept of mental health was extremely stigmatised in Indian culture and that the support she got was unusual, as families usually expected a mother to keep the family together and not “go crazy”.

**“I am so lucky, my husband is my rock, he is like, everything.”**

This same participant was also receiving support from a woman at her temple to overcome her struggles, and recommended she attend the focus group, and other events, to “tell her story”.

Participants from the women’s groups said that the group had been very important for their mental health. They had presenters from a local public health organisation come and educate the women on the importance of mental health and the role a General Practitioner (GP) plays in the process of accessing support.

**“Now we know mental health is as important as physical health”**

Women also said that having a community group helped them talk about their own mental health.

**“Feel so lonely, am I like, the only one who is suffering from this? I find this group and I know, I’m not.”**

Participants felt that their children had a greater understanding of mental health as a result of the pandemic. Yet, they also noticed that their kids were very reluctant to go out after the lockdowns and weren’t necessarily seeking help for their “low moods”. One of the women’s groups facilitators said this reluctance was present in their group as well, so she felt that this phenomenon affected parents and children.

Another participant felt that the system in Australia for seeking mental health support did not make sense to other cultures, as there were many misconceptions about who GPs would share your private health information with, or confusion about the role of GPs assessing your mental health, instead of your physical health.

**"People from multicultural backgrounds know that there's a lot of stigma around talking about mental health and the idea of going to a GP when you have mental health issues doesn't sit well."**

The same participant also posited a reason for the role that migrating plays on mental health, suggesting that:

**"The big difference for people from multicultural backgrounds is that where they would have come from generally speaking, would have been a more collectivist kind of environment. And here, we are so used to being individualistic, that, you know, at the end of the day, we go home, we have our own meal by ourselves, and maybe we catch up on the weekends. And people from multicultural backgrounds are not used to that."**

The stigma associated with mental health was laid bare in one focus group where a couple attended, with the wife describing some intense feelings she had during the lockdown. Her husband dismissed her, saying "Oh she's been like this ever since covid, she's complaining and won't stop talking. Ignore her." This participant later asked us to stop talking about the pandemic as it was too hard for her to continue thinking about. The research team provided her with some documents to help her seek support following the focus group.

**"Financially I was so stressed, mentally, there was no part left in my life that I wasn't stressed about."**

## Moving on from the pandemic

*Most have moved on from the pandemic without dwelling on the major effects it has had on their health and wellbeing, others are still struggling to move forward.*

For most of our participants, this was the first time they had an in-depth debrief about the pandemic. When we asked them how they were processing these experiences, some had sought counselling, but not for the pandemic itself. Most said they didn't really talk about it, they just moved on.

**"I just deleted those two years."**

Despite this, people still appeared to have strong emotional connections to experiences that we may now consider minor. Memories of a vehicle visiting their home marked with the words 'COVID-19 response' in the very early days of the pandemic caused one person to wince – still fearing the social repercussions they felt would arise from their neighbours thinking they had COVID-19 when "no one had covid then, no one".

Another participant was actively seeking out experiences such as the focus group to share her story. She said the isolation had really affected her and was hoping to attend more of these sessions.

**"I like to meet people, talk to them...I love talking."**

Those who had experienced significant grief and trauma said that there was little opportunity to share their story. Despite others having similar experiences, the lack of formal support meant it wasn't something they would bring up.

**"You have no one to sit and share these stories with."**

# The importance of community-led initiatives to create social connection

*People recognise that social connection is most successful when it comes from within the community and many multicultural communities have willing and capable community leaders. There are a lot of opportunities for social connection and recovery following the pandemic.*

Participants spoke about the importance of supporting local leaders to help with the recovery from COVID-19. Some ideas for community-led initiatives included:

- Immigration peer-support services, especially for university students. Many mentioned that word of mouth was the most useful way for them to find out about services, social occasions, and employment when they arrived.
- 'Clean up the area' days – noting the significant effect stray worksite rubbish was having on the liveability of newly established communities. Participants felt this would encourage pride in the area and was a family-friendly activity.
- Group-led discussions about the effects of COVID-19, natural disasters, or similar events. Many had not spoken about the effects of recent years with anyone. People mentioned the relief the focus group discussion brought and the need for more similar events. It was also a useful way to engage in a discussion about mental health in a non-confrontational and less stigmatising way. These events may require support from grief practitioners.
- Community leader upskilling sessions. They explored opportunities to upskill new members of the community, or people in life transitions to become leaders in their community. They felt that many of the barriers to participation could be overcome if the information was accessible, avoiding learning through trial and error, and potentially burning out.

The women's groups were a great example of peer-led recovery. They provided opportunities for English-language acquisition, improved confidence and were a source of social, physical and emotional support. They employed migrants as group leaders, upskilling them in community development, who then supported other group members to find employment or education in Australia.

While on the surface they appeared to be social groups, the groups were often visited by other organisations who shared health advice, or ran information sessions on family and domestic violence, sessions on gender equality, addictions, mental health, information about how to enrol your children in school and much, much more. Many described the initiatives as "life-savers". For very little investment, these groups provided significant social, emotional, and physical support and acted as strong primary prevention in public health campaigns.

After getting involved in the group, some women had gone on to project manage major events in their local area. They spoke about the confidence this gave them and the important role they now played in the community. They felt that with ongoing support, there would be many other new members of the community who could complete similar work.

**"We are more confident now like what to do and where we were wrong...So you know, it's kind of a learning and, and working together as a team that makes you a good relationship between [us]."**

**"So I feel like we should have these kind of carnivals [that we organised] even more to entertain people positively. And take them out and build that relationship."**

# Recommendations

1 Explore opportunities to address the significant mental health effects of the pandemic on multicultural communities. Activities which build social cohesion, connect people to culture and identity, encourage sharing and create a sense of belonging are all important for people's mental health and are especially necessary following the impacts of the pandemic. For communities who face stigma when discussing mental health, social interventions provide a more accessible alternative to having these difficult conversations.

2 Consider the unique social isolation multicultural people face during times of upheaval and the effect this has on their ability to access education and services. More should be done to support multicultural children and their families before, during and after major upheavals. For example, we believe similar outcomes would occur following a major weather event such as a bushfire or flood.

3 Continue to fund and support community projects and campaigns led by community leaders, especially those which increase social cohesion. This increases the popularity of the project, provides employment opportunities and gives a sense of ownership to the community.

# Recommendations

## continued

4 Support community organisers in tangible ways to avoid burn-out. Community event management workshops may help new leaders to be more sustainable in their efforts. Helping these leaders complete practical steps like gaining council permission, or providing financial and promotional support would be invaluable in the creation of sustainable and impactful leaders.

5 Continue funding social connection groups such as the women's groups run by VICSEG New Futures. These are incredible tools for connection, confidence building, public health dissemination, career progression, English-acquisition and much more. They have flow-on effects to the entire community.

6 Continue promoting the importance of social connection campaigns, such as Neighbours Every Day (NED). NED is a proven intervention, which supports communities to engage in their own community-building, which leads to sustainable reductions in loneliness and improvements to mental health, which have endured despite the pandemic.