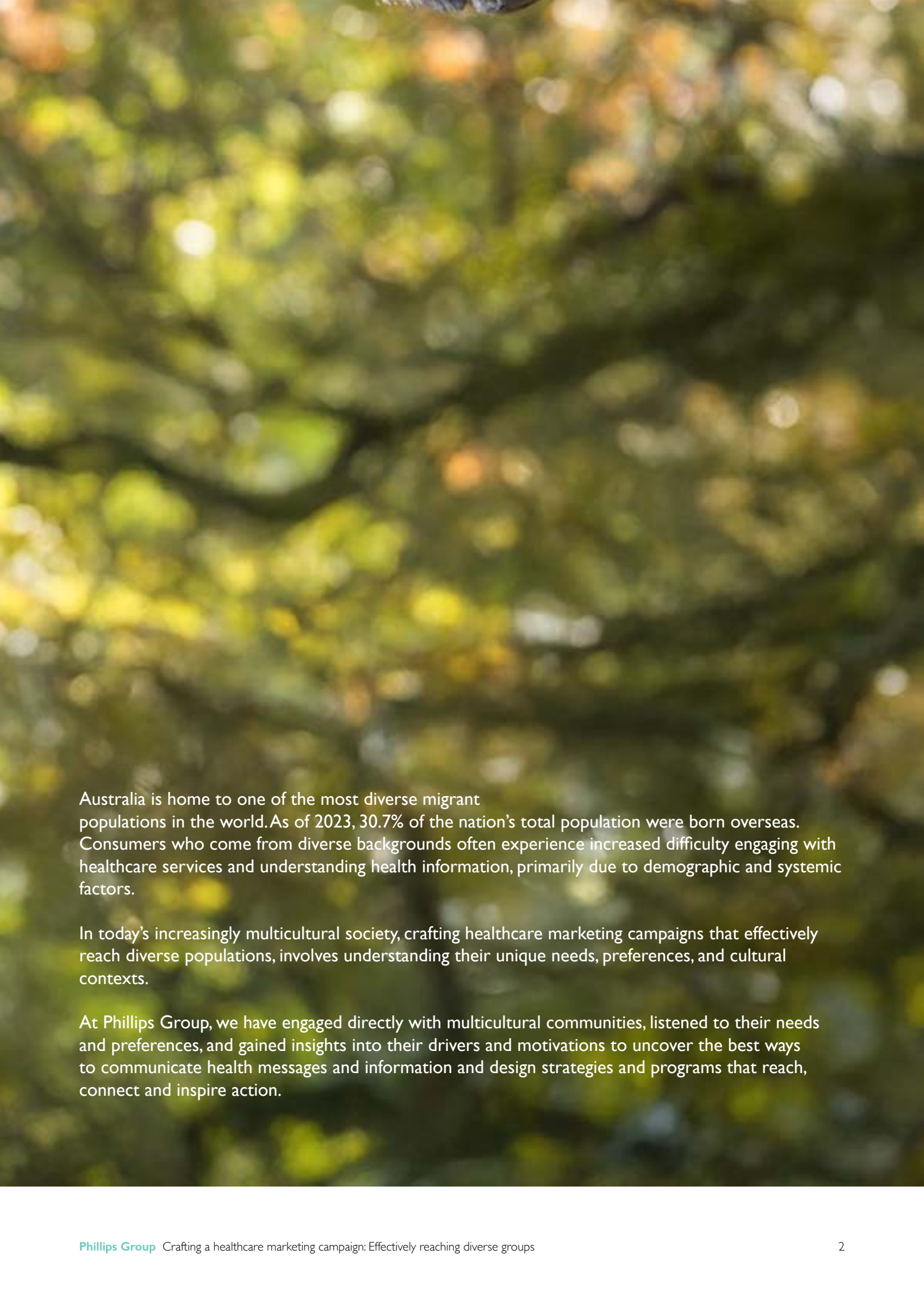


Crafting a healthcare marketing campaign: Effectively reaching diverse groups





Australia is home to one of the most diverse migrant populations in the world. As of 2023, 30.7% of the nation's total population were born overseas. Consumers who come from diverse backgrounds often experience increased difficulty engaging with healthcare services and understanding health information, primarily due to demographic and systemic factors.

In today's increasingly multicultural society, crafting healthcare marketing campaigns that effectively reach diverse populations, involves understanding their unique needs, preferences, and cultural contexts.

At Phillips Group, we have engaged directly with multicultural communities, listened to their needs and preferences, and gained insights into their drivers and motivations to uncover the best ways to communicate health messages and information and design strategies and programs that reach, connect and inspire action.

Key considerations when engaging with CALD communities

We have developed a snapshot of our research with multicultural communities to convey the most important themes we have found relevant to informing healthcare marketing campaigns for these groups. Four key areas consistently show up and impact the acceptance and adoption of messages and information. These areas relate to what the message is, who conveys the message, and how it is conveyed.

1 Inter-racial and power dynamics has a role in receiving, accepting and adopting health information

Inter-racial power dynamics are a fundamental aspect on how power is distributed, maintained and exercised in multicultural communities. Power dynamics operate differently in different communities, and when tailoring educational materials to an audience, it's important to understand what they respond to and value.

Respect for leaders

Understanding community power dynamics is important for tailoring messages in language that respects culture while informing community choices.

Multicultural communities respect leaders and people in influential positions. Power dynamics and imbalances involve community leaders, faith leaders and within marriage. There is high respect for people in positions of power from within and external to the community. Some communities have a high level of respect for positions of authority while other communities, particularly those who have migrated from countries with corrupt or despotic political regimes, have a strong mistrust of governments and authority figures. These attitudes directly influence the decisions multicultural communities make regarding their health. For example, during the COVID-19 pandemic a disproportionate amount of multicultural people refused to get vaccinated due to low trust in government and authority figures.

Interconnectedness of culture

The interconnectedness of cultural communities can act as a major deterrent for seeking help about prevention or diagnosis or treatment on personal matters because there is potential for there to be a breach of confidentiality, which is far greater in these communities than in other communities. For sensitive topics, some people prefer to talk to someone from a different ethnic group to obtain a level of anonymity, this is particularly the case for women.

Cultural practices

Communities have very different cultural practices that can be considered either acceptable or non-acceptable in comparison to Western practices. Within multicultural communities, the complexity of identifying with both the individual's ethnocultural heritage and their society of residence can create an indifference between first—and second-generation Australians and shape how individuals interact with family and social conditions.

Community champion models

Using community champion models who drive positive behaviours can be useful for different groups and help to address power dynamics. Identifying and utilising trusted sources, such as community leaders, to disseminate information can be an effective strategy to address potential apprehensions communities may have in trusting health authorities. When doing so, the information needs to be given to community leaders in an empowering way for it to be more likely to be communicated.

2 Addressing language barriers requires more than accurate translations

Language barriers present a key challenge in effectively conveying information to communities with English often being a second language for multicultural individuals and groups. Our research has shown that these communities often lack access to appropriate translators.

People from different cultures describe matters differently with unique labelling words. It is not uncommon for multicultural communities to use different language or words to discuss health related and/or sensitive matters. Translated materials need to be accurate, carefully consider the topic and use of language or word selection.

Multicultural communities are generally more receptive to simple, straight-to-the-point language. Clear visual narratives and subtitles on communication materials have been found to be highly effective. Additionally, materials should be conservative in the number of messages they attempt to convey, as featuring too many risks all points being missed entirely.

Co-designed partnership approaches are critical for community education where there are language barriers and specific needs of cultural groups. Drawing on community champions, respected intermediaries and multicultural networks and holding targeted community focus groups can significantly assist the design of effective health information.

3 Being relatable isn't about generic or stereotypical depictions

Multicultural communities are multifaceted, and audiences do not respond to generic or stereotypical depictions of themselves. Situations need to represent diversity and be inclusive and avoid presenting a mainstream appearance and look. Many individuals, particularly generational immigrants, experience the complexities of identifying with both their ethnocultural heritage and Australian society.

Portraying cultures in a stereotypical manner may leave audiences feeling alienated from the broader society in which they live in. Extensive caution needs to be taken to ensure that the health-related issue being presented is not portrayed as a result of the culture or community being targeted.

Creating situations that are relatable and in an authentic manner increases the likelihood of the message being received as intended.

4 Stigma is a significant barrier to engaging with a health message

Stigma is a significant barrier for multicultural communities' engagement with a health message. People have concerns over bringing shame to themselves or their family. Cultural and sociological factors may influence how certain people perceive certain topics, depending on their backgrounds. This can have significant implications for the way the topic is viewed, understood and accepted. Being mindful of potential sensitivities audiences may have to certain topics due to stigmas is crucial when designing educational materials.

In summary, our research has found effective health messages and information for multicultural communities include:

- ▶ Co-designed partnership approaches that consider specific communication needs of the population group
- ▶ Tailored materials that are relatable capturing the various aspects and differing identity traits associated with both the culture the audience resonates helps to make information relatable
- ▶ Addressing language barriers by providing health education in-language and ensuring the appropriate use of 'lingo'

For more information about how we undertake research with CALD communities, contact our Group Executive Director Health and Care, Rebecca Williams.

You can Download our [Step-by-step guide to developing a successful healthcare marketing campaign aimed at diverse groups](#) here.

**If you have gaps in your
communication and engagement
approaches, we can provide support.**



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