



Engaging Arabic Speaking Communities Within Mental Health Services

CALD Toolkit

A Marketing Guide to
Engaging Arabic Speaking
Communities

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A Marketing Guide to Engaging Arabic Speaking Communities

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The purpose of this document is to serve as a guide for organisations implementing marketing campaigns and community outreach with the aim to engage Arabic speaking communities (ASC). Using the CASI framework explored in *A Practical Guide to CASI Framework* can assist organisations to reach, inform and empower ASCs in a culturally sensitive way across the following marketing activities. This resource should be used in conjunction with *A Practical Guide to CASI Framework* as well as *SICAS Questionnaire – A Worker's Guide*. This guide is provided in condensed format, refer to *Chapter 2: A Marketing Guide to Engaging Arabic Speaking Communities* of the CALD Toolkit for the full text.

Quote from Community Staff co-design participant :

"Arabic speaking people are often at home, they cannot speak English and might be living alone, so they listen to Arabic radio all the time because they love Arabic music, and they can get information through radio."

Recommended marketing strategies



Arabic community radio

Community radio stations conjure up feelings of trust and familiarity for the ASC. They offer news from home, a connection to culture and language and an avenue for information sharing.¹³

Methods:

- One-on-one radio interview.
- Q&A segment with the listeners.

Outcomes:

- Achieving word of mouth amongst the Arabic speaking community.
- Generating immediate enquiries and referrals into mental health services when prompted with an instant call to action (call the number or visit the website to register).



Tips and practical considerations

- Use appropriately interpreted language emphasising confidentiality and mental health assistance to assure listeners that privacy is provided.
- Emphasise on the benefits of the service for the whole family when seeking mental health support.
- Use polite pleasantries that embody the connection to God, religion and spiritual life.

Priority CASI values: Language, Privacy, Family, Religion.



Social media platforms

These visual platforms are powerful mediums for advertising and community engagement across the ASC. They continue to grow in popularity, Instagram has seen a 15-point jump in users (from 31% to 46%), whilst Facebook remains the most popular, with 94% of social media users on this platform.¹⁵

Methods:

- Dedicate resources into curating and posting consistent content on your organisation's official Facebook and Instagram pages.
- Tailor the content to reach specific ASC cohorts and sub-cultures, using the Culturally Accommodating and Safe Interface (CASI) framework across official Facebook and Instagram pages.

Outcomes:

- Organisations are able to track advertising and engagement using features that quantitatively measure exposure and reach such as 'likes', 'comments' and 'views.'
- Assist in situating your organisation as the provider of choice for mental health services and supports.
- An opportunity to link to appropriate Facebook Live Arabic community radio segments.



Tips and practical considerations

- Ensure information and claims are always true and correct. This helps to encourage connection and trust from the ASC over time.
- When marketing to specific cohorts within the ASC (e.g., Iraqi, Lebanese, Syrian), it is strongly recommended that words which reflect the cultural nuances of that cohort are included in the copy (alongside Modern Standardised Arabic).
- Curate content that aims to empower Arabic speaking youth, whilst acknowledging the strong values of family and parent/child ties within the ASC.

Priority CASI values: Language, Respect, Family, Parent/child ties, Community, Gender, Privacy.

Quote from Advisory Group member:

"The Arabic community are always on their phones, they are using social media to communicate, to get their news, entertainment, so there is such a huge opportunity to reach and educate the community through social media."



Mental Health Literacy Program (MHLP) psychoeducation sessions

Mental Health Literacy Programs (MHLP) are an effective and popular way to engage with the ASC. Increasing the mental health literacy of the ASC will help organisations build rapport while also significantly reducing barriers to help seeking.

Methods:

- Contracting an evidence based Arabic MHLP ensures the content provided is relevant and culturally appropriate.
- Liaison with key community stakeholders to assist in reaching the ASC. These may include neighbourhood centres, community liaison officers, school hub leaders, ethno-specific community groups, service providers, social support groups and migrant resource centres.
- Conducting pre and post surveys in both English and Arabic provides organisations with insight into demographics, perceptions, access points and level of trust in mental health service providers of attendees/potential clients.

Outcomes:

- Improved understanding of mental illness among the ASC and reduced stigma and shame.
- Increased trust in mental health service providers, resulting in high referral rates into eligible mental health services and programs.



Tips and practical considerations

- Tailor the presentation to the specific audience based on demographics such as, sub-cultural background/country of origin, language and dialect spoken, age group, and literacy levels¹³
- Promote specific, tangible, and immediate benefits that can be achieved when linking to mental health supports that help nurture the parent/child bond while supporting the whole family.
- Consider the spirit of hospitality by catering culturally appropriate food at the education sessions.

Priority CASI values: Family, Parent/child ties, Nationalism, Hospitality, Gender, Language, Privacy, Religion, Respect, Community.

Quote from Community Staff co-design participant :

“Nationalism is important to their identity. They feel afraid of changing their identity when they first arrive, they go through a culture shock, due to differences in society, and the educated vs people from rural areas will measure how they can settle and integrate. This will go up and down. So, we remind them that they do not have to change their culture. It’s about finding the balance.”



Engaging Arabic speaking religious leaders

Because religious leaders and healers are often a first point of contact for Arabic speakers struggling with their mental health, it is important to work collaboratively with religious leaders to ensure that they are well-equipped to refer individuals into qualified mental health providers wherever necessary.²⁹

Method:

- Working with a bicultural and bilingual mental health professional who is well known within the ASC to craft a religiously and culturally sensitive 'mindfulness track'. This can be played within venues of worship popular amongst the ASC.

Outcome:

- Mindfulness is considered a culturally acceptable treatment in many religious teachings across the ASC, and this practice is currently being trialled across group workshops with Arabic speaking refugees and asylum seekers in specific NSW regions. So far, the feedback has been positive, as it is "helping them make sense of what they know."²⁹

Priority CASI values: Family, Parent/child ties, Nationalism, Hospitality, Gender, Language, Privacy, Religion, Respect, Community.



CPD Accredited program – general practitioners and allied health professionals

Majority of the ASC prefer to consult with their general practitioners (GPs) when experiencing mental health concerns. GPs who treat Arabic speaking people often operate in over-populated, highly dense suburbs where the ASC reside, and can therefore have limited time to dedicate to consult and/or diagnose Arabic speaking patients with mental health conditions.

Method:

- Co-develop and deliver a Continuing Professional Development (CPD) accredited Arabic Mental Health Literacy Program, co-developed by an education provider that is accredited by the Royal Australian College of General Practitioners (RACGP), in partnership with a bicultural and bilingual GP advisory team.³²

Outcome:

- Incentivises GPs and allied health professionals to contribute to increasing help seeking behaviour among the ASC.
- A CPD accredited program offers an advantage in a competitive marketplace of mental health service providers.³¹

Priority CASI values: Family, Parent/child ties, Nationalism, Hospitality, Gender, Language, Privacy, Religion, Respect, Community.



Inter-agency presentations

Inter-agency presentations are an opportunity to provide information about your service to another service provider or stakeholder. This is an effective way to encourage referrals and information sharing across the mental health sector.

Method:

Following is a list of recommended access points for the organisation to present at inter-agency sessions:

- Mental health networks.
- Settlement Services Agencies.
- Services Australia (more specifically; their internal CALD engagement team).
- Social Workers within hospitals.
- Non-crisis mental health services.
- Organisations that provide treatment and rehabilitation for torture and trauma survivors.
- Community groups.
- Clubs and ethnic associations.²⁸
- Aged care service providers.²⁸
- Bilingual and bicultural (Arabic/English) lawyers and doctors.²⁸

Outcome:

- Improved and up to date cross-organisational knowledge of available services, programs and supports that can support Arabic speaking people with mental health issues and/or conditions.
- Opportunity to form partnerships that align with supporting the ASC (see more in *Chapter 3: A Guide to Partnerships with Arabic Speaking Stakeholders*).

Priority CASI values: Family, Parent/child ties, Gender, Language, Privacy, Religion, Respect, Community.



Social media influencer (SMI) marketing

Given the high rates of social media usage among the ASC, collaborating with a suitable social media influencer (SMI) would be an effective way to inform the community about your services and encourage help-seeking behaviour. It is essential that the selected SMI embodies the CASI values across their social media influencing channels, due to their large reach and credibility within the ASC.

Method:

- Using the CASI framework, select a culturally appropriate SMI who has credibility within the ASC. Provide training, information and resources to the SMI to empower them to share their story and encourage the ASC to engage in services.

Outcome:

- SMIs often have high credibility within the ASC and can assist in directing the community to the most appropriate mental health services and increasing help seeking behaviour. The credibility of a SMI is determined by their familiarity, trustworthiness, likeability, and popularity.²¹ Taking into consideration the reduced overall trust that emerges due to experiences of war and terror common amongst the ASC, it is important to capitalise on figures that may procure a sense of trust as gatekeepers to marketing services and information.¹⁸

Priority CASI values: Family, Parent/child ties, Nationalism, Gender, Language, Privacy, Religion, Respect, Community.



Vignettes

Sharing stories within one's community determines how attitudes and perceptions are shaped over time. Vignettes are an effective medium for normalising experiences of mental illness and treatment. Arabic speakers with lived experience of mental health, exited or current clients or staff could be consulted to provide their stories.

Method:

- Create vignettes that engage with the ASC and aim to shift negative attitudes and perceptions of stigma around mental health.
- Consult with existing Arabic speaking clients, and/or Arabic speaking persons who have successfully exited from mental health programs to gain insights into their mental health journeys, and subsequent success stories.
- Conduct interviews with existing and well-known members of the ASC who have lived experience in mental health.
- Share the vignettes across various marketing and communication platforms for optimal reach (such as, the organisation's official website, social media pages, and electronic direct marketing).

Outcome:

- Sharing success stories with the ASC in an engaging way helps normalise experiences of mental illness and breaks down stigma and shame, demonstrating that a fulfilling life is possible with the right treatment and services.

Priority CASI values: Family, Parent/child ties, Gender, Language, Privacy, Religion, Respect, Community.



Print advertising and direct mail campaign

Traditional marketing channels are a favoured medium for communicating and sharing information among the ASC. Creating and distributing simple and succinct print materials that are highly visual tend to appeal to the ASC as they communicate the marketing message in a simple, digestible, and non-confronting way, which caters for diverse literacy levels, whilst also mitigating any barriers in digital literacy, particularly amongst older Arabic speaking people.

Method:

- Develop a simple, versatile, and highly visual flyer, for mail drop distribution around target residential suburbs.
- Create a direct mail campaign targeting Arabic speaking people who engage in community groups or services (See more on this in *Chapter 3: A Guide to Partnerships with Arabic Speaking Stakeholders*).
- Create and display a QR code on the flyer that invites the Arabic speaking person to upload their story onto a 'video compilation platform' where they can upload a video sharing their story about how they sought mental health support. The QR code may also invite them to join a Facebook group dedicated to providing information about mental health services and available supports.
- Create a poster version which can be distributed at locations the ASC frequently access. For ideal locations for poster distribution see (6): 'Inter-Agency Presentations and In-Service Sessions'.

Outcome:

- Increased visibility of services within the ASC help to influence help seeking behaviour as well as build rapport and trust in mental health service providers.



Tips and practical considerations

- Use Modern Standardised Arabic (MSA) when translating/interpreting the marketing copy, as this will ensure comprehension of the message across all ASCs, regardless of dialect spoken.
- Use specific language from the dialects and cultural nuances with which specific sub-cultural cohorts identify (alongside MSA) to help further connect with more specific sub-cultural cohorts.

Priority CASI values: Family, Parent/child ties, Gender, Language, Privacy, Religion, Community.

Quote from Community Staff co-design participant :

"Dropping a flyer in the mail is such an easy and simple way to reach the Arabic speaking community. They can ring the phone number on the flyer, or visit the website. They can even show the flyer to their family and friends and then talk about the service."



Infographic video with voiceover and subtitles

The use of an interactive infographic video with Arabic voice over and Arabic subtitles is a recommended medium for communicating to ASCs. Conveying the message in an audio format, combined with Arabic subtitled text is a useful and powerful way to convey an organisation's message.

Method:

- Use videos with interactive imagery (instead of real human actors), voice over and subtitles in MSA.
- Tailor the copy to further accommodate the varying rates of literacy and diverse ASC cohorts.
- Share this marketing asset across various communication platforms for optimal reach.

Outcome:

- This communication format engages the ASC in a non-confronting way and is accessible across literacy, language and education background.

Priority CASI values: Family, Parent/child ties, Gender, Language, Privacy, Religion, Community.

Quote from Community Staff co-design participant :

"Having characters in the role play is less intimidating than viewing real actors in a video, and the Arabic sub-titles makes it easier to follow the message."

Choose different, choose wellways

At Wellways, our experience in both mental health and disability allows us to provide supports and understand your physical and emotional needs.

OVER 40 YEARS OF EXPERIENCE

40

Wellways has been working for people with mental health issues, disabilities and carers for more than 40 years.

MENTAL HEALTH SPECIALIST



We develop and deliver mental health services including suicide prevention, follow-up after care and housing support programs. We understand the challenges and complexity of mental health issues for individuals, families and communities.

COMPLEX NEEDS



Our experienced and trained staff work with people with complex needs and multiple diagnoses.

WORKERS WITH LIVED EXPERIENCE



Many of our workers have a lived experience. At Wellways we value personal experience together with learnt knowledge and believe this contributes to the depth of our programs.

WORKERS WHO IDENTIFY AS LGBTIQ+



Our programs aim to meet the needs of all participants who identify as LGBTIQ+ by providing them access to LGBTIQ+ peer and support workers.

RECONCILIATION ACTION PLAN



We are committed to reconciliation, to closing the gap and addressing injustice in association with Aboriginal and Torres Strait Islander people.

Contact Wellways on **1300 111 400** to find out about services and supports available to help you achieve your goals.

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Wellways acknowledges Aboriginal and Torres Strait Islander People as the traditional owners and custodians of the land on which we live, work and play and pays respect to their Elders past, present and future.

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