

Health promotion interventions for reducing alcohol use among refugees living in a regional town in NSW, Australia: A participatory qualitative study

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Introduction: Refugees experience specific health needs for alcohol use. Existing health promotion interventions are not sufficient. Privileging refugees' voices and experiences is central to developing appropriate health promotion interventions. This study aimed to explore refugees' health needs for alcohol use and suggest appropriate health promotion interventions.

Methods: This is a participatory qualitative study design. Face-to-face in-depth interviews and focus group discussions were conducted with 18 Burmese and Iraqi/Syrian refugees. This study followed purposive sampling. Teams software transcribed in real-time and audio-recorded sessions. A deductive thematic analysis method was used to analyse data. We performed data coding by using NVivo software. After reading and rereading the transcripts, codes were generated and identified to develop sub-themes leading to themes.

Results: Seven themes were identified. Alcohol use has been a cultural issue in refugee communities. Illegal sales of tobacco and drugs have raised more concerns. Liver problems, heart diseases, death cases, physical inability, mental disorders and bad fighting were identified as health and behavioural concerns. The key challenges were language barriers due to multiple dialects, inadequate interpretation, and inappropriate culture-responsive services. Suggested health promotion interventions included: doctor's guidelines and counselling, group discussions, skilled interpreters in multi-dialects, making video clips, and the government restrictions.

Discussions and Conclusions: Language and culture-appropriate health needs are public health emergencies for refugees in Australia. Health promotion interventions must consider multi-dialects, lingua franca, and culture-responsive health services. Bridging appropriate connections between the government and community level and imposing restrictions at the individual level would limit alcohol use among refugees.

Implications for Practice or Policy: Results will help the participants, doctors, policymakers, and health promotion officers in Australia. For instance, making video clips and choosing the appropriate media routes to disseminate them may require feasibility testing through further implementation research. This evidence will inform future funding applications for designing and implementing local and/or national interventions.

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