

## **All in this together? COVID responses, diverse communities and practices of care**

Murphy D<sup>2,3</sup>, Pienaar K<sup>1</sup>, Keaney J<sup>4</sup>, Bennett C<sup>5</sup>, Kelaita P<sup>1</sup>, Bogatyreva K<sup>5</sup>

<sup>1</sup>Sociology, School of Humanities and Social Sciences, Deakin University, <sup>2</sup>Kirby Institute, UNSW Sydney, <sup>3</sup>Department of Infectious Diseases, Alfred Hospital and Central Clinical School, Monash University, <sup>4</sup>Gender Studies, School of Social and Political Sciences, University of Melbourne, <sup>5</sup>Epidemiology, School of Health and Social Development Deakin University

### **Background:**

COVID-19 has laid bare existing inequalities, highlighting the pressing need for inclusive health responses in times of crisis. As the pandemic unfolds, government leaders frequently remind us that we are 'all in this together'. Yet despite this emphasis on solidarity in the official public health response, experiences of the pandemic have exposed fault lines of socio-cultural difference, with culturally and linguistically diverse (CALD) communities among the most severely impacted. Although Australia's public health measures typically address the public in universal terms, their implicit understandings of care, 'essential' work, and family do not adequately capture the everyday practices of diverse communities.

### **Methods:**

Applying Warner's (2002) conceptualisation of 'publics' and Race's (2009) counterpublic health, we explored the normative assumptions and implicit logics governing Australia's COVID response. We also considered the implications of these findings for health inequalities and practices of care in times of crisis.

### **Results:**

COVID-19 public health advice enacts the subject of public health as coupled, and living with their partner or nuclear family in a stand-alone suburban 'home'. Those in non-normative relationships and households are not only excluded from this narrow enactment of the 'ideal' public health subject, but are rendered as potential disease vectors by virtue of their alternative kinship arrangements or community affiliations.

### **Conclusion:**

Building on these insights and analyses, a new interdisciplinary research project is currently being undertaken to explore the impact of COVID restrictions on diverse communities in high-density public housing, with a view to informing more equitable, culturally inclusive public health measures.

### **Disclosure of Interest Statement:**

The presenting author receives funding from Viiv Healthcare for an unrelated study.