



**World
Wellness
Group**

2023 - 2024 | Annual Impact Report

OUR VISION IN ACTION

Health Equity for All



Annual Report.

Executive Summary - Our Vision in Action.

For 13 years, our vision of building health equity through the delivery of health services to directly facilitate access and equity has continued to materialise, while we have stepped up our systems impact work. Our work reflects this vision in action. Our staff are deeply connected to this shared vision, and it is ultimately their efforts that bring it to life—it permeates everything we do.

The focus of the 2023-24 financial year was on securing a permanent home for WWG. We began the year occupying three buildings in Stones Corner and concluded it under one roof in Woolloongabba. It took four years to find our new home, and the effort has been well worth it. However, the story is not over, as the building is currently for sale. We are working diligently to raise the capital needed to purchase it, which will secure our future and viability as a not-for-profit organisation that must remain in a central location despite the rising rent and property prices.

This financial year, we launched several new programs: Culture Care - a carer supporter service, long-term recovery support for survivors of family and domestic violence and sexual violence, and the return of our popular acupuncture clinic, facilitated by our larger new premises. Culture Care, delivered in partnership with Arafmi, supports carers from multicultural backgrounds who care for individuals with mental health issues. We also commenced a two-year pilot program providing long-term recovery support (up to two years) for survivors of family and domestic violence and sexual violence, allowing women to focus on their long-term recovery after the initial crisis. Additionally, we expanded our Asylum Seeker & Refugee Assistance (ASRA) program, a much-welcomed development that has enabled us to respond more effectively to newly arrived individuals and families from Gaza.

This year, we continued to make an impact at both national and international levels. WWG took a leading role at the National Health & Wellbeing Conference in Sydney in November 2023 and presented at international conferences in the USA and Singapore. We plan to continue and expand our systemic work, benefiting not only our clients but also people from multicultural communities across the nation.

Rita Prasad-Ildes,
Marina Chand & Nera Komaric
(Co-founders)

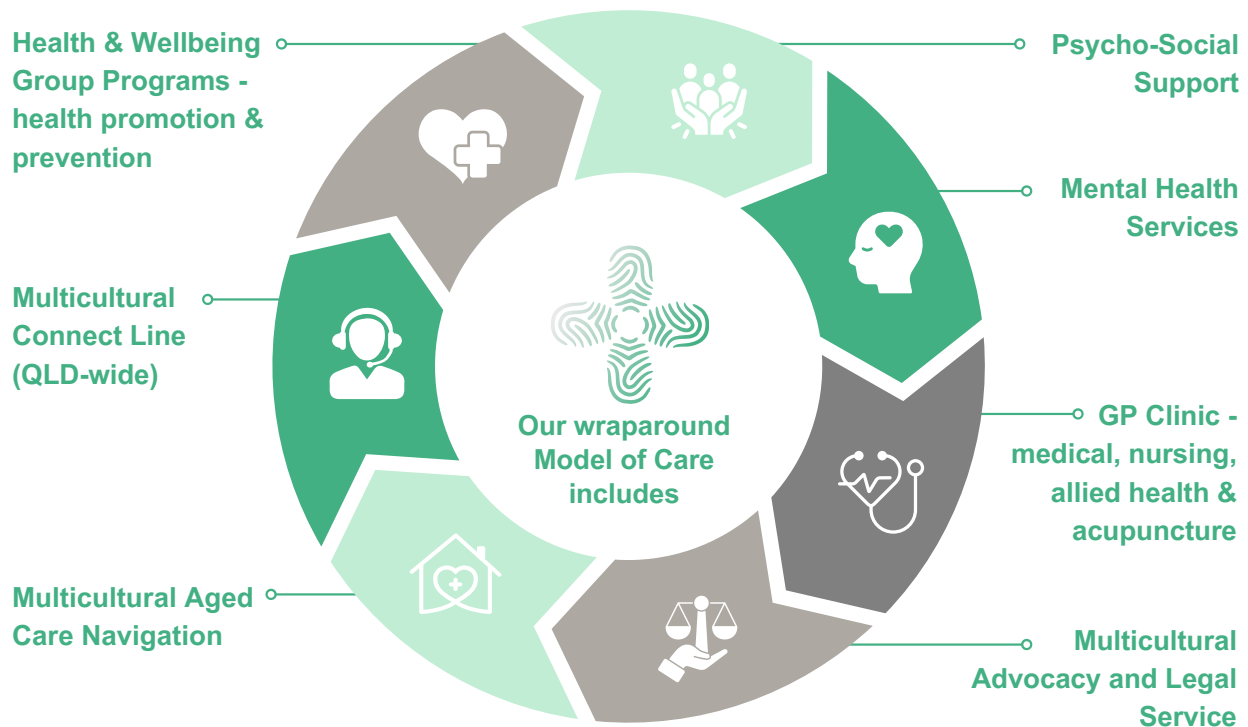


WWG Co-founders: Marina, Nera and Rita

Our Programs.

A Model of Wrap-Around Primary Health Care

World Wellness Group is a primary health service. We provide wrap-around services to those made vulnerable by the system. We are also a health promotion charity, delivering health promotion and prevention programs. Our model looks like this:



GP Clinic

Our GP clinic is a large 'front door' to our service. It operates as a social enterprise and in 2023-24 had more than 1,300 active patients. Our bulk-billing clinic saw 2.5 patients per hour per GP compared to 4.6 in comparable bulk-billing clinics in our region. We cannot achieve a comparable patient per hour ratio due to language, cultural and mental health needs and a higher level of complexity which continue to impact on appointment times. The clinic also provides nursing, allied health and acupuncture services.



Our Programs.

A Model of Wrap-Around Primary Health Care

Mental Health and Wellbeing

Mental health and wellbeing continue to be central to our primary health care model as integrated care helps improve access to mental health care. As people from multicultural backgrounds continue to be overrepresented in acute mental health settings, our primary mental health care approach is essential for facilitating access in a less stigmatising setting within a holistic approach.

Collectively, our mental health programs supported over 1,600 clients last financial year. This represented over 55% of total service contacts for all WWG services highlighting the volume of mental health work delivered. We delivered mental health care across the spectrum of services from low-intensity and brief interventions to psychological therapies and psycho-social support for those with complex mental health issues. Our mental health services were accessed by people from 129 different ethnicities speaking 75 different languages, demonstrating our services are widely accessed across diverse multicultural groups.

We also continued to deliver state-wide mental health support via our Multicultural Connect Line and Asylum mental health program. Our mental health services expanded into two exciting new areas of work: Culture Care, which is focused on supporting those who care for people with mental illness, and our therapeutic services which have expanded to long-term therapy for those who have experienced domestic and family violence, sexual violence, and childhood sexual abuse. This expansion is part of a national pilot delivered via the Primary Health Networks.

Asylum Healthcare

Providing access to healthcare continues to be a big focus at World Wellness Group. This essential work continues to be partially supported by government via the Asylum Seeker and Refugee Assistance (ASRA) program and by philanthropic support. Last year we provided \$95,000 worth of pro bono health care to people without access to Medicare. Our asylum seeker mental health and nursing programs had more than 150 clients and were supported with tailored mental health support, nursing advocacy to access health services in the health system not accessible to those without Medicare, free medications, access to pathology and radiology and pro bono medical appointments.

Multicultural Aged Care Navigation

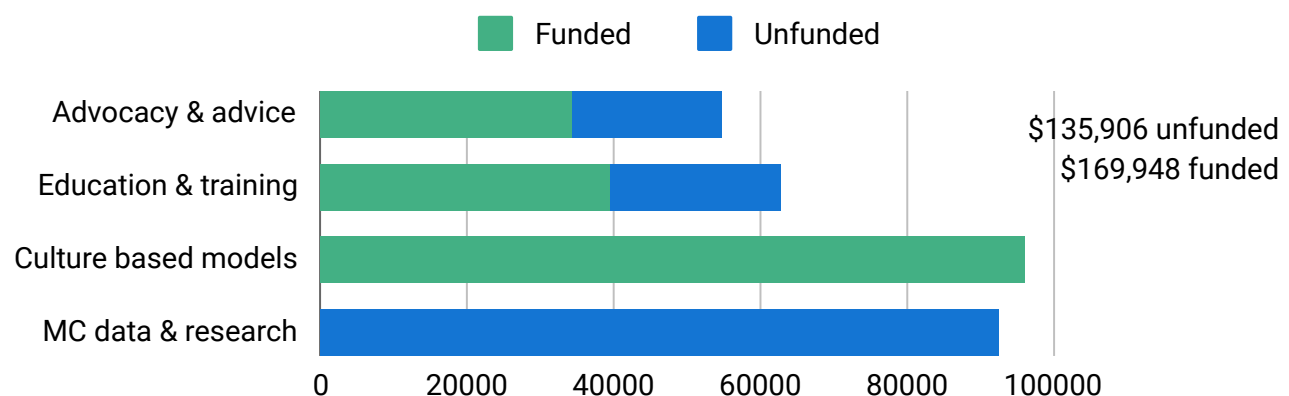
Our Care Finder team, which services the Brisbane North region, has continued to engage older adults who require assistance navigating the aged care system. The program uses a strong outreach model to ensure that socially isolated older adults from migrant and refugee backgrounds are aware of this service. Last financial year almost 100 clients were supported with their aged care service needs.

Our Impact.

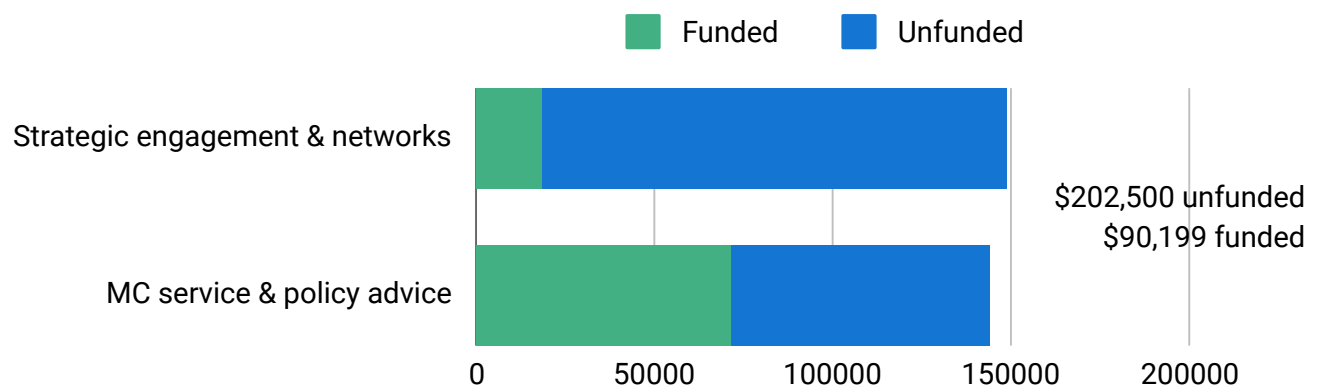
Our social impact framework continues to lead and guide our work. We continue to measure our work at two levels of intervention: service delivery and systemic. We are consistently collecting more data to evidence our work and impact, which are shared in this annual impact report. Thanks to a Queensland Government social enterprise grant, we now have a data dashboard that consolidates service activity, demographic, human resources, and client journey data into one comprehensive picture, providing us with unique insights into our organisation, our clients, and the impact of our work.

This year, we took a deep dive into systems impact, as it is more challenging to measure the direct causal link between inputs and outcomes across complex systems. We discovered that there are few systems impact frameworks available to inform and improve ours. We will continue with our framework and measure our systemic work as best as we can, which is largely qualitative in nature. We also closely examined how we are funding and sustaining our systems impact work and demonstrated that most of our efforts in this area are unfunded. Key areas such as multicultural data and research, strategic engagements and networks, and multicultural service and policy advice, which are crucial to furthering our mission, remain unfunded.

Systems Outcome: Multicultural Inclusive Data, Research & Education



Systems Outcome: Equitable Multicultural Inclusive Policy, Planning & Investment



Our Impact.

More than
3000 Clients



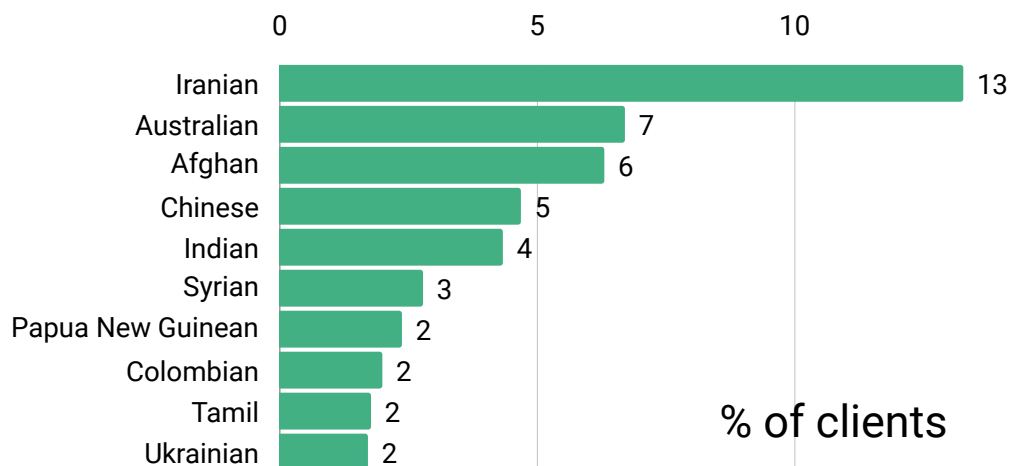
22.4K Service contacts / Appointments



15% Increase in service contacts compared to last year

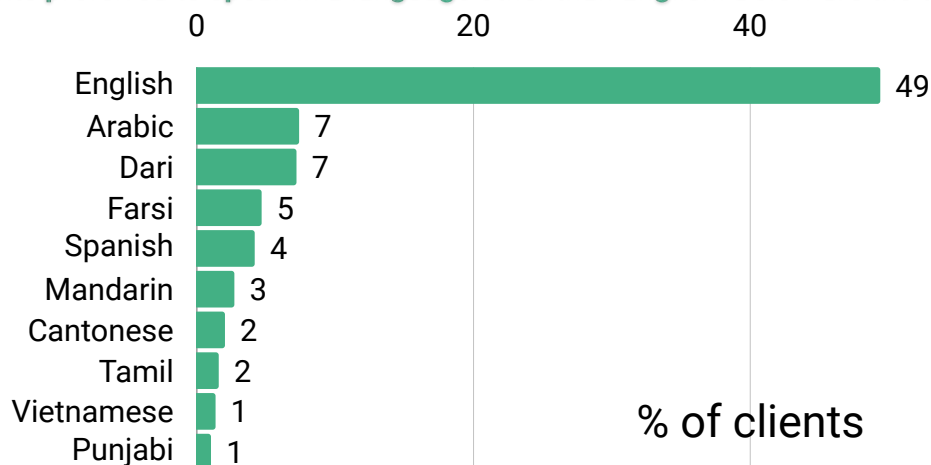


We worked with individuals from 163 different ethnicities. 75% of clients identify with an ethnicity other than Australian, English or unknown. Below are the top 10:



We worked with individuals who preferred to speak in 77 different languages.

51% of clients preferred to speak in a language other than English. Below are the top 10:



Improved Access.

There are multiple and complex barriers to accessing primary health services for multicultural communities, which are well evidenced (Henderson & Kendall, 2011; Javanparast et al., 2020; Khatri & Assefa, 2022; Kpozehouen et al., 2017). The barriers to primary mental health services are also numerous. A 2023 Queensland Health commissioned report on strengthening Queensland Health MHAOD services for people from multicultural backgrounds found that key drivers requiring attention include racism and stigma, limited understanding of how people from multicultural backgrounds perceive and experience MHAOD care, lack of multicultural data, historically siloed systems, and broader resource constraints. The report also detailed “a pattern of late, complex, and crisis presentations,” which is consistent with national data (Nous Group, 2023).

Our social impact framework identifies visa status, cost, geographic location, cultural and language barriers, mono-cultural healthcare models, and lack of staff diversity as key barriers. This year, we achieved outcomes for all these identified barriers. Almost all our services continue to be free of charge and we use outreach models in all our programs except the primary health GP clinic to overcome geographic barriers. We have a state-wide telephone helpline to provide state-wide access to psycho-social support. To overcome visa barriers, we delivered approximately \$95,000.00 worth of pro bono healthcare to people seeking asylum.



51%

Of clients prefer a language other than English



18

Minutes is the average travel time from our clients postcode to ours



1300 +

Multicultural Peer Support Worker (MPSW) sessions



Visa Status

Is not a barrier.



1020 +

Sessions with an interpreter



50

Languages spoken by our team



700 +

Sessions where the client and practitioner spoke the same language



54

Languages spoken by our MPSW team



Improved Cultural Safety and Wellbeing.

Literature highlights cultural factors in healthcare such as feeling unsafe, having culturally based communication gaps, having culturally determined health explanatory models and cultural concordance (Harrison et al., 2020). Furthermore, the experience of racism and discrimination in Australian healthcare is well evidenced and acts as a barrier to service access. Internationally it is seen as a determinant of health (Devakumar et al., 2022; Khatri & Assefa, 2022; Williams et al., 2019). This year we engaged with 289 people from migrant and refugee backgrounds in the Brisbane North PHN region whilst conducting a multicultural access mapping project and found that 27% of survey participants had experienced racism 'a lot' or 'sometimes' at a health service.

In our social impact framework we identify lived experience and peer support, wrap-around care, culturally diverse staff, cultural and language support and culturally based models as essential to improved cultural safety and wellbeing. We engaged Multicultural Peer Support Workers for more than 1,300 sessions, 1,026 sessions included an interpreter and more than 700 sessions had a language match between the practitioner and client. The engagement of Multicultural Peer Support Workers also demonstrates our commitment to peer support, lived experience and our culturally based models of health.

"I have gone from doctor to doctor who are not Asian. I faced racial discrimination. I searched until I found someone who didn't discriminate against me. This happened some years ago. I had been here in Australia for one year. I saw the doctor for some pain issue. She said 'Because you are Asian, that's why you have lots of problems' I just went home and cried. I felt so bad."

- Community focus group participant

35% of our clients used more than one service at WWG, evidencing our wrap-around model.

The improvement in wellbeing is an important outcome across all our programs. In our Multicultural Psychological Therapies (MPT) program the average K10 scores dropped from 32 at initial assessment to 22 at conclusion. The reduction in the K10 score indicates an improvement in the mental health and wellbeing of clients.

This financial year, the Brisbane North Primary Health Network (BNPHN) commissioned a multicultural access mapping project across primary care services. This work revealed that almost 90% of multicultural clients clinically improved in K10 scores from treatment, compared to 79% for the rest of the BNPHN population. All PHN funded multicultural mental health services in the region are delivered by WWG.



27%

of survey participants experienced racism at a health service



35%

of clients used more than one WWG service

Improved Cultural Safety and Wellbeing.

Our multicultural seniors social wellbeing group program aims to reduce social isolation among older adults from migrant and refugee backgrounds. Social isolation is an important but often neglected social determinant as social connection is essential to good mental and physical health and wellbeing. More than 120 seniors have attended a monthly group program with social activities, healthy aging topics and practical skills development. This year we received formal feedback from 34 participants who completed a survey. Participants reported that their participation in the program had the following impacts:

97% Reported their level of social interaction has changed



42% Said their level of social interaction had increased 'a lot' and another 42% said it increased 'somewhat'



62% Reported that they interacted with other group members outside the monthly group sessions either by phone, text or in-person. This is a significant result for breaking down social isolation



70% Reported that their feelings of loneliness had decreased 'a lot' or 'somewhat' since joining the group and 73% said they felt more connected to other people. 8% reported that their loneliness had increased 'somewhat' or 'a lot' since joining the group



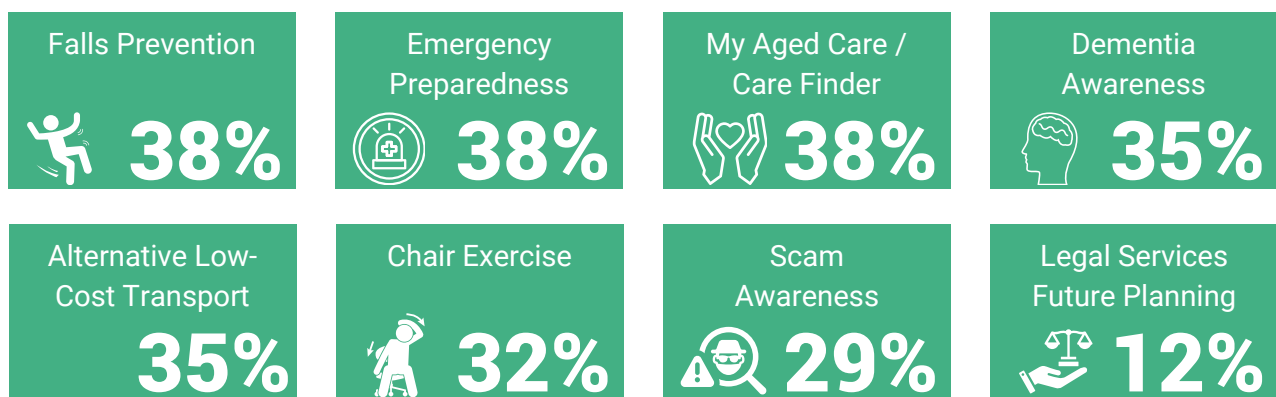
44% Reported that their overall wellbeing had 'much improved' since joining the group and another 44% said it had improved 'somewhat'. Two people reported no change to their overall wellbeing



Improved Knowledge & Self-Management Skills

Our social impact framework identifies that health promotion is often inaccessible and mono-cultural and that the provision of culturally tailored health education and promotion are important to improving health literacy and self-management.

Delivery of pertinent healthy aging information that facilitates older adults to make changes to their lives, strongly contributes to improved self-management skills. In the evaluation of the multicultural seniors' social wellbeing program, participants reported that the following healthy aging topics allowed them to make changes in their lives:



We also continued to deliver physical activity sessions under the Brisbane City Council Active Parks Program. These took place in Calamvale, MacGregor, Inala, Sunnybank and Seven Mile Rocks. We delivered 186 sessions over the year with 3,608 attendances – this is an average of 19 participants per session! These sessions are delivered in partnership with Heilani who are experts in delivering culturally based, fun and high quality physical activity sessions.



Physical Activity sessions under the Brisbane City Council active parks program delivered in partnership with Heilani

Our Voices

Multicultural Peer Support Workers (MPSW)

40

Number of countries of birth of the MPSW team



54

Different languages



46

Number of cultural backgrounds of the MPSW team



67

Number of people in the MPSW team



The WWG MPSW team



The WWG MPSW team

Languages Spoken by the MPSW Team



Shayna*'s Story

My family and I came to Australia seven years ago. We are originally from Syria and had spent time in Lebanon on our way to settling in Australia. When we arrived in Australia, we were referred to WWG as our GP Clinic, and were overwhelmed by how welcoming and caring everyone was. It meant so much to us being welcomed into a multicultural environment when we were new to Australia.



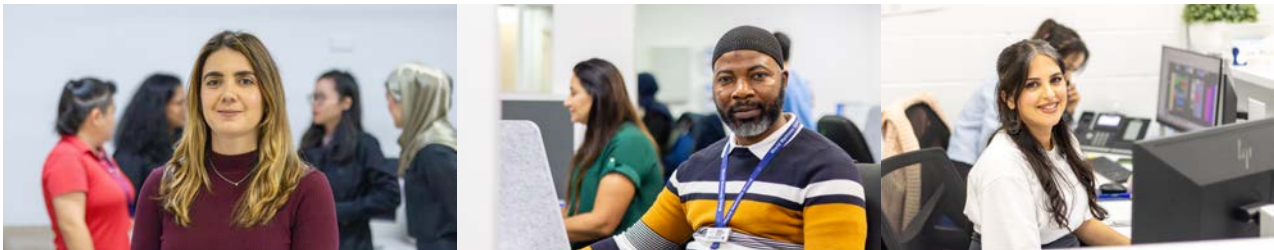
Not the client's real photo

Straight away we felt like we belonged - everyone was so kind to us and willing to help us with whatever we needed. Even now I haven't felt that care and kindness anywhere else.

When you first settle in Australia, the Government provides some financial support for medications. However, some of the medication my family needed wasn't covered by this program. Without us even asking, WWG gave us some money to cover the cost of the medicines. It was an incredibly kind gesture that meant so much.

I have been on a journey with WWG and have seen the help, support and care they provide ...the support they provide can really transform someone's life and help them when they really need it. The Clinic makes such a difference.

* Pseudonym has been used to protect privacy



What Our Clients Say

"I have been coming to WWG from 2014 for counselling and GP appointments. Definitely in this country, for women like me in crisis, from other countries, we are left alone. I have tried so many places to get help, but no one helped except World Wellness Group. It is a great thing that they are running without any charges or fees. Only after coming here I started to build up some confidence that I will overcome all these problems and justice will be seen. Because of that confidence, I am living now." - **Birnthia Singarasa**

"I came here as a refugee. The World Wellness Group experience... - they are very friendly, very friendly. I want to recommend everybody to please come and see them and then they will support you 100%. Sometimes it's financially, and then sometimes do the treatment, medicine, doctors some physio....In my life, I will not forget the support offered by World Wellness Group and help offered by Lata (Culture in Mind)." - **William Rajini Kanth**

Systems Impact.

Our systems impact work is crucial to our mission and yet it is difficult for a frontline service to secure financial resources for this long-term work. There is ample evidence that health inequities are generated by systems level drivers (Carey & Crammond, 2015; National Academies of Sciences et al., 2017) which perpetuate mechanisms that organise the distribution of power and resources differentially across lines of ethnicity, gender, class, sexual orientation and other dimensions. More fundamentally, the root cause of health inequity is the unequal allocation of power and resources which manifest in unequal social, economic and environmental conditions – the social determinants of health (National Academies of Sciences et al., 2017).

Studies also indicate that the power of an intervention comes not from where it is targeted, but rather how it works to create change within the system (Carey & Crammond, 2015). Qualitatively, the actual presence of some of our programs in the health system, have made changes within the system. For example, the presence of our Culture in Mind service led to the evaluation of mental health services for multicultural communities in Queensland, which in turn led to Queensland Health commissioning similar services in additional regions in Queensland. Our social impact framework will continue to evolve and try to capture some of these important systems impacts.

During 2023-24 we analysed our systems work and found that the previous year, \$305,854 worth of systems work in the outcome area 'CALD inclusive data, research and education' was unfunded. Similarly, \$292,699 worth of systems work in the outcome area Equitable CALD inclusive policy, planning and investment was unfunded. WWG delivered almost \$600,000 worth of systems impact work. Gaining resources for this important work will be a priority in the next financial year.

Almost
\$600k

The amount World Wellness Group delivered worth of systems impact work



Rita Prasad-Ildes (Director - WWG) presenting at the 3rd Global Summit for Mental Health Advocates in Singapore



Marina Chand (Director - WWG), Dr Dinesh Palipana OAM (WWG Ambassador) and Hamza Vayani (Board Chair - WWG) at the National Multicultural Health and Wellbeing Conference 2023 in Sydney

CALD Inclusive Data, Research & Education.



The lack of published multicultural health data continues to cripple our sector, making it challenging for us to evidence the needs of multicultural communities that we observe daily at the front-line of service delivery.

This year our reach went international! We developed a collaborative working relationship with the NHS Race and Health Observatory in the UK, presented at the 3rd Global Summit for Mental Health Advocates in Singapore and were awarded a health equity scholarship to participate in the Global Wellness Summit in the USA, an invitation only event of global thought leaders shaping the world of wellness. WWG continues to be recognised as leading pioneers in multicultural health models of care to improve health and wellbeing.

This year we undertook the following activities to add to the evidence basis in Australia:

- Continued to participate in the CALD Patients Emergency Department study which has some early findings that were published that can be accessed on the WWG website: <https://worldwellnessgroup.org.au/knowledge-resources-hub/publications-and-resources/>.
- WWG is a pilot site for a national study that will develop a scalable patient navigation program for people affected by cancer from multicultural backgrounds during survivorship.
- Via our clinic we are participating in the Activating Primary Care for Medicine Safety, ACTMed research project.
- WWG undertook a multicultural access primary care mapping project on behalf of the Brisbane North Primary Health Network. WWG partnered with Pasifika Families and Norfolk Island Health and Residential Aged Care Service to deliver the project which involved engagement with 289 community members from multicultural backgrounds and 51 service providers. Multiple systems barriers were identified including a barrier within primary care data collection: the data platform used by PHNs across Australia, Primary Sense, cannot extract the indicators that identify multicultural populations and therefore primary care access cannot be accurately mapped in Brisbane North, nor anywhere else in Australia based directly on primary service data. Further advocacy on this will facilitate primary health access for multicultural populations in Australia for the first time.
- We facilitated the opening plenary session at the National Multicultural Health and Wellbeing Conference in November 2023 and delivered two additional papers at the conference.
- We presented the opening paper at the CanEngage Symposium at Macquarie University's Australian Institute of Health Innovation on 'Active partnership with CALD communities to improve health'.
- We delivered regular training to external agencies across all our program areas such as Care Finder training to the social work department at the Royal Brisbane and Women's Hospital and the Older Persons Mental Health Team at Metro North.

As an organisation that is on the front-line of service delivery, we started sharing our practice learnings via a series of blogs on our website and will continue to participate in multicultural health research projects.

Equitable CALD Inclusive Policy, Planning & Investment.

WWG has continued to work at the systemic level to work for inclusive policy and investment. We have:

- Continued to participate on the Queensland Health Multicultural Health Advisory Group that has developed a Multicultural Policy and Action Plan
- Engaged with Queensland Women's and Girls Health Strategy and Plan development
- Developed submissions to various policy areas including Working Better for Medicare Review
- Continued membership on the Interim Coordination Group of the Australian Multicultural Health Collaborative which provides strategic guidance to the Collaborative.

Our Multicultural Advocacy & Legal Service (MALS) undertook law reform activities including co-writing a pitch paper for the Health Justice Symposium at Queensland Parliament House in February 2024, and contributed to submissions to the report of the Independent Expert on the enjoyment of all human rights by older persons on legal capacity and informed consent of older persons.



The World Wellness Group team with Hon Andrew Giles (Minister for Immigration, Citizenship and Multicultural Affairs)

A New Home for WWG.

Since establishing WWG in 2011, we have moved 4 times! As a social enterprise that is self-made, we have fundraised for each move to bigger premises. Since 2020 we have searched for more appropriate premises that would be fit-for-purpose, affordable and in a central location near public transport. In 2023 we located the perfect building in Woolloongabba, just 800 metres from our previous home in Stones Corner. By the time we moved in early 2024, our team was occupying three separate buildings.

Our new office is absolutely fit-for-purpose with a fitted out clinic downstairs, high quality counselling rooms, client interview rooms, office space and an open plan office area. There are also multiple meeting rooms.



WWG Team members outside the new office in Woolloongabba

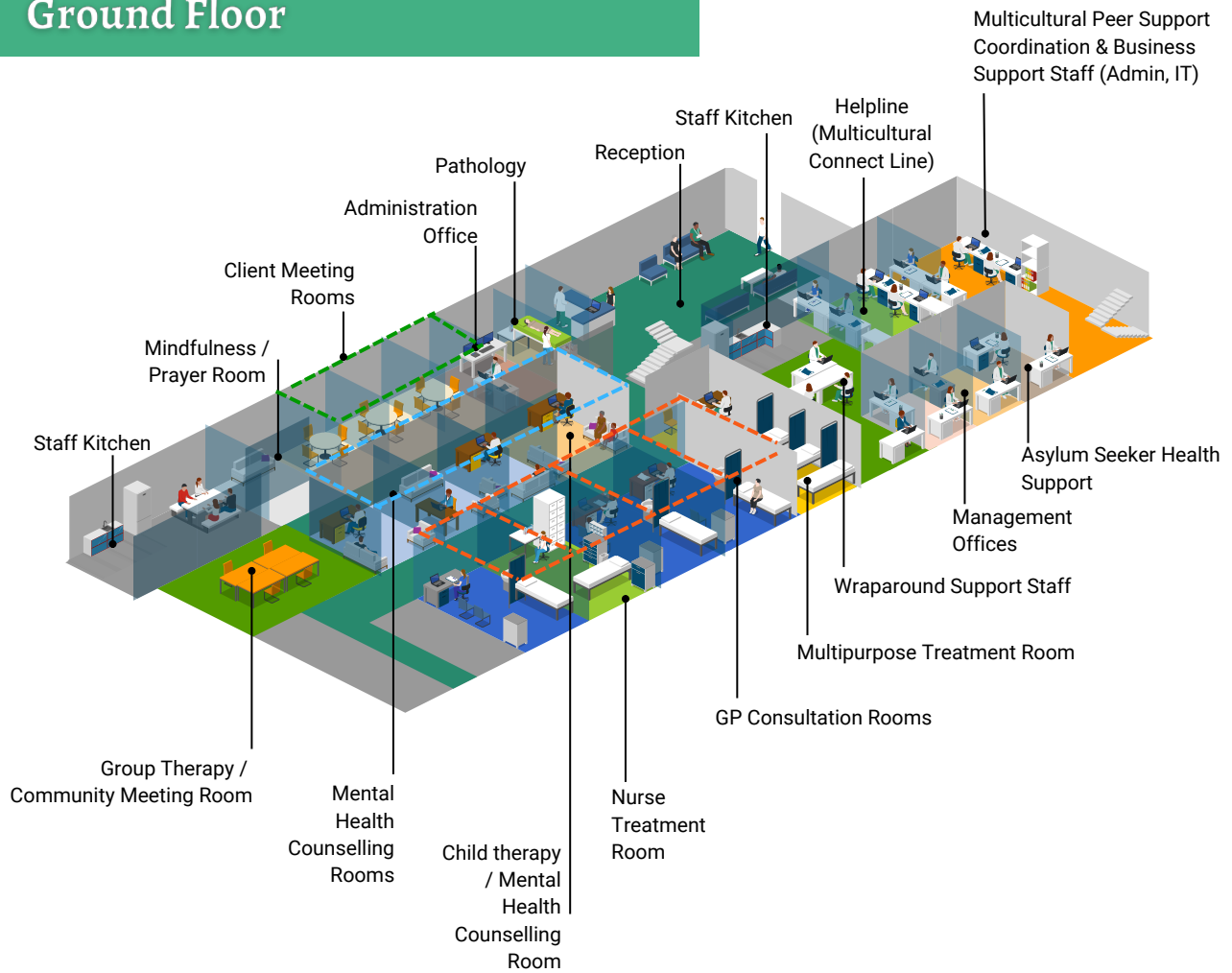


WWG Director cutting the ribbon at opening of the Woolloongabba office

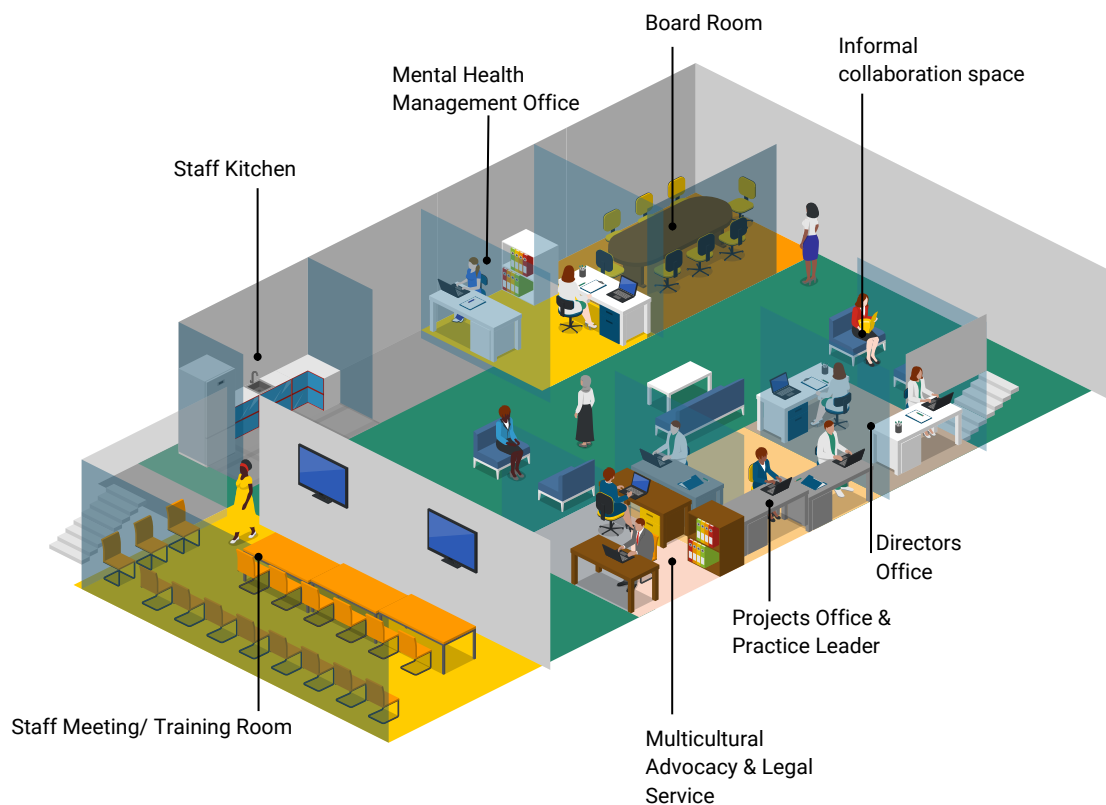


The front of the Woolloongabba office

Ground Floor



Level One



Capital Campaign.

Finding a new home for WWG has been wonderful as it has boosted the morale of staff and clients, and it has attracted a bigger medical team. As the building is for sale, the WWG Board took the decision to secure WWG's future with a stable base by embarking on a capital campaign to raise the capital to purchase the building. We are engaging with philanthropists, business leaders, social impact investors and government to raise the required capital by June 2025.

Telling Our Story.

Our ability to tell our story was elevated this year through the production of a video series. Via support from a Queensland Government Social Enterprise Development Grant, we produced a series of videos that tell the story of WWG's social enterprise clinic and our points of difference to other clinics; the stories of our amazing GPs who work so hard each day; and some of the stories of our clients.

The impact of these videos has already been felt, with the GP videos helping us to recruit more GPs for the clinic; and the clinic video helping us to explain our mission to philanthropists and other stakeholders.

Most popular of course, are our client videos who capture so incredibly well their own experiences and the support they have received from us.

The videos can be found on the WWG youtube channel and also on our website.

Follow us on  <https://www.youtube.com/@worldwellness>



Philanthropic Partners.

This year we completed and continued important projects supported by our philanthropic partners. Our philanthropic partners allow us to trial and deliver important work that government may not fund but that are very important to achieving our mission. Here are some examples:

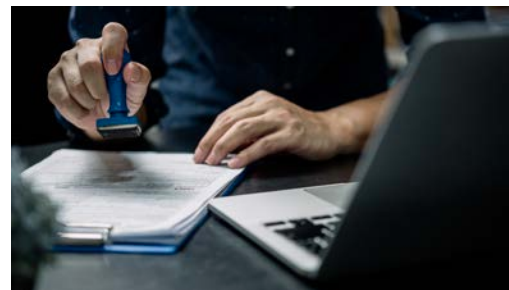
Navigating the immigration system

Funded by the Wanless Family Fund via the Australian Communities Foundation



We work with many clients who are faced with navigating the Australian immigration system without support. Unable to pay for lawyers and ineligible or very limited free legal advice or representation, many clients approach WWG for assistance with immigration matters. Our Health Justice lawyer wrote a series of factsheets translated into key refugee community languages (Arabic, Persian and Tamil) and these are freely available on our website. Topics include:

- Communicating with the Department of Home Affairs
- Support options for immigration matters
- Understanding your IMMI account
- VEVO checks
- Understanding your visa conditions
- Your health rights



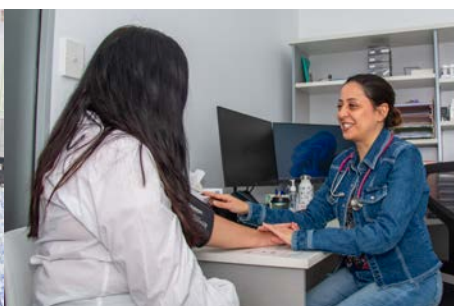
Our Health and experiences - multicultural health

Funded by Brisbane Airport Corporation



We produced factsheets about our experiences as migrants and refugees in Australia that resonate with our lived experience – not just a translated factsheet produced by a health professional. Produced by our own team and particularly, our lived experience staff, these factsheets are a bit different from the usual factsheets. These are also available in Simplified Chinese, Spanish, Persian and Dari.

'Migrants come to Australia with relatively good health that reduces with time. By the time we have lived in Australia for ten years or more, some of our communities have higher rates of chronic disease than Australia-born people. (Australian Bureau of Statistics, 2023). It is important that we keep our good health.'



Social wellbeing program for multicultural seniors

Funded by Eastern Star Foundation



For a second year, the Eastern Star Foundation supported our social wellbeing program for multicultural seniors in Brisbane North experiencing social isolation and loneliness. Since the program's established, more than 120 seniors have engaged with the program by attending monthly group sessions, participating in fun and healthy activities, and receiving information about healthy aging.

The second year's grant has allowed us to continue the program whilst also undertaking an evaluation. The program continues to enjoy a high level of engagement and participation from seniors and continues to grow each month.



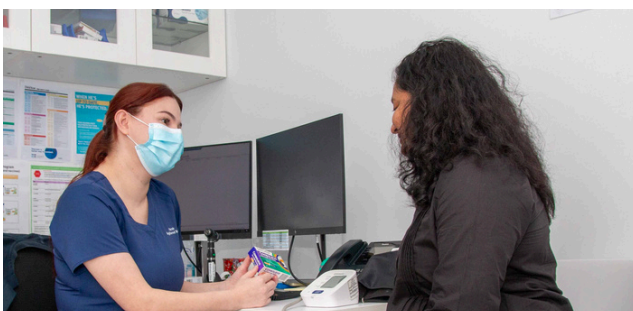
Health access for people seeking asylum

Funded by Budget Direct Insurance



Budget Direct has continued to support our front-line work that provides access to medical appointments and medications to people seeking asylum. This incredible support has truly enabled WWG to deliver on our mission to provide health access to those locked out of the system. This year we delivered more than \$95,000.00 worth of pro bono supports.

This year our partner Auto and General (Budget Direct) was awarded 2024 Queensland Corporate Philanthropist of the Year! WWG is one of seven fortunate charities who receive amazing support from Auto & General who take their corporate and social responsibility very seriously.



Support to Clients Seeking Asylum

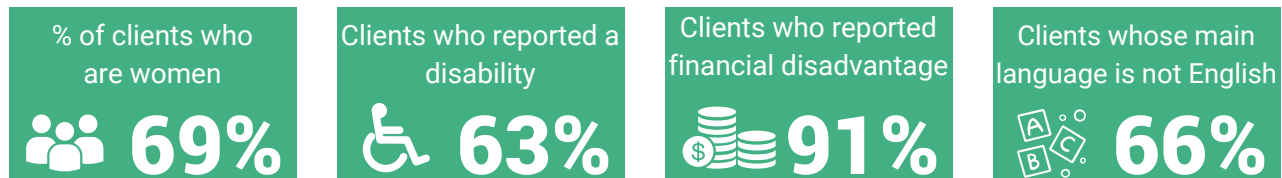
Funded by Muslim Charitable Foundation (MCF)



MCF continues to provide vital support to our clients seeking asylum, including medications.

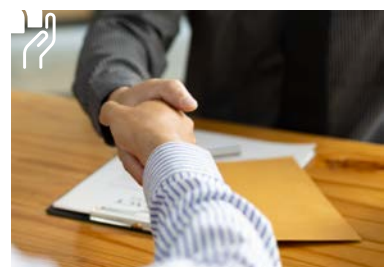
Multicultural Advocacy and Legal Service

The Multicultural Advocacy and Legal Service (MALS) is our health justice program that is co-designed and co-delivered with Caxton Legal Centre to improve access to justice for people from multicultural backgrounds with mental health conditions. Diverse clients have accessed the service in 2023-24:



The program has delivered solid outcomes for its clients. Some examples are given below:

- Achieved an out-of-court settlement for an unfair dismissal case.
- Advocated for a housing transfer using the Human Rights Act 2019 (QLD).
- Amplified the voices of domestic violence victims in court, including those wrongly identified as aggressors.
- Secured Australian residency for a client under the domestic violence partner visa provisions.
- Ensured clients received cultural and language support when interacting with police, courts, and tribunals.
- Navigated the divorce process, including international marriages.
- Assisted clients with hardship arrangements through the State Penalties Enforcement Registry (SPER).
- Facilitated understanding of complaint processes under the Human Rights Act and anti-discrimination legislation.
- Applied to Victim Assist Queensland for clients experiencing violent crime.
- Educated clients on their employment law rights, including issues of underpayment, bullying, harassment, and discrimination.



Client statement presented as part of the Lived-Experience Panel at the Queensland Health Justice Symposium on 29 February 2024



My name is Dani* and I am currently studying at TAFE to be a support worker.

Several years ago, when I was an asylum seeker, I came to WWG as I needed to see a doctor, and WWG provided free GP services to people seeking asylum who have no Medicare access. I was also recommended WWG due to being multicultural. This service is so great, that years on as a citizen, I still go there and see my GP.

I actually previously also used the Caxton's free legal advice service years back too. They helped me by providing legal advice in relation to a legal issue I had where I sold my car, but the owner didn't change over the ownership and accrued many speeding tickets, which was causing me lots of stress.

More recently, when I went to see my GP at WWG, I was talking to my GP about my work place situation, that I was dismissed without being told that I was dismissed. During this time I was homeless for half a year and struggled to keep up with work. Once I solved my homelessness issue and returned to work, I was told there were no shifts for me and told to look elsewhere. I spoke to my GP about it and she told me about their legal program at the clinic, and then I was referred to the Lawyer Ada – who was incredible.

I continued to see both my GP and Ada at the same time over a couple of months. Ada helped me complete my legal documentation to settle my fair work matter out of court. This whole battle was detrimental to my health and having the support to settle outside of court was extremely helpful. I felt very supported at each stage. I couldn't have faced the company alone in the process. The company also wanted to settle out of court too. If I had to go to court, my mental health issues would have been much worse. And this was avoided. What I received back was negligible compared to the expenses, my mental health, accrued, but it was good to have it over and settled and have some justice.

The legal support very much positively impacted my health. Knowing there is a lawyer on my side to help me fight this battle meant so much, especially as an asylum seeker. As an asylum seeker you feel like no one is on your side, and to then experiencing have a legal service have your back and support you is so great. Ada was my lawyer and my advocate.

We always met at WWG which made things easier too. Having legal support that didn't cost an arm and leg was really beneficial. I could never have afforded a lawyer and I couldn't have done this battle without support. My health was improved by this service.

I kept thinking after, I wish I had a WWG legal service also help me with my citizenship process which was very overwhelming.

WWG legal service had a very supportive approach which was needed as my mind was scattered and I was very stressed.

I am so thankful. I want to also now advocate for support for asylum seekers and refugees too. I have a passion for this, and thank WWG legal service for doing this for me.

Thank you.

*Pseudonym has been used to protect the client's identity.

Justice Prescribed

Achieving Health Outcomes Through Legal Support

In February 2024, our Health Justice Program in partnership with Caxton Legal Centre and the QLD Health Justice Network facilitated a showcase of the incredible work being delivered by health justice partnerships.

The event attracted a full house including government Ministers, shadow Ministers, Deputy DGs from the Departments of Health and Attorney General & Justice, the Human Rights Commissioner and the Public Advocate.

The event highlighted the incredible outcomes that can be achieved when health services and legal services work together in more accessible and integrated models to benefit the most marginalised community members. Our very own Multicultural Advocacy and Legal Service is a great example of a health justice partnership.



Marina Chand (Director - WWG) with Hon Shannon Fentiman (Minister for Health, Mental Health and Ambulance Services and Minister for Women), Hamza Vayani (Board Chair - WWG) and Joe Kelly (Member for Greenslopes)



Cybele Koning (CEO - Caxton Legal Centre) and Rita Prasad-Ildes (Director - WWG) presenting at the Justice Prescribed event



Discussion panel during the Justice Prescribed event???



Hosts and sponsors of the Justice Prescribed event



AGPAL Accreditation



WWG is committed to providing quality services, and accordingly, our programs are accredited under relevant quality standards. Our GP clinic is accredited under the AGPAL quality standards and just before the end of the financial year, our clinic team impressed the AGPAL auditors once again and successfully retained our AGPAL accreditation.



Chinna, Sara, Miryam and Ellice from the WWG Clinic Team



Ellice (Clinic Manager -WWG), Nera (Director - WWG) and Dr Azadeh (GP - WWG)



Ellice, Pawhae, Farida, Samahah, Fatema and Sara - From the World Wellness Group Clinic and Mental Health Administration teams

Staff Wellbeing Day.

Our staff are surveyed every two years to provide an indication of the diversity within our organisation and also very importantly, how included staff members feel in the organisation.

It helps us create better hiring and work practices for a workplace where everyone feels valued, respected and can be their authentic selves at work.

The survey is conducted anonymously so that staff can provide honest feedback. The last staff survey was conducted in 2023 and the next one will be conducted in 2025. We developed staff wellbeing activities as a direct response to the 2023 staff survey as staff expressed the need to feel more connected to each other, and for more social opportunities to improve their workplace wellbeing. Our staff retention rate for full and part time staff over the past 2 financial years was 92% which is well above the industry benchmark which at present is characterised by high turn-over.

Prior to our 2023 staff Christmas party, our staff took time out for a communal lunch and a series of activities over the afternoon that fostered social connection and fun. Staff enjoyed cooking classes, team volleyball, a beach walk just before sunset, yoga and dance! The wellbeing afternoon was followed by a Christmas party for not only the staff, but family members too, who often contribute so much themselves to our organisation and mission.



WWG Team members doing yoga



WWG Team members having a break during a nature walk



WWG Team members in a baking class



WWG Team members playing volleyball

My Journey as an MPSW

Paula Schiavy



My journey at WWG began 4 years ago when I received an email from a friend who thought of me as soon as she saw the job description. She was right because she knew my passion for helping empower people going through challenges and difficulties. I was so excited about the role that I decided to study it to learn more about this system of giving and receiving through the sharing of lived experiences that is peer support work. The term 'peer' loosely translates as 'a person who belongs to the same group' or 'a person who is equal in social position', but in practice, it goes far beyond the literal definition. The proposal offered by WWG in terms of peer support work went beyond the ordinary when it aimed to reach the multicultural community. Being able to work in an organisation that recognises that the process experienced by people who immigrate to another country can be challenging and often devastating for some, and that provides the Multicultural Peer Support Work service to benefit this community, is extremely rewarding. I am an immigrant like my peers, and I know how difficult it can be to integrate and adapt to a new culture and the impact this process can have on us. The language barrier and cultural differences can cause people who arrive in the country healthy to face significant declines in both their mental and physical health, as they give up seeking medical help. I went through this myself years ago, when I could not explain to the first GP who saw me here that I did not want to be examined by a male doctor for a particular procedure. This experience shook me at the time because I realised that not being able to speak English took away my voice and not having a professional who was willing to understand at least a little about the different cultures in society discouraged me from seeking medical help frequently. It would have been different if WWG had existed at that time because I certainly would have had access to an MPSW, who would have assisted me with cultural and linguistic support and who would also facilitate the care by serving as a cultural bridge between me and the professional who was treating me. To compensate, as an MPSW, I seek to serve with excellence all my fellow migrants, my peers who come to access the services offered by the organisation.

Another important factor that I must emphasize is that at WWG, it is not only the clients, the peers, but also all those who provide services. We all immigrated and have this lived experience in common, so everything starts with us. With this in mind, I seek to interact with my colleagues applying the same key principles of peer work, which are respect, shared responsibility, and mutual agreement of what is helpful. I do not believe in an environment where power dynamics trump empathy and honesty, so I always advocate for a work environment in which relationships are built on trust, and where coworkers are able to respectfully challenge each other to try new paths and behaviours that make us role models in the services we provide to clients. I believe in the work environment proposed by the organisation's leadership, where it does not matter whether you are leader, doctor, therapist, social worker, receptionist, MPSW, nurse or coordinator, we all interact harmoniously and respectfully, promoting quality in work and in customer service. Colleagues like Aurore Pascaud (MPSW coordinator) and Mohamed Kamara (PM+) were and are key players in my development in the organisation, always valuing me not only as a worker, but also as a person, which encouraged me when I was facing difficulties and encouraged me to be a better professional. With these support, I graduated in Mental Health Peer Work and over time I was given the opportunity to work in other programs in the organisation (CIM, PM+, Culture Care, Lived Experience Reference Group), learning, collaborating and doing what I love most, which is supporting people who need someone who is willing to listen to them and share strategies to improve their well-being. It is very satisfying to be working in a place where the investment and efforts in improving the quality of services provided to the multicultural community never ends. Being part of this is a great pleasure for me. Let's go!

Photos From The Year



Artwork from our Art Therapy clients on display at the Stones Corner library



Staff from World Wellness Group at the TAFE QLD Wellbeing expo



WWG Staff celebrating the opening of the new building



WWG Staff celebrating International Women's Day '24



WWG Staff at the World Wellness Group Staff Wellbeing Day enjoying some time outdoors



WWG team members receiving a donation of plants for the new office from Bunnings Newstead

Acknowledgement

World Wellness Group acknowledges the support of the following organisations in financially contributing to our service delivery:



**Queensland
Government**



Dedicated to a better Brisbane

phn
BRISBANE NORTH

An Australian Government Initiative

phn
BRISBANE SOUTH

An Australian Government Initiative

**BudgetTM
Direct**
simply smarter insurance

MCF
Muslim Charitable Foundation



| **easternstar**
FOUNDATION

References



AIHW. (2023, February 8). *Chronic health conditions among culturally and linguistically diverse Australians*. Australian Institute of Health and Welfare. <https://www.aihw.gov.au/reports/cald-australians/chronic-conditions-cald-2021/contents/about>

Carey, G., & Crammond, B. (2015). *Systems change for the social determinants of health*. BMC Public Health, 15(1), 662. <https://doi.org/10.1186/s12889-015-1979-8>

Devakumar, D., Selvarajah, S., Abubakar, I., Kim, S.-S., McKee, M., Sabharwal, N. S., Saini, A., Shannon, G., White, A. I. R., & Achiume, E. T. (2022). *Racism, xenophobia, discrimination, and the determination of health*. The Lancet, 400(10368), Article 10368. [https://doi.org/10.1016/S0140-6736\(22\)01972-9](https://doi.org/10.1016/S0140-6736(22)01972-9)

Harrison, R., Walton, M., Chitkara, U., Manias, E., Chauhan, A., Latanik, M., & Leone, D. (2020). *Beyond translation: Engaging with culturally and linguistically diverse consumers*. Health Expectations: An International Journal of Public Participation in Health Care and Health Policy, 23(1), Article 1. <https://doi.org/10.1111/hex.12984>

Henderson, S., & Kendall, E. (2011). *Culturally and linguistically diverse peoples' knowledge of accessibility and utilisation of health services: Exploring the need for improvement in health service delivery*. Australian Journal of Primary Health, 17(2), Article 2. <https://doi.org/10.1071/PY10065>

Javanparast, S., Naqvi, S. K. A., & Mwanri, L. (2020). *Health service access and utilisation amongst culturally and linguistically diverse populations in regional South Australia: A qualitative study*. Rural and Remote Health, 20(4), Article 4. <https://doi.org/10.22605/RRH5694>

Khatrri, R. B., & Assefa, Y. (2022). *Access to health services among culturally and linguistically diverse populations in the Australian universal health care system: Issues and challenges*. BMC Public Health, 22(1), Article 1. <https://doi.org/10.1186/s12889-022-13256-z>

Kpozehouen, E., Heywood, A. E., Kay, M., Smith, M., Paudel, P., Sheikh, M., & MacIntyre, C. R. (2017). *Improving access to immunisation for migrants and refugees: Recommendations from a stakeholder workshop*. Australian and New Zealand Journal of Public Health, 41(2), Article 2.

National Academies of Sciences, E., Division, H. and M., Practice, B. on P. H. and P. H., States, C. on C.-B. S. to P. H. E. in the U., Baci, A., Negussie, Y., Geller, A., & Weinstein, J. N. (2017). *The Root Causes of Health Inequity. In Communities in Action: Pathways to Health Equity*. National Academies Press (US). <https://www.ncbi.nlm.nih.gov/books/NBK425845/>

Nous Group. (2023, August). *Strengthening the state funded mental health drugs (MHAOD) service response for people from CALD communities*. Queensland Health.

Williams, D. R., Lawrence, J. A., & Davis, B. A. (2019). *Racism and Health: Evidence and Needed Research*. Annual Review of Public Health, 40(1), Article 1. <https://doi.org/10.1146/annurev-publhealth-040218-043750>





182 Logan Road | Woolloongabba | QLD | 4102 | Australia

Tel: (07)3333 2100

ABN: 95 154 368 804



worldwellnessgroup.org.au