



**World
Wellness
Group**

worldwellnessgroup.org.au

FY 2024 – 2025

Impact Report

Foundations for the future



Executive Summary

This year was dominated by a major goal – securing a permanent home for our vision. We raced against the clock – 30 June 2025 – to raise the funds to purchase our \$4 million clinic building. The purchase marked a transformative moment in WWG's journey – a bold investment in stability, sustainability and long-term impact. More than bricks and mortar, our space embodies our commitment to community-led and -owned change, cultural community voice, and the power of place.

Conversely, the support we received from the community was a testament to people power – the purchase was fueled by people power. From grassroots donations to our incredible crowd-funding campaign – the purchase of our building was made possible by the collective belief, generosity, and determination of those who share our vision. It was a powerful reminder for WWG that when communities come together, that together we can achieve what seemed beyond reach.

This year also saw the consolidation and expansion of existing key programs – expanding the WWG footprint further across Queensland. We expanded the Culture in Mind program (psychosocial support) geographically into the Gold Coast, Darling Downs and West Moreton regions; we expanded our Multicultural Seniors Social Program; and we established a Multicultural Alcohol and Other Drugs Program. All these program expansions also represent the foundations for the future.

And finally, this year also saw some changes on our Board of Directors. Our Co-founder Nera Komaric retired from the board and we welcomed new Directors Judy Foster, Daniel Coase and Sasenka Abeysooriya.



From L to R: Roger Collins-Woolcock (Treasurer), Marina Chand (Director), Daniel Coase (Director), Judy Foster (Director), Hamza Vayani (Chairperson), Rita Prasad-Ildes (Director), Sasenka Abeysooriya (Director), Missing from image: Dr Lisa Bohlscheid (Director)

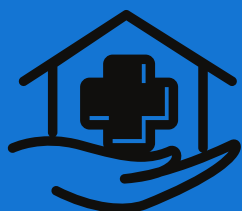
Inequity Has a Cure

Our programs are co-designed to deliver health equity with the multicultural communities they are designed with. Achieving greater health equity is WWG's mission and it powers everything we do.

There is growing and compelling evidence that health services designed by the communities who use them—through co-design, community health programs, and participatory models—are more effective, equitable, and sustainable. WWG is an example of a community-led service – we strongly reflect the communities who use our services.

Health programs are the most effective when they include community-controlled governance, local resource mobilisation and partnership.

International evidence (Kerkhoff et al., 2022; New Global Guidance Puts Forward Recommendations for More Effective and Equitable Clinical Trials, n.d.) shows that community health programs improve access and outcomes for under-served communities and they also:



Improve access to primary health care

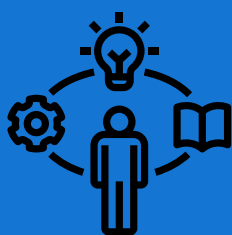


Modify the social determinants of health



Reduce care costs, lower hospitalisation rates and prevent disease progression

Local services that are designed by and for the community are even better. Some of the reasons are:



Relevance

Services reflect real needs and cultural contexts

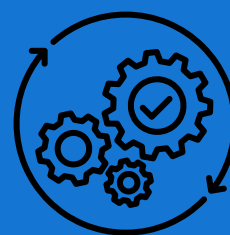


Trust and ownership



Systemic change

Community led services challenge power imbalance and promote equity



Efficiency

Community insights lead to better resource allocation and reduce wastage

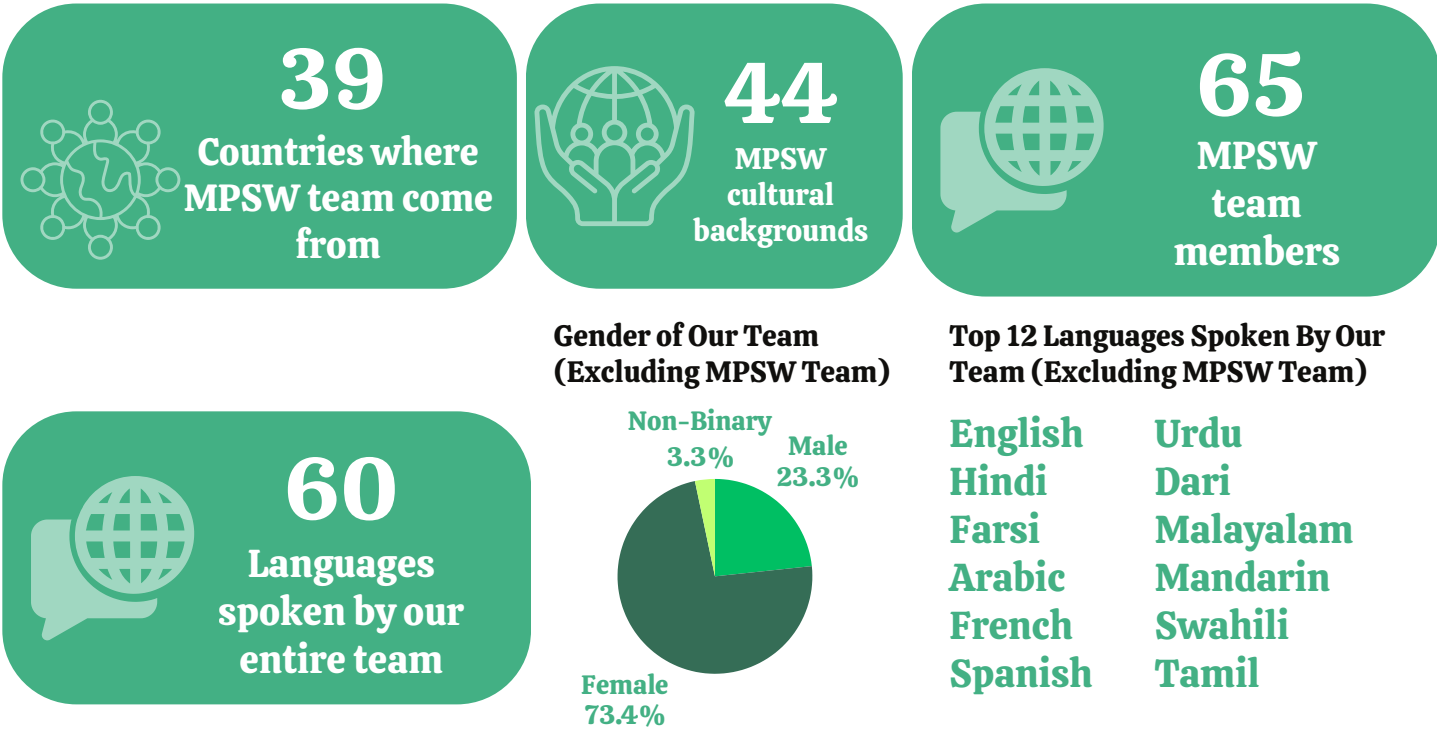
While WWG has created measurable positive impacts on the health and wellbeing of people from multicultural backgrounds, there is still much to do to achieve systems impact.



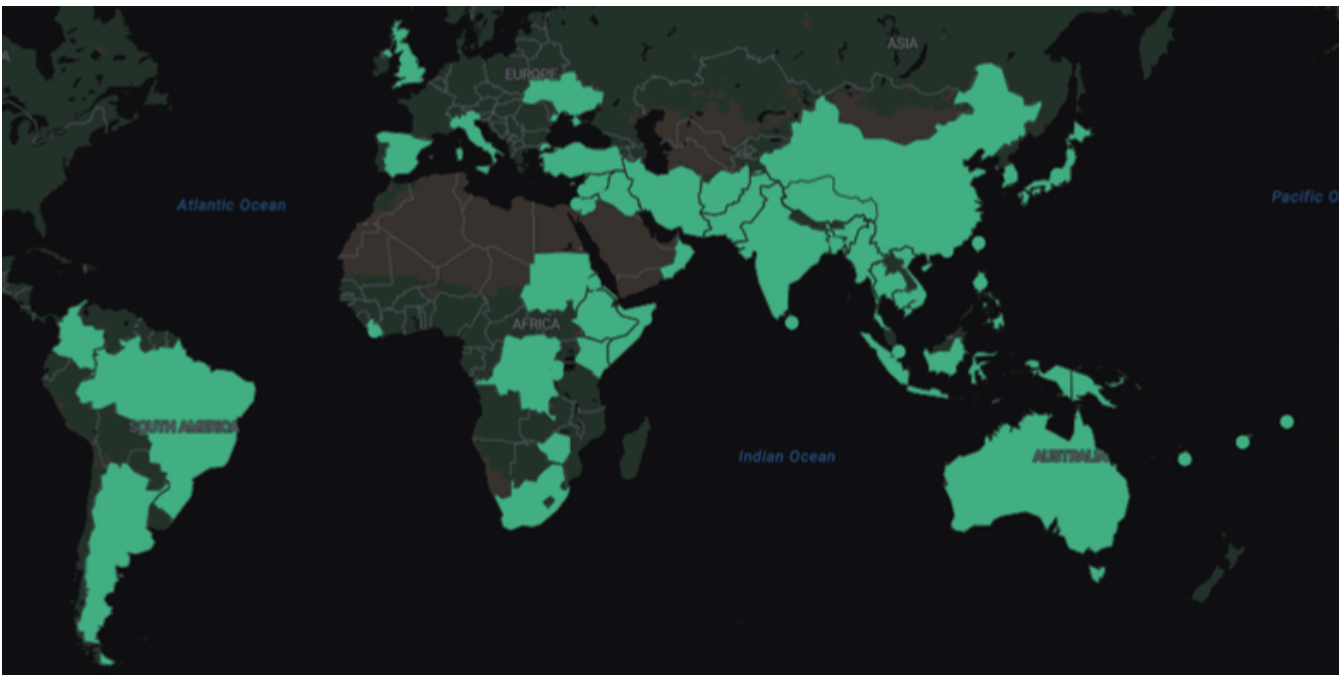
Lived Experience Implementation Work

Over the past year, WWG has continued to embed the principles of our Multicultural Lived Experience Framework across our work. Many goals within the framework have already been operationalised, including workforce engagement, service planning, and culturally responsive initiatives. Engagement with multicultural lived experience representatives (MPSWs) has provided ongoing insights into barriers and opportunities, guiding initiatives across the four interconnected pillars of the framework.

This year, attention has centred on consolidating foundational elements and mechanisms for integrating lived experience input consistently across services. Key initiatives were all of staff training and the development of practice guidelines by several of our mental health practitioners in collaboration with the Lived Experience Reference Group on expanding our co-therapy practice framework focused on brining lived experience to the forefront. We have revised our Lived Experience Reference Group to a Lived Experience Operational Action group, signalling our ongoing commitment to action in creating culturally attuned spaces for listening and learning and meaningful participation.



Where Our Entire Team Come From



Our Impact | FY2024 - 2025




26k
Appointments /
Service Contacts



16%
Increase in
service
contacts



More than
3k
Clients



2.5
GP appointments per hour
Clinics in the Brisbane North and
Brisbane South who
predominantly bulk bill have
around 4.5 GP appointments per
hour*

Our GPs conduct fewer appointments per hour to allow for longer, more comprehensive consultations tailored to complex care needs. Despite generating approximately 50% of the billing per hour compared to other predominantly bulk-billed clinics*, our model prioritises equity, cultural safety and quality over volume, delivering high-impact care.

*Data based on Cubiko where 31% of QLD practices are in the dataset (Touchstone General Practice Industry Report, 2024, <https://www.cubiko.com.au/resources/general-practice-benchmarks-2024/>)



~ 1500
Service Contacts where
the practitioner and
client spoke the same
language

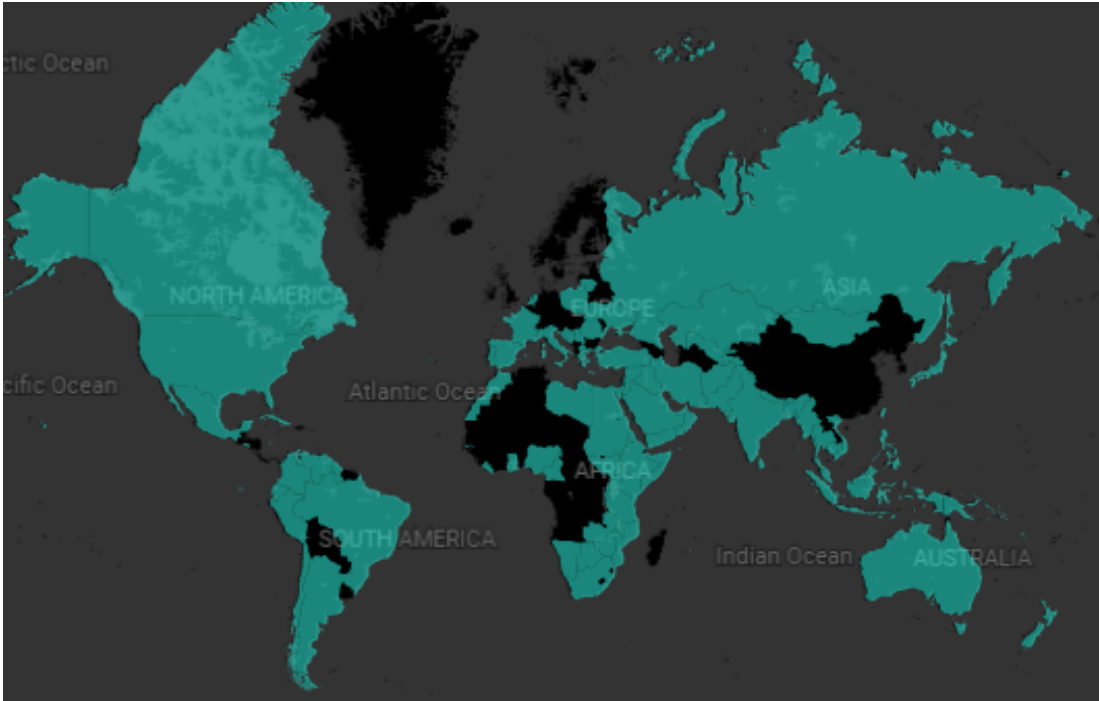


43%
Of clients used
more than one
WWG service



71%
Of clients prefer
a language other
than English

Country of Birth of Our Clients





150
Number of
ethnicities of
our clients



156
Number of
countries our
clients come
from

Strengthening Regional Outreach of Culturally Responsive Care

This year, the Culture in Mind program expanded into new regions, helping more people from multicultural backgrounds access mental health support that respects their culture and lived experience. This expansion came as a result of an evaluation commissioned by Queensland Health of our Culture in Mind Program, which demonstrated a clear need for culturally safe, psycho-social mental health support in priority regions in Queensland. The expansion includes the Gold Coast, West Moreton and Darling Downs regions.

Culture in Mind helps people with complex to severe mental health challenges live meaningful lives, despite having a mental health challenge. It is a goal focused, action oriented mental health service aiming to transform the way communities think about the capacity of people with mental health challenges.

On the Gold Coast, services are now being delivered by our partner organisation, Multicultural Communities Council Gold Coast (MCCGC), on behalf of WWG. We've set up a shared governance model, whereas In West Moreton and Darling Downs, WWG is delivering the program directly.

The regional delivery of Culture in Mind is supported by WWG's established statewide infrastructure of the Multicultural Connect Line.

We've welcomed a new team of Multicultural Mental Health Recovery and Wellbeing Workers, who bring cultural knowledge, compassion, and experience to their roles. The program has been highly anticipated in these communities, and we've developed a robust training package to make sure our team is well prepared to deliver this unique service to build capacity in communities.

Behind the scenes, we've worked hard to build the right governance processes, technology systems, and data tools to support service delivery across large and diverse regions. We've also started recruiting multicultural peer support workers in these regions , who will play a key role in expanding WWG's lived experience and culture based approach to co-delivery.

All of this supports our goal: to provide non-clinical, recovery-focused support that is delivered by skilled multicultural workers who understand the communities they serve. Our new data capture system is aligned with WWG's Social Impact Framework, helping us measure the difference we're making in people's lives.



Darling Downs CIM Team: Wafa, Azeez and Reshma

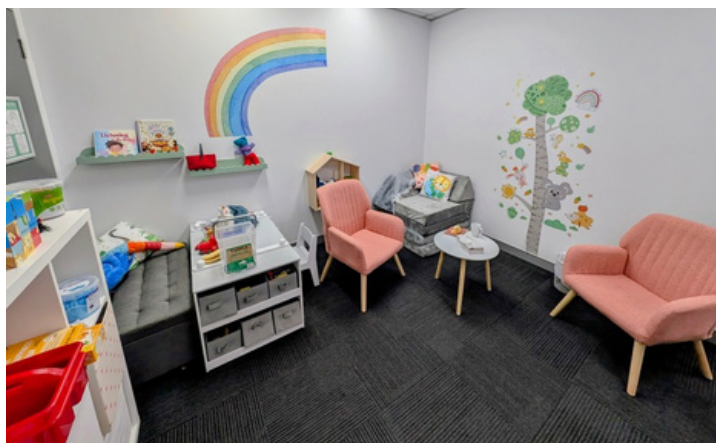
West Moreton CIM Team: Roya and Sandra



Therapy Service for Victim-Survivors of Family, Domestic and Sexual Violence

We are privileged to be part of a 2-year national pilot by the Federal Government which is focused on improving health system responses to victim-survivors of family, domestic and sexual violence.

As part of this response, we provide longer term culturally responsive therapeutic services to children, young people and adults. As part of this program, we have been able to build significant internal capability to provide trauma informed DFV and sexual violence focused therapeutic services and have also created a children's therapy room to be more responsive to the needs of children.



Advancing Social Wellbeing for Multicultural Seniors

Over the past two years, World Wellness Group successfully piloted a culturally tailored social wellbeing program for seniors from multicultural backgrounds—proudly supported by the Eastern Star Foundation through the Australian Communities Foundation. The program's proof-of-concept evaluation, published in the report *Lonely in a Foreign Land*, which can be found on our website: <https://worldwellnessgroup.org.au/knowledge-resources-hub/publications-and-resources/>, provided compelling evidence of unmet needs and measurable outcomes of our program design. This advocacy led to new funding from the Department of Families, Seniors, Disability Services and Child Safety, enabling the program to be scaled across the Brisbane north region.

The support from Eastern Star Foundation was instrumental in amplifying the voices of multicultural seniors, demonstrating that language and cultural barriers continue to exclude them from mainstream social inclusion efforts. This initiative not only validated their experiences but also catalysed policy and funding responses to address long-standing inequities.



Accessible Services

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 to healthcare for multicultural communities.

These barriers are well evidenced in published literature (*Henderson & Kendall, 2011; Javanparast et al., 2020; Khatri & Assefa, 2022; Kpozehouen et al., 2017*). We measure ourselves against the solutions to these barriers:



Free or Low-Cost

All services are provided at no charge (except acupuncture which is low-cost)



Visa No Barrier

No programs have visa as an eligibility criteria. Almost \$80,000 pro bono medical and medications provided to people seeking asylum.



Overcome Geographic Barriers

WWG has several state-wide programs including Multicultural Connect Line, Culture Care and Asylum Mental Health Care and most of our services have an outreach model.



Cultural and Language Support

1500 Multicultural peer support sessions
+/- 1500 staff/client language match sessions



Culturally Based Models of Care

All WWG services place culture at the centre and cultural responsiveness is embedded in service design.



Culturally Diverse Staff and Leadership

92% of WWG staff from multicultural backgrounds representing 69 ethnicities. We are representative of the community we serve.

Supporting the Health of People Seeking Asylum

Providing health support to people seeking asylum is a vital part of our commitment to universal access to health care. Health is a fundamental human right, and ensuring equitable access for all—regardless of immigration status—reflects our values of dignity, compassion, and justice.

People seeking asylum continue to face significant barriers to health care, with many not having Medicare access. Even for those with Medicare there are significant barriers to care including trauma, displacement and limited resources which lead to poor health outcomes. WWG continues to be the health provider in the ASRA Consortium (Asylum Seeker and Refugee Assistance Program) funded by the Queensland Government. This year our team was expanded in response to Palestinian families arriving from Gaza as they arrived with no Medicare access. We continue to provide significant pro bono support and by continuing this support, we uphold our values of a fair and humane health system.



Background

Ali came to Australia in search of freedom, crossing the sea on a small boat with a group of people in 2013. His only 'crime' back home was expressing his beliefs, which led to him being hunted down and facing either lifetime imprisonment or execution.

After two weeks of fear, helplessness, and hope on the boat, he finally reached Australian soil. Unfortunately, he was rerouted to Manus Island by Australian officials and detained there in a state of limbo for over a decade. When he was granted a Bridging Visa, he was doing quite well financially and contributing positively to the wider community through his services.

Health Concerns

However, the Department cancelled his work rights a year ago for unknown reasons, and since then, Ali's situation has deteriorated. He began feeling helpless again, became more reliant on others, and his past traumas started to severely affect his mental health. He also has several physical health concerns that require regular medical attention.

When his work rights were cancelled, his Medicare was also suspended. As a result, he was unable to access the healthcare services he needed for both his physical and mental health.

WWG Support

Fortunately, through the Asylum Seeker and Refugee Assistance (ASRA) program, Ali was linked with WWG and has since been receiving regular physical and mental health care.

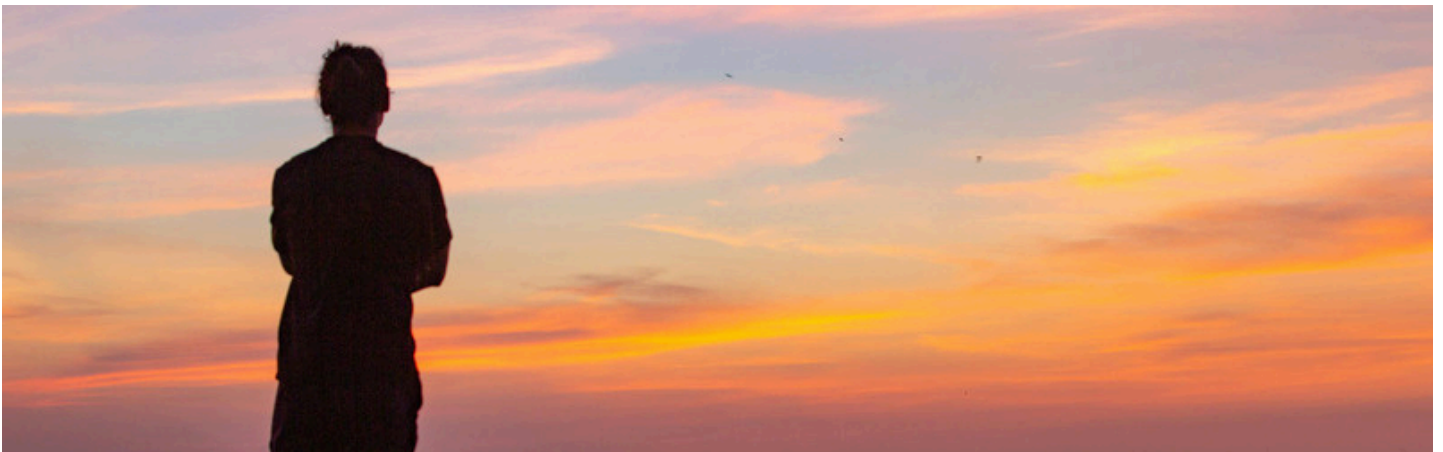
He deeply appreciates the care, support, and genuine concern shown by WWG, and often expresses that WWG makes him feel seen and respected—even during the lowest points in his life.

He now volunteers in many activities, as encouraged by his mental health practitioner and GP, to keep himself engaged and active. Through ASRA at WWG, he receives support to cover medical costs, including medications, scans, and blood work.

Road to Recovery

Ali would greatly benefit from the reinstatement of his work rights. In the meantime, WWG's holistic approach to supporting him has made a significant difference to both his physical and mental health.

He enjoys volunteering and refers to WWG as his second home as he comes to the clinic frequently.



Improved Cultural Safety and Wellbeing

There is diverse literature on the role of culture within the healthcare context (*Watt et al., 2015*). In the 1980's cultural competence was introduced as a skillset that health practitioners should possess and display when working with diverse clients (*Cox & Simpson, 2020*).

Then, the concept of cultural safety and responsiveness emerged with a more robust understanding of power dynamics in healthcare. Cultural safety focuses on the experience of the healthcare recipient and seeks to address the power imbalances and inequitable social relationships that exist in healthcare.

Cultural safety also places emphasis on the role of healthcare organisations in creating and maintaining culturally safe environments (*Cox & Simpson, 2020*).

WWG has embedded "improved cultural safety" in our social impact framework. Measuring cultural safety has some complexities in a service delivery environment but we are committed to improving our measurement in this area to ensure our services are inclusive, responsive, grounded in trust so every individual feels safe and valued regardless of their cultural identity.



77%

**of closed casefiles
where treatment was
completed have a K10
done pre and post**



95%

**of the 77% of clients
where a pre and post K10
was done have reported
Improvement in
psychological distress**

**These scores are based on the
Multicultural Psychological
Therapies and Problem
Management + Programs.**

**The K10 is a widely used
instrument to measure
psychological distress.**



4,368

**Hours worked by the
Multicultural Peer
Support Workers
Team**



1,500

**Sessions with a
Multicultural Peer
Support Worker
(MPSW)**



67

**Multicultural Peer
Support Worker Team
Members**



My Journey at WWG

by Mahsa Mirshekari

My journey with WWG began when I attended a carer event and had the opportunity to meet one of the psychologists who used to work at WWG. We had a great conversation about my interests and background, and she introduced me to the MPSW role. She explained how my bilingual skills and psychology qualifications could make me a strong fit. I found the role incredibly innovative and meaningful, especially for supporting people from multicultural backgrounds. I was excited by the idea of bringing my own lived migration experience into the sessions, helping clients feel more heard and understood. I saw it as a way to build trust and empathy, and I was eager to be part of that process.



As an MPSW, I quickly saw the unique value of the role. Clients were more motivated to engage when they felt culturally safe and understood. They opened up more easily, shared their stories, and felt empowered to seek support. It made a real difference when they knew someone was genuinely listening and working to overcome communication barriers. I've shared my positive experience with friends and family and encouraged them to consider the MPSW role. It's a powerful way to support others while developing professionally.

My transition to the Wellbeing Support Coordinator role happened quite naturally. During one of the sessions, a practitioner I was working with mentioned some opportunities and encouraged me to apply. I've always been eager to learn and grow, so I took the chance. I worked in the Multicultural Connect Line and Culture in Mind programs for six months, which was an amazing experience. I learned so much, connected with practitioners and service providers, and supported clients with complex needs. It was incredibly rewarding to see how my support helped them access the services they needed. Later, when a Senior Worker position opened up at WWG, I applied and was successful. I'm truly grateful to be part of an organisation that not only provides fair and accessible support to clients but also creates space for practitioners to grow and thrive while working hard.

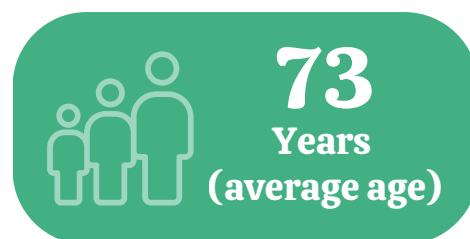
Throughout this journey, I've had many proud moments. I've grown both personally and professionally, thanks to the support of colleagues who understand the migration journey and the challenges that come with it. I've attended professional development sessions, expanded my knowledge, and become more confident in my skills. Working with people from diverse backgrounds has deepened my cultural awareness and respect for different ways of living. I've also received heartfelt feedback from clients who felt truly seen and supported.

To anyone looking to follow a similar path, my advice is keep looking for opportunities to grow, challenge yourself, and learn new skills. It's not always easy as you might feel lost at times, but growth often comes through challenges. Also, don't be afraid to put yourself and your work out there. Constructive feedback is a gift that helps you improve and move forward.

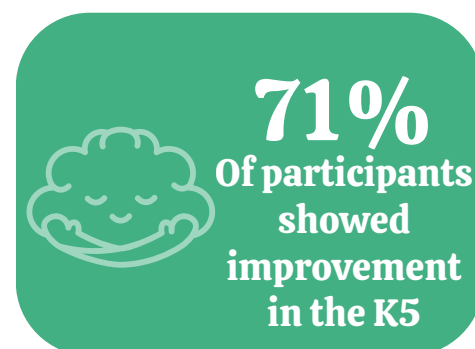
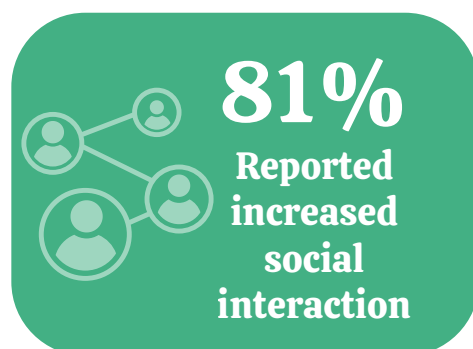


Older Person's Wellbeing

Participation and Diversity



Wellbeing Improvements and Social Connection



Personal Wellbeing Index-Adults-5 (PWI-A) with a 6-months interval, completed by 18 participants pre and post.

Participant Voices

“Before, life was very boring and even me and wife don’t have much to speak about. Now after the group we have lots to talk about – the people and the topics.”

“I have made some friends now with people from Cook Islands and Thursday Island. When you meet some different cultures, you learn their culture too.”

“Before I came to the group I had no idea even where I could call and where I could go. But after I came to the group, because of the group they talked about different social services, so now I know how to overcome this problem.”



Mrs Zee's* Story

*Not real name

Background

Mrs Zee is 79 years old and recently widowed. She comes from a Chinese background. She spent the last couple of years looking after her husband who recently passed away. Our care finders assisted Mrs Zee's husband with his aged care needs. Although reluctant at first, Mrs Zee finally agreed to receive aged care supports due to increasing care needs.

Unfortunately, Mrs Zee is not eligible for aged pension. She is unable to pay for all of her aged care needs, and is also struggling with buying food and paying her bills. Mrs Zee has two children, but prefers not to engage with them.

WWG Support

Due to all the recent changes in her life, grief and bereavement, and her financial struggles, Mrs Zee's health started deteriorating and she was hospitalised. She was also experiencing social isolation. Her whole life had been dedicated to caring for her husband.

When Mrs Zee connected with our care finders following her hospitalisation, the following goals were identified: 1) remove financial obstacles so she can receive aged care services at a reduced rate or at no cost; 2) link her to community organisations to help manage her long-term financial issues; and 3) link her to social groups to reduce feelings of social isolation. The care finder who assisted Mrs Zee comes from the same cultural background and speaks the same language as her.

Our care finder supported Mrs Zee to achieve her three goals. First, the care finder liaised with the client and the social worker and occupational therapist who supported Mrs Zee when she was hospitalised to better understand her health and aged care needs. Our care finder immediately requested a support plan review for Mrs Zee so she can receive more supports.

Second, the care finder successfully advocated for Mrs Zee to receive financial hardship assistance from her Commonwealth Home Support Programme (CHSP) providers while waiting for the outcome of her support plan review. Fortunately, Mrs Zee's Home Care Package (HCP) was assigned quickly following a support plan review, and she was able to utilise her HCP straight away, rather than use her CHSP services. Our care finder made sure Mrs Zee is connected with a culturally appropriate Home Care Package provider.

Third, the care finder also referred Mrs Zee to emergency relief supports in her local area to receive assistance with payment of bills and access to food parcels and free community meals. Lastly, Mrs Zee was referred to our multicultural legal and advocacy service (MALS) so someone can advocate on her behalf regarding her large bills.

Road to Recovery

Mrs Zee is now happily using her Home Care Package Level 4, particularly transport, domestic assistance, and social support. She frequently attends social groups delivered by her provider. She also met with a financial counsellor to discuss her situation and was provided with options regarding long-term financial sustainability. Mrs Zee also visits her local community centre regularly to receive food parcels and free community meals. Mrs Zee also attends the seniors' picnics we organise at WWG.



Multicultural Advocacy and Legal Services (MALS)

MALS is a health justice partnership between Caxton Legal Centre and WWG. The service brings together a Senior Lawyer from Caxton and a Multicultural Navigator from WWG to provide integrated legal, health and social support to people from multicultural backgrounds whose legal issues are affecting their mental health.

Originally established as a pilot program, MALS has now become a core program at both Caxton and WWG, following continued government funding announced this year. This recognition reflects the program's success in improving access to justice, health and wellbeing for multicultural communities experiencing complex disadvantage.

Josie's* Story

*Not Real Name

Josie, a Pacific Islander woman seeking refugee protection in Australia, had survived serious gender-based violence in her home country. Living with trauma and mental health challenges, she struggled to process complex information and entered into a franchising agreement she didn't fully understand. The demands of the business and pressure from the franchisor quickly became overwhelming, affecting her health, finances and housing stability.

Josie was referred to MALS by her psychologist at WWG. MALS worked closely with Josie's psychologist and her doctor at the Mater Refugee Complex Care Clinic to address her legal, health and social needs.

MALS helped Josie manage her debts, obtain representation to negotiate a fair exit from the franchising contract, and secure housing and financial assistance. This coordinated, trauma-informed support helped Josie regain stability and confidence.

Recently, Josie was granted permanent residency and is now studying at TAFE to improve her employment prospects.

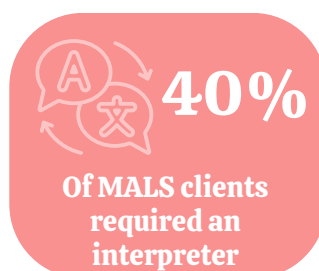
In Josie's words:

"I felt like I wasn't alone...[The support of MALS] made a huge impact on my mental health.

I had so much fear – I felt I wanted to stay in my room, I was so scared to go out. But with your help, I was able to push through.

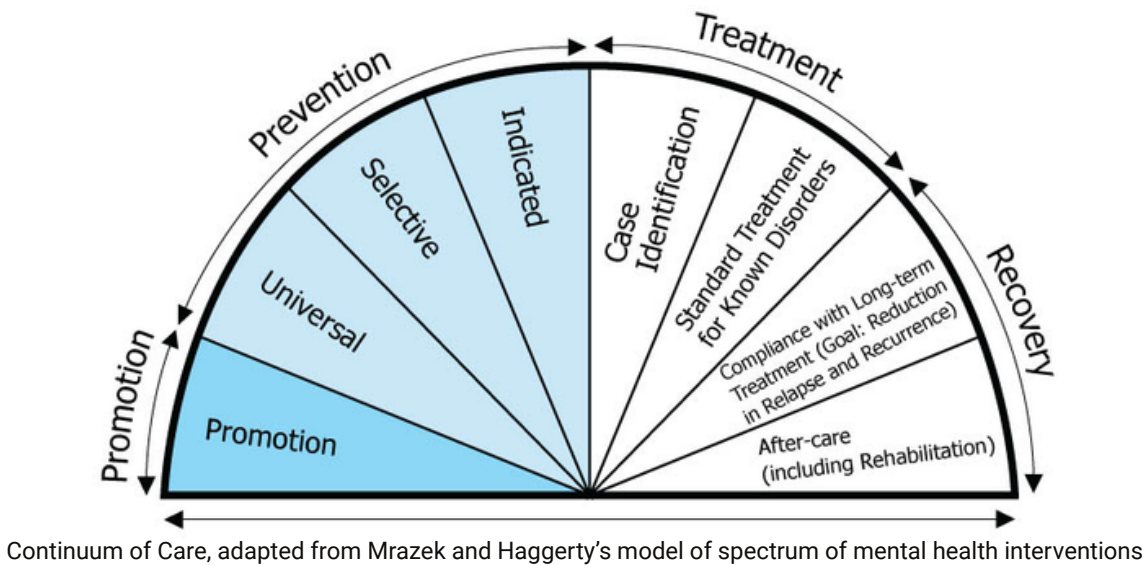
For the community, if reading my story makes them think 'if someone like her can get help and come out of the other end on a high, then I can get help too', that would be a really positive thing. They can be encouraged by my story."

Josie's story shows how culturally safe, multidisciplinary support can transform lives for people from refugee and migrant backgrounds facing complex challenges.



Improved Knowledge and Self-Management

As a health promotion charity, WWG has a strong focus on promoting health within and for multicultural communities. Whilst many of our services would fall in the ‘treatment’ and ‘recovery’ domains of the healthcare continuum, a stronger focus on prevention and promotion occurred in 2024-25 with the establishment of the Multicultural Alcohol and Drugs Program and the expansion of the Multicultural Seniors Social Isolation Program.



Physical Activity | Promotion

The physical activity sessions are hosted throughout Brisbane South parks and are funded by the Brisbane City Council through the Active and Healthy Program.



3,658
Attendees at physical activity sessions



178
Physical activity sessions

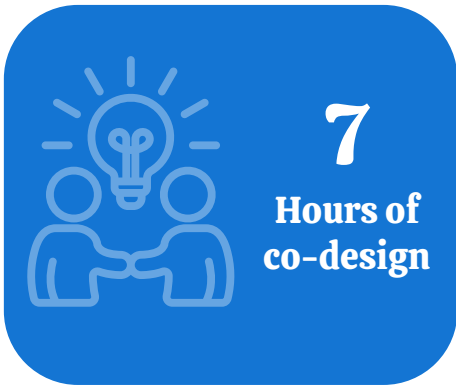
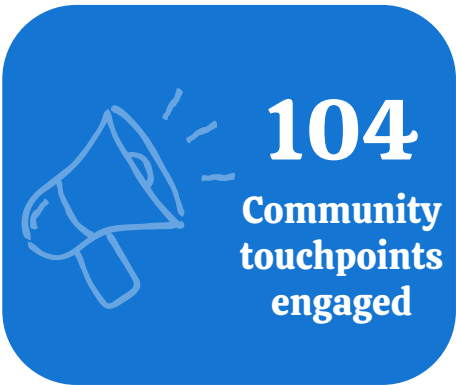


20
People per physical activity session on average



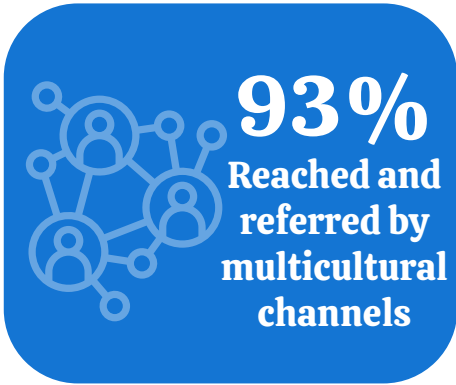
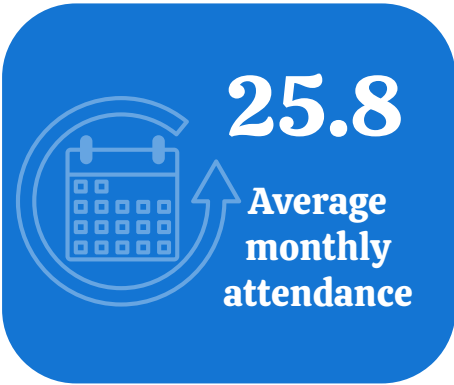
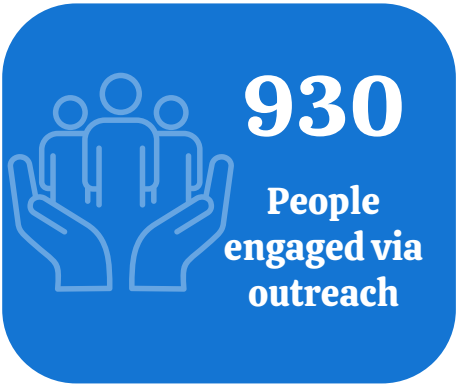
Multicultural AOD Program | Universal Prevention

The Multicultural AOD Program completed its establishment phase during the first half of 2025, achieving:



Multicultural Seniors Social Program | Indicated Prevention

The Multicultural Seniors Social Program achieved the following level of engagement.



Background

Ayesha's life has been impacted by difficulty, despair and loss. She is from a culture which does not value girls. She reported upon her birth, her mother was battered and belittled for not producing a male child. She experienced domestic violence and, witnessed it against her mother. Her mother divorced her father and this led to family poverty and stigma. Both she and her mother fled, leaving her two brothers behind. They lived in refugee camps for more than 10 years. This was a difficult time, with many moments of fear and vulnerability. They were granted visas for Australia as vulnerable women.

Health Concerns

She has undergone significant trauma and difficulties which caused psychological challenges. Additionally, she has struggled with physical symptoms, due to the multiple trauma and difficulties she has been exposed to. This led to avoidance, and mistrust causing significant loneliness and isolation. She often was sick and had difficulty attending appointments and attended TAFE under sufferance.

WWG Support

Ayesha was referred to WWG by her GP, as they recognised that there was a need for brief therapeutic intervention. Furthermore, Ayesha recognised that she was ready to access support. She reports that this was a very big step for her. Her fear and mistrust were barriers to her leaving the house, social engagement and community participation. The psychoeducation, therapies and skills-building which occurred contributed to feelings of being valued and valuable.

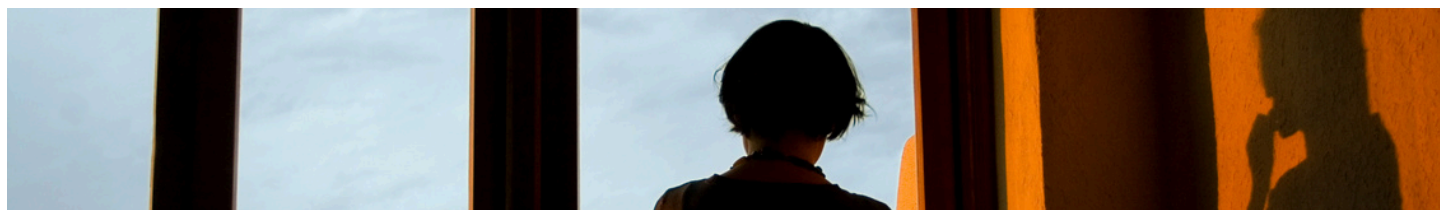
The sessions were supported by a Multicultural Peer Support Worker, whose gender was determined by Ayesha. Skills aligned to focused psychological strategies, were discussed, modelled and practiced in session. She was able to be assertive, celebrate self-agency and self-determination. This led to a trip back to her family overseas after 10 years' separation, which meant confronting very difficult things. In addition, she reports going back to her country of birth was effective in engaging with family and recognising that she "being able she is valued and loved". Furthermore, she reported the confidence to make friends and engage with them. She found the sessions and, mastering those skills helpful.

The staff treated Ayesha with respect and kindness, making her aware of the many arms of the organisation, which can be accessed should she need it. The organisation offered her information around other agencies within and, without World Wellness Group which might be helpful.

Road to Recovery

With consistent support, Ayesha has begun her journey of healing. Ayesha aspires to pursue her dream of study and supporting others who have gone through a journey similar to hers.

Today she reports actively pursuing her TAFE studies, which is a step in the journey of her goal to complete tertiary studies. Furthermore, she reports supporting others who require assistance within the diverse communities. She reports this allows her experiences, to make positive difference in the lives of others.



The Year Photos



The Year Photos



HEALTH *is a* HUMAN RIGHT



**World
Wellness
Group**

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