

CHARITABLE & SOCIAL SERVICES
ANNUAL REPORT

16-17



ABOUT OUR CABRINI'S CHARITABLE
AND SOCIAL SERVICES

page 4

YEAR AT A GLANCE

page 8

01

THE IMPACT WE MADE

page 10

02

OUR PARTNERSHIPS

page 20

03

MEET SOME OF OUR
STAFF VOLUNTEERS

page 26

04

OUR PERFORMANCE, RECIPIENTS
AND SUPPORTERS

page 36

ABOUT CABRINI

page 42

US



Celebrating 25 years of missionary identity

By Catherine Garner
Executive Director Mission &
Charitable Services

→ The XI General Chapter of the Missionary Sisters, which was held in Rome in 1990, was the catalyst for Cabrini to broaden its activities beyond healthcare. The Chapter Conclusions reaffirmed the Cabrini Sisters' missionary identity and directed all of their institutions to support their commitment to serve the poor and needy.

This was the first General Chapter where lay representatives from the Cabrini Sisters' missions around the world were present. The invitation reflected the Sisters' recognition that lay directors and employees were critical to the future sustainability of their missions.

At the time, Cabrini comprised a 300-bed acute private hospital providing inpatient

In 2010, we committed to increase the annual value of the program from \$1m to \$6m over the next ten years and at the same time, reduce the number of relationships while increasing their strength and effectiveness.



care primarily for people living in the City of Stonnington and neighbouring local government areas (or municipalities). The poor and needy in our community were not immediately evident. It took time to understand how such a program could be structured and who it should serve. The Board's first response was to provide a funding stream for the work, establishing the mission enhancement fund in 1991-92.

Our first formal agreement was with the Catholic Archdiocese of Melbourne, and involved establishing Cabrini Centacare in Malvern in association with the Catholic Family Welfare Bureau (now CatholicCare). At the time, there were no counselling services available in Malvern. Cabrini Centacare offered means-based fees, removing the financial barrier for local community members to gain access to such a service. Subsidised counselling was made available to Cabrini staff. A joint management committee was set up to oversee the development and operation of the service.

Our longstanding commitment to the Cabrini Sisters' work in Swaziland was brought into the program. At the invitation of the Sisters, Henk Bos (then-Pathology Laboratory Manager) undertook a service review at St Mary's

1997

Cabrini performed its first of many medical evacuation cases

2017

A new strategy for our charitable and social services is underway



*Opposite page:
Plastic surgeon Mr Will Blake and
medical evacuee Pulei Latu of Tonga
at her final appointment.*

*This page:
Cabrini Sisters Sr Pietrina Raccuglia
MSC (immediate past Provincial
Superior) and Sr Sharon Casey MSC
perform a blessing of memorial
plaques at Cabrini Malvern.*

Mission in Manzini and St Philip's Mission in Swaziland's rural low veld. As a result of the review, the Cabrini Sisters made a commitment to concentrate their efforts at St Philip's and our support became more purposeful. For example, we funded a deep-water well, built a maternity unit to improve maternal and child health and, with the support of our staff, we sponsored children to go to school.

We began a relationship with Open Family Australia, an organisation founded by Father Bob Maguire to serve homeless and at-risk youth. The value of our philanthropic contribution was enhanced by providing opportunities for our staff to volunteer. We found this had the added benefit of increasing staff engagement, and it quickly became a principle in all new relationships.

In 1997, we began to leverage our healthcare expertise in our first medical evacuation case. We commenced an employment-integration program to provide supported employment opportunities to clients of our partner organisations.

By the end of the first decade, we were working with 29 different organisations. That year, we provided in-hospital care for four medical evacuation cases and

eight people were participating in the employment integration program.

In 2010, we committed to increase the annual value of the program from \$1m to \$6m over the next ten years and at the same time, reduce the number of relationships while increasing their strength and effectiveness. We have made significant progress towards these goals. Our achievements over the past 12 months are detailed in this report.

The approval of the Cabrini group-level strategy 2016-20 by the Board in November 2015 was a catalyst to review our program once more, so as to position it for the next quarter-century of missionary service. The resulting charitable and social services strategy will see us become more directly involved as a service provider. The strategy is due to go to the Board for approval in August 2017. We are excited about the opportunities it will provide. ●



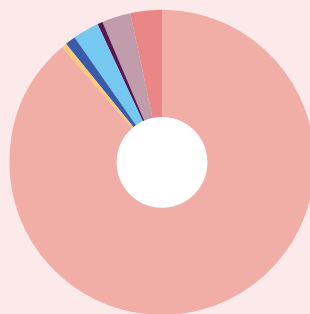
KEY PERFORMANCE INDICATORS

Goal	Key performance indicator	2009-10	2015-16	2016-17
Sixfold increase in investment	Total annual spend	\$1.02m	\$3.05m	\$3.77m
Become a service provider	Amount spent on Cabrini delivered services	\$36,000	\$140,000	\$624,000
Fewer, more significant partnerships	Number of partnerships	38	12	10
	Amount spent on partnerships	\$840,000	\$1.6m	\$1.4m
	Amount spent on top three partners	\$444,000	\$995,000	\$855,000
Preference working with Catholic organisations	Amount spent with Catholic organisations	\$364,000	\$1.74m	\$1.54m
	Percentage spent with Catholic organisations	36%	57%	57%
Balance onshore and offshore investment	Amount transferred overseas	\$354,000	\$886,000	\$1.03m
	Percentage transferred overseas	(34%)	(29%)	(27%)



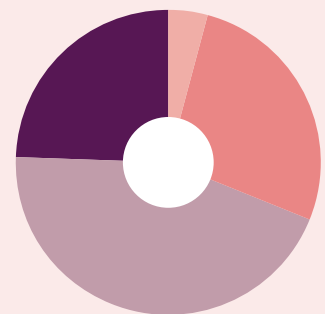
Above:
Intjartnama is an Aboriginal outstation
in central Australia. Twice yearly Cabrini
staff visit to participate in an Aboriginal
reconciliation experience.

INCOME



- Mission enhancement fund
- Medicare
- Workplace giving
- Appeals, donations, grants
- Fundraising events
- In-kind contribution (SVHM)
- Pro bono contribution

EXPENDITURE



- Administration
- Cabrini-delivered programs
- Partnerships
- Philanthropic grants

01

The impact we made

In 2016-17, we made impacts in a range of priority areas including the provision of healthcare for asylum seekers and refugees locally, international health, Aboriginal health and creating benefits for our local community.





176 ASYLUM SEEKERS RECEIVED HEALTHCARE

We marked World Refugee Day on 20 June 2016 with our first client consultation at the Cabrini Asylum Seeker and Refugee Health Hub in the Melbourne suburb of Brunswick. By 30 June 2017, we had 176 registered clients and 136 people regularly using our service.

We prioritise asylum seekers who are Medicare-ineligible and those who have access to Medicare but little or no income. Our clients come from a wide range of countries including Afghanistan, China, Ethiopia, India, Iraq, Iran, Pakistan, Papua New Guinea, the Philippines, Saudi Arabia, Sri Lanka, Sudan, Turkey and Zimbabwe.

Our services comprise a nurse-led refugee health assessment and catch-up immunisation service, general practice clinics and psychiatry outpatient clinics. In April 2017, we launched a specialist mental health service to provide a wraparound service involving case-management, secondary consult and limited community outreach. We have appointed a part-time medical director and mental health social worker, and are recruiting a mental health nurse to complete the team.

Given we are unable to generate much Medicare income, we rely on the support

of psychiatrists, general practitioners and psychologists prepared to work pro bono to complement our employed team. We have 19 generous health professionals who work regularly with us.

BETTER HOSPITAL CARE IN DUBBO, ETHIOPIA

Since 2002, the Cabrini Sisters have been involved in St Mary Catholic Primary Hospital in Dubbo, a village 300 km south-west of the national capital Addis Ababa. In 2016-17, they assumed full responsibility for the hospital for a three-year period in a memorandum of understanding with the local Catholic diocese. As well as providing significant financial support, we partner with the Sisters to strengthen the hospital's governance and management systems and improve clinical standards.

A total of 6121 patients were admitted to the hospital in the 2016 calendar year. Twenty-seven per cent of the admissions were children. Sixty-four children were suffering from severe acute malnutrition. Many of the local people are subsistence farmers. Poverty and drought together with chronic health problems such as severe anaemia, intestinal parasites, malaria and other illnesses contribute to

Previous page:

Staff of Cabrini Ministries Swaziland provide home-based care: nurse David Hlophe (right) with a nursing student.

This page:

Dr Ed Sixsmith is working pro bono as a GP at the Cabrini Asylum Seeker and Refugee Health Hub in Brunswick.

Opposite page:

Sue Hewat (right) is General Manager and Director of Nursing at Cabrini Brighton. She visited Dubbo, Ethiopia as part of a health service mission.



176

asylum seekers received healthcare at the Cabrini Asylum Seeker and Refugee Health Hub in 2016-17

451

Swazi children had health checks during a health outreach initiative conducted over five days

malnutrition in this area. Some children improve quickly while others take many weeks to get better. Sixty-one of the children recovered sufficiently to be discharged from the program.

In the same period, 1410 babies were born at the hospital. Although the percentage of women delivering in the hospital has doubled since the Ethiopian government mandated free childbirth services, many women still choose to deliver at home or in a clinic where difficulties such as obstructed labour, ruptured uterus, severe pre-eclampsia/eclampsia and haemorrhage are unable to be managed. Sadly, delayed referral to the hospital resulted in the 108 stillbirths and two maternal deaths during the year.

451 SWAZI CHILDREN HAD HEALTH CHECKS

We have partnered with Cabrini Ministries Swaziland since 2002 when the HIV-AIDS epidemic became evident. Initially, the focus was on caring for people who were dying of AIDS and caring for children who were orphaned as a result. However, Cabrini Ministries quickly established community education, testing and counselling programs and, when



Above:
Cabrini nurse Jovie DeCoyna (left)
participated in a health outreach initiative
with Cabrini Ministries in Swaziland.

In 2012, we started a joint health outreach initiative to communities around St Phillip's Mission providing free health checks to local children.

anti-retroviral treatment later became available, treatment and follow-up programs. Food aid ensured the treatment had the greatest chance of success. The Sisters' commitment to patient follow-up resulted in the achievement of some of the highest rates of compliance with treatment in the developing world.

As it became evident that the crisis was ending, in 2012 we started a joint health outreach initiative to the communities around St Philip's Mission providing free primary health checks to children who have little access to healthcare. In March 2017, Ngaire Diamond led a team comprising a doctor, three nurses and a social worker who worked alongside the Cabrini Ministries' health and childcare staff to perform the health checks. They visited six pre-schools to screen children under five years. Over five days, the team completed 451 health checks.

They found the children were generally in good health. Common ailments were respiratory conditions, gastrointestinal upsets, fungal infections, poor dental hygiene and ear infections. Children requiring follow-up were referred to Cabrini Ministries' outpatient clinic and those who had complex medical conditions were referred to the Good

Shepherd Hospital. A total of 138 children were immunised. One child was identified as being HIV-positive, which enabled the initiation of anti-retroviral treatment.

163 STAFF EXPERIENCED ABORIGINAL CULTURE

Twice each year, we invite staff to participate in an Aboriginal cultural experience at Intjartnama, the Cook family's outstation 120 km west of Alice Springs. The visit usually takes place over four days. The goal is to enable participants to learn about Australia's rich Aboriginal history and to experience the beauty of the central Australian desert.

The vast blue sky overhead, the distant horizon and the ochre ground beneath your feet have a strange way of making you stop and pay attention to the present. It does not take long to adapt to the rhythm of the day as a measure of time. The cares of yesterday and the worries of tomorrow seem unimportant memories. Stories and activities provide a glimpse into a culture that thrived in this land for tens of thousands of years before the arrival of Europeans. Unlike our present way of living, they left little visible impact on the landscape.

93

The number of Swazi children being sponsored by Cabrini staff

16

The number of orthopaedic service and education programs that have been conducted in Papua New Guinea



There is a saying that you cannot understand someone until you walk a mile in their shoes. We do not pretend that this experience makes any of us experts, however it helps us to challenge mainstream assumptions about our Aboriginal brothers and sisters. We realise we have plenty to learn from one another.

Since 2000, 163 staff and one Board director have participated in the experience. Many of them have returned to Intjartnama, in order to deepen their understanding and strengthen their relationships. This is a tangible expression of our reconciliation journey, one step at a time.

93 SWAZI CHILDREN SPONSORED BY STAFF

Swaziland is a small landlocked country in southern Africa that has the unenviable position of having highest prevalence of HIV-AIDS in the world. The first case was reported in 1987. By 2002, many Swazis were dying from AIDS-related illnesses as there was no treatment available in Africa.

The Cabrini Sisters have been in Swaziland since 1971. They responded by redirecting all of their efforts to the crisis. They began community education and HIV-AIDS

*This page:
Surgical registrar Dr Scholastica Ecarl
(left) at Modilon Hospital in Madang,
Papua New Guinea.*

The team operated on 20 cases over four days, working alongside two local doctors. They were able to treat a variety of conditions including club feet, deformities of upper and lower limbs and acute fractures.

testing programs, were among the first agencies in the country to offer anti-retroviral therapy when it became available and established a childcare program for children orphaned by the disease.

Our staff immediately rose to the cause. Within three years, 55 children were being sponsored from Australia and, ten years later, 93 children were being sponsored. This long-term commitment of staff to reach out to others less fortunate than themselves has brought a new dimension to our workplaces. Cabrini Brighton is such a case. Each ward and department sponsors a child. Some staff contribute through our workplace giving program. Their donations are complemented by a host of fundraising activities and events that take place throughout the year, creating a positive social, supportive and engaging workplace.

SIXTEENTH ORTHOPAEDIC OUTREACH TO PAPUA NEW GUINEA

The sixteenth orthopaedic service and education program to Modilon Hospital led by Dr John Griffiths took place from 24-31 July 2016. The program began with a ward round to assess inpatients, many of whom had travelled long

distances from other provinces and islands off the coast in anticipation of the team's arrival. Assessment of outpatients followed. The team's goal was to make a clear diagnosis, recommend treatment and book cases for surgery if they had the necessary equipment.

Following the assessments, the theatre list was compiled. The team then operated on 20 cases over four days, working alongside two local doctors. They were able to treat a variety of conditions including club feet, deformities of upper and lower limbs related to previous trauma, acute fractures (including seven inpatients who had fractured shaft of femurs) and children who had complications of osteomyelitis (infection of the bone).

The first three operating days took place in the old operating theatres, which were in a dilapidated state. The new operating theatres, which had been designed and constructed with Cabrini's help in a project spanning eight years, were in the final stages of commissioning. After assessing the anaesthetic equipment, sterilising department and theatres, it was judged safe to operate in the new theatres on the last day. This was a momentous day for both local doctors and nurses, as well as the visiting team from Cabrini.



BETTER COMMUNITY TRANSPORT FOR OLDER CITIZENS

A community needs analysis in the City of Stonnington conducted in 2013 highlighted parts of the city had high concentrations of older residents. We know from our experience as a healthcare provider that many of them would have complex and chronic health conditions. In order to live at home, they would be required to access various health and support services to ensure their healthcare needs are met. At the same time, a transport audit demonstrated poor availability of community transport to complement conventional public and private options.

In 2014, we approached Bentleigh Bayside Community Health (now Connect Health & Community): one of the community transport providers servicing the City of Stonnington. At the time, only 180 (6 per cent) of their trips were in Stonnington partly due to their existing funding stream through Victoria's home and community care program, which placed strict eligibility criteria for service use. With funding from Cabrini, the 'Driving Change' project was born and began in May 2014. The aim of the project was to increase and improve accessibility, and use of free community transport, for older Stonnington residents using volunteer drivers.

In the past 12 months, 66 individual residents have used the service with 1240

trips recorded. Destinations included medical appointments, rehabilitation programs, shopping, community meetings, swimming, and other health and wellbeing activities. Although the take-up has been low compared to the population size, the impact of the service on these residents has been significant.

ENABLED DIALYSIS IN SANTA TERESA

Since 2015, we have partnered with Caritas Australia and St Vincent's Health Australia to fund a renal dialysis service in Santa Teresa provided by Western Desert Dialysis. Santa Teresa is an Aboriginal community 85 km south-east



*Above:
Cabrini has had a long relationship
with the Aboriginal community in
Santa Teresa, 85 km south-east of
Alice Springs in the Northern Territory.*

of Alice Springs. Like most Aboriginal communities, it has a high burden of chronic disease including renal failure. Prior to 2015, residents were forced to either relocate to Alice Springs to receive regular treatment, or travel along an unsealed road three days of every week. This resulted in these people suffering isolation from their families and community. Neither option was appealing, which contributed to poor treatment compliance.

In 2004, a similar problem in the Kintore community resulted in the establishment of what has become Western Desert Dialysis. They were keen to help Santa Teresa however they did not have the funds to do so. We were approached as

we had a long-standing relationship with the Santa Teresa community, having first supported their primary health clinic in 1996. Together, the contributions from Cabrini, Caritas and St Vincent's covers 65 per cent of the cost of operating the service. The rest of the funding is provided by Western Desert Dialysis.

In the past 12 months, the service has enabled four residents to receive dialysis treatment in their own community. A total of 596 treatments were provided. This represents a 95 per cent rate of utilisation for the service. More importantly, it demonstrates good treatment compliance, resulting in better health and wellbeing outcomes for the individuals involved. ●

02

Our partnerships

We are proud to have partnerships with ten like-minded organisations whose work overlaps with our priority areas. As well as providing funding, our human, intellectual and organisational resources are harnessed in support of their efforts.





CATHOLICCARE MELBOURNE

CatholicCare Melbourne operates under a charter from the Catholic Archbishop of Melbourne and the Diocese of Sale for the purposes of carrying on the welfare, non-profit, educational and charitable activities of the Roman Catholic Church in the Archdiocese of Melbourne and Diocese of Sale with respect to the welfare of families.

- Partner since **1992**
- Funding in 2016-17: **\$181,500**
- Total funding over the life of the partnership: **\$4,644,500**

CABRINI MINISTRIES

Cabrini Ministries is a faith-based community care organisation providing comprehensive, integrated healthcare, childcare, education and social services to the most poor and vulnerable in the Lubombo lowveld area of Swaziland in Southern Africa.

- Partner since **2002**
- Funding in 2016-17: **\$175,000**
- Total expenditure over the life of the partnership: **\$3,151,000***

**excludes proceeds of staff fundraising and workplace giving for the childcare program*

Previous page:

Villagers await primary health checks in Swaziland.

This page:

Typical rural dwelling in Swaziland.

Opposite page:

A new four-theatre surgical block under construction at Modilon Hospital in Madang, Papua New Guinea.



FAMILY LIFE

Family Life is an independent, community service organisation operating in the south-eastern suburbs of Melbourne. Family Life's goal is to enable children and young people and families to thrive in caring communities.

- Partner since **2010**
- Funding in 2016-17: **\$144,000**
- Total funding over the life of the partnership: **\$809,000**

JOCARE

JoCare is a volunteer based community service sponsored by St Joseph's Catholic Parish offering friendship and support in the local Malvern area.

- Partner since **2014**
- Funding in 2016-17: **\$10,000**
- Total funding over the life of the partnership: **\$53,000**

LIGHTHOUSE FOUNDATION

Lighthouse Foundation provides homeless young people from backgrounds of long-term neglect and abuse with a home, a sense of family, and 24-hour therapeutic care that is individually tailored, trauma informed and proven to work.

- Partner since **1996**
- Funding in 2016-17: **\$72,300**
- Total funding over the life of the partnership: **\$933,300**

MODILON GENERAL HOSPITAL, MADANG, PAPUA NEW GUINEA

This is a regional general hospital in Madang Province in the northern part of Papua New Guinea. Although primarily established to serve the 500,000 people living in the province, Madang draws patients from a wider area as it is connected by road to Mount Hagen in the Western Highlands and Lae in Morobe Province.

- Partner since **2007**
- Funding in 2016-17: **\$300,000**
- Total funding over the life of the partnership: **\$772,300**



SACRED HEART MISSION

Sacred Heart Mission assists people who are homeless or living in poverty to find shelter, food, care and support.

- Partner since **1996**
- Funding in 2016-17: **\$152,700**
- Total funding over the life of the partnership: **\$1,537,700**

ST MARYS HOSPITAL, DUBBO ETHIOPIA

St Mary's is a 100-bed Catholic hospital owned by the Vicariate and operated by the Cabrini Sisters providing medical, surgical, paediatric and maternity care to the local community of 100,000 people.

- Partner since **2012**
- Funding in 2016-17: **\$500,100**
- Total funding over the life of the partnership: **\$1,304,100**

*Above:
Local children in Dubbo, Ethiopia
enjoy lunch which fortifies them
for learning.*



THE WAY COMMUNITY

The Way Community is a home and outreach centre for older men who are homeless, or at risk of becoming homeless. They offer a home in which residents are valued and supported, and also seek out people in local boarding houses, squats or on the street who are at the same time the most needy, and the hardest to reach.

- Partner since **2005**
- Funding in 2016-17: **\$75,000**
- Total funding over the life of the partnership: **\$719,000**

VERY SPECIAL KIDS

Very Special Kids is a children's charity that helps more than 900 families across Victoria who have a child with a life-threatening condition, providing ongoing support from diagnosis all the way through to recovery or bereavement.

- Partner since **1995**
- Funding in 2016-17: **\$114,700**
- Total funding over the life of the partnership: **\$596,700**

03

Meet some of our staff volunteers

Seven Cabrini staff share their life-changing experiences of having participated in Cabrini's social and charitable services program.





Kiley Harkness

Kiley Harkness is senior call centre data clerk in Cabrini's communications department and volunteers at the Big Day Out events.

→ Halfway into her second year working for Cabrini, Kiley saw the Cabrini-Children First Foundation Big Day Out event advertised. She leapt at the opportunity to get more involved and give back. Four years later, she now plays a big part in coordinating the events.

Many of the events involve accompanying the community of children to outings to the Melbourne Zoo, Melbourne Aquarium, Melbourne Museum or other local tourist attractions. At first, she didn't realise exactly what was involved. "It's a lot of hands on," said Kiley. "You have to be one-on-one with each child, gain their trust and build their confidence in a short amount of time."

She says it is a rewarding experience. "The positivity they have, it makes you realise we complain over such trivialities every day," she said. "They might have so many operations to endure but are still happy, and we are able to provide some fun activities for them while they're going through a life-changing experience."

Importantly for Kiley, volunteering with international children in need teaches her own children respect. "Exposing my son to the program teaches him important values, and helps him learn how to interact with children from other cultures," she said.

It is hard not to be struck by these children, who regardless of undergoing sometimes complex surgeries and rehabilitation, they are all smiles and never seem to complain.

Kiley says the personal benefit of this program is huge. Being involved in an experience like this, "makes you a better, less selfish person. You appreciate life more, and stop taking everyday things for granted. So much can be taken away from us in a split second." ●

Debbie Hocking

Debbie Hocking is a researcher with the Cabrini Institute and works *pro bono* as a psychologist at the Cabrini Asylum Seeker and Refugee Health Hub.

→ Debbie joined the team at the Cabrini Asylum Seeker and Refugee Health Hub in October 2016 and works there fortnightly *pro bono* as a psychologist.

She explains: “Ever since I was young, I’ve had a keen interest in social justice and equity. I was writing letters for Amnesty International at the age of sixteen.”

She chose to work with disadvantaged populations as a provisional psychologist and when she began her doctorate in clinical psychology, she approached the Asylum Seeker Resource Centre (ASRC) for research opportunities.

Professor Suresh Sundram, who at the time was leading ASRC’s psychiatry program, suggested she explore mental health in asylum seekers for her thesis. Her research found alarmingly high rates of undetected and untreated mental disorders, in the order of 50 to 60 per cent. This led to further research with Professor Sundram and Cabrini to develop tools for non-health workers to detect likely mental health disorders in asylum seekers.

She has now come full circle, complementing her research with *pro bono* counselling. She says: “Both the research and the clinical work inform each other – it’s a very satisfying process”.

Debbie believes her work shows that one person can make a difference to someone’s world. “The future for an asylum seeker is so uncertain; they face so much psychological anguish, injustice and discrimination,” she said. “To have one hour where they can let go of their survival instincts a little and have someone else hold the hope for them [and] to provide a little bit of sanctuary – this helps to neutralise some of the hardship and discrimination they may experience here. It helps them to discover that not everyone agrees with the asylum seeker policies that we have in place in Australia.” ●



Rey Angalot

Rey Angalot is a theatre technician at Cabrini Malvern and volunteers his time and skills for Cabrini's medical evacuation program.



Each year, Cabrini sets aside funding to support surgery for patients, particularly children or young adults, who have been evacuated to Australia for treatment to restore basic function: treatment that is unavailable in their own country.

Cabrini provides the pre and post-operative diagnostic investigations and inpatient care at no charge to the patient. The support of the medical and perioperative nursing staff, who volunteer their time out of their normal working hours for surgical procedures, is an important aspect that enables this program to continue.

Rey Angalot hails from the Philippines and has lived in Australia for five years. Over the past 12 months, he volunteered for two medical evacuation cases making a total of four cases since joining Cabrini.

Rey is happy to sign up for medical evacuation cases. "A big factor is that I'm happy to help somebody else who is in need," he says. As well as bringing him a sense of personal fulfilment, he says it creates a positive feeling among the whole team involved in the case.

Rey's commitment is no small thing. "Some cases are rarer than the ones you would normally see in our patient population at Cabrini. They can take up to eight hours and some patients require multiple operations."

Rey says he could not volunteer for these cases without his wife's support, as she needs to change her work roster to stay home with their three-year-old daughter while he completes the case. Her reward is hearing his stories afterwards. ●

Jenny Grey

Jenny Grey is Cabrini's Payroll Manager and a volunteer knitter.



Jenny has worked at Cabrini for ten years. Over the past few years, she has been knitting clothing items to give to those in need.

Jenny's volunteer knitting efforts began with kogo (Knit One Give One), a charity Cabrini supports. Kogo distributes the knitted garments to community organisations working with poor and vulnerable people. As well as providing the recipients with physical warmth, kogo believes the garments also give them an emotional boost because they are made by a community that cares about them and their situation.

Jenny's knitting then expanded to making garments for a short-term winter campaign for clients attending the Cabrini Asylum Seeker and Refugee Health Hub. Her knitting efforts are so substantial that she was also approached to knit beanies for babies born prematurely, which would be sent to Santa Teresa Health Clinic, 85 km south-east of Alice Springs. Cabrini has had a link with the health clinic there since the mid-1990s.

Jenny explains her motivation as feeling a need. "I work full-time, so I was looking for an activity that I can do after hours or on the weekend." Knitting was a perfect solution as it can be done anytime and Jenny has embraced it with gusto.

Jenny has a deeply held, personal conviction that all of us have a duty to give back to those more vulnerable than us. "There but for the grace of God, go I," she says, with a hint of sadness and a lot of fire.

Her life experience has taught her there's not a lot of separation from the 'haves' and 'have-nots'. She likens life to a house of cards, which could all fall down at any minute. She lives her life with conviction. "We are all born with nothing and we will die with nothing," she says. "It's what we do in the meantime that counts". ●



Angela Doherty

Angela Doherty is Cabrini's Customer Relations Manager and volunteers with Sacred Heart Mission in St Kilda.

→ Angela volunteers once a month on a Sunday at Sacred Heart Mission, something she has been doing for the past five years. She became involved because she wanted to give back to the local community.

"It's an effort to get up on a Sunday morning, but you just do it!" she says. "You become part of the volunteer team, you have others relying on you to fill your shift and turn up, and they would have extra work if you didn't do it."

Angela enjoys interacting with the people of different backgrounds who volunteer at Sacred Heart Mission. "You might be volunteering alongside a teacher, a parent, or a lawyer. The conversations you have are amazing, informative, and good fun."

She feels a sense of achievement from being involved. "I get more from it than I feel that I give, because you not only

experience camaraderie and fun, but you get an insight into a commercial kitchen," she said. "You are able to witness the dynamics of the team and how they work or don't work, from an outsider's perspective."

Angela feels that working with different socio-economic groups provides a great learning experience. "Speaking for myself, I'm a sheltered social individual working here at Cabrini, and this exposes you to a different side of life," she said.

"Seeing the clientele at Sacred Heart Mission makes you realise how lucky we really are, and that we have so much to give.

"This is my way of giving back to our community. It's good to be aware of these stories and how people can find themselves in the situation of being homeless and vulnerable." ●

Wendy Harrison

Wendy Harrison coordinates casual staff at Cabrini and is a volunteer computer trainer.

→ The Cabrini Sisters have been in Ethiopia for approximately 15 years. Last year, Birkinesh, an Ethiopian woman working with Sisters in Ethiopia, spent time in Australia being fitted for a new prosthetic leg.

The Sisters asked if she could have some basic computer training while she was here. Inspired by her close friend Sister Maureen Bennett MSC, Wendy jumped at the opportunity to tutor Birkinesh. "I can't say no to Maureen! She works tirelessly for the mission in Ethiopia," she said.

Wendy's job was to help Birkinesh become familiar with using a personal computer, particularly learning how to send and receive emails. As Birkinesh was in Australia for a limited time, Wendy tutored her up to three times per week and set her exercises to complete between the sessions.

Learning about Ethiopian culture was an unexpected benefit, as any Internet

search they performed generally involved the topic of Ethiopia. "During an Internet search, Birkinesh typed in 'Ethiopian dancing' and a video with her daughter in it came up," said Wendy. "While we watched it, she was overjoyed. She just couldn't believe that her little girl was on the Internet. Watching the joy on her face was such a thrill".

Wendy also learned about the unreliability of electricity and Internet coverage there; things that we take for granted. "It really brought home to me the difference that these small things make in life."

Wendy found the experience incredibly rewarding. "Watching Birkinesh progress from her first lesson when she first clicked on the mouse, to the last lesson when she was able to get into her Hotmail account and send emails, was very fulfilling."

The day Birkinesh departed, she and Wendy hugged. "Both of us were crying," said Wendy. "I really bonded with her." ●



Alison Hill

Alison Hill is an Associate Nurse Manager at Cabrini and volunteers with the orthopaedic service program in Papua New Guinea.



Alison was invited to participate in the annual orthopaedic service and education program at Modilon Hospital in Madang, Papua New Guinea, led by orthopaedic surgeon Mr John Griffiths. She found it “an eye-opening and profound experience”.

Alison says she was excited about the opportunity but it did not turn out to be what she expected. “I thought I was going over there to share my knowledge but actually I learned far more from them, and from how they cope, than I could ever teach them,” she said. “We had a young patient who had a head injury and without having access to a CT scanner, they had to take him to surgery and drill some holes in his head to establish how to treat the injury; luckily he did improve.”

She found the staff had great communication with their community. “There is a much greater sense of community and togetherness and support there that is lacking here in many respects,” she said.

The families are much more involved in the patient’s care. “It is a cultural expectation that when you attend hospital, you will have family members attend with you and they are so compassionate in how they tend to all their loved one’s care. I was amazed to discover that falls and pressure management is not an issue over there due to the presence of family members. They stay by their bedside and when the patient wakes up in the middle of the night, they prevent them from falling and reassure them. The staff will show the family how to turn the patient and other aspects of care.”

The experience provided Alison with insight into how to manage with limited resources. “We have so many things we need to be thankful for. If a patient needs crutches here we simply order them, but there they might put some sticks together and be happy with that,” she said. “It really made me feel that we shouldn’t complain about anything. We are so privileged to have access to the education and resources we have here.” ●



Above:
Cabrini Social Outreach Program Manager Kate Barker
(far right) visits the surgical operating theatre at
Modilon Hospital in Papua New Guinea.

04

Our performance, recipients and supporters

In 2016-17, the income for Cabrini's charitable and social services was approximately \$3.8m with \$3.7m disbursed on a range of programs, partnerships, grants and planning activities.



Dr Harry Aigeeleng and Dr John Benjamin from Divine Word University participated in Cabrini's overseas clinician training program.

Income

	\$'000
Mission enhancement fund (cross-subsidy)	3,347
Medicare revenue	15
Workplace giving	40
Appeals, donations & grants	112
Fundraising events	14
Pro bono health professionals ¹	120
In-kind (St Vincent's Hospital Melbourne) ²	120
Total income	3,768

¹ Estimated value of the pro bono health professional time at the Health Hub

² Estimated value of the pro bono pathology and medical imaging services provided for Health Hub clients at SVHM and cost of part-time project officer to assist in the establishment of the service

Disbursements

	\$'000
Administration	164
Cabrini programs	
Aboriginal reconciliation	12
Asylum seeker mental health screening tool	72
Cabrini Asylum Seeker & Refugee Health Hub	784 ³
Medical evacuations	52
Overseas clinician training	2
Vale community bereavement service	79
Partnerships	
Aboriginal health and wellbeing programs	154
Asylum seeker and refugee programs	42
International programs	815
Community programs	643
Grants	
Clinical service program grants	5
Philanthropic grants	907
Total disbursements	3,731
Surplus/deficit	37⁴

³ Includes the value of pro bono health professional time and in-kind support

⁴ Balance of donations and fundraising held by Cabrini Foundation for the Health Hub

Philanthropic grant recipients

During 2016-17, philanthropic grants were made to programs run by the following organisations:

IN AUSTRALIA

- Afghan Australia Development Organisation
- Baptcare
- City of Stonnington
- Indigenous Hospitality House
- Star Health (formerly Inner South Community Health)
- Interplast Australia and New Zealand
- Jesuit Mission Office
- Jesuit Social Services
- Malvern Emergency Food Program
- Opening the Doors Foundation
- Wapenamanda Centre for Primary Health, Papua New Guinea
- Western Desert Nganampa Walytja Palyantjaku Tjutaku Aboriginal Corporation
- Yulukit Marnang

OVERSEAS

- Cabrini Sisters, Stella Maris Province
- Cabrini Immigrant Services, New York

Other friends and associates

We are proud to work alongside the following organisations:

- Australian Centre for Health Research
- Australian Centre for Grief and Bereavement
- Big Issue
- Brunswick Community Medical Centre
- Bunnings, Sydney Road Brunswick
- Children First Foundation
- Divine Word University, Papua New Guinea
- Intjartnama Aboriginal Corporation, Northern Territory
- kogo (Knit One Give One)
- Lentara UnitingCare
- LifeHealthcare
- Medtronic
- Neuro-Monitoring Services Australia
- Sir Run Run Shaw Hospital, China
- St Vincent's Health Australia
- St Vincent's Hospital Melbourne

Memberships

Cabrini holds memberships of the following organisations:

- Catholic Social Services Australia
- Catholic Social Services Victoria
- Refugee Council of Australia
- Social Determinants of Health Alliance
- Supply Nation

OUR MISSION

Who we are: We are a Catholic healthcare service inspired by the spirit and vision of Saint Frances Xavier Cabrini and the Missionary Sisters of the Sacred Heart of Jesus.

What we believe: We are a community of care, reaching out with compassion, integrity, courage and respect to all we serve.

What we do: We provide excellence in all of our services and work to identify and meet unmet needs.

OUR VALUES

Our values form the base of our mission, are built around what we believe, and drive how we act. They are drawn from Saint Frances Xavier Cabrini's life and reflect her heart, her spirit, her conviction and her approach.

They are:

- Compassion
- Integrity
- Courage
- Respect

ACKNOWLEDGEMENT OF COUNTRY

We acknowledge the Boon Wurrung People, the traditional custodians of the land on which Cabrini's facilities stand. We recognise the Boon Wurrung Elders and the Elders of all Australia's First People, for they hold the memories, traditions, culture and hopes of Aboriginal Australia.

CABRINI

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