

SOCIAL AND COMMUNITY OUTREACH

ANNUAL REPORT 2012-13



ABOUT CABRINI HEALTH

OUR MISSION

Who we are:

We are a Catholic healthcare service inspired by the sprit 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

About the cover

Five-year-old Isaac Hudson lives in the remote Aboriginal community of Napranum on the Cape York Peninsula in far north Queensland.

Napranum is just one of the many Aboriginal communities Cabrini visits to provide its pro bono echocardiography service.

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.

FAST FACTS

FINANCIAL YEAR 2009-10 2010-11 2011-12 2012-13 Number of partnerships 46 43 19 38 Number of projects 42 45 53 38 Mission enhancement \$1m \$1.6m \$2.15m \$2.85m fund expenditure Gift Shop donations \$60,000 \$90,000 \$100,000 \$96,000 Staff fundraising \$99,000 \$95,000 \$97,000 \$114,000 and donations Other expenditure \$8000 TOTAL program expenditure \$1.159m \$1.785m \$2.347m \$3.068m

ABOUT CABRINI'S SOCIAL AND COMMUNITY OUTREACH PROGRAM

Cabrini's social and community outreach program was formalised in 1992, in response to a request by the Cabrini Sisters (owners of Cabrini Health in Australia) to more closely align our organisation with their missionary vision and goals.

abrini Health Limited (Cabrini) is part of an international network sponsored by the Missionary Sisters of the Sacred Heart of Jesus (Cabrini Sisters). This congregation was founded by Saint Frances Xavier Cabrini to be bearers of God's love in the world through practical action. More than 150 years later, the Cabrini Sisters are present in 17 countries including Australia.

Our first response was the establishment of a counselling service in Malvern in partnership with Centacare Catholic Family Services (now CatholicCare). The success of this experience set the model for our program which grew organically over the years, as we partnered with other agencies that had values and goals similar to our own.

Today our social and community outreach program is underpinned by seven principles, which reflect Catholic social teaching and embody our values:

- Mutual respect and trust are the foundation of good partnerships. It involves listening to one another, transparency, probity, flexibility, joint planning and accountability, as well as working through potential conflict situations.
- Projects must be people-centred with empowerment at their heart.
- We give priority to projects which involve collaboration with all relevant sectors of the community to promote the common good.
- Stakeholders must be involved in consultation, planning, implementation and evaluation of the project.
- A commitment to long-term engagement and sustainability is preferred.
- Collaboration with others, including all levels of government and social institutions, must be based on a shared unified vision.
- Where advocacy is an element of the partnership, projects should be initiated with local communities so that they can lobby the appropriate layer of government for the implementation of their rights.

OUR SOCIAL AND COMMUNITY OUTREACH ACTIVITIES ARE CLUSTERED IN FOUR PROGRAM AREAS:

Serving the most marginalised

Aboriginal health and wellbeing

International health

Community engagement



We seek to bring value to the program through our human, financial and material resources and by contributing our skills, knowledge and services. Our experience demonstrates that strong partnerships are an effective way to address economic and social disadvantage.

Vorking on the premise that most people want to 'do good', we seek relationships that provide an opportunity for our staff to make a contribution to our social outreach program. We have found that this approach enhances our capacity for community service and has a positive impact on our organisation's culture.

Our last staff engagement survey, held in March 2012, showed that:

- More than one in five staff (22 per cent) had made a personal contribution to one of our social outreach projects during the past 12 months
- Almost half our staff (47 per cent) were involved in a voluntary community activity

At Cabrini, we are proud of these results and celebrate the contributions of our community minded staff.

SIGNIFICANT CHANGES IN FINANCIAL SUPPORT

PARTNER	2011-12	2012-13	PROJECTS SUPPORTED	PROPORTION OF TOTAL PROJECT COSTS
CatholicCare	\$296,000	\$347,000	Family counselling service (eastern area: Malvern, Dandenong and Mitcham) Refugee resettlement Asylum seeker support Family education and support	20%
Cabrini Ministries	\$280,000	\$321,000	Health outreach to clients with HIV-AIDS Childcare for orphan and other vulnerable children Infrastructure and building support Child health assessment outreach	60%
Jesuit Social Services	\$115,000	\$250,000	Capacity building in Aboriginal communities Mission and identity education needs analysis	63%

LOOKING BACK, LOOKING FORWARD

By Cath Garner, Executive Director Mission and Strategy

In 2010, we set a goal to treble real expenditure in social outreach and community activities over the next three financial years. We committed to strengthening our support of asylum seekers and refugees, increasing our involvement in Aboriginal health and wellbeing programs and undertaking a community needs analysis in order to better meet local needs.

t the same time, we decided to decrease the number of agencies we work with so that we would have fewer, more significant relationships.

Therefore, we decided that where possible, we would achieve growth through our present relationships, giving priority to our Catholic social and community outreach partners. During the past three years, we have been working toward these goals.

We started the year by reviewing each project and identifying relationships that are true partnerships – that is, where we are engaged above and beyond the provision of financial support. This new understanding was overlaid across the program, resulting in the changes to the profile of our program. According to our new definition, we have 19 partnerships that account for more than half (55 per cent) of our real expenditure. It is planned that both funding and support will shift progressively towards partnerships over time. Our three most significant partners are CatholicCare, Cabrini Ministries and Jesuit Social Services. We work with them across a range of services.

During 2012-13, our financial commitment to CatholicCare, Cabrini Ministries and Jesuit Social Services increased and they now account for almost 30 per cent of our annual social outreach budget. Our total contribution covers: 20 per cent of the costs of running the four projects we support with CatholicCare; 63 per cent of the costs of the three projects we support with Jesuit Social Services; and 60 per cent of the cost of Cabrini Ministries' programs.

In line with the goal of reducing the number of our partners, we gave Open Family Australia 12 months' notice that we would be withdrawing from two projects that we have supported for many years. In 2011, Open Family Australia merged with Whitelion, providing it with new opportunities for partnership and support.

We have enjoyed a 19-year association with Open Family Australia, so it was a difficult decision. However, our relationship will continue. For example, our staff will continue to volunteer with Open Family Australia on Christmas Day to help distribute Christmas hampers and gifts to marginalised families. This has been a popular activity for families over the past few years and is beneficial for both the people being served and those who give their time to be involved.

In consultation with the Missionary Sisters, we have developed a timetable to withdraw support from Save Our School Children Foundation Inc, in Baguio City, Philippines. This will take place during the next three years in a phased approach, in order

to provide sufficient notice and the ability for the organisation to replace Cabrini's support without adversely affecting its capacity for service delivery.

While the mainstay of our approach to social outreach has been to partner with agencies with like values and expertise in the area of service delivery, one of the most exciting developments in our program during the past 12 months has been the establishment of two new health outreach services. We define health outreach as the provision of a healthcare service to individuals or groups who are financially or socially disadvantaged and who would otherwise have limited or no access to that service. Health outreach provides a way for us to share our core healthcare expertise and skills and for our staff to be involved in delivering the service.

Our first new health outreach is the provision of a pro bono echocardiography service to remote Aboriginal communities located on Cape York Peninsula. We have signed a Memorandum of Understanding with Cape York Hospital and Health Service, Queensland Health, to provide the service. Our cardiac technologists travel to Cape York up to two times each month to perform the echocardiograms and our cardiologists report on the studies. Our staff value the opportunity to provide this vital service in such a beautiful setting. The high rate of abnormal studies (approximately 80 per cent) demonstrates the need for the service.

Our most recent health outreach commitment is the provision of a pathology service to Modilon Hospital in Madang, Papua New Guinea. The need for the service became evident when we learned that there is limited onsite capability and the turnaround time on

histopathology specimens sent off-site is six months to three years. We established the necessary processes to enable us to import the specimens to Australia and provide the report in a one-week timeframe. This is a greatly improved service that will support treatment decisions. It offers great potential benefit to the 2.5 million people in the Momase region.

I would like to acknowledge the work of our project partners and the other agencies with which we have been associated over the year. We know that each program makes a direct contribution to improving quality of life.

I also thank my colleagues on the Mission and People Board Committee and Cabrini Executive Committee for their leadership and support. Importantly, I would like to recognise the many staff who have contributed to our work in social outreach during the past 12 months. With your continued support, we look forward to another year of achievement in 2013-14.

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CATH GARNER
Executive Director Mission and Strategy





SERVING THE MOST MARGINALISED

Every day we are confronted with news and images of people who are living on the margins of the world we take for granted. Homelessness and social isolation, natural and man-made disasters, disproportionate allocation of resources, restricted freedoms: these are the everyday realities for some in our society.

hile we cannot change the world, we have learned that we can make a difference if we step out of our comfort zone and take concrete action. The projects in this area of the program reflect the Cabrini Sisters' missionary vision that calls us "to respond to the cry of the poor and the excluded, the suffering of children and the elderly at risk, the disintegration of the family and the disorientation of youth, the tragedy of so many of our immigrant and refugee brothers and sisters, the exploitation of women and human trafficking."

Over the years, we have developed partnerships with agencies such as:

- Sacred Heart Mission and The Way Community, which work with people who are homeless or in insecure housing
- St Kilda UnitingCare Drop In Centre, which is funded as a mental health service and supports many people in insecure housing situations
- Lighthouse Foundation, which provides a family model of care for marginalised youth
- Project Respect, which supports people working in the sex industry including people who have been trafficked to Australia
- CatholicCare, which supports asylum seekers and refugee programs



These partnerships respond directly to the priorities of the Cabrini Sisters. While all of these partners receive our financial support, we add value to the relationships in many different ways.

Sacred Heart Mission is one of our long-standing partners. We provide a budget and food ordering service for their meals program and a pro bono linen service for their residential hostels. Our staff volunteer two days per month in the meals program. Some staff volunteer regularly at the Women's House. Two staff have contributed to the governance of the organisation as directors on the Sacred Heart Mission's Board. At Christmas time in 2012, we:

- Provided food for Sacred Heart Mission's Christmas lunch
- Donated 350 presents for Sacred Heart Mission's clients, which we collected from staff and visitors through our Giving Trees during December 2012
- Organised 15 staff and their families to volunteer in helping to prepare and serve festive meals to Sacred Heart Mission's clients on Christmas Eve, Christmas Day or Boxing Day

Our funding to The Way Community is complemented by staff from Cabrini Rehabilitation who conducted drives for non-perishable foods and winter coats, as well as providing Christmas presents for residents and others supported through the service. This complemented the Christmas meal we provide.

We know that St Kilda UnitingCare Drop In Centre values our donation as it enables them to provide lunch for their clients each day. However, the annual exhibition hosted by the staff at our Hawthorn

campus, where we display the works created by the centre's clients, is an annual highlight for both our organisations. Strong relationships have developed between our staff and their clients over the six years we have been involved in this activity. In the early days, the clients had to be coaxed into our office building for the exhibition. In June 2013, the service manager and one of the clients participated in our annual celebration for Feast of the Sacred Heart, which illustrates how far we have come together. We presented a cheque of the proceeds of our staff fundraising during the year and the client gave the vote of thanks. The fact that staff could hear first-hand about the positive impact of their fundraising efforts, as well as the importance of the relationship to the people who receive the services, was a reward in itself.

We continue to make a rent-free home available to the Lighthouse Foundation (Cabrini Lighthouse), as well as funding a full-time, live-in carer and providing a budget for household supplies. Cabrini staff who volunteer on the Cabrini Lighthouse management committee actively involve their colleagues in supporting fundraising events, which cover the annual costs of running the house.

During 2012-13, we continued to fund Lighthouse Foundation's initiative to document its therapeutic family model of care as a pre-eminent approach for helping young, homeless people integrate back into the community.

We advised and supported the Lighthouse Foundation in its goal to establish the Lighthouse Institute in partnership with the University of Melbourne, which

About serving the most marginalised

- This program responds to the "cry of the poor and excluded" (Cabrinin Sisters' Missionary Vision 2008)
- We invested \$730,000 in this area of the program in 2012-13
- Five key ongoing partnerships in line with Cabrini Sisters' priorities
- Staff are involved in regular volunteer work with Sacred Heart Mission
- We help make Christmas special for clients of Family Life, Sacred Heart Mission, St Kilda UnitingCare Drop In Centre and The Way Community

will lead the organisation's effort in contributing to public debate and influencing policy making.

For some years, we have had discussions with CatholicCare about creating a hub of co-located services to support refugees and asylum seekers in the City of Greater Dandenong, Melbourne. While we have not yet realised this vision, we have supported the expansion of CatholicCare's refugee and settlement program and its asylum seeker support project.

We complemented our work with CatholicCare by funding the Mental Health Research Institute to develop a mental health assessment tool, which can be used by non-professional staff to assess asylum seekers. This is the first step in providing better mental health support to asylum seekers and refugees, in order to help them manage the trauma they experienced in their flight to safety.

We have invested more than \$730,000 on these priorities, which is equivalent to 94 per cent of the total funding in this area of our social outreach program. The remainder of the budget for this area was spent on philanthropic grants to help other marginalised groups.



From left: Tomasa Morales, Team Leader (South Eastern Cluster), CatholicCare's refugee and settlement program, with colleague Gula Bezhan, Settlement Support Worker.

Supporting refugee health

Refugees are among the most marginalised people in any community and recognising this, Cabrini has increased its support to refugee and settlement programs in Dandenong, Victoria's most ethnically diverse community. This is in line with the missionary vision of our founder Saint Frances Xavier Cabrini, who was canonised Universal Patron Saint of Immigrants in 1946.

Through CatholicCare's Multicultural Women's Healthy Cooking Group, Cabrini dieticians and diabetes educators delivered tailored health information to 15 local women. Many have a higher incidence of preventable diseases (such as diabetes, high blood pressure and cholesterol) than the general population, according to Gula Bezhan, Settlement Support Worker at CatholicCare. Newly from Afghanistan, they often face significant barriers to accessing health information and other services they need.

Five sessions on diabetes and nutrition education were incorporated into the weekly program. For 62-year-old Gulsoom, a community elder, the sessions are a good opportunity to learn something new. "I love it because [as someone living with diabetes], I am shown how to use different foods," she said.

The group is an important part of the women's lives. "Afghan women are isolated, and at home we have lots of tension," Gulsoom said. "On the day of the group, I get up early.

I walk to the Community Kitchen, about 15 or 20 minutes.

I am passionate about it."

Tomasa Morales, Team Leader in CatholicCare's refugeee and support program, says Cabrini's financial support fills a gap in the continuum of settlement and support services, as most services cut out after people have been in Australia for five years. "If they're here in our office it's because they have a need. Having this support from Cabrini allows us to be flexible in how we work with people."



ABORIGINAL HEALTH AND WELLBEING

We want to make a real difference to the lives of Aboriginal people. By focusing on small, achievable goals, we have found a place to start and we have been blessed – and changed – in the process.

boriginal health is a priority health issue in Australia given the gap in both life expectancy and health outcomes between Indigenous and non-indigenous Australians. We have been working in this area for more than ten years and have purposefully increased our involvement during the past three years. Currently we support programs in Victoria, Northern Territory and far north Queensland.

Northern Territory

In the Northern Territory, we have maintained our partnership with Elva Cook (a Western Arrernte elder) and her family. We have continued to offer two opportunities each year to staff to visit the Cook family on their outstation 120 km west of Alice Springs. During 2012-13, 24 staff took advantage of this special opportunity.

We continued to support Jesuit Social Services in its work with Central and Eastern Arrernte communities. Jesuit Social Services is helping the communities to develop governance structures to support their independence and self-determination.



During 2012-13, Cabrini's funding for Aboriginal health and wellbeing programs was \$580,000, an increase of \$225,000 on 2011-12.

Victoria

Locally, we have continued our association with Authentic Community Training (ACT). In 2005, ACT was established to develop and hold healing programs for Aboriginal men, young men and children.

During 2012-13, ACT extended its scope to include Aboriginal women and non-Aboriginal people. We hope that in the next 12 months, we can partner with ACT to provide local Aboriginal immersion experiences.

We continued to fund Stonnington Primary School's Indigenous tutoring program, which helps Aboriginal children who live at the Horace Petty Estate in Prahran to engage in school and have a positive school experience.

During the 2013 academic year, eight students are being supported under the program. The success of the program is reflected by the fact that one of last year's students is successfully making the transition to high school.

This year marks the tenth year that we have financially supported the Opening the Doors Foundation Scholarship Program. During the past decade, the number of scholarships offered by the foundation has grown from 50 to 600 per year.

We continued our partnership with the Indigenous Hospitality House, Ngwala Willumbong's Winja Ulupna (women's recovery centre), and the Inner South Community Health Indigenous Access Program.

Queensland

In October 2012, we conducted our first echocardiography health outreach visit to a remote Aboriginal community on Cape York Peninsula. This program operates in partnership with Cape York Hospital and Health Service (CYHHS), Queensland Health. Aboriginal people in the remote communities on Cape York have a high burden of rheumatic heart disease and need regular echocardiograms to screen them for disease, assess their cardiac status and monitor their health.

Despite the high workload, CYHHS was unable to recruit a cardiac sonographer to perform these studies. Cabrini was approached to help with the backlog of studies amassed since the service was discontinued and we offered to provide the service on an ongoing basis.

We signed a Memorandum of Understanding with CYHHS to provide reliability and transparency in delivery of our service to the community and as a point of reference and continuity, in order to prepare for future changes in staff.

Cabrini's echocardiography health outreach service involves providing a qualified and experienced cardiac sonographer one to two weeks per month who travels to the remote communities and provides service for both adults and children. A make-shift procedure room is set up in whatever local facility is provided.

About Aboriginal health and wellbeing

- This program is designed to help close the health gap between Aboriginal people and other Australians
- We invested \$250,000 more than in 2011-12
- We are active with Aboriginal communities in Queensland, Northern Territory and Victoria
- Staff are involved in our new, pro bono echocardiography service provided to communities on the Cape York Peninsula
- In 2012-13, we celebrated ten years of support for the Opening the Doors Foundation Aboriginal scholarship program

Approximately ten studies are performed each day depending on community need. More than 170 echocardiograms have been performed and reported on by our cardiologists since the program began. Approximately 80 per cent of the studies showed abnormal findings, demonstrating the need for this service.

During 2012-13, Cabrini's funding for Aboriginal health and wellbeing programs increased by \$255,000 on the previous year. In the early days of development of this area of our social outreach program, our relationships were all interstate.



Cabrini cardiac technologist Cathy Wilkie with eight-year-old Callan Bosuen and mother Denita.

Care at the heart of new health outreach initiative

Cathy Wilkie's growing Indigenous artwork collection reflects the colour and richness of her experience working for Cabrini on the Cape York Peninsula. She is one of three Cabrini staff (the others are Josh Sher and Chrissy Page) who travel to far north Queensland each month to deliver our pro bono echocardiography service to remote Aboriginal communities.

She has visited seven different communities since she first travelled there in March 2013 and has been touched by patients' stories and culture along the way. "I've collected so many photos and works of art to remember this experience, I feel honoured to be doing this outreach work for Cabrini," she said. "We are giving these communities hope and reassurance, if Cabrini were not providing this service, patients would have to fly to Cairns for investigations."

Cabrini works in partnership with a medical team of doctors and nurses from Queensland Health and Cape York Health Service to provide the service at remote health clinics.

Queensland Health's Dr James Brown, part of the Cape York medical team, says the echocardiography service is vital to these communities. "Cabrini's support allows us to provide better care to these patients; many are struggling with rheumatic heart disease and need regular monitoring and treatment," he said.

Many of the communities Cabrini visits can only be accessed by light planes: Aurukun, Kowanyama, Mapoon, Napranum and Pormpuraaw just to name a few, adding to the challenge of providing a reliable health service. Cathy isn't fazed.

"I once had to climb in through the roof of the plane, it was so small," she said.

"The medical teams I work with are amazing, the health centres feel like a community hub for people, there is a lot of trust and respect and it's a very positive environment."



INTERNATIONAL HEALTH

Australians are fortunate in receiving a high standard of healthcare. Through our international health programs, we are able to harness and share our knowledge, skills and resources with people who live in other parts of the world. We are active within the Asia Pacific region and further afield.

/e have a world class public health system in Australia. Our neighbours in the Asia Pacific region do not all have the same good fortune. Substandard equipment and infrastructure, chronic shortage of medical supplies and problems with counterfeit pharmaceuticals are common problems in this region. This is also true for Papua New Guinea (PNG), a country of more than 7 million people and our nearest international neighbour, as well as many other developing nations in our region and in other parts of the world.

In PNG, our partnerships with Wapenamanda Centre for Primary Health in Enga Province and Kanabea Hospital in the Gulf Province have continued. Also, we have strengthened our partnership with Modilon Hospital in Madang Province with the addition of a pathology outreach service.

It was in November 2012 that the need for a pathology outreach service was first identified. The greatest need was for histological diagnosis for patients who had undergone surgery. This was because surgeons were making treatment decisions, including performing unnecessarily extensive surgical operations, as they had no diagnostic information available to them.

We increased sponsorship from 95 to 99 children, which means that most of the children (more than 80 per cent) now receive the highest level of care.

New pathology service in PNG

Following a scoping visit in April 2013, Henk Bos (a Cabrini volunteer) spent time with Modilon Hospital staff in Madang, in order to establish procedures to facilitate the provision of the pathology service from Melbourne.

This included designing forms and procedures at the hospital for specimen collection, sourcing bio-hazard containers locally that would meet the International Air Transport Association's Dangerous Goods Regulation, developing documentation to satisfy DHL requirements for transporting pathology specimens and comply with Australian Customs and Quarantine and Inspection Service requirements, establishing a process for Cabrini to refund the transport costs and setting up a secure method for electronic communication of the results.

The service formally commenced in May 2013, when we received the first specimen at our laboratory in Malvern. As well as providing a probono service, the Cabrini Pathology staff committed to fundraising to support the service. They have purchased two pieces of pathology equipment for Madang Hospital to enhance the service on the ground.

More support for Cabrini Ministries Swaziland

We have expanded our partnership with Cabrini Ministries in Swaziland, southern Africa.

During 2012-13, we continued our financial support for the health outreach program and increased our involvement with the development of a partnership between Cabrini Palliative Care and the Cabrini Ministries healthcare team.

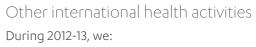
We increased sponsorship from 95 to 99 children, which equates to more than 80 per cent of children in the highest level of care. These children are all sponsored by Cabrini staff and friends.

During the year, we participated in an outreach program with Cabrini Ministries to provide health checks for children in the local community who have no regular access to healthcare. One doctor and three nurses from Cabrini in Australia volunteered their time to participate in the service. Over four days, health checks were performed on 350 children, which was an excellent team effort.

This experience resulted in the development of a relationship between the staff of the two Cabrini organisations and the sense of connectedness with the Cabrini mission. We have committed to continuing this outreach as an annual program.

About Cabrini Ministries

- Swaziland is at the epicentre of the global HIV-AIDS crisis
- More than one in four adults (26 per cent) in Swaziland is infected with HIV-AIDS
- Swaziland has the highest rates of HIV-AIDS and TB infection in the world
- Cabrini Ministries reaches out to more than 25,000 people in south-eastern Swaziland, providing tests and treatment for HIV-AIDS and TB
- 450 orphans and vulnerable children (including 115 who live at the St Phillip's Mission Hostel operated by Cabrini Ministries) receive food, clothing, healthcare, education and psycho-social support)



- Continued to fund and support Afghan Australian Volunteer Organisation's efforts in rural Afghanistan
- Continued to fund Interplast's service program in the Philippines
- Hosted six staff from Sir Run Run Shaw Hospital in China through our overseas clinician training program
- Established a relationship with Dubbo Hospital in rural Ethiopia, a sister-hospital run by the Cabrini Sisters

In partnership with Moira Kelly's Children First Foundation, we provided pro bono healthcare for Hala Dawwas from Palestine. Hala, a six-year-old girl, was the victim of a car accident in which she suffered severe pelvic trauma. She required multiple surgeries to repair her bladder and bowel.

Hala's is a great success story, as she was able to return home with an almost normal function and continue her education.

Over four days, a doctor and three nurses from Cabrini in Australia performed health checks on 350 children in Swaziland, southern Africa and the initiative was so successful that it will continue as an annual program.



Sr Barbara Staley MSC is a member of Cabrini's Board of Directors in Australia and leads Cabrini Ministries in Swaziland.

Love in the epicentre of human crisis

For almost ten years, Sister Barbara Staley MSC has been based at St Phillips Mission in Swaziland: a not-for-profit mission working to address the needs of people infected or affected by HIV-AIDS or TB via healthcare services and childcare.

"The work is tremendously meaningful as we are at the epicentre of the HIV-AIDS crisis," said Sr Barbara. "We are making an impact at a micro level through direct care and we are also helping to inform policies, protocols and procedures at the macro level, both nationally and internationally."

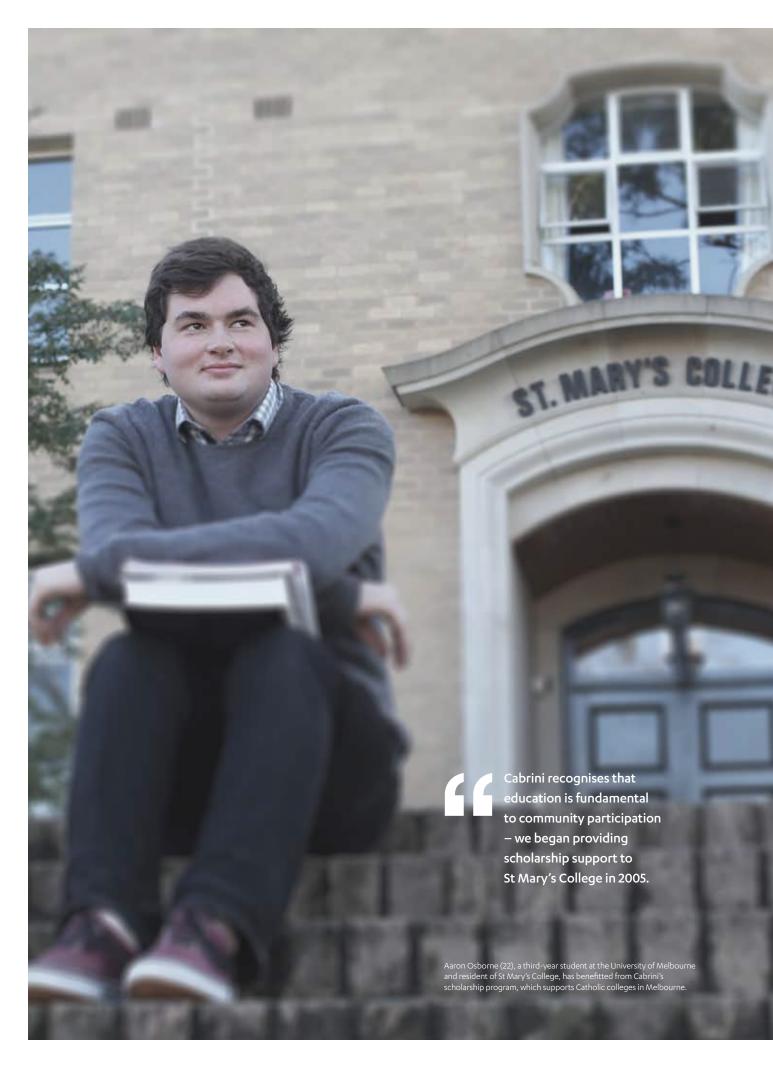
Cabrini provides a community based clinic without walls: all the main services are delivered at the person's home. It is a full service, holistic, integrated program that provides care from birth to death.

"Currently we are treating 2200 HIV positive patients – of them 800 have HIV-AIDS and are on anti-retro viral (ARV) therapy – and at any one time, we are treating 75 people who have TB and of them, one in five has multi-drug resistant TB."

Among Cabrini's Swazi patients, there is a zero default rate which is rare. "We know every patient by name and we have a comprehensive database that helps us to identify anyone who has missed their refills, so we can follow up with them," said Sr Barbara.

"We make a covenant with our patients as people don't always recognise their own worth and the value of life – by letting them know they are important, we get them invested in their own treatment."

In Swaziland, Cabrini Ministries has the highest rate of people who are still alive one year after commencing ARV treatment in Swaziland: 92 per cent. This exceeds the World Health Organization international target of 80 per cent.



COMMUNITY ENGAGEMENT

We recognise that we are part of a community that has complex needs. As a large, not-for-profit organisation, we are committed to sharing our resources to strengthen and develop community capacity and sustainability. We believe we are an integral part of the communities in which our hospitals and healthcare facilities are located.

ore than 20 years ago,we began our social and community outreach program by funding a counselling service in Malvern for the local community. With our continued financial support, CatholicCare (formerly Centacare Catholic Family Services) remains the only not-for-profit counselling service in the suburb. However, we felt that it was time to undertake a community needs analysis with a view to establishing another significant new community outreach.

We partnered with Bayside Medicare Local, Inner South Eastern Partnership in Community Health and the City of Stonnington in this endeavour. In 2012-13, funding for a new outreach initiative was made available but it was unspent at 30 June 2013 due to the timing of the needs analysis project. We have reviewed the data and identified several options and will put the funding into effect by end-2013.

We recognise that education is fundamental to community participation. We provided funding to CatholicCare to support its family education support partnership program at the Horace Petty Estate in the Melbourne suburb of Prahran.



During 2012-13, 17 people participated in the employment integration program offered at Cabrini Linen Service and today 14 of them have jobs there. It aims to develop a place-based education program for children who live at the Horace Petty Estate and surrounding housing estates who are reluctant to attend school, disengaged or at risk of disengaging from education. This program complements CatholicCare's 'cool2b@school' initiative that operates in the local schools.

We continued our scholarship program with Catholic colleges in Melbourne, as well as our support for education and formation of the Cabrini Sisters and their collaborators in the Stella Maris Province.

We started a significant new education initiative in partnership with Jesuit Social Services to build capacity within faith based organisations, enabling them to work more effectively within the values and principles of their organisation's faith heritage. We have made a three-year commitment to this program.

Access to just and fair employment is another foundation for community participation. Many people in our community do not have the skills to obtain and keep a job, have no employment history or are otherwise disadvantaged. As a large and complex organisation, Cabrini is able to offer many employment opportunities.

During 2012-13, 17 people participated in the employment integration program offered at Cabrini Linen Service and today 14 of them have jobs there. All of these employees were presented to us through one of our social outreach and community partners.

During 2012-13, we continued to expand our partnerships with Very Special Kids in the City of Stonnington (the location of Cabrini Malvern) and with Family Life in the City of Bayside (the location of Cabrini Brighton).

We began new projects with both organisations resulting in an increase in our annual financial commitment to them. As with all our partnerships, our funding is complemented with other forms of support.

In 2012-13, we added to our support for Very Special Kids, which includes a pro bono linen and computer helpdesk service, with support for scoping and establishing a workplace health and safety function.

Cabrini Brighton leads our partnership with Family Life in Bayside, collecting and donating secondhand goods to their opportunity shops, supporting and promoting its Open Garden Day fundraising initiative and providing Christmas gifts for children served through Family Life's programs.

About community engagement

- This program focuses on strengthening and developing community capacity and sustainability
- We began this program 20 years ago through a partnership with CatholicCare (formerly Centacare Catholic Family Services)
- In 2012-13, we conducted a community needs analysis to uncover new opportunities to contribute our skills and resources to community outreach
- Several initiatives provide support for education, which is fundamental to community participation
- In 2012-13, we expanded our partnerships with Very Special Kids and Family Life

We began new projects with Family Life in Bayside and Very Special Kids in Stonnington, resulting in an increase in our annual financial commitment to these organisations.



Aaron Osborne is pictured at St Mary's College, a residential college at the University of Melbourne, established in 1918, which accommodates 160 students.

A healthy future ahead

Aaron Osborne (21) is a beneficiary of Cabrini's scholarship program (established 2002) to support Catholic colleges in Melbourne.

Currently he is in the third year of a Bachelor of Biomedicine degree at the University of Melbourne. Raised in Victoria's Gippsland region, Aaron has lived at St Mary's College throughout his degree.

Dr Elizabeth Hepburn IBVM, Principal of St Mary's College, says Cabrini's support is important in keeping the recipients in college and at university. The grants are paid directly to the colleges, which disburse them to students and families as fee reductions. This is designed to support students whose studies could be in jeopardy for financial reasons.

"Most recipients of these scholarships are from country areas," said Dr Hepburn. "They are able to study in a supportive environment, as well as try out other activities in the arts, sport and community service."

Aaron describes the opportunity to attend St Mary's College as a "good transition".

"I don't know how I would have gone at uni otherwise; to have a support network when you are away from all you know has without a doubt made a difference to my success," he said.

Aaron says that his experience at St Mary's College has added to his degree. He has made the most of it, attending academic tutorials and trying out different sports. He was appointed Vice President of the Student Club, responsible for organising social events that help to maintain a positive atmosphere at the college. He also travelled to Mexico, where he spent a month studying public health.

"I have found what I want to do and that has made a big difference to my focus," said Aaron, who is interested in preventive medicine and considering further studies in public health.

SOCIAL AND COMMUNITY OUTREACH PARTNERS

AUSTRALIAN BASED

CatholicCare

(formerly Centacare Catholic Family Services)

Cape York Hospital and Health Service

Family Life

Indigenous Hospitality House

Intjartnama Aboriginal Corporation

Jesuit Social Services

Lighthouse Foundation

Moira Kelly's Children First Foundation

Ngwala Willumbong

Sacred Heart Mission

St Kilda UnitingCare Drop In Centre

St Mary's House of Welcome

The Way Community

Very Special Kids

INTERNATIONAL

Afghan Australian Development Organisation

Cabrini Ministries, Swaziland

Catholic Health Services, Diocese of Kerema, Papua New Guinea

Modilon Hospital, Madang, Papua New Guinea

Sir Run Run Shaw Hospital, China

PHILANTHROPIC GRANT AND IN-KIND RECIPIENTS

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Australian Catholic University

Authentic Community Training

Big Issue Magazine

Inner South Community Heath

Interplast Australia & New Zealand

John Pierce Centre

Jesuit Mission Office

Kids off the Kerb

Knoxbrooke Inc

kogo (Knit One Give One)

Malvern Emergency Food Program

Mannix College

Mental Health Research Institute

Newman College

Open Family Australia Inc

Opening the Doors Foundation

Project Respect

Salvation Army (Kingston)

St Joseph's Parish Malvern

St Mary's College

Stonnington Primary School

INTERNATIONAL

Cabrini Immigrant Services, New York

Catholic Health Services, Diocese of Kerema, Papua New Guinea

Divine Word University, Madang, Papua New Guinea

Dubbo Hospital, Ethiopia

MSC Stella Maris Province

Save Our School Children Foundation Inc, Baguio City, Philippines

Wapenamanda Centre for Primary Health, Wapenamanda, Papua New Guinea

CABRINI:

ASHWOOD

BRIGHTON

ELSTERNICK

HAWTHORN

MALVERN

PRAHRAN

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