

2018–19 Annual Report

# Collaborative leadership

- breaking down the silos.









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# Our strategic priorities

# Our goals

Advocacy	Climate change resilience / adaptation	Enhance opportunities for change through advocacy by engaging and mobilising key stakeholders within the community who will champion the development and implementation of collaborative initiatives to enhance social health outcomes.	
Service system design	Service & product development	Develop and utilise contemporary service system design methodology to strengthen enliven's planning and delivery processes, ensuring co-design and collective impact principals are embedded in practice.	
Population	Prevention of family violence	Positively impact on the health of the population by improving the capacity of our members and stakeholders to collaboratively	
health	Low intensity mental health & youth resilience	engage with local communities to address current and emerging health needs.	
Vulnerable groups	Tackling obesity in the South East	Reduce inequities and disparities among vulnerable groups by facilitating networks involving organisational and community stakeholders in the south-east to develop tailored interventions to improve health and social outcomes for these communities.	
	Vulnerable and/or diverse communities	Deliver on the commitment to place-based approaches	
Place based	Healthy workplaces	by ensuring that members and stakeholders are supported in the planning and delivery of services in defined socio-geographic areas.	
Service co-ordination	Early intervention & integrated care alliance	Improve service co-ordination by promoting and leading the collaborative development of common processes and systems for consumers to better navigate local health community services.	
Partnerships	Neutral partnership broker opportunities	Build strong and effective partnerships and foster key stakeholder relationships to maximise service integration and collaboration opportunities.	

## Our purpose

To promote the prevention and control of diseases in human beings by:

#### (a) enabling partnerships

of health and social service organisations to be more effective in preventing and controlling diseases in human beings.

(b) improving the social determinants of health

on a population-wide basis in order to prevent and control diseases in human beings.

(c) increasing the ability of carers, families and communities

to prevent and control diseases in human beings.

(d) identifying, preventing and controlling newly arising issues

in our community that contribute to diseases in human beings.

enliven receives funding from a variety of sources. Approximately 50% of enliven's focus is currently on core Primary Care Partnership (PCP) priorities and activities. The enliven Board recognises the need for effective outcomes to be gained via collective impact, recognising that a whole of government approach is required as well as the pursuit of private sector and philanthropic opportunities.

Improving the organisational capacity of our member agencies and stakeholders to incorporate health literacy principles in their work is fundamental and underpins each of enliven's strategic priorities. enliven is committed to, and will continue to, utilise frameworks that support collective impact and community co-design principals.







# Chair's report

enliven has made great strides this year with the highlight undoubtedly being the first enliven conference 'Excellence in Health Promotion and Prevention'. This was a great success with over 150 people attending from all over the south east. Following on from this we plan to make this a biannual event.

As I write this report there is some uncertainty about the future funding of Primary Care Partnerships (PCPs). enliven is of course more than just a PCP but this has been the foundation on which enliven has been built. PCPs were created in 2000 and were focussed on rebuilding trust and collaboration between organisations which had been badly damaged during the Kennett years.

PCPs have always been based on the principle that we do better together than apart. We also owe it to our community to ensure our health services are joined up so that care is provided seamlessly and as a result people do not fall between the gaps. With changes to the service system over the years, increased tendering in some programs, and the transfer of aged care and disability funding to the Commonwealth there hasn't been greater need for partnership and collaboration. So if PCPs do cease there will be a huge loss of capacity across Victoria.

On a positive note enliven has benefited from increased funding this year partly as a result of our staff's endeavours in preparing submissions and tenders for a variety of projects. enliven continues to focus on the big issues including the rise of obesity in our communities and the effects on health of climate change. Our work in health literacy is world class.

I would like acknowledge the commitment and excellent work of my fellow Board members and the enliven team under Rob Macindoe's leadership. I also thank our members for their ongoing support and participation in enliven's work and helping to achieve our shared goals. We look forward to continuing this work and collaboratively improving the health and wellbeing of the communities in the south east.

**Gregg Nicholls** CHAIR



... enliven has benefited from increased funding this year partly as a result of our staff's endeavours in preparing submissions and tenders for a variety of projects ... Our relevance is probably best measured by the number of new member requests we have had this year and we continue to receive requests worldwide to share our intellectual property.





# Executive Director's report

**enliven**'s key focus areas, consistent with our Strategic Plan, have been reflected in activity over the past 12 months. This report provides broad insight to our key achievements in addressing these priorities.

Apart from the specific activities highlighted in this report, **enliven** has been active in facilitating alliances and advocating to support common priorities of members and stakeholders. These include convening the South East Prevention Leadership Group, the SE Refugee & People Seeking Asylum Alliance, the Aboriginal Early Years Roundtable and the Early Intervention and Integrated Care Committee. **enliven** submitted evidence-based information, along with other community informants, opposing applications for new Electronic Gaming Machines at Lynbrook, Officer and Dandenong – it is pleasing to say that none of these applications have been successful to date.



As we move into the new financial year, we remain optimistic that the work we do is becoming increasingly valued by members and stakeholders and this is in no small way underpinned by the committed staff/volunteers and skills mix they bring under the strategic oversight of our Board.

We are particularly proud that **enliven** was contracted to develop the Alcohol and other Drug (AOD) catchment-based plan for South East Melbourne which was completed and signed off in early 2019 with **enliven** contracted to oversee implementation of this important work for the first 12 months.

The "Bi-cultural Brilliance tool kit" was completed late in the last financial year in conjunction with DHHS, Monash Health, Red Cross and SECL and this is now being extensively used across Victoria. Plans are now afoot to form a Bicultural Worker Network.

The focus on "Tackling Obesity" has continued for a second year with support from the South East Prevention Leadership Group and Health Futures Australia. We are excited with the commitment of non-traditional partners in this work such as South East Water.

Apart from service provider relationships, It is also important to recognise our increasing partnership and linkages with research initiatives, particularly with Monash University and Monash Partners. This includes active participation in the IMPACT project led by Prof. Grant Russell and development of a "Pop Up" initiative to link South Sudanese community leaders with support services which is planned later in 2019. enliven is keen to expand these relationships recognising the importance of research and academic links with the core work we do and the learning outcomes that can be achieved.

As we move into the new financial year, we remain optimistic that the work we do is becoming increasingly valued by members and stakeholders and this is in no small way underpinned by the committed staff/volunteers and skills mix they bring under the strategic oversight of our Board. I urge you to follow-up with our team any areas of particular interest, and how we might further support you to collaborate in achieving our common aims and building in sustainability moving forward.

Rob Macindoe





### Vulnerable and diverse communities

#### Refugee and Asylum Seeker Health Alliance

The enliven-led Alliance in Melbourne's south east is a collective platform for health, humanitarian and social service providers to collaborate and support the people who seek refuge in our community.

In a climate where Federal Government policy positions on people seeking asylum and refugees are changing, concern among the settlement and health sectors is high, particularly regarding this cohort's mental health. In its 4th year, the enliven led Alliance has elected to focus on addressing escalating mental health needs. In doing so, enliven coordinated a joint submission in response to the Royal Commission into Victoria's Mental

Health System to highlight the unique challenges faced by people from refugee backgrounds in accessing mental health services - such as cultural stigma, poor health literacy, lower levels of education, employment and income. The Alliance has also formed taskgroups which come together regularly to work on specific issues, or as a community of practice. These are detailed below:

#### Community Strengthening Taskgroup (CST)

enliven's CST has continued to provide a platform for collaboration and information sharing among local professionals working on communityfocused health and wellbeing projects.

Although the group was originally established to provide strategic oversight to **enliven**'s Afghan and Tamil Community Strengthening project, members expressed interest and saw the value in continuing the group beyond the project completion in 2018. The group currently provides bi-monthly opportunities for members to showcase and share new projects, joint problem-solving activities, and identify opportunities for collaboration, consultation and partnerships.



Refugee and People Seeking Asylum Suicide Prevention Taskgroup

This taskgroup (pictured left) is a collaboration of key stakeholders working collectively to support individuals in high psychological distress across a range of refugee and people seeking asylum populations. The purpose of this taskgroup is to identify strategies to enhance capacity across the service system and within community to better identify and respond to individuals at risk of suicide. The taskgroup does this by building workforce and community capacity to respond to suicidality in refugee and people seeking asylum populations, developing initiatives/solutions to address emerging issues within community, identifying and monitoring of gaps in service provision for community and identifying existing models of practice and initiatives that could potentially be applied.



Southern Metro Region LGBTI Community of Practice Forum.

#### LGBTI+ Regional Reference Group

**enliven** is working with neighbouring Primary Care Partnerships (Southern Melbourne PCP and Frankston Mornington Peninsula PCP) to form an expanded LGBTI+ Reference Group across the broader catchment.

In 2016, **enliven** established an LGBTI+ Reference Group across City of Greater Dandenong, City of Casey and Cardinia Shire to promote the voice of LGBTI+ members to provide input on meaningful service delivery, planning and design and to advise on the appropriateness of consumer information and inclusivity of existing facilities.

After some initial success, there were challenges with maintaining the engagement of the group. **enliven**, Southern Melbourne PCP and Frankston

Mornington Peninsula PCP are now working collaboratively to review the groups purpose and ensure its future success by expanding its scope across the southern metropolitan region.

The aim is to build a sustainable reference group, where members are meaningfully engaged, and service providers are better informed in inclusive practice. **enliven** began the process of engaging with consumers and service providers via the Southern Metro Region LGBTI+ Community of Practice Forum, pictured above. The community and service engagement process will continue until the end of the year and the terms of reference for the group will be determined and finalised collectively.

The new reference group is expected to commence meeting in early 2020.





### Vulnerable and diverse communities (continued)

#### Child Protection, Child First and the Law training

**enliven** coordinates and administers Child Protection workshops across the south east, in collaboration with Victoria Legal Aid, Child Protection and Child FIRST.

The 2018/19 year saw **enliven** successfully co-facilitate three 'Child Protection, Child FIRST and the Law' workshops. These 3-hour workshops were co-designed and delivered together with partners from DHHS, Uniting and Victoria Legal Aid to provide a comprehensive and coordinated overview of the roles and processes within the Child Protection and legal systems.

This training has now been delivered to over 77 individuals from 31 different organisations across the south east region. Evaluations of the workshops have shown overwhelmingly positive feedback. Participants from a range of diverse sectors reported increased knowledge of the systems and processes, and increased confidence to support their clients and engage with these services. There has been a high demand for the delivery of additional workshops. The success of these workshops has prompted expansion of the training into the Frankston and Mornington Peninsula catchment in late 2019.

#### **Aboriginal Early Years Round Table**

Working together to improve access to, and engagement with, early years services for Aboriginal families.

The **enliven**-led round table consists of representation from a number of agencies and organisations in the south east providing early years services to Aboriginal children. The round table is held twice a year to improve awareness of services and new initiatives and to improve referral to early years services between agencies. This forum provides opportunities for joint problem-solving and helps to identify opportunities for collaboration.



It has been wonderful collaborating with enliven on the Child Protection, Child FIRST and the Law workshops for community workers. enliven were key to bringing the three presenting organisations together, and the positive feedback and attendance for the workshops reflected the important need for this kind of learning opportunity.

Alaine Prime, Victoria Legal Aid



It was a pleasure working collaboratively with all the partner agencies (enliven, Child First and Vic Legal Aid) in completing a number of presentations to staff. We all collaboratively planned and participated in the workshops and the relationships that were formed and knowledge shared were invaluable to all of us.

Marea Franes, DHHS

### Neutral partnerships

# South Eastern Melbourne Alcohol and Other Drugs Catchment Based Plan 2019 - 21

In August 2018, **enliven** was engaged by Windana on behalf of the South Eastern Consortium of Alcohol and Drug Agencies (SECADA) and Substance Use and Recovery (SURe) to produce the Alcohol and Other Drug (AOD) Catchment Based Plan.

SECADA and SURe are two consortia contracted by the Victorian Government Department of Health and Human Services (DDHS) to deliver AOD services in Melbourne's south east. In the development of the plan, **enliven** led a rigorous data mining and stakeholder consultation process which included:

- Analysis of de-identified client data recorded by SECADA and SURe services as well as catchment, socio-demographic and health outcomes data;
- Face-to-face and online consultation with SECADA and SURe staff, as well as representatives from other key stakeholder organisations; and
- Face-to-face and online consultation with members of the community

The final plan and associated appendices, can be viewed and downloaded at: <a href="https://enliven.org.au/south-eastern-melbourne-aod-catchment-based-plan-2019-21/">https://enliven.org.au/south-eastern-melbourne-aod-catchment-based-plan-2019-21/</a>. The plan includes a set of priority areas for action that were co-designed through the consultation processes; as well as an outline of how SECADA, SURe, enliven and the broader community intend to work together to address the identified areas of need. For an updated status report of the progress of each working group, please visit our website.

**enliven** was also engaged to facilitate the delivery of Year 1 AOD implementation plan activities. Working groups have been established and are well underway in meeting their targets for 2019.

Areas of priority action for the first year include scoping of cross sector service navigation tools and opportunities for networking, creating links with culturally diverse communities to improve engagement with services, mapping AOD activity across the catchment to identify gaps and opportunities for collaborative action, improving data collection and reporting processes and scoping potential for Telehealth to improve service access across Casey/Cardinia.



Pictured from left - Kate Lowsby, Cinzia Theobald, Rob Macindoe and Wasana Liyanage.



The plan includes a set of priority areas for action that were co-designed through the consultation processes; as well as an outline of how SECADA, SURe, enliven and the broader community intend to work together to address the identified areas of need.

















### Neutral partnerships (continued)



#### **Excellence in Health Promotion and Prevention** Conference 2019

enliven's inaugural conference brought together nationally recognised speakers and master class facilitators to share knowledge, build skills and inspire.

Over 150 delegates with an interest, passion, career or future-career in public health, health promotion and community health came together to enhance their knowledge, skills and practice in prevention and health promotion. This unique event provided a rare opportunity to network, connect and learn from other local practitioners and professionals from across Victoria.

Our MC, Rod Quantock OAM opened the conference with his unique brand of humour. Keynotes included Gilbert Rochecouste (Placemaking), Dr Helen Keleher (Developmental Evaluation) and Prof John Toumbourou (Communities that Care). Delegates also heard from local health promotion and prevention teams about the implementation of innovative health promotion and prevention practice in the south east. Master classes gave delegates the opportunity to delve deeper and hone skills in an area of their choice, ranging from community engagement (Gilbert Rochecouste), Health literacy (Helen Keleher), Data mining (Darshini Ayton) and Theory U (Shelley Bowen).

Following a poster competition with entries across our catchment and beyond, the Australian Health Promotion Association closed the conference with a presentation on the registration process for health promotion practitioners.





Anecdotally, and via the evaluation conducted, we have received very positive feedback with delegates reporting sound and relevant content, value for money and a great opportunity for networking.

We would like to extend our sincere gratitude to those who attended, the presenters, to our sponsors, and to the **enliven** volunteers who contributed to the success of the day.

This event was proudly supported by the Australian Health Promotion Association (AHPA) Victoria/Tasmania Branch Committee and SECADA alcohol and drug services.



This unique event provided a rare opportunity to network, connect and learn from other local practitioners and professionals from across Victoria.

## Early intervention and integrated care

#### enliven Practice Group

Working together through the reforms in the aged and disability sectors to enhance services for the community.

This **enliven** led practice group of assessment services, allied health providers, access and support workers, and other health and community service workers was formed in 2018. This group meet quarterly to assist each other in working together through the reforms in the aged and disability sectors.

Initially established to support agencies in working together with My Aged Care, the group problem-solve issues they face across many areas of their work including working with interpreters, supporting clients to transition to the NDIS, referral processes, and support for diverse communities.

#### Victorian Integrated Care - Communities of Practice

Developing and promoting Community of Practice events across the south east.

In partnership with the Australian Disease Management Association (ADMA), Monash Health and South Eastern Melbourne PHN, **enliven** has developed and promoted six Community of Practice events across the City of Greater Dandenong, Cardinia Shire and City of Casey catchment in 2018/19.

The Community of Practice events bring together general practice, community health services, hospitals, council services, allied health services, community pharmacies, neighbourhood houses, social services, social groups and others, with the aim of improving service awareness and connectivity. Presentations have been delivered on topics identified by attendees, informative panel discussions have been facilitated, and valuable networking opportunities provided.





## Mental health and youth resilience

#### BounceBack

In partnership with headspace and Alfred Health, **enliven** are helping to support young people in a region-first mental health service.

Funded by South Eastern Melbourne Primary Health Network (SEMPHN), the partnership between **enliven**, Alfred Health and headspace is designed to provide additional resource to headspace sites in Melbourne's south east including Dandenong and Narre Warren centres, and out-postings in Pakenham and Moorabbin.

Traditionally, headspace services are not designed or resourced to support young people whose mental health becomes severe and complex. As such, young people whose needs exceed what headspace are able to provide often fall through the gaps and find it difficult navigating other services and supports.

The BounceBack partnership provides additional resources to the headspace team, including:

- a number of highly experienced mental health clinicians (headspace)
- a registered psychiatrist (Alfred Health)
- two Youth Peer Support Workers from Culturally and Linguistically Diverse (CALD) backgrounds (recruited, supported and mentored by enliven).

The enliven-recruited Youth Peer Support Workers have a unique role in the BounceBack team, brokering the relationship between young people and the service. The Peer Support Workers are from CALD backgrounds and have lived experience which makes them well-equipped to support young people, families and the headspace team to understand what clients are experiencing.



Our Peer Support Worker is seeing a 12-year-old boy who migrated to Australia 2 years ago with his family. When the client was first referred to BounceBack he was disengaged from school, did not have any contact with friends and spent most of his time in his bedroom at home. After the second session with Steven, the client's mother thanked the BounceBack clinician for linking her son with him, stating that he has started to come out of his room and the house, and is wanting to participate in activities and see friends; and she is consequently feeling more hopeful for his future.

Amanda Thomas, Team Leader, headspace Dandenong and Narre Warren

#### Steven

Steven first came through **enliven**'s doors as a 19-year-old Tamil seeking asylum.

Since then, he has given new meaning to the art of "going from surviving to thriving."

Like many Sri Lankan Tamils, Steven fled his war-torn home country, seeking refuge on safer shores. After finishing high school, Steven found it difficult to find his footing, questioning where to take his next step and in which direction.



With **enliven**'s support, Steven has since completed a Certificate IV in Youth Work, and in early 2019 secured a role as one of two Youth Peer Support Workers in the BounceBack program.

Steven's first-hand experience in coping with the challenges of finding his place in a new culture whilst simultaneously processing the traumas of earlier years, makes him a valuable asset to the BounceBack team. He supports young people who are "doing it tough" to understand and navigate headspace and other services, and similarly supports headspace staff to better understand the journey of the young people they work with.

Our team are very proud of Steven and his achievements and of being able to play a small part in helping him to get where he is today!

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#### Suicide Prevention

**enliven** commenced work on the Suicide Prevention Gatekeeper Training Initiative in May 2019 as part of a twelve-month contract funded by the South Eastern Melbourne Primary Health Network.

**enliven** has spent the early months of this project engaging with culturally diverse and vulnerable communities and the service sector. These early conversations have been guiding the future direction of this project. The local City of Greater Dandenong community identified a need for a resource to help link them with current health and social services. **enliven** has drafted this resource and final issue is expected in September.

Gatekeeper training has been identified as an effective means of building community capacity in suicide prevention. The training is designed to build on individuals' knowledge of the most common warning signs and causes of suicidal behaviour. Gatekeeper training aims to equip community members with the skills they need to respond to appropriately to a person who is at risk of suicide.

**enliven** has partnered with the City of Greater Dandenong to work in a collaborative and respectful way with the local community. This partnership allows **enliven** and City of Greater Dandenong to be consistent in sharing suicide prevention messages and resources across the catchment.



Project Manager Emily Harris and Suicide Prevention Lead Alison Asche.





## Obesity prevention



Working with new partners, South East Water, in planning for the next stage: Jon Anstey (HFA), Chris Tancheff and Terri Benton (SE Water), Rob Macindoe and Cinzia Theobald (enliven), Shelley Bowen (HFA).

#### Tackling obesity across Melbourne's east - a leadership platform for change

We have been on a journey to re-think and inspire our efforts to become a wellbeing region, through leadership to prevent obesity.

Building on the work of last year, Health Futures Australia interviewed senior leaders and managers across a number of organisations to gain an in depth understanding of their perspectives on prevention and wellbeing, and on obesity prevention more specifically.

This included the three local councils (Greater Dandenong, City of Casey and Cardinia Shire), South East Water, South East Melbourne Manufacturing Alliance. South East Business Networks, SJD Homes, Future Recycling and the South East Prevention Leadership Group. The rich information received was captured in a synthesis report which was then reviewed, analysed and interpreted via 3 sensemaking workshops to identify insights and opportunities for the region.

Our next step is to bring together our stakeholders engaged so far to:

- Check in on our sensemaking of the challenge we are facing together
- Experiment with co-design and design thinking, to imagine "preventions investible future"
- Set up our way of convening a healthier future together

## Climate change resilience

#### **Dandenong Heatwave Hot Spots**

enliven continues its work in supporting communities that are vulnerable to the impact of climate change.

enliven, City of Greater Dandenong (CGD), Southern Migrant and Refugee Centre and Bolton Clarke partnered on this project (funded by The Lord Mayors Charitable Foundation) with the aim of raising awareness of the health risks associated with heatwaves and the behaviours that can minimise these risks, particularly amongst diverse and vulnerable communities.

Since 1890, heatwaves have killed more people in Australia than all other extreme weather events such as floods or bushfires combined.

22 information sessions were attended by 503 people including 221 from community groups, 147 staff and 135 individuals at immunisation sessions. At the end of the session most could recall the 5 key messages and understood the importance of checking on older people living alone and knew what to do if someone was unwell as a result of excessive heat, including awareness of Nurse on Call.

Free posters, brochures and videos in community languages assisted in getting the message to participants, along with resources such as fans, the CGD emergency checklist bag and Emergency Prepare Booklet as well as access to DHHS Heat Health Alert messaging.



## Health literacy services

#### Health literacy training

**enliven** continues to deliver in-service training to member and stakeholder organisations to improve the health literacy of the communities we serve.

60% of all Australian adults have low health literacy and numeracy skills – being below what is considered the minimum needed to meet everyday life and work demands. People's health literacy significantly impacts the way in which they seek out, understand and use information to make decisions about their health.

**enliven** has developed a suite of health literacy services to support our member and stakeholder organisations to make their services easy to find, simple to navigate and clear to understand.

Requests to deliver our Health Literacy Training have been steadily increasing and our ability to customise this training to meet the needs of each organisation have been well received. In the past year we have delivered our tailored training to several organisations and have been commissioned to deliver further training in the latter part of 2019 as the demand for this service continues to grow.

The training, co-facilitated by Emily Harris and Kate Lowsby, is very hands-on and informative, equipping delegates with the tools and skills they need to make a real impact on health literacy. Visit our website or contact us to hear more about the range of services we offer.

#### **Development of image library**

With the assistance of a graphic artist and some philanthropic funding, **enliven** developed 6,000+ locally relevant images to help in creating easy-English resources

We recognise the importance of using imagery in creating easy-English resources. From a health literacy perspective, imagery can either add meaning to, or even replace text, and as a result can make a resource much easier to follow and interpret.

Through our work in supporting our members and partners to create easy-English resources, we noticed a shortage of imagery that is appropriate for our diverse communities in Melbourne's south east. As such, we engaged an artist to help us fill this gap and to create a series of adaptable images featuring:

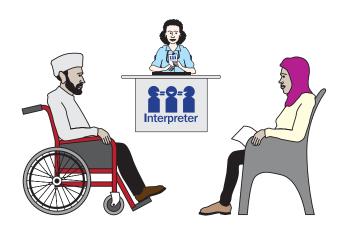
- people of various cultural and religious backgrounds including Aboriginal, Muslim and Sikh
- people of all ages from children through to older adults;
- a range of props such as wheelchairs, prams and walking sticks that can be affixed to the characters;
- scenario-type images such as people handing in forms at a reception counter, or sitting down with someone at a desk and computer

This improves our ability to reflect our community in resources that we develop and that we assist others to create. To find out more about creating easy-English resources, or our health literacy services more broadly, check out: enliven.org.au/health-literacy-services or contact us at: healthliteracy@enliven.org.au or 03 9791 1768.



Health Literacy Training session at AMES Australia.

We recognise the importance of using imagery in creating easy–English resources ... This improves our ability to reflect our community in resources that we develop and that we assist others to create.







# New volunteer program

enliven embarked on a new volunteer program in early 2019

enliven has recently engaged two health promotion volunteers to support our project team, with over 80 volunteer hours accumulated between them over a 3 month period.

Joanne Longland and Emily Nelson have made extremely valuable contributions across a number of projects. enliven would like to acknowledge and formally thank them for the ongoing assistance and enthusiasm they bring to our team. We look forward to further developing and expanding our volunteer program in 2019/20.

#### Joanne Longland

Jo recently graduated with a Bachelor of Food and Nutrition Sciences, majoring in Health Promotion at Deakin University.

Throughout my time at enliven I have assisted in the preparation and organisation of the first Excellence in Health Promotion and Prevention Conference held in July 2019. I had the opportunity to lead the design

and development of documents, presentations, poster templates, sourcing content for boomerang bags and the evaluation survey.

Through **enliven** I have been able to attend important forums such as WHISE – Creating Respect Together which gave me an insight on key issues raised from the community and how we can focus and meet these challenges. It also gave me the chance to network and establish connections within the field.

Being part of the enliven team has been an extremely rewarding and supportive experience, making me more excited to learn and expand my understanding within health promotion. I have gained valuable practical skills and knowledge that will contribute immensely to my career development. I am so thankful for this opportunity. I have learnt so much and am looking forward to continuing to assist enliven in the future.

#### **Emily Nelson**

Emily is a 3rd and final year Monash University student, studying a Bachelor of Public Health Science.

Over my time at enliven I have been fortunate to assist with different projects including evaluating and redeveloping enliven's Health and Wellbeing Hub website and mapping and reviewing the CALD

focussed networks within the catchment. I've also had the privilege of assisting with enliven's inaugural Health Promotion Conference and sit on a panel to judge the City of Greater Dandenong's Healthy Settings Video Competition.

enliven staff have been incredibly supportive of me and I have learnt so much from everyone. They have invited me to meetings with partners and a range of other experiences throughout my time here, which has allowed me to build my networks and gain further insights into the profession.

All in all, I have had a great taste of what my career could look like working in the health promotion space. I feel like I have gained a lot of practical skills and knowledge that I will carry to wherever I go next and throughout my career. I am incredibly grateful to enliven, for all the opportunities and experiences they have given me, and I have thoroughly valued and enjoyed my time volunteering here!



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### enliven board



Gregg Nicholls
CHAIR



Phillip Toovey
DEPUTY CHAIR



Mary Rydberg
DIRECTOR



Julie White



Samantha Kolasa DIRECTOR (RESIGNED)

### enliven staff



Rob Macindoe
EXECUTIVE DIRECTOR



Cinzia Theobald
DIRECTOR, PROGRAMS &
COMMUNICATIONS



Kate Lowsby

MANAGER,
HEALTH PROMOTION



Emily Harris PROJECT MANAGER, SUICIDE PREVENTION



Heather Lawson

EARLY INTERVENTION

AND INTEGRATED CARE

COORDINATOR



Wasana Liyanage GRADUATE PROJECT OFFICER



Mitchell Bowden

MANAGER, HEALTH
PROMOTION &
INNOVATION (FORMER)



Margaret Robb

ADMINISTRATIVE

OFFICER

enliven also wishes to acknowledge the contribution of casual staff and specialist advisors such as Therese Watson (Chair – Refugee Health Alliance), I-Hao Cheng (Consultant Advisor Refugee Health), Sayed Wahidi (Refugee Health), Michelle Sacchetti (website) and Rose Griffiths (enliven conference).

Bookkeeper: Louise Sutton Auditor: Saward Dawson Chartered Accountants







### enliven members

#### Organisation members

Adult Migrant Education Services (AMES)

Australian Croatian Community Services

Australian Multicultural Community Services

Baptcare

**Bayside City Council** 

Better Place Australia

Bolton Clarke

Campbell Page

City of Casey

City of Greater Dandenong

Connect Health & Community -Southern Gamblers Help

**Connections Uniting Care** 

Dandenong & District Aborigines Cooperative Ltd (DDACL)

Doveton Neighbourhood Learning Centre

Emerge Australia

GEKA Inc.

Grief Line

Independence Australia

Kooweerup Regional Health

Services

Link Health and Community

mecwacare

MiCare

MIND Australia

Monash Health

Motor Neuron Disease Association

of Victoria

Move4Health

Queen Elizabeth Centre

SCOPE

Shire of Cardinia

Southern Academic Primary Care

Research Unit

South East Climate Change Councils Association (SECCCA)

South East Palliative Care

South East Melbourne PHN

Southern Migrant and Refugee

Centre

Taskforce Community Agency

The Bridge

Uniting Age Well

Vision Australia

WAYSS

Wellsprings for Women

Windermere Child and Family

Services

Women's Health in the South East

YMCA - Casey Race

#### Associate members

LIME Management Group

Mary Rydberg

**Gregg Nicholls** 

Rovel Shackleford

Diane Bakon

### Partnerships

The achievements of enliven are only possible because of the hard work, support and commitment of many organisations and individuals.

**enliven** partners with many public and private sector organisations (in health, social services and beyond), universities and researchers, community groups, government bodies, peak bodies and corporates. The Board and staff of **enliven** would like to formally acknowledge and thank everyone who has contributed, shared their knowledge and worked with us.

\*enliven is supported by funding from the Victorian Government under the Department of Health and Human Services (DHHS) Primary Care Partnership Program. During 2018/19, enliven also received grant funding from DHHS, The Lord Mayors Charitable Foundation, South Eastern Melbourne Primary Health Network, Windana (SECADA) along with membership and fee for service revenue.



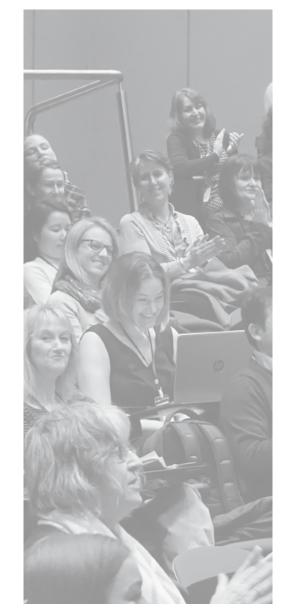


# SEHCP Incorporated trading as **enliven** ABN: 56 183 844 961

# Statement of income and expenditure and other comprehensive income as at 30 June 2019

2019 2018 \$ \$

Income	566,381	555,220
Expenditure		
Accounting fees	13,045	14,056
Depreciation and amortisation expense	3,131	3,701
Advertising	4,268	8,414
Employee benefits expense	366,508	462,301
Computer expenses	6,883	3,814
Motor Vehicle Expenses	262	1,265
Consulting Fees	111,263	97,829
Rental Expenses	40,243	39,872
Admin expenses	6,608	6,841
Bank Fees	502	643
Conference Costs	413	4,014
Office Expenses	8,490	15,846
Bank Fees	115	882
Total Expenditure	561,731	659,478
Surplus/(Deficit) for the year	4,650	(104,258)
Other comprehensive income for the year		-
Total comprehensive income for the year	4,650	(104,258)







# SEHCP Incorporated trading as **enliven** ABN: 56 183 844 961

2019

2018

### Statement of financial position

as at 30 June 2019

	\$	\$
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	595,895	603,039
Trade and other receivables	22,319	27,088
Prepayments	19,763	5,004
TOTAL CURRENT ASSETS	637,977	635,131
NON-CURRENT ASSETS		
Plant and equipment	1,761	3,166
TOTAL ASSETS	639,738	638,297
LIABILITIES		
CURRENT LIABILITIES		
Trade and other payables	31,891	43,711
Employee benefits	24,253	22,704
Other liabilities	79,430	75,620
TOTAL CURRENT LIABILITIES	135,574	142,035
NON-CURRENT LIABILITIES		
Employee benefits	7,507	4,255
TOTAL LIABILITIES	143,081	146,290
NET ASSETS	496,657	492,007
EQUITY		
Retained surplus	428,313	423,663
Reserves	68,344	68,344
TOTAL EQUITY	496,657	492,007







