

# CENTRE FOR MIGRANT AND REFUGEE HEALTH

## STRATEGIC PLAN 2021-2025



**Centre for Migrant and Refugee Health**

205 THOMAS STREET,  
DANDENONG VIC 3175

# CENTRE FOR MIGRANT AND REFUGEE HEALTH

## STRATEGIC PLAN 2021-2025

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### PREPARED FOR

THE CENTRE FOR MIGRANT AND REFUGEE HEALTH 2020-  
2025



STRATEGIC PLAN 2021-2025

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# 1. Intro



The Centre for Migrant and Refugee Health (CMRH) is a not-for-profit agency established in 2019. CMRH has a public health focus on improving mental health and wellbeing for Australia's migrants, refugees, and Asylum seekers, including new and emerging, culturally and linguistically diverse (CALD) communities.

We achieve our work by offering integrated mental healthcare services both clinical and practical solutions complement with community education, mobilisations, and campaigns raising awareness aim to address definitive social determinants of health, mental illness, stigma and discrimination. In addition, we utilise research, policy support, and advocacy on inequities and inequalities that create human suffering, social isolation and vulnerability, impacting and compounding poor mental health outcomes and quality of life.

## 2. OVERVIEW AND STRATEGIC DIRECTION



### Goals of Strategic Plan

The CMRH strategic plan aims to:

- Develop a bold vision, mission, and priorities for the CMRH to advance the needs of migrant, refugee and asylum seeker backgrounds communities in Victoria, Australia.
- Establish participatory approach working together with the people with lived experience to examine impacts of mental health.
- Recognition of the contributory duty of each of the critical stakeholders through partnership and collaboration on mental health promotion, research, policy support and advocacy.
- Develop a mission that engages stakeholders, philanthropists, government, nongovernmental and institutions to prioritize the objectives of CMRH.
- Elevate the CMRH structure and organizational governance, and accountability for the staff.

### 3. MIGRATION IMPACTS

Figure 1: Factors that affect Mental Health Outcomes and Quality of Life during the phases of immigration

BEFORE MIGRATION	DURING MIGRATION	POSTMIGRATION
<p>Exposure to war,</p> <p>Political persecution,</p> <p>Social status,</p> <p>Economic hardship,</p> <p>Biological,</p> <p>Social,</p> <p>Educational,</p> <p>Economic,</p> <p>Political,</p> <p>Occupational status in the country of origin</p> <p>Disruption of social support, status, roles, and network</p> <p>Trauma (type, severity, perceived level of threat, number of episodes)</p> <p>Political involvement (commitment to a cause)</p> <p>Age and developmental stage at migration</p> <p>Disruption of education</p> <p>Separation from extended family and peer networks</p>	<p>Course (route, duration)</p> <p>Exposure to disasters, harsh living conditions (e.g., refugee camps and routes of immigration)</p> <p>Exposure to violence, racism, and discriminations</p> <p>Disruption of family and community networks</p> <p>Uncertainty about the outcome of migration</p> <p>Separation from caregiver/parent/guardian</p> <p>Poor nutrition</p> <p>Uncertainty about future</p> <p>Life-threatening events</p> <p>Physical harm</p> <p>Death of loved ones</p> <p>Health neglect</p> <p>Deportation</p>	<p>Uncertainty about immigration or migrant, refugee and asylum's seeker status</p> <p>Poor living conditions &amp; health outcomes</p> <p>Crime and incarceration</p> <p>Unemployment</p> <p>Racism, Discrimination and social exclusion (at school or with peers)</p> <p>Loss of social and family status</p> <p>Loss of family and community social supports</p> <p>Concern about family members left behind and possibility for reunification</p> <p>Difficulties in language learning, interculturalization, acculturation, and adaptation (e.g., change in sex roles &amp; orientations)</p> <p>Stresses related to family's adaptation</p> <p>Domestic and family violence</p> <p>Deportation</p> <p>Acculturation (e.g., ethnic, and religious identity; sex role conflict; intergenerational conflict within family)</p> <p>Ageing population and Disability</p>

## 5. our HISTORY



We are a growing community-based mental health agency implementing 10-years of experience working with African Australian carers, vulnerable parents, families, and young people from migrants, refugees and asylum seekers, including new emerging and culturally linguistically diverse communities (CALD) in Victoria, Australia.

The CMRH works predominantly with carers, parents, families, seniors and young people suffering from prolonged stress and trauma. Their unique experiences and barriers impacting individual mental health and recovery led to the formation of CMRH to demonstrate leadership in population mental health and wellbeing.

The CMRH aims to provide mental health education to address stigma and discrimination, research, support policies and advocate for culturally safe, appropriate interventions and mental healthcare-specific treatment and rehabilitation services.

In the last two years, CMRH has supported families, parents, young people, and individuals to recover from mental illnesses, including anxiety, depression and other mental health issues. For example, during the COVID-19 pandemic, we have helped many Australians access much-needed support and information about COVID-19 and its vaccine.

Mental illnesses may arise from various social determinants of health or determinants illuminated from migration that negatively impact individuals with a more extended recovery period. While in Australia, most parents and young people face new challenges, from unemployment to domestic and family violence, shaping family dynamics to either single parenthood or unstable relationships. Our principle is to continue to help these groups to address the same experience.

In Australia, 3 million people live with anxiety or depression, and 1 in 5 persons is dealing with mental health issues.

During COVID-19, the household survey shows that around “2 in 5 (42%) Australians reported their mental health to be excellent or very good in January 2021, while 1 in 5 (21%) reported their mental health as fair or poor. 1 in 5 Australians (22%) reported their mental health in January 2021 as worse or much worse than before the introduction of COVID-19 restrictions in March 2020 (ABS January 2021)”.

What do the above statistics mean in the perspective of other multicultural communities’ mental health, including migrants, refugees and asylum seekers who have had existing posttraumatic stress disorder (PTSD), long history of suffering and struggle in their lives from countries of origin to Australia? Most people are unaware or never speak or believe that mental illness is real and treatable. Yet, half of the people diagnosed get treatment—only half of those adhere to treatments. We are committed to addressing gaps by engaging the parents, families and individuals with GPs or health professionals.

Research evidence shows that overall cumulative stress combined with existing inequities and inequalities cause severe mental illness that can significantly shift many family structures and lives.

In addition, current episodes of mental illness in our communities have shed light on indicative evidence of the high prevalence of poor health, chronic diseases, substance abuse, drug addictions, crimes, incarcerations, suicides, homicides, and domestic and family violence.

At CMRH, we seek an agency to provide culturally safe, appropriate, and specific mental healthcare services to break the chain of mental illness challenges and improve quality health outcomes. We are aware that many parents, families, young people, and individuals still don’t have knowledge of mental illness signs, symptoms and delayed treatment, support, and recovery cause needless suffering. Thus, our objectives are to provide community education, campaigns raising awareness, and psychosocial programs to build the capacity and knowledge of our communities about the seriousness of the mental illness.

We deliver our work through national and local media, including Facebook, Twitter, Instagram, TV, Radios, online and print on international, federal and regional platforms, including community events.

# WHAT WE DO?

Our goal is to provide mental health education, major psychosocial programs, and practical and clinical service solutions in a friendly and healthy environment that facilitates equitable participation in healthcare services to improve mental health outcomes and quality of life. We are determined to provide excellent treatments or interventions over the phone, online or in-office appointments to help refer you or your loved ones to culturally safe, appropriate, and specific mental healthcare services.

The implications of poor mental health outcomes are also directly linked to chronic diseases and injuries that continue to remain an issue and exacerbate low-quality health outcomes.

Many significant associations exist between mental illness, chronic diseases, and injury. Individuals with chronic conditions such as diabetes and cancers, to mention a few, have an increased risk of mental illness. Injuries, both intentional, such as homicide and suicide and unintentional, for instance, motor vehicle accidents, are 2-6 times higher for persons with a history of mental illness than those without an account.

We demonstrate our works with the help of many volunteers, community champions and ambassadors focusing on human rights and values not limited to respect and equitable access to healthcare services.

Besides, our services utilise culturally sensitive and trauma-informed safe care as existing frameworks to support excellence in our work and improve individuals' quality of life and safety.

We collaborate with our selected GPs or mental healthcare practitioners, social workers and any carers, family members, and friends you would like to involve.

**THANK YOU, AND WE LOOK FORWARD TO WORKING WITH YOU.**

## 4. THE RATIONALE FOR STRATEGIC PLAN AND SERVICES DELIVERY

The migrants, refugees and asylum seekers hold bad and worse experiences in their lives. Yet, their resettlements in Australia do not guarantee adequate standards of life given pre, during, and post-migration challenges. Every migrant, refugee and asylum seeker deserves a fair chance to better their living standards in Australia. Hence, mental health, health outcomes and quality of life.

In September 2020, the CMRH designed and launched a strategic plan to achieve its vision and mission in the next four years through advancing partnership, networking, and collaboration with partner organisations and advocates of mental health and wellbeing. The CMRH strategic plan aims to provide a roadmap for the migrant, refugee and asylum seekers that make up culturally linguistically diverse (CALD) backgrounds communities. The plan maps out the centre's approaches, goals, objectives, ambition, and aspirations to support and achieve its strategies, deploying its frameworks to pursue and deliver the desired centre culture and mental health, wellbeing, and quality of life outcomes.

*"The Royal Commission into Victoria's Mental Health System made 65 recommendations in its Final Report, handed down in March 2021, and the nine recommendations in its Interim Report". Part of the recommendations includes "working in partnership with people with lived experience of mental health challenges and psychological distress and their families and supporters continue to be at the heart of this once-in-a-generation reform". "It is critical to achieving better experiences outcomes for Victorians with mental illness".*

The Royal Commission recommendations envision the understanding of the unique needs of Victoria's diverse communities, including:

- "LGBTIQ+ Victorians
- Victorians from culturally and linguistically diverse backgrounds
- Victorians with a disability".

In addition, the Victorian refugee and asylum seeker health action plan 2014–2018 outlined the actions the Victorian Government will take to improve the physical and mental health of refugees and asylum seekers. The action plan has five priority action areas:

- accessibility
- expertise in refugee health
- service coordination
- service responsiveness
- cultural responsiveness
- Health literacy and communication.

So, we in CMRH aim to address migrant, refugee and asylum seekers' mental health and wellbeing in Australia through partnership and collaborative approaches.

The CMRH recognises the Royal Commission recommendations and work of the Victorian Government to collaborate with partner organisations, community leaders, advocates, and groups throughout the reform process, including planning, implementing and managing the reformed mental health and wellbeing system in Victoria, Australia. We believe that these diverse communities, including migrants, refugees, and asylum seekers deserve a broad range of mental health services to address various factors impacting individuals' experiences. These may include issues and challenges they have faced throughout pre, during and post-migration, such as gender identity, age and visa status.

Our strategic plan extends and reinforces the work of the Royal Commission and the Victorian Government in mental health and wellbeing through partnership, collaboration, research, policy support and advocacy.

For CMRH to achieve its aims and goals on those recommendations, we will utilise practical tools to address mental health from perspectives of their experiences from pre, during, and post-migration issues and challenges with consideration of the Biopsychological model (see figure 1). Besides, we will implement best practices and capabilities in staff investment at the small to most significant scale in delivering mental health using available resources.

## PEOPLE WITH LIVE EXPERIENCES AND SUPPORT GAINED FROM CMRH

Life isn't straight, or challenges and experiences in life vary from one person to another, but all end in catastrophic mental illness. Below are a personal story with our services support and help.



Ms. Ayen L

### CASE STUDY-I

I am Ayen L, a 24-year-old from Melbourne, Australia. I recently finished a diploma in community services in March 2021 and currently undertaking my student work placement at the Centre of Migrant and Refugee Health. Unfortunately, it was hard to find placement due to the COVID-19 pandemic. Most of the community service centres that I had called to secure placement had told me, "Sorry, we are not currently taking placements due to COVID-19; we still have students from 2020 who haven't started their placements."

And just as I was about to give up, I came across the Centre of Migrant and Refugee Health, and I said to myself, "this is the last phone call I am making" And to my surprise, yes! They were taking placements, and I felt so happy and relieved.

The Centre of Migrant and Refugee Health (CMRH) plus Sudanese Mothers Coalition in Victoria (SMCV) met my placement requirements. Both CMRH and SMCV provided me with a suitable work area, including desk and computers, to meet the WHS requirements for the placement and case management for clients impacted by sociological factors and COVID-19.

My placement with CMRH has helped me gain some skills that I would use when working in community service centres. I feel so delighted and confident!

If such organizations were to be supported more, they would change society and help students gain the skills they need in the community services area.

## PEOPLE WITH LIVE EXPERIENCES AND SUPPORT GAINED FROM CMRH

Life isn't straight, or challenges and experiences in life vary from one person to another, but all end in catastrophic mental illness. Below are a personal story with our services support and help.



Ms. Achol K

### CASE STUDY-II

I am 29 years old single mother of 2 children living in Caroline Springs, Victoria. I arrived in Australia in 2003 but later returned to South Sudan in 2009 to live with the other extended families and finally got married and returned to Australia in 2013.

During COVID-19, I have immensely suffered from unusual symptoms and mood disturbance. Before then, I was supposed to be a full-time worker. But, I was laid off and became unemployed because the company I was working for needed only full-time workers. So, I started looking at my older brother as a caretaker. However, I was left vulnerable due to our past sore relationship and hard to cope with him, socially and mentally. I somehow struggled to engage with him, his family and others in a way that may support me mentally and be able to interact with colleagues, relatives, and my children. But, with my engagement through the Centre for Migrant and Refugee Health (CMRH)'s activities. I began to understand a wide range of issues with mental illness given the education and campaign awareness about the mental health they provide in the community.

CMRH explores and recommends a range of psychosocial supports, including education and employment services. I benefited from their employment services, especially when they connected me with my current workplace. I could not empathise how valuable it was to get a job amidst the COVID-19 pandemic and other transport supports during the first days of my employment services with.... But, of course, it was hard working my way out during the COVID-19 pandemic with my children. After all, I felt mentally uncomfortable with the pandemic because I couldn't do anything in terms of studies, working, and being unable to pay rent on time.

Thanks to the CMRH staff for their tremendous support. I wish their support should continue and extend hands to the struggling individuals within the community.

# Message from Chairman of the Board



**DR. MICHAEL AKINDEJU**  
**CHAIRMAN OF THE BOARD**  
**CMRH**

In my thinking, as an African Australian professional and community leader, I understand the implications of poor social and economic outcomes. Therefore, I salute the efforts and aspirations of the CMRH to improve the mental health and wellbeing of emerging and culturally linguistically diverse (CALD) migrants, asylum seekers, and people of refugee backgrounds who are socially isolated, vulnerable, and of low socioeconomic status.

Over the past years, the CMRH has demonstrated acuity and are forward-looking as they aspire to become a vital change-maker in breaking the cycles of stereotypes, invisibilisation and silencing that have plagued African migrants and refugees in Australia.

Such efforts would culminate in mitigating the impacts of entrenched vulnerability stressors that put our people at risk of exposure in the eight major vulnerability outcome domains:

- Constrained / Limited Income Earning Opportunities,
- Deprived Employment,
- Increase in Crime Perpetration,
- A rise in Crime Victimisation,
- Limited / Lack-of Housing Options,
- Poor Health & Well Being,
- Poor Education Outcomes, and
- Deprived access to Services.

Over the past year, as the chair, I have seen the CMRH increasingly grow to align its operations with sound governance principles. Therefore, I can only expect that CMRH's operations will continue to influence African Australian communities in Victoria and perhaps Australia at large.

# Message from Founder, Chairman & CEO



"Our ambition targets and priorities are tailored to drive a safe social environment and change that help with the mental health and wellbeing of the refugees, migrants, and asylum seekers in Australia. The issues affecting this population do not only need humanitarian conciliation, but also reflection and taping in their past experiences, building capacities, and providing equal opportunities to unleash their potentials".

**MR MABOR CHADHUOL**  
FOUNDER, CHAIRMAN & CEO  
CMRH

I'm delighted to present CMRH's strategic plan for 2021-2025. Since the inception of CMRH, it has become imperative and increasingly clear that our role in strengthening the healthcare system by focusing on vulnerabilities and determinants of health that trigger mental health is essential. The health outcomes and quality of life are perpetuated by the complexity of factors, noticeably inequalities, inequities, institutional racism, discrimination, the sense of alienation, social injustice and exploitation.

Our priorities will focus on essential areas to improve mental health and wellbeing through partnership and collaboration. In addition, we will endeavour to strengthen our performance by establishing strong governance, transparency, and accountability to drive sustainable progress in the short, medium, and long outcomes.

Amidst COVID-19's second wave, refugees, migrants, asylum seekers backgrounds, and new and emerging communities in Victoria, Australia, were disproportionately affected by the COVID-19. Many institutional, economic, or environmental factors compounded their vulnerability. In origin-destination and transition countries, migrants, refugees, and asylum seekers are exposed to detrimental outcomes, such as wars, conflicts, social isolation, discrimination, poor health, and economic deprivation, which can interact in destructive ways. At a time, COVID-19, intersectional vulnerability and other pre-existing factors present profound challenges to the targeted population.

We acknowledge the Victorian Government's Multicultural COVID-19 Taskforce for the funding support that facilitated CMRH to provide a community-led education and campaign awareness for a safe COVID-19 vaccination. We have provided many COVID-19 Community sessions in partnership with the community organisations, including the Society of South Sudanese Professionals-Australia, Sudanese Mothers Coalition in Victoria, and others. Our work has contributed to achieving the Victorian Public Health benchmarks towards attaining a 90% and more COVID-19 vaccination target. Our participation in this achievement was possible due to the CMRH team's efforts and like-minded health professionals across Australia.

The Victorian Department of Health-"Shield that symbolises Immunity together with Community-Unity" received by the CMRH team in appreciation and recognition for our contributions during COVID-19 is symbolic. We want to send our great attributes to Prof. Ben Cowie, the current Acting Chief Health Officer and the Victorian Government, Department of Health, for what we would call "The Victorian Multicultural Communities 2020-2021 Big COVID-19 Campaign" to help the vulnerable communities understand COVID-19, its vaccines and related impacts.

Our engagement with vulnerable multicultural communities to follow fundamental public health measures and safe COVID-19 vaccination indirectly addresses individuals' and communities' mental health and wellbeing during the pandemic.

For our mental health education and capacity building, we are ahead in our transformation to establish a mental health database. In this way, we will ensure to link current social determinants of health to the mental health of migrant, refugee and asylum seekers. We have also achieved significant milestones in the research domain, particularly mental health surveys and research to ascertain the mental health of African-Australians during and post COVID-19. The CMRH has accumulated much mental health survey data accessible to our population, stakeholders and partners. The success in research, policy support and advocacy will innovate our mental health priorities as stipulated in our strategic plan.

The CMRH strategic plan adopts a community-led approach based on addressing social injustice, one of the social determinants of health and bringing about social change hard to be achieved only by a top-down solution.

Therefore, we welcome private, government institutions, philanthropists, and communities to forge partnerships around a community-led actions approach. The partnership will provide opportunities to those affected by social injustice, and a health determinant that requires collective experience, to identify what needs to change, drive solutions, and act for and influence change in healthcare systems, particularly mental health and wellbeing.

# The Biopsychosocial Model

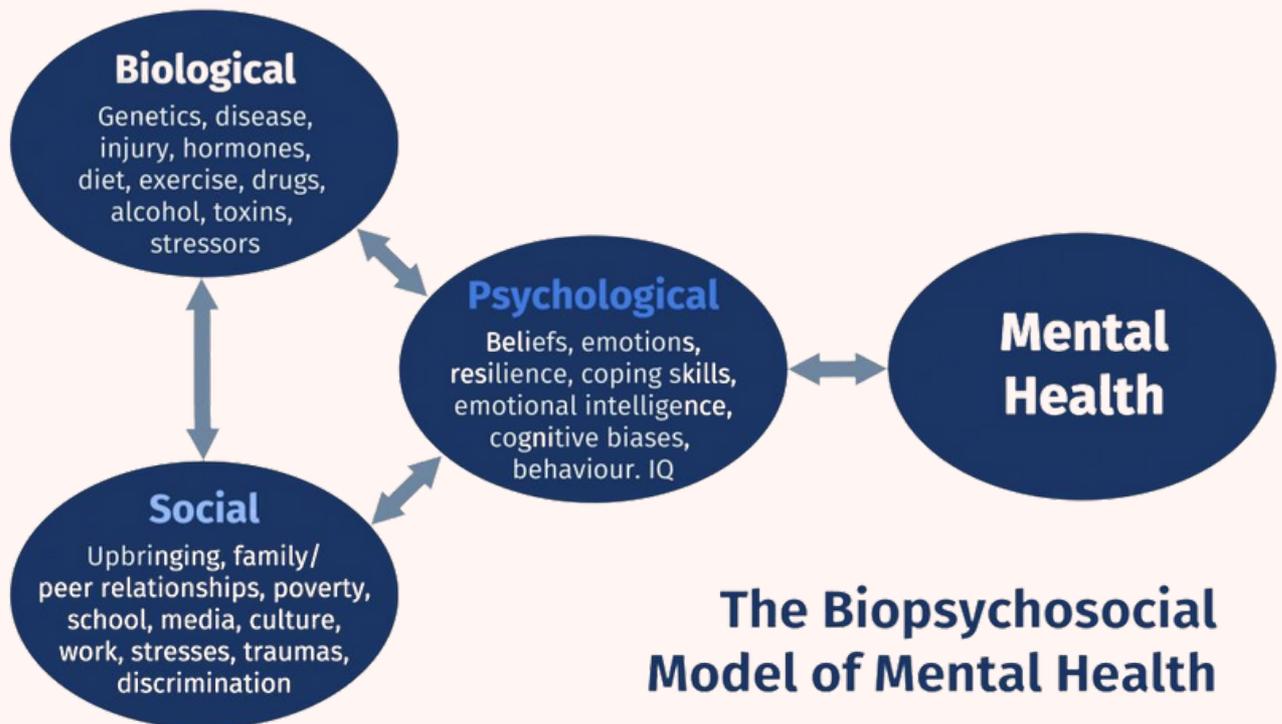
The model explains mental health as a consequence of many forces occurring at different points of time in life which have a cumulative effect on the individual. These forces are complex results of several factors, which can be positive or negative. If the negatives outway the positives, then a person could develop a mental illness.

"It's unlikely to be one specific thing that causes mental ill-health, but rather a mixture of unfavourable circumstances that have built up. So, for example, one thing might push a person too far, but it's unlikely to be that this alone causes a disorder".

"Engel's biopsychosocial model went on to become very influential. Most medical professionals now consider mental health to be affected by three main areas that are encapsulated in the biopsychosocial model:

- Biological (e.g. genetics, brain chemistry and brain damage)
- Social (e.g. life traumas and stresses, early life experiences and family relationships)
- Psychological (e.g. how we interpret events as signifying something negative about ourselves".

Figure 1: The Biopsychosocial Model



## VISION

Seeks a network of collaborative and sustained mental health education promotion efforts to improve access to culturally safe, appropriate, and specific mental health and healthcare services for socially isolated, vulnerable, and low socioeconomic carers, parents, families, and young people from migrant, asylum seeker and refugee backgrounds.

## AMBITION AND ASPIRATION

This strategic plan is designed to make the CMRH a leader in multicultural community's mental health and wellbeing. It proposed to support policies that promote culturally safe, appropriate and specific mental health and healthcare services.

- A nationally recognised centre in the excellence of providing education, campaign awareness and promoting mental health and wellbeing for emerging communities, including CALD, migrant, asylum seekers and refugee backgrounds in Victoria, Australia
- Recognised as a leader in research, policy support and advocacy around mental health, health outcomes and quality of life.
- Demonstrate and validate high impact through translation of research and policy activities.
- Financially sustainable through various funding sources through government, nongovernmental and philanthropic.

## MISSION

Advance public health leadership with a unified national voice in addressing mental illness and related social determinants of health to achieve better health outcomes and quality of life through mental health promotion, clinical and practical solutions through co-design, research, policy, and advocacy.

APPROACH	Mobilisation & Engagement	Consultation, Research, Policy & Advocacy	Partnership, Support & Recovery		
GOALS	<p>1. Education, Campaign Awareness for multicultural community's mental health</p> <p>7. Explore and implement inclusive participation of every individual and leader to encourage members of the community and relevant agencies</p>	<p>2. Strengthen evidence-based research and information sharing to shape national mental health policy</p> <p>8. Research that establishes impact and change through prioritising multicultural or CALD communities needs nationally</p>	<p>3. Leadership in CALD mental health, including, equitable provision of the mental healthcare services</p> <p>9. Seek training, mentoring and capacity in leadership to support CMRH work</p>	<p>4. Partnership and Engagement with CALD communities, Government, Non-Governmental, Private Institutions and other community agencies</p> <p>10. Develop policies that support strong partnership with stakeholders and partners</p>	<p>5. Sustainability of CMRH and progress</p> <p>6. Governments, funding bodies, and policy makers are sufficiently informed to make evidence-based decisions</p> <p>11. CMRH demonstrates effectiveness, efficiency, and sustainability</p> <p>12. Everyone experiencing mental illness can access effective services</p>
OBJECTIVES	<ul style="list-style-type: none"> <li>• Increased community-wide understanding of the symptoms, signs, and impact of mental illness</li> <li>• Build capacity and understanding in mental health and mental illness</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct research to support multicultural or CALD communities, including migrant and refugee needs</li> <li>• Provide leadership in collaboration, coordination, and dissemination of research around mental health</li> </ul>	<ul style="list-style-type: none"> <li>• Promote training and education in mental healthcare services to recognise different cultural, religious, and ethnic believes</li> <li>• Provide continuous professional development to partner organisations or agencies</li> </ul>	<ul style="list-style-type: none"> <li>• Establish a strong partnership and collaboration with stakeholders and partners</li> <li>• Build ongoing networking and communication throughout the relationship</li> <li>• Informed health policy at regional, state, and federal levels</li> </ul>	<ul style="list-style-type: none"> <li>• Collaborate with the services providers across the healthcare domain to become a reliable and trusted partner</li> <li>• Focus on the practical structure of governance and solid strategic direction</li> </ul>

<ul style="list-style-type: none"> <li>• Improve perception &amp; stigma of mental illness</li> <li>• Access to culturally safe, appropriate, and specific mental healthcare services</li> <li>• Empower community voices by maintaining a dialogue in communities that identifies, respects, and supports mental health sufferers and families</li> </ul>	<ul style="list-style-type: none"> <li>• Run workshop, seminars, and conferences with the communities</li> <li>• Inform communities with available mental health services</li> <li>• Encourage individual or community members to access counselling and support services</li> </ul>	<ul style="list-style-type: none"> <li>• Involve community and faith leaders</li> <li>• Establish a strong partnership with the communities</li> <li>• Link community with safe and culturally appropriate mental health services and support</li> </ul>	<ul style="list-style-type: none"> <li>• Involve stakeholders, partners to provide for mental health services</li> <li>• Seek local fundraising support and donations</li> </ul>	<ul style="list-style-type: none"> <li>• Seek opportunities for partnership with State, Territories and National peak bodies, including philanthropic agencies and associations on agreed terms</li> <li>• Explore alternative revenue or funding from philanthropic and other good will members</li> </ul>
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ACTIONS	<ul style="list-style-type: none"> <li>• Build awareness of mental health through traditional social media drawing on CMRH's Champions knowledge to promote local and national awareness-raising</li> <li>• Develop and implement a national campaign to raise awareness and understanding of the incidence and impact of anxiety and depression to ensure early intervention</li> <li>• Build targeted programs to increase awareness in underserved and more challenging to reach communities</li> </ul>	<ul style="list-style-type: none"> <li>• Maximise the Community Champions Program to strengthen the voice of those who have experienced anxiety and depression to reducing both stigma and barriers to seeking help</li> <li>• Contribute to all relevant national and state consultations to promote consumer experience of mental health in multicultural communities</li> </ul>	<ul style="list-style-type: none"> <li>• Use lived experience, traditional research, and economic impact to influence federal and state funding decisions.</li> <li>• Identify critical knowledge gaps about the lived experience of mental health and seek funding/partnerships to address these gaps.</li> <li>• Counselling services through Telehealth</li> </ul>	<ul style="list-style-type: none"> <li>• Advocate for and facilitate consumer involvement in the development of local, regional, and state-based services</li> <li>• Promote the need for awareness of psychosis so that symptoms can be recognised early</li> <li>• Support parents and families through high-quality website information drawn from consumer experience</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to develop partnerships with key organisations to develop further the capacity to support diverse communities</li> <li>• Promote Mental Health Checklist to support understanding of the community on mental health and related illness</li> <li>• Advocate for effective screening for anxiety and depression</li> <li>• Promote the importance of valuing mental health screening equally to physical health screening</li> </ul>
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**VALUES**

CMRH principles and values are set with core beliefs that guide centre actions, operation and coordination with the stakeholders and partners both with and outside of CMRH.

**Respect**  
For health rights of an individual migrant, refugee, and an asylum seeker with consideration on their beliefs and religious practices.

**Equitable Access**  
Promote equitable access to mental healthcare services with cultural appropriateness.

**Safety**  
Prioritisation of safety and care for all CALD communities, including migrants, refugees, and asylum seekers.

**Integrity**  
Works on strong ethical values, accountability, and transparency.

**Excellence**  
Maintain high standards in all our work with partner agencies and stakeholders.

**FRAMEWORKS**

Human rights focus	Culturally sensitivity	Coordinated care	Trauma Informed Safe Care
Promoting health rights of all vulnerable people in relevant areas of mental health services	Respect and sensitivity for individual cultural, norms and religious beliefs	Utilising partnership and available resources to help communities through the best practice	We provide a conducive environment free of stigma, discrimination, and prejudices

# CMRH Program Model

Figure 2. This logic model shows mental health awareness, mental health integration into the prevention of chronic diseases, injuries, health promotion, the provision of healthcare, research, policy support and advocacy

Input	Activity	Short- Term Outcomes	Medium-Term Outcomes	Long- Term Outcomes	
Partners, including governments, private institutions, Universities, Colleges, Staff Leaders, Community Leaders, Community Ambassadors, Community Champions, Community Advisors, Infrastructure Funding, Technical assistance	<b>SURVEILLANCE</b> Establish cultural operational definition of mental health Perform & expand community mental health surveillance and epidemiology Define public health role in mental health Improve understanding of the impact and burden of mental health	<b>PROGRAMS</b> Form and strengthen public health partnerships with mental health providers Integrate mental health into general health program efforts Developmental health communication messages for target audiences Put into operation mental health integration	Generate understanding that mental health is fundamental for establishing physical health Clarifying and confirm public health role and approach to mental health	<b>MENTAL HEALTH AND PHYSICAL HEALTH</b> Health Care Systems Treat, refer, and encourage self-management of mental and physical health issues Communities and settings are more supportive and healthier Individuals Increase in knowledge, attitudes, and beliefs People with Mental Health Problems have increased sense of empowerment Initiate and sustain regimens and healthy behaviors Decrease incidence of chronic diseases, injuries, suicide and homicide promote community resilience	Disparities in quality of life are reduced Public, mental, and physical health systems are integrated at all levels, sectors, and settings Individuals are more "resilient"- adaptable, able to cope with stress Quality of life of individuals improved. Optimal mental and physical health are achieved major reductions in chronic diseases communities are informed of important of community resilience
	<b>RESEARCH</b> Define mental health research gaps and agenda Identify opportunities for programs	<b>POLICY SUPPORT</b> Support and reinvigorate current policies into mental <b>ADVOCACY</b> Act to promote a better mental health for all	Primary Prevention: Public Health Community Optimal mental health strategies are integrated into targeted efforts to improve the health of individuals and populations Secondary Prevention: Public Health Community Modifies public health interventions to address those with mental health issues and several mental illnesses	Disparities in quality of life are reduced Public, mental, and physical health systems are integrated at all levels, sectors, and settings Individuals are more "resilient"- adaptable, able to cope with stress Quality of life of individuals improved. Optimal mental and physical health are achieved major reductions in chronic diseases communities are informed of important of community resilience	
Assets	COMMUNITY AND THE PEOPLE				



# CMRH Capability Framework

Capability	Capability Measures				
	ELEMENT	ALL STAFF	TEAM LEADERS	MANAGERS	EXECUTIVE MANAGEMENT
<b>CLIENT EXPERIENCE</b> <ul style="list-style-type: none"> <li>Understanding what people want from their experience with us and striving to make it happen</li> </ul>	<ul style="list-style-type: none"> <li>Community relations &amp; partnership</li> </ul>	<ul style="list-style-type: none"> <li>Be sensitive to clients cultural heritage, religion, traditions and identity.</li> <li>Actively listens to clients issues, gather relevant information and accurately deliver right services</li> </ul>	<ul style="list-style-type: none"> <li>Seeks to understand, support and advocate for clients with complex needs</li> </ul>	<ul style="list-style-type: none"> <li>adapt organisation strategic plan to meet the needs of the clients</li> <li>Contributes to sector to enhance client outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>utilise information to plan and improve ways of meeting client needs.</li> <li>Uses high level advocacy skills to address systemic issues affecting client outcomes.</li> </ul>
<b>NEW AND DIFFERENT APPROACHES</b> <ul style="list-style-type: none"> <li>Drive innovation and growth in the team and organisation</li> <li>Building new and different approaches into our services and programs, the ways and places we work and where we obtain our resources</li> </ul>	<ul style="list-style-type: none"> <li>Accountability</li> </ul>	<ul style="list-style-type: none"> <li>Seeks feedback to ensure work is consistent with expectations.</li> </ul>	<ul style="list-style-type: none"> <li>Deal with performance issues in a formal sense when required.</li> </ul>	<ul style="list-style-type: none"> <li>Upholds a clear sense of purpose and outcomes for their program.</li> </ul>	<ul style="list-style-type: none"> <li>Support the strategic direction for CMRH and the sector</li> </ul>
	<ul style="list-style-type: none"> <li>Ethics</li> </ul>	<ul style="list-style-type: none"> <li>Observes Code of Conduct, behaves ethically and seeks assistance with ethical dilemmas</li> </ul>	<ul style="list-style-type: none"> <li>Observes professional boundaries and standards and assists others with ethical dilemmas</li> </ul>	<ul style="list-style-type: none"> <li>maintain adherence to the Code of Conduct are communicated</li> </ul>	<ul style="list-style-type: none"> <li>Models organisational values and preferred behaviors and promotes the Code of Conduct.</li> </ul>
	<ul style="list-style-type: none"> <li>Program Development</li> </ul>	<ul style="list-style-type: none"> <li>Performs own roles and responsibilities efficiently to contribute to program objectives</li> </ul>	<ul style="list-style-type: none"> <li>Contributes to program objectives, develops and implements project plans.</li> </ul>	<ul style="list-style-type: none"> <li>Manages programs to work to timelines and budgets and achieve goals and objectives.</li> <li>Engages others in translating strategy into operational goals for the program.</li> </ul>	<ul style="list-style-type: none"> <li>Establishes targets for program areas and encourages strong results. Supports the development of new projects/programs</li> </ul>
	<ul style="list-style-type: none"> <li>Innovation</li> </ul>	<ul style="list-style-type: none"> <li>Identifies opportunities to do things better, develops ideas with others and assists with the implementation of routine changes.</li> </ul>	<ul style="list-style-type: none"> <li>Supports the use of new technology and generates and shares ideas and encourages others to reflect on activities and develop ideas for innovation and improvement</li> </ul>	<ul style="list-style-type: none"> <li>Researches and implements new technologies to strengthen the organisation and improve business practices.</li> </ul>	<ul style="list-style-type: none"> <li>Promotes the use of new technologies to enhance business practices</li> <li>Invests in developing capability throughout the sector by sharing CMRH's learning and experience</li> </ul>
<b>WORKING IN PARTNERSHIP</b> <ul style="list-style-type: none"> <li>Seeks out, and is open to, new and different opportunities and ways of working</li> <li>Building a partnership approach into all that we do with people and communities, staff and volunteers, funders and other organisations</li> <li>Includes using appropriate communication skilling to make it happen</li> </ul>	<ul style="list-style-type: none"> <li>Change Management</li> </ul>	<ul style="list-style-type: none"> <li>Maintains a positive approach to change and adapts to new or different ways of working</li> </ul>	<ul style="list-style-type: none"> <li>Supports change management and assists others to adapt and adjust to change</li> </ul>	<ul style="list-style-type: none"> <li>Implements change management processes and monitors progress</li> </ul>	<ul style="list-style-type: none"> <li>Be aware of changing political, economic, and social context and designs responsive changes</li> <li>Influencing process, through lobbying and using third parties as levers for influence.</li> </ul>
	<ul style="list-style-type: none"> <li>Partnerships and Collaboration</li> </ul>	<ul style="list-style-type: none"> <li>Builds collaborative relationships with the relevant people at CMRH</li> </ul>	<ul style="list-style-type: none"> <li>Builds collaborative working relationships across relevant sectors to support client outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>Builds collaborative relationships with professionals, agencies, government departments within their program/region or area of expertise.</li> <li>Identifies opportunities and facilitates partnering between programs to deliver the best outcomes for the client.</li> </ul>	<ul style="list-style-type: none"> <li>Develops and maintains high level relationships with senior government, community and agency stakeholders to progress the achievement of CMRH goals.</li> <li>Identifies opportunities for partnerships with other agencies to enhance program and policy integration and consistency across CMRH</li> </ul>

## PARTNERS AND AFFILIATES



**Centre for Migrant and Refugee Health**  
*We embrace your health*



## FOR MORE INFORMATION, PLEASE CONTACT:

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