



45
Years of
Supporting
Women



womens health
& family services

Annual Report 2022

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Womens Health & Family Services acknowledges that we are gathered on traditional Nyoongar Whadjuk land and pay our respect to elders past and present and to all Aboriginal and Torres Strait Islander peoples.

Chair's Report

Womens Health and Family Services vision of 'Better futures for WA Women' can be critically underpinned by societal progress in achieving greater social and financial equality for women. Progress in this regard has been slow. However, during 2021/22, heightened acknowledgement of the prevalence of dysfunctional cultural issues in workplaces requiring both government and employer intervention, along with pandemic data recording the widening pay gap for women in WA, have led to a resurgence of attention on social and financial equality for women. In the face of persistent workforce shortages, especially in some female dominated service industries, policy attention has also shifted to the cost of childcare, improved pay rates for the low paid and reducing the cost of training for participants.

Against this broad backdrop Womens Health and Family Services has made significant progress, this year, in further integrating its approach to health services for women in line with our philosophical commitment to a one stop shop approach for meeting the complex needs of women and families. From the perspective of a service provider in the field, actions at the level of funders which would further support the strength of integrated service provision include increased coordination and, in some instances, pooled funding across different funders, departments and government levels. This would facilitate the development of consistent outcome objectives and the concomitant use of measurement instruments to improve the development of program funding with greater certainty over longer timeframes.

One frustration in the field has related to the potential follow-up of funded "pilot and innovation programs". Where these are initially funded against a backdrop of positive social research, consistency in both the measurement of outcomes and locked-in funding in the case of positively measured outcomes would enhance opportunities for evidence based social policy responses. A case of note pertains to the PCAP programme for which a research paper was published in PLOS Global Public Health. The programme was designed to address the effects of Fetal Alcohol Spectrum Disorder (FASD) on babies of parents who consumed alcohol and drugs during pregnancy. Two of WHFS' staff members viz

Natalie Raymond and Jennifer Meehan worked in collaboration with Martin Symons from Telethon Institute and two others to develop the article, which is available [here](#).

The Board has been impressed by the energy and professionalism of the staff and the executive which has underpinned a successful year and further developed our integrated services. This has been achieved against the backdrop of continued vigilance against the impact of Covid-19. We thank them all for their commitment.

I would like to thank all members of the Board for their enthusiasm for engagement with innovation, their strong support for our vision and for collegiate support in our deliberations. I would like to express my regret that the Vice-Chair of the Board, Jo Robinson-Smith and Board member Victoria Campbell have decided that it is time to step away from the board and to acknowledge their important contributions during their time on the board

Margaret Nowak AM, Chair



CEO's Report

Throughout its 45-year history Womens Health and Family Services has always operated with an understanding of health in its broadest context. Womens Health and Family Services' approach to meet its organisational vision of 'Better futures for WA women' has therefore always been to work with the social determinants of health providing integrated physical, mental health and social support programmes that reflect the changing needs of WA women. This is also aligned with society's evolving understanding of intersectionality and the need for comprehensive one stop shop approaches as a logical way to organise complex services and programmes.

A key undertaking for Womens Health and Family Services this year has been to build upon the foundational quality and information technology work we started back in 2019 and increase our development as a truly integrated organisation. A place where women can move seamlessly between multiple trauma informed and recovery focused programmes. This work will continue because true integration – something that goes beyond just warm referrals and co-location of multiple programmes is not easy.

Not only are there the complex information management issues associated with multiple funders with different data collection and reporting requirements, outcome measures etc – there are also those historical and often intangible and unspoken barriers to information sharing between professional disciplines that can be even harder to navigate. Traditionally GP's, nurses, counsellors, mental health care providers and social support providers and advocates do not share client information easily across their professional boundaries.

Implementing deeper service integration with a single electronic client record entailed having some pretty robust and courageous conversations about privacy, confidentiality and trust between practitioners to get the staff buy in needed to make the system work. It was a significant change to the way people had operated and we realised that a culture of transparency and accountability was going to be fundamental to success. We have actively been working towards creating this culture over the past 2 years. Our employee engagement results have jumped two percentile categories over the journey indicating strong staff support for a new approach and I thank every staff member for their willingness to accept and embrace change.

I am pleased to be able to say that the pain has been worth it – we can now demonstrate many, many case studies of women moving seamlessly across three or more different programmes at Womens Health and Family Services and achieving heart-warming stories of recovery and moving forward to happier, healthier, and more empowered lives. I hope you will be inspired by the clients journeys detailed throughout this report which is also evidenced in the integrated case study of a Nurturing Families client's trajectory through the various WHFS programs available [here](#) for reading.

As we go forward, we will be advocating strongly for system change that will enable primary care, mental health and social support services and programmes to work beyond co-location towards true integration. Pooled funding, co-commissioning not only between health and community services but also between state and federal divides accompanied by a focus on long term funding and prevention are aspirational goals but these are the radical system changes that will be needed to improve integration and deliver social impact for women.

Felicite Black, CEO



About Us

Our team provide medical, nursing, allied health, health promotion & training, counselling, mental health, drug & alcohol, pre-employment, and domestic violence services in a safe, inclusive and nurturing environment for all women – regardless of age, culture, sexual orientation, ability, or circumstances.



Our Purpose

To provide excellent connected health and support services to women across their life cycles



Our Vision

Better futures for WA women

Our Core Values



Respect

We respect the innate dignity and value of each person and the need to show kindness and compassion to all. We value the collective power of teamwork.



Integrity

We are honest, transparent and accountable in our work and in developing trusting relationships. We keep our word and acknowledge our mistakes.



Innovation

We believe to meet the needs of our clients in an ever-changing world we must continuously strive for excellence and turn our creative ideas into effective solutions.



Diversity & Inclusion

We welcome women of All Ages, All Cultures, All Beliefs, All Sexualities, All Identities, and All Abilities. Our rich diversity makes us stronger and helps us better serve our clients and community.

WHFS has been supporting women for the past 45 years



1977

Opening of **Women's Health Care House** in Glendower Street, Highgate, offering medical & counselling services for women

1988

English classes for migrant women commence

1989

Whitfords Women's Health Centre commences

1991

Domestic Violence Support Group commences

1992

Perth's Women's Centre opens on Aberdeen Street

1992

Commencement of **Latino Women's Group**

1993

Therapeutic group for aboriginal women commences

1994

Counselling for Abuse by Health Professionals programme commences

1996

Award winning **Mental Health Community Outreach Project** now known as Be Well commences

1998

Women's Healthworks opens in Joondalup

1998

Award winning PEPISU programme commences

1999

Post-Natal Depression programme & Drug and Court Diversion programme commence

2001

Award winning **Multicultural Women's Advocacy Service** commences

2002

Commencement of **Aboriginal Grandparents & Family Services**

2005

Women's Healthcare House & Perth Women's Centre merge under the name **Women's Health Services**

2005

AGFS announced as **winner of Community Service Industry Award**

2006

Physical activity program commences, including exercise classes for migrant women

2007

Volunteer programme commences

We believe better futures for WA women means better futures for all

2008

Building commences on **purpose-built service** in Newcastle Street

2009

Multicultural Women's Advocacy Service now in 6 different locations

2010

Women's Health Services renamed as **Womens Health & Family Services**

2011

AGFS wins award NAIDOC Unsung Heroes- Closing the Gap by Leading the Way

2012

Rural In Reach programme commences. The first of its kind in WA, delivering services to regional community centers

2014

Joondalup Healthworks merges with WHFS

2016

Training & Education programme commences, providing gender specific training & education

2016

WHFS AOD service **hosted the FASD conference**

2017

Workplace Wellbeing Survey developed to help workplaces assess psychological risk factors within the workplace

2018

Children's Therapy room **renovation** completed

2019

Women's Legal Service and WHFS commence their **Health Justice Partnership**

2020

Reception and waiting room at **Newcastle St building upgraded**

2021

WHFS fully accredited to the National Standards for Safety and Quality in Healthcare and National Mental Health Standards

2021

Active Recovery Team commences as public private partnership with **North Metropolitan Health Services**

2021

Nurturing Families programme receives award for WANADA 'Translating Research into Practice for Improved AOD Outcomes'

2022

WHFS **turns 45**

2022

Body Esteem Program expanded

2022

Digital transformation project completed, with all WHFS systems now cloud based



Medical Clinic

The all-female staff of nurses and doctors at WHFS clinics offer a high level of care specific to women's health issues ranging from sexual health, pregnancy, postnatal care, menopause, to mental health care plans and beyond.

We are thrilled to collaborate with the National Cervical Screening Program & Clinipath Pathology in facilitating the introduction, education and testing of the self-collection of Cervical Screening Tests (CSTs) in WA. This new self-collection method is a less invasive and more culturally sensitive option for people who are less likely to screen for cervical cancer. We hope this new method will encourage more people across diverse backgrounds to screen regularly and contribute towards better outcomes of cervical cancer diagnoses.

WHFS clinics continue to offer face-to-face and telehealth consults to our clients, many of whom are vulnerable and at risk. The number of face-to-face appointments has increased with the easing of COVID-19 restrictions. We were thrilled to have two new doctors, Dr Michelle Hooi and Dr Lauren Corso, join our team which has resulted in an increase of available appointments and shorter wait times. We continue to offer IUD and Implanon insertions, as well as a full contraceptive service, with nurses conducting pre-IUD contraceptive screening.

Nurse led clinics continue to meet the increased demand for routine screenings. There were 5,854 client contacts, 1,913 consulted with an advanced practice nurse, 141 cervical screening tests were conducted, 221 clients were screened and tested for a sexually transmitted infection, other contacts related to safe sex, vaginal health, menopause, and unplanned pregnancy counselling.

This year, we introduced a new medical termination service for our clients, which has started to gain momentum. It allows women access to safe, non-judgmental, confidential, and affordable medical abortion services.

The large number of clients presenting with issues related to menopause led us to develop a survey to gather information about menopause and its effects on women's lives. The results will provide us with an opportunity to redesign our nurse led clinic so that we can assist our clients to be better informed to manage their menopause.

The clinic has also seen a large increase in clients seeking mental health care plans this year. With the addition of two new doctors, we have been able to accommodate the demand for appointments and connect with our WHFS mental health services to deliver holistic and connected health care for our community.



Client Testimonials

"The care, understanding, patience and advice has been exemplary. I feel comfortable and supported enough to ask questions, which I've not been able to ask before and the advice has been simple so I understand the answers (as I don't have a medical background). Thanks for being amazing"

"The nurse I saw was amazing. She was kind, approachable, educated and so welcoming. It was a no judgement environment and I felt more than comfortable discussing my concerns with her. My experience was wonderful, thank you "

Health Promotion



The Health Promotion team work flexibly in Joondalup and Northbridge to respond to requests for community education and engagement across a diverse spectrum of clients. We engaged with 6,047 clients via face-to-face and online programs and had 49,518 social media contacts. Events delivered included health education presentations and workshops for professionals addressing topics on mental health, movement, and nutrition. Enhanced website content and dedicated resources for social media increased engagement in key campaigns, newsletter content and subscriptions. Health Promotion Facebook engagement rose 96% in the Jan-June 2022 period.

The Health Promotion team continue to adapt and innovate service delivery. Engaging with consumers around the website was positive. It confirmed the website was easy to navigate with mobile access being the most preferred method. Health promotion brochures were the most sourced resource with multiple language translations the most requested outcome for the engagement survey.

Mental health, healthy relationships, and general health & wellbeing (healthy eating, movement, and physical activity) related education sessions remain the most requested topics of interest. In addition, there was an increased focus on women centered issues – ovarian cancer, health checks (screening), sexual health, contraception, menopause and pelvic pain. The HP team collaborated with the clinic to ensure coordinated health communication, targeted messaging, and communication strategies for these key areas of interest.

Women's Health Week (September 2021) and the 16 Days of Activism Against Gender Based Violence (November 25-December 10, 2021) campaigns were significant events for the team. A focused communication strategy and participation in the Silent March saw increased engagement in the topic of ending violence against women. The 2022 Women's Health Week has carried on the success of the previous year. We have established an annual Women's Health Week Breakfast event and deepened community relationships by collaborating with the Women's Adventure Film Co, the Vietnamese Women's Association and by hosting several health focused stalls and presentations during the week.

During Cervical Cancer Awareness Week, to encourage clients that were either overdue or who had not participated in cervical screening tests previously, we developed targeted health information and offered pamper packs to clients that booked their CSTs with WHFS. This initiative increased CST consults significantly.



In response to increasing concerns around vaping the team delivered tailored talks to high school students. Other topics included healthy relationships, consent content, promotion of sexual health podcasts.

Workshops on eating and movement for health & wellbeing, mental health and stress reduction strategies were delivered to North Metropolitan TAFE Career Transition Assistance programme, Adult Migrant English programme and Beacon Lifeskills programme. We also participated in homeless health care visits to Moore Street in collaboration with other health care support services, Breastscreen WA and Street Doctor.

We continue to drive the importance of integrating daily movement and physical activity for physical and mental health and wellbeing through walking groups, tai chi, yoga, weights for wellbeing and functionality, fun functional movement activities with culturally and linguistically diverse adults and high school students, and presentations to workplaces and local governments.

Networks and collaborations with key partners including ASeTTS, Uniting WA, Landlease, Salvation Army (Beacon), Neami, Vietnamese Women's Association, local governments such as Stirling, Wanneroo, Joondalup, Armadale, Perth, and Vincent were further developed. The team continue to support and host the Mental Health Promotion Network meetings.

Aboriginal Family Services

Our Aboriginal Family Services aims to support and strengthen Aboriginal women and their families across the generations by empowering clients to represent their own interests, and to move towards a sustainable and effective change. We provided counselling, family support, advocacy, and referrals, as well as group activities, peer support groups, early years playgroup and holiday programmes. Phone sessions and wellbeing check-ins also continued during periods of COVID-19 restrictions this year.

Post COVID-19 our Aboriginal Reference Networking group has recommenced and will be run four times per year in Joondalup. The reference group consists of service providers and Aboriginal community members. The aim is to keep in touch with what is happening in the local and wider Aboriginal Community regarding services available, trends and events to strengthen our work with Aboriginal people to meet their needs.

Individual and/or family support for Aboriginal and/or Torres Strait Islander people living in Wanneroo and Joondalup includes outreach and in-house services to people experiencing difficulties with their own or a close family member's mental health and/or alcohol or other drug use. Activities/programmes include:

- Alcohol and/or drug and mental health counselling and awareness workshops
- Art and cultural and recreational activities
- Community workshops
- Circle of Security parenting support
- Counselling
- Linking clients to other community services
- Advocacy and support



100%

of clients indicated an improvement in their knowledge of risk factors impacting healthy lifestyles



100%

of clients who indicated they are satisfied with the service they receive and had opportunities to discuss their support needs with staff



26

community events



Mental Health and Counselling Services

Counselling

Womens Health and Family Services proudly offer a team of highly qualified multidisciplinary clinicians who provide care for clients across the lifespan, and across a range of sites and outreach locations in Perth metropolitan. Our services are offered to women and their families, including infants, toddlers, teenagers, and partners.

Our clients are from diverse cultural backgrounds and often have experienced significant developmental trauma. As an inclusive service, we offer support for all people who identify as women across the LGBTQIA+ spectrum. Our clients value our collaborative care approach as our team of counsellors, psychologists, social workers and case workers partner with doctors and nurses in our medical clinic. Our peer workers have lived experience associated with eating disorders, substance use, and domestic violence and offer valuable support to our clients. As an integrated service, our intake team are skilled at following the client journey within our organisation and offer continued support when transitioning them to additional services, including external referrals to partnering agencies. Many of our clients self-refer, additionally we value working in partnership with referring agencies such as hospitals, medical clinics, government departments, allied health practitioners, and schools.

Body Esteem

We are extremely proud to be recipients of additional funding from the Mental Health Commission for the expansion of the Body Esteem Programme (BEP). The BEP is the only community-based service which offers dedicated programmes for women experiencing eating disorders. Our expanded service will include all genders as well as a dedicated programme for young people aged 16-18 years. In addition, we will also be seeking to increase service provision for parents, carers and other family members who are supporting a loved one with an eating disorder. Over the last year, staff have been developing an online programme which aims to increase accessibility of support to people living in rural and remote regions as well as those who may not be able to attend face-to-face groups. A consultation process has commenced with key stakeholders, and we are excited to work alongside sector professionals and service users in the development and roll out of the new service model.



Be Well

The Be Well mental health programme has continued to operate successfully over the past 12 months. In addition to Art Therapy groups, individual Art Therapy sessions have now been embedded within the service model. A Be Well programme manual was developed, incorporating domains to manage mental health, physical health, living skills, friends, and community. The Be Well Programme submitted a tender for ongoing and expanded service provision with a core focus on high-quality, consumer-led and accessible services.



Active Recovery Team

The Active Recovery Team (ART) is a project that works in partnership with North Metropolitan Health Service to deliver support for people living with severe and persistent mental health conditions. This multidisciplinary approach to care involves collaboration between psychiatry, nursing, psychology, mental health case workers, and peer support workers.

Last year WHFS received funding via a State Government initiative, to establish the Active Recovery Teams. These teams were established in ten metropolitan and regional locations. The aim of this 18-month pilot programme is to bridge the gap between clinical mental health services inside hospitals and the community-based organisations who provide care outside of hospitals. North Metropolitan Health Services (Adult Mental Health Service) and WHFS partnered to deliver this initiative in the North Metro area (Stirling and Joondalup catchments).

Since the establishment of ART there has been an increase in referrals to WHFS of clients with complex substance use and mental health presentations. Clients can engage in the programmes for 12 weeks to access specialised mental health and medical services, advocacy, counselling, and peer support. Peer workers actively work alongside clients to support them to engage in group and support networks as well as other WHFS services.



Client Testimonials

"I honestly love my peer worker - she is amazing, and she has helped me out so much - I couldn't ask for a better peer worker"
-ART Client

"These groups are imperative for my recovery & the support workers give valuable support and information "
-ART Client

Children & Family Services

Perinatal Mental Health

The Perinatal Mental Health (PNMH) Programme has been designed to support early intervention for mothers and their babies during pregnancy and the postnatal period. Referrals can be made by individuals, child health nurses, hospitals or GPs who have identified expectant mothers or mothers with babies experiencing, or at risk of experiencing, perinatal anxiety and/or depression. Client outcome scores confirm that the PNMH Programme improves the mother-infant attachment, reduces anxiety, and improves reflective and self-care capacities for mothers by offering support from initial assessment through to individual support and group support. The current design of the PNMH Programme includes individual counselling for perinatal mental health challenges and group programmes for learning and support.

Groups delivered include Circle of Security, Making Sense of Motherhood, Healing Wombs and Play Now, Discover Always.

Play Now, Discover Always is a therapeutic and psychoeducational group programme for women who are at risk of or are experiencing postnatal depression and/or anxiety as well as co-occurring complexities including AOD, family and domestic violence, trauma or other issues.

The focus of the programme is to assist women to develop a secure attachment with their children through play, using the Circle of Security (COS) attachment-based parenting programme and trauma informed practice principles. The success of the pilot has recently led to a new partnership with the Association for Service to Torture and Trauma Survivors (ASeTTS) to continue facilitating future groups.



Nurturing Families

The Nurturing Families programme is a parent-child intervention offered to women who are pregnant and/or have children aged 0 to 2 years. The programme assists families who experience significant disadvantage which places children at considerable risk of poor developmental outcomes. Intensive outreach and case management is provided during the prenatal period and throughout the first 24 months of a child's life. The evidence-informed model draws on relational theory, motivational interviewing, and harm reduction concepts. Nurturing Families is an innovative programme based on the Parent-Child Assistance Programme, created by the University of Washington School of Medicine and adapted for use within an Australian context.



of clients reported an increased rate of skills and knowledge.



of Nurturing Families respondents agreed that the treatment they received helped them manage their condition better.



of respondents agreed that they believed their health would improve after care.

Kids in Focus

Kids in Focus (KIF) is an early intervention and prevention programme designed for children and families impacted by parental substance use. It is aimed at improving child development and wellbeing whilst supporting parents and caregivers in their parenting role. The KIF team also facilitate Circle of Security parenting groups aimed at equipping parents with the skills to understand their children's attachment needs and how to build secure attachment.

The KIF team experienced a significant increase in demand for services over the past year – particularly as there have been increased waitlists for psychologists and paediatricians in the private and public sector. During COVID-19 restrictions the KIF team continued to run services via telehealth and sharing of online resources.

Family Therapy

WHFS Family Therapy team assists families with children aged 0–24 to improve the functioning and resilience within the family unit. Many referrals to Family Therapy are internal from other WHFS service areas, as well as from GPs, schools, and child protection. Every case is unique and complex. Over the past year, the team experienced increased client demand at all locations. During difficult periods in lockdowns, families remained engaged with the team via telephone and virtual counselling sessions.

Creche

Our creche team continue to offer support for families engaging in group programmes at our Northbridge location. Creche workers have developed specialist expertise to collaborate with our counsellors when perceiving moments of attunement during separation and reunification between mothers and their children when entering and departing our creche. We are proud that our creche team can offer feedback to parents on their child's emotional and behavioural responses.

Client Testimonials

"This group has helped pull me out of PND + PNA, after meds and 1:1 therapy helped but didn't fully heal from birth trauma (but probably primed me to be able to address it in this group). I have had nothing but an excellent experience with all staff and supports via the perinatal team. Thank you for helping mums like me heal so we can get on and enjoy our babies and motherhood and the new versions of ourselves. I'm sure this group and service has kept me out of hospital. My family and me are forever grateful. Please continue these unique services to help other Mums in need. You made accessing help less daunting and effective. Thanks so much xxx."
-PNMH Client

"150000% happy with you guys, especially Jennifer. The support you guys offer is fricken awesome. The fact the program is two years is amazing. Jennifer really cares and is invested in my recovery and wellbeing, it's not just a 9-5 job for her. People in recovery need someone who genuinely cares"
-Nurturing Families Client

"Really eye opening to my own sense of self and to know others are also part of the motherhood struggles which are so common. I just never knew."
-PNMH Client



Alcohol & Other Drug Services

The Alcohol & Other Drug (AOD) Programme provides counselling, advocacy, psychotherapeutic and peer support groups for women and their families impacted by AOD use and/or co-occurring mental health issues. Consultations are delivered face-to-face, telehealth, online or hybrid and are running at capacity at both Northbridge and Joondalup sites. Group attendance rates increased to 73%; participants can commence at any time and there is no fee to attend. During the disruptions of COVID-19, individual and group sessions continued to run online. This increased demand for counselling support continues to be a significant trend well into 2022.

Women's Empowerment Night

This group is delivered in partnership with the 'Women's Recovery Community', and offers a consumer led space to present topics, run forums, and create opportunities for sharing and learning. Topics are recovery focused and often cover aspects of overcoming challenges when dealing with AOD or mental health issues.

Alcohol and Other Drug Treatment Group

This 10-week psychoeducational group explores issues such as relapse prevention, triggers, social supports, relationships, stress, trauma, and addiction. Developed by women for women, the group is facilitated by a counsellor and a lived experience peer worker. The AOD Programme is designed to meet the needs of all women, including individual women and women with children.

Womens Health and Family Services has helped my whole family. They have supported me to stop drinking and I have been able to get my children back in my life. The groups have helped me understand what I needed to do with my own behaviours.



I started out in group with nothing. I have grown in myself and now I am doing the Recovery College Course to be an educator. I cannot thank Karen enough.

Coffee Talk

Coffee Talk is an online, interactive forum run from Lotteries House in Joondalup. The Coffee Talk forum is a collaborative venture between Counselling and Support Services, Health Promotion, and Women's Recovery Community. Some of the topics covered this term were sexual health for women, menopause, healthy eating, and parenting in recovery.

SMART Recovery

Self-Management and Recovery Training is a free group programme assisting any problematic behaviours, including addiction to drugs, alcohol, cigarettes, gambling, food, shopping, internet, and others.

After Hours Programme

After Hours programme provides individual counselling services and group programmes every Tuesday and Wednesday evening to deliver support for women who are working or studying and require assistance outside of normal hours. We are proud to offer assistance with qualified counsellors working alongside trainee volunteers.

We are grateful to have established strong partnerships with community organisations; Connect Wanju, Women's Recovery Community, Men's Recovery Community, Western Australian Recovery College Alliance, Women's Legal Service, and Jacaranda Community Centre. Working in collaboration with these organisations allows Womens Health and Family Services clients to seek ongoing continued support upon completion of treatment with our service.



Legacy, the Therapy Donkey is a beloved member of the WHFS team. Legacy recently won the RSPCA Animal Welfare Award. Read about his work and his time in the limelight [here](#)

Family & Domestic Violence

Overall, we have seen an increase in the complexity of clients presenting with Family and Domestic Violence (FDV) this year. COVID-19 continued to impact on FDV services, along with lack of alternative housing and an increase in clients reporting on issues with mental health. Our advocacy clients have presented with multiple instances of emotional and psychological abuse, and we saw an increase in technology-based abuse, with mobile phones, tracking devices, and digital home packages frequently used by perpetrators to intimidate.

We responded favourably to the consultation on coercive control. We believe that criminalisation of coercive control is essential to support victim-survivors. Our response detailed several areas to be addressed including FDV training for the justice system, additional support for CaLD women and community oversight of high-risk perpetrators.

We continue to work with the FDV community and sector, presenting on FDV in the workplace to the Public Transport Authority, providing a culturally secure presentation with the Sikh Community and have engaged in research with the Department of Justice around forensic services requirements and contributions to research for Intimate Partner Sexual Violence.

Domestic Violence Advocacy Service & Multicultural Women's Advocacy Service

The Multicultural Women's Advocacy Service (MWAS) focuses on the removal of barriers and improvement of access for individuals of diverse backgrounds. The Domestic Violence Advocacy Service (DVAS), provides similar advocacy for non-CaLD women.

This year has seen an increase in immigration issues for our MWAS clients; particularly those on temporary or skilled shortage visas. The latter resulting in the secondary applicant (our clients) being required to leave Australia following a breakdown in their relationship. We know that perpetrators consistently use visa requirements as a weaponizing tactic against the victim survivor. We found that clients are ineligible for various subsidies and payments from Services Australia due to visa status, lack of documents and an inability to establish their own account separate from the perpetrator.

Language barriers continue to impact when accessing services, compounded by a complicated visa process, and limited funds for translation of Court documents. Challenges with identity documents continue to add complexity to processes, especially with children involved.

The team continue to advocate for our clients; in the last 6 months staff sent 1580 referrals to support clients requiring access to services. We continue to work closely with our partners at Women's Legal Services and Legal Aid who provide on-site assistance for our clients, over 140 clients have been referred and supported this year.

Client Engagement and satisfaction continues to be high with 92% clients reporting increased skills regarding their safety and future plans along with increased skills to manage relevant problems. 83% of clients reported meeting all their goals whilst with the programme.



92%

of clients felt their knowledge around safety/FDV had increased significantly after the care they received



83%

of clients had achieved their goal at exit

Coordinated Response Service

WHFS also manage the Coordinated Response Service (CRS), co-located at Perth and Mirrabooka police stations. This is part of the WA Government's priority area of the Family and Domestic Violence Response Team, focused on perpetrator intervention, early intervention, and crisis response.

The team triages all Category One incidents in collaboration with the Western Australian Police and Department of Child Protection. In the last year the team triaged over 3,954 incidents.

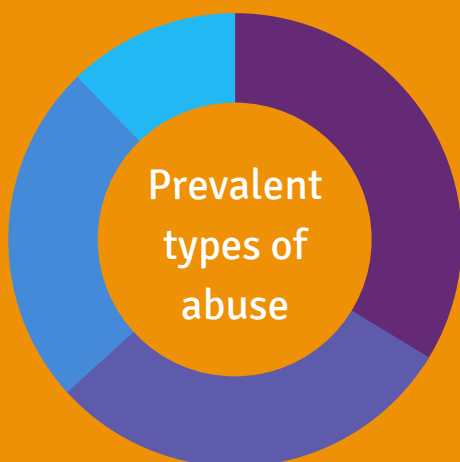
The benefits of the prompt intervention of CRS services results in greater confidence of victim survivors to report violence to authorities, and increased potential for prosecution. There are increased opportunities to access other FDV and medical services and less negative experiences with attending officers, reducing the potential for secondary trauma which aligns with the primary aim of safety for the victim survivor and their family.

Multicultural Kids in Focus

Multicultural Kids in Focus (MKIF) is a service designed to support children (aged 4-14) and families from CaLD backgrounds within Perth Metro area who are at risk of homelessness. MKIF uses a child focused approach that assesses safety and wellbeing and works to provide support, advocacy, information, and referral to reconnect kids to local community, school, and other support resources.

There has been an increase in referrals for housing advocacy and services, and an increased number of requests to provide therapeutic support to children.

Case complexity continues to vary from advocacy to therapeutic support for complex psychosocial needs. Most families presented as being isolated and lacked community and cultural support.



- 34% Emotional Abuse
- 30% Physical Abuse
- 24% Financial Abuse
- 12% Sexual Abuse



Career Advocacy & Support

ParentsNext

The ParentsNext programme continued to provide career support to parents, building their confidence, developing their skills, and assisting them with accessing relevant support services. The programme supported 730 participants, a growth of 25% from last year.

A new space opened in Mirrabooka, providing a nurturing environment for clients to attend their appointments. The programme now operates from five locations (Northbridge, Joondalup, Mirrabooka, Midland and Ellenbrook). The programme builds relationships with participants through regular appointments identifying their study and work goals and working closely with partners in the community. This year \$74,000 funding was utilised to support clients with expenses such as training, laptops, childcare, work clothing and licenses, to help them achieve their goals.

Ongoing support from Career Advocates, and referrals to community service, continued to be driving factors, empowering participants to work towards their education and employment goals. Nearly 90% of clients reported to be making progress in at least one outcome area, with job skills and experience, aspiration and motivation, and job search skills having the highest progress.

Although the programme aims to provide support and guidance in pre-employment and education, 212 clients were successfully transitioned into sustainable education or employment over this reporting period.



Moving On

WHFS' Moving On programme also continue to support women who have experienced family and domestic violence. Workshops, held over an 8-week period, provided tailored support to help overcome barriers from adverse experiences and empower independence in career choices. Key focus areas included increased knowledge around work and study pathways, practical assistance with applications and building on soft skills like communication and problem solving. Moving On has now supported over 90 women.

“WHFS encourage, guide, listening to my needs, helping my situation, help me to make cover letters, resumes, and all the training!”



7,077
clients accessed
our services in
2021/22

Our Clients



84% Non-Indigenous



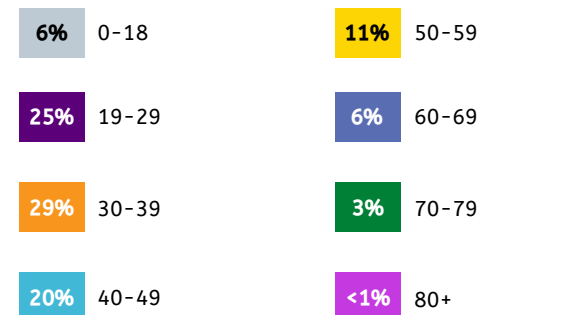
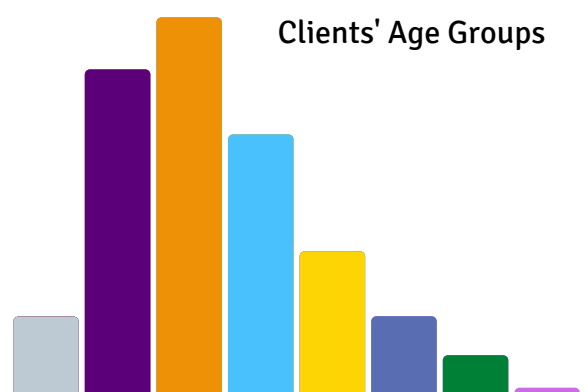
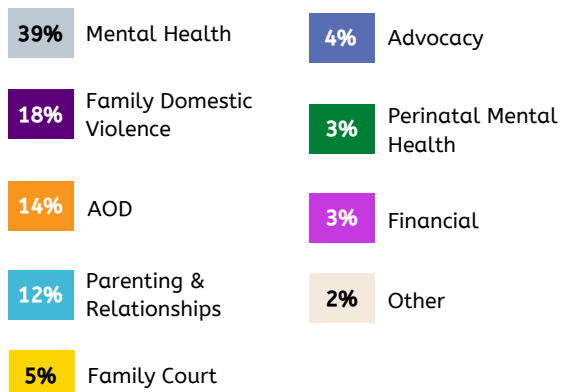
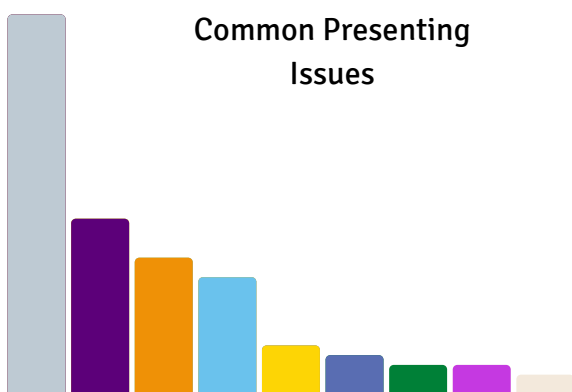
17% Culturally & Linguistically Diverse



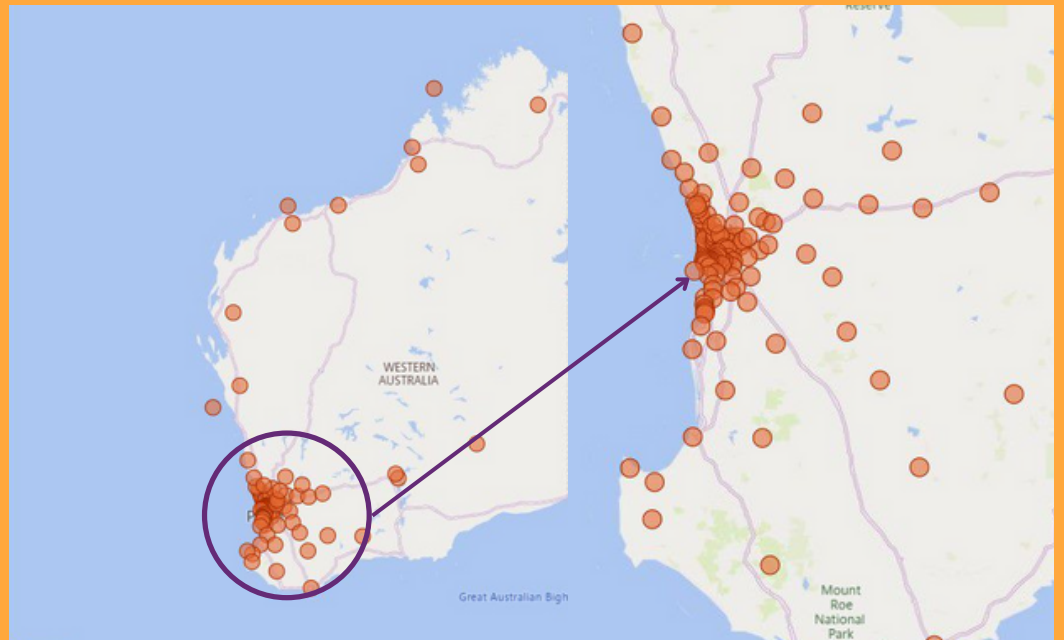
12% Aboriginal & Torres Strait Islander

The philosophy of WHFS is based on an understanding of health within a social context. This social model of health acknowledges that health is determined by a broad range of factors including social, environmental, economic, and biological factors. This model also recognises that differences in health status and outcomes are related to gender, age, socio-economic status, ethnicity, environment, disability, sexuality, and discrimination.

The social view of health also recognises that there are a range of essential elements necessary to support the promotion of health. These elements include addressing issues of equity and access, providing appropriate primary health care, ongoing consultation with all stakeholders, community development processes, consultation and advocacy, preventative health measures, health promotion and education.



Where Our Clients Live



Clients' Country of Birth

Our Clients' Languages Other Than English



Our Staff

Our compassionate team is diverse in age, culture, life experience, and ability.



101 highly qualified female staff aged 21 to 69 work with us to achieve our goals



28% of staff are from a Culturally and Linguistically Diverse background



5% of staff identify as Aboriginal or Torres Strait Islander



35% Counselling & Support

17% Administration & Corporate Support

8% Children & Family

8% Career Services

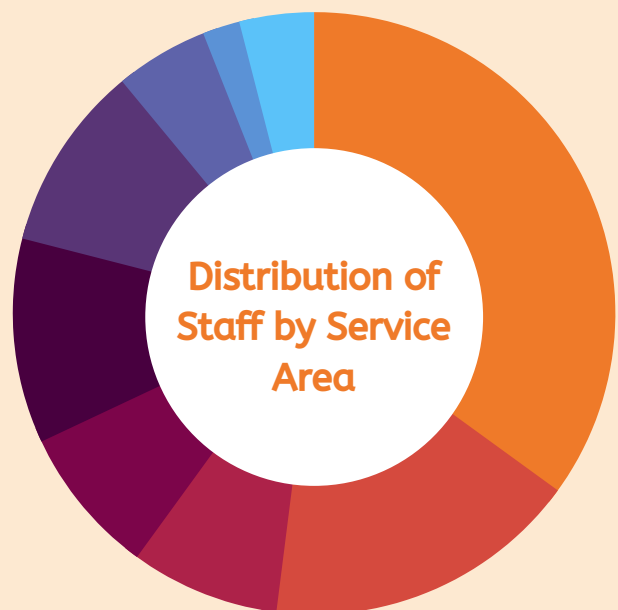
11% FDV

10% Clinical & Medical

5% Health Promotions & Training

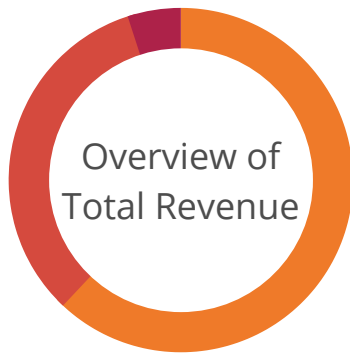
2% Aboriginal Client Services

4% Creche



Financial Overview

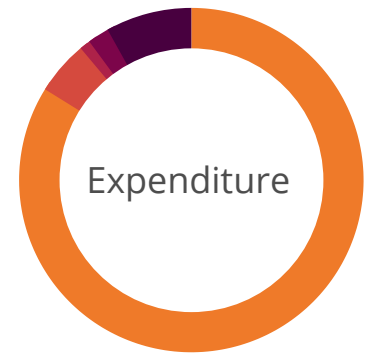
In 2021-2022 our revenue was \$8.9m



- 62% State \$4.82m
- 33% Federal \$2.53m
- 5% Others \$1.25m



- 95% Grant
- 2% Other Revenues
- 3% Revenue From Customers
- <1% Donations



- 83% Staff & Related Costs
- 5% Occupancy & Depreciation
- 1% Insurance
- 3% Communication & Technology
- 8% Other



Thank you for helping support women in our community

Thank you to all our funders and donors

Funders

We would like to acknowledge the following funders and supporters for their valuable contribution.

- Government of Western Australia:
 - Department of Communities
 - Department of Health (Women and Newborns Health Service)
 - WA Country Health Service
 - WA Mental Health Commission
- Australian Government:
 - Department of Social Services
 - Department of Education, Skills & Employment
 - Department of Health
 - Department of Jobs and Small Business
- WA Primary Health Alliance
- Myer Community Fund
- Lotterywest

Donors

We would like to express our gratitude to the organisations and individuals who generously donate to us.

- Myer Joondalup
- Clinipath Pathology
- Public Transport Authority
- Grill'd Leederville
- GIVIT
- Ging Mo Academy

Partners

We also acknowledge our appreciation to our partners:

- ASeTTS
- Palmerston
- Women's Legal Service WA
- Foodbank WA
- Cyrenian House and North Metro Community Alcohol & Drug Service
- Gosnells Women's Health
- Jacaranda Community Centre
- Jean Hailes
- Ngala
- North Metropolitan Health Service - Community Mental Health Adult Program
- North Metropolitan TAFE
- Ruah
- Western Australian Recovery College Alliance

Financial Statements

We are committed to transparency and accountability in our operations. A complete set of audited financial statements is available at our Annual General Meeting or upon request. Our financial reports are also published on the ACNC website.

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