Cultures in the Know
Enabling Multifaith Communities to improve Mental Well-being

A Pilot Project
This project was supported by Manningham Council's Community Development Grant Program

MANNINGHAM
BALANCE OF CITY AND COUNTRY

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ADEC
Project Team

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Published March 2013 by:

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About one in five Australians will experience a mental illness, and most of us will experience a mental health problem at some time in our lives. Therefore good mental health is an important issue for the entire community and a high priority of Manningham Council.

The Manningham Public Health Plan 2009-2013 identifies Council’s health priorities. One of the objectives of the Plan is to enhance mental wellbeing through social inclusion and connections in the community.

A particular area of interest for Council is how to empower people from culturally diverse backgrounds who are traditionally difficult to reach. Many people from these cultures who may be suffering from a mental health issue choose to go to their faith leader rather than a health professional for advice and guidance.

It is important that these faith leaders have the information to be able to identify mental health issues (know the signs and symptoms) and to be aware of the mental health services available in the local area and of referral pathways; and to be able to provide ongoing support.

Conversations between Action on Disability within Ethnic Communities (ADEC) and the Manningham Interfaith Network to explore possibilities of a partnership project with faith leaders, led to the development of the project brief “Cultures in the know - Enabling Multi-Faith Communities to Improve Mental Wellbeing”.

“Cultures in the Know” was submitted to Manningham Council for assessment and I am very pleased to say the highly innovative pilot project was funded through Council’s Community Development Grant Program.

The pilot commenced in 2010 and targeted the Islamic and Catholic faith communities of the UMMA Centre and the Yarra Deanery (six parishes) to provide information on mental health to community members. Subsequently Council has awarded a second community grant to ADEC to deliver phase 2 of this pilot project - Mental Health First Aid training to faith leaders.

Council is very proud to support the local faith leaders and the community through “Cultures in the Know” project and we look forward to ongoing partnerships with ADEC and the CALD community.

Cr Jennifer Yang
Mayor
Section 1

Project Development

What was the history for the project? Why was faith dialogue the theme?

Background & History

Action on Disability within Ethnic Communities (ADEC) was established with the mission of assisting people with disabilities from ethnic backgrounds, and their carers and families. The main purpose was to enable access to services and ensure that service systems are inclusive and responsive to the needs of people from Culturally and Linguistically Diverse backgrounds (CALD). ADEC’s Transcultural Mental Health program has been working towards building greater awareness in ethnic communities about mental health literacy and services; and in turn with services to enhance their practices of cultural responsiveness.

About one in five Australians will experience a mental illness, and most of us will experience a mental health problem at some time in our lives. Faith-based care is the predominant form of care accessed by some people with a mental illness, particularly from non-English speaking backgrounds. Communities working with ADEC over the years reiterate the importance of cultural and religious practises in a) understanding mental illness b) coping with everyday realities of living with mental illness and c) the process of recovery and healing. Help seeking behaviours of individuals, families and groups are informed and shaped by cultural values and spiritual/religious beliefs. Most communities access a trustworthy religious leader, a faith congregation or community endorsed healers either before accessing the mainstream services and/or during the period of illness and recovery. Faith leaders are a critical link between communities that are seeking support to restore their well being and services that are trying to improve the health and well-being in communities.

This gave the impetus to begin conversations with the Manningham Interfaith Network to explore possibilities of a partnership project with faith leaders in the Manningham area.

Further, a project brief titled “Cultures in the Know - Enabling Multifaith Communities to Improve Mental Well-being” was submitted to the Manningham Council.

The project was funded under the Manningham City Councils Community Development Grant Program and commenced in March 2010. The project funding was for a period of 12 months.
Section 2

Literature

What kind of work has taken place with faith leaders in the past?

Published research in the area of mental health and religious faith is scant. Across clinical disciplines there is predominantly an absence of religious perspectives of mental health, for example the complete lack of mention of religion in core textbooks used in the education of mental health professionals. This is despite the fact that thoughtful reviews on the relationship between religion and psychiatric illness have been produced within the medical literature and there is growing empirical evidence suggesting positive association between religiosity and mental health.

On the other side of the field is, pastoral care, chaplaincy and spiritual services for the community. Research in this area is nearly non-existent. However these practitioners clearly recognise the role of spiritual care in mental and physical well-being.

Despite literature and everyday practice experience demonstrating the importance of the interface between faith communities and formal mental health service delivery, few attempts have been made to establish collaboration between the formal service delivery system and religious/traditional practitioners.

The reasons for this struggle to integrate religion or faith based interventions with mainstream mental health models are complex. Contributing factors include:

a) There is a glaring gap between enabling practices and policy documents. For example, the consultation paper ‘Because Mental Health Matters: a new focus for mental health and well-being in Victoria (Department of Health Services, 2008) only makes reference to spiritual well-being relating to indigenous mental health. On the other hand the policy document “Victorian public hospitals and mental health services, policy and funding guidelines 2008-10” explicitly indicates that public hospitals and health services are to ensure that diverse religious, pastoral and spiritual care needs of patients be met.

b) The historical aversion that psychology and psychiatry professionals have to all matters religious.

References:


Taylor, RJ; Ellison, CG etal. 2000. Mental Health services in Faith communities: The role of clergy in Black Churches. Social Work, 45, 1, Jan 73-87.


c) In North America there is evidence to show that client groups seeking mental health care come predominantly from minority backgrounds with religious beliefs/practices whereas the mental health service professionals are predominantly from secular backgrounds and mental health service institutions, both in North America and Europe, are often monochrome and mono-cultural.

d) Increasingly religion and religious values are seen as ‘esoteric’ and inconsistent with the mental health discipline’s quest for being scientific and biological/neurological.

e) Lastly, there is little training in spiritual assessments or faith based dialogue so practitioners from the mental health disciplines lack the necessary tools or skills to use or integrate religious perspective in holistic care giving.
Section 3

Description of the Project - The phases of the project

How did we go about doing the project?

The project was carried out in three phases: Identification of faith groups, focus group discussion to scope their needs and training to meet some of the identified needs.

a) Identification of faith groups:
   ADEC liaised with most faith groups in Manningham interfaith network. After scoping the varying needs and diverse interests, two faith groups were identified; the Umma Islamic Group and Pastoral Care Workers of the Yarra Deanery respectively.

b) Identification of needs:
   To further understand the specific needs of these groups, focus groups were conducted with each of the groups. When conducting the focus groups, the location, period and structure of the focus group were important aspects that were taken into account.

c) Training:
   Based on the needs of the groups ADEC invited the Victorian Transcultural Psychiatry Unit (VTPU) to be training partners. ADEC and VTPU facilitators brainstormed around the need of the groups, importance of bi-cultural workers, inclusion of a moderate and respected spiritual leader as a guest speaker, and inclusion of culturally and linguistically sensitive resources.

The project engaged with the faith leaders of the Umma Islamic Group and Pastoral Care Workers of the Yarra Deanery from 5 Christian parishes in the Manningham LGA. Both groups underwent similar processes during the project.

Both groups were given evaluation sheets to complete after the training.
<table>
<thead>
<tr>
<th></th>
<th>Umma Islamic Group</th>
<th>Pastoral Care Workers of the Yarra Deanery</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Attendance</strong></td>
<td>14</td>
<td>22</td>
</tr>
<tr>
<td><strong>Composition of the group</strong></td>
<td>Imam and faith leaders of the centre</td>
<td>Priests and pastoral care workers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>representing five parishes</td>
</tr>
<tr>
<td><strong>Location</strong></td>
<td>Mosque</td>
<td>Church</td>
</tr>
<tr>
<td><strong>Period</strong></td>
<td>Weekday, late evening, cognition taken of the prayer times. Dinner was served.</td>
<td>Weekday, late evening Late supper was provided</td>
</tr>
<tr>
<td><strong>Duration of the consultations</strong></td>
<td>3.5 hours</td>
<td>3.5 hours</td>
</tr>
<tr>
<td><strong>Facilitated by</strong></td>
<td>ADEC Transcultural Mental Health unit staff</td>
<td>ADEC Transcultural Mental Health unit staff</td>
</tr>
</tbody>
</table>
| **Identified areas of need**         | - How to navigate the system - a brochure or poster to be displayed in the mosque.  
- Ways in which the community can be motivated to attend information session on mental health.  
- Community including Umma management need educational/awareness sessions about mental health issues and where to go.  
- Imam said that he is ready to assist any MH services who want to bring their brochures, he will assist them and also encourage the people to use those services.  
- Need training that talks about all types of mental illness | Mental illness awareness and treatment related issues:  
- Definition, types and recognising mental illness.  
- Issues around women in relation to anxiety and depression  
- Treatment - how to approach a person about it? Where to send a person?  
- How to handle someone who has different belief systems  
- Services:  
  - Resources around services available and types of mental illness.  
  - How to access the system. |

The role of the priest, imam or clergy is seen as pivotal in providing information about mental health services to the congregation and providing reassurance to embrace mental health services.
Section 4

Training & Evaluation

What training was carried out? How did we evaluate?

(a) Umma Islamic Group

The training session for the faith leaders of the Umma Islamic centre was held in the mosque premises. This ensured that cultural practice was honoured and the training session was attended by a group of 8 faith leaders.

The training process with the Umma Islamic group included presentations from a person with lived experience of mental illness and the guest session by Sheikh Issa Abdo, a respected faith leader. The session was interactive and collaborative and took into account the knowledge and skills of the participants.

The resource folder distributed amongst the group included a poster about mental health services in the Manningham LGA (refer page 19), which was requested by the participants to put up on the mosque notice board. The folder also included information about mental illnesses, including translations in Urdu.

Umma Islamic Group - Training Program

AGENDA

Time: 5:30 pm - 9:00 pm (incl. ½hr prayer & ½hr dinner)

Time of training: 2 ½hrs

5:30pm: Opening prayer
5:35pm - 5:45pm: Introduction
5:45pm - 6:00pm: Positive Story of recovery - Evan Bichara
6:00pm - 6:30pm: What is mental health and what is mental illness?
6:30pm - 6:45pm: Prayer
6:45pm - 7:15pm: What is mental health and mental illness? Where to go for help? (contd.)
7:15pm - 7:30pm: Advocacy & Rights
7:30pm - 8:00pm: Dinner
8:00pm - 8:30pm: A message from the Imam
8:30pm - 8:45pm: Evaluation & Resource Folder
8:45pm- 9:00pm: Summary
(b) Pastoral Care Workers of the Yarra Deanery

The training session was held for the pastoral care workers of five parishes in the Manningham LGA at church premises. The group of 19 participants included ministers, pastors and pastoral care workers.

During the training, a council representative of the Manningham mental health working group made a presentation about the mental health services available and how to access them.

The resource folder distributed amongst the group included the poster ‘Finding the right help: Services for culturally diverse people in the Eastern Region’ that was printed with the support of the Manningham community development Grant (refer page 20, 21). The folder also included fact sheets on different mental illnesses.

Mental Health Issues: Response, Recognition and Referral 23rd August 2012

AGENDA

Time: 7.00 pm - 10:00 pm (incl. 15 minute break)

Time of training: 2 hrs 45 minutes

7:00pm - 7.05pm: Introduction
7.05pm - 7.15pm: Ice Breaker
7.15pm - 7.30pm: Personal Stories
7.30pm - 8.30pm: Mental Illness Awareness
8.30pm - 8.45pm: Break
8.45pm - 9.15pm: Mental Health Services and Access - Vicki Martinez
9.15pm - 9.45pm: Negotiating the System and Cultures
9.45pm - 10.00pm: Feedback and Evaluation
Evaluation Questions & Responses

1. Discuss 3 things that stood out for you in the training program?

2. Did this training meet your needs (expectations)?

   0 1 2 3 4 5 6 7 8 9 10
   Very poor       Very satisfactory

3. What surprised you about the training?

4. How if any would you change the training program?
   - Time/duration
     Keep it as is......Increase the time......Decrease the time
   - Presentation format and topics
     No change...............Add the following
     (please mention what you would like to add)
   - Change the format (please say how to change the format)
   - Food
     Keep it as is............no need for food.............change
   - Food quality
   - Facilitators
     No change.............Add facilitators..........too many facilitators

5. Would you recommend the training to other groups?
   Yes.................Not really................Yes, with change

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Things that stood out in the training program

"The explanation of where to seek help"
"The importance of listening and caring"
"Emphasis on holistic"
"The introduction of the resources we are provided in our community"
"Mental health in a more clear understanding way"

Did this training meet your needs?

"very satisfactory" - 81% responses

What surprised you about the training?

"Good presenters"
"Clarity"
"Enthusiasm of trainers"
"How much I didn’t know"
"The topics based on the audiences needs"
"Easy to understand"

How if any would you change the program?

"Keep as it is “ - 80% responses
"very good but a bit long"
"More examples and stories"
"include role playing"
"more examples from community"

Would you recommend the training to others?

"Yes" - 90% responses
Perspectives - Questionnaire

What do the key stakeholders (KS1 & KS2) say about the project?

• Why did you think it necessary to support this project?

  KS1: The successful past projects that have been carried out by the transcultural mental health program at ADEC.

  KS2: People with mental health issues may, in the first instance, discuss their issue with their faith tradition leader, a priest, minister, imam, rabbi, monk, etc. Such faith tradition leaders are often well trained in providing theological education and spiritual direction, but they are often not trained in the identification and appropriate referral of mental health issues. It was to bridge this education gap that Manningham Interfaith Network took an active role in this project. Several participants in the project run small businesses in the City of Manningham and thought this program would be very valuable to small business.

• Are you aware of any similar activities done in the past by the sector to address these issues?

  KS1: Not in such an interactive and innovative manner

  KS2: Fr. Wayne Edwards, Parish Priest of St Pius X Catholic Church in Heidelberg West, ran a Mental Health First Aid Program that appeared to be very successful, but we are not aware of any such program having been run in the City of Manningham

• What do you believe the project has achieved?

  KS1: The project was innovative, practical and interactive. It promoted intercultural understanding of mental health by placing it in the context of the unknown and often misunderstood. The project demonstrated that NESB communities have a unique approach to the mental health issues and sends the message that if their approach is understood, respected and incorporated it can effectively aid mental health recovery.

  KS2: It has significantly raised the level of awareness about mental health issues for those who participated in the project. These participants have also spoken to other members of their communities and further raised the level of awareness.

  The participants in the program have gained valuable skills in relation to the identification of mental health issues and information about the appropriate level of referral.
Given the above, what is your organisation’s long term commitment to continue this kind of work?

**KS1:** ADEC has already acknowledged the need to continue to make the general community and general services system of how to address Mental Health issues within the cultural context and made a commitment to continue to incorporate into ADEC’s strategic planning.

**KS2:** Manningham Interfaith Network is happy to work with professional organisations such as ADEC in opening the doors to faith communities in order that such communities can have the benefit of professional training in this critical area.

Do you feel there is room for continued dialogue between interfaith and mental health?

**KS1:** Not a question of if there is room, but the project has demonstrated that this is the most effective way of dealing with mental health issues in a culturally responsive and responsible manner giving justice to the wisdom of the members of those communities and creating true partnerships.

I see this as an effective way of marrying the western concepts and strategies with the wisdom of ethnic communities and utilizing as a source of information.

**KS2:** Yes. The current project was very successful in raising the level of awareness, but we have hardly scratched the surface. The communities that have participated in the project to date have indicated that they would welcome follow-up training and there are members of these communities who have not been exposed to this educational opportunity. In addition, there are faith traditions in the City of Manningham who have not participated in the project.
Section 6

Strengths and limitations

*What worked well and what could be changed.*

What worked well?

- **Enthusiastic/ resourceful groups**

  Both Umma Islamic group faith leaders and the Yarra deanery pastoral carer workers were a group of keen participants. This enabled for a rich environment of shared learning. The groups had a clarity around their needs and expectations which helped the training immeasurably.

- **Having a culture broker/mediator (Ahmed Tohow/Charles Belnaves)**

  The critical link for the project was the presence of a culture broker. A culture broker in this instance acted like a cultural consultant/mediator who was able to articulate clearly the vision and role of the faith group vis-à-vis this project.

- **Support of Council**

  The support and belief in interfaith dialogue from Manningham Council validated the project team and its goals.

- **Location**

  Having focus group and training sessions in the Mosque and the Church honoured the cultural practice of the faith group. This provided the project team with a space that was safe and secure for sharing to occur.

- **Faith Leader’s values**

  Having Sheikh Issa Abdo speak on mental wellbeing for Umma Islamic faith leaders created a synergy and resonance with Umma group values. Having the Sheikh endorse and acknowledge the issues of mental health and well-being was highly significant for the Umma Islamic group.
What could be changed?

- **The process of collaboration**
  
  It took longer to liaise and build a collaborative partnership with faith networks than what was anticipated. Building a trustworthy relationship that paves the way for partnerships takes time.

- **Administrative challenges**
  
  There were numerous administrative and bureaucratic challenges. For example, written permission at every step of the project and organising meetings with community leaders (who gave their time because of their goodwill towards the project).

  Although verbal feedback was easily and readily obtainable written feedback ie: evaluation forms were a challenge to administer on the day of training and equally hard to follow up later.

- **Interest versus action**
  
  Several faith groups showed initial interest and discussions were held with these groups. However, only two groups followed through with their initial interest.

- **Collaborative forum between faith leaders and mental health practitioners.**
  
  There was interest shown in participating in a collaborative forum. However the structure, format, process and outcomes of such a forum need a lot more planning. Commitment to such an activity was not sustained.
Section 7

Recommendations

What are the project outcomes? What is sustainable? What next?

ADEC & VTPU

Approaching and presenting to other Councils (i.e. Darebin) to scope their interest for a similar activity.

Visually documenting the process (i.e. filming the focus group and the training or at least parts of it).

Bringing together a collaborative forum

Umma Islamic Group

The group requested mental health resource information to include on their website which was provided.

A flyer of mental health services in Manningham was prepared and put up on the mosque wall and mosque information board as per request from the group.

Pastoral Care Workers of Yarra Deanery

The group expressed a need to have further training in mental health first aid. In response to that ADEC has applied for funds for training from Manningham council.
Resources

Finding the right help for mental health problems
Manningham City Council Area

If you or a family member you are caring for are not coping with day to day activities and believe it may be worth seeking help, following are some places you can contact:

**General Services:**
- Your local General Practitioner (GP) or doctor
- Manningham Community Health Service: (03) 8841 3000
- Central East Mental Health Service 1300 721 927
- Mental Illness Fellowship: (03) 8480 4222

**Youth Services:**
- Child and Adolescent Mental Health Service (CAHMS): 1300 721 927
- Manningham YMCA Youth Services (03) 9848 5400
- Headspace: (03) 9027 0100

**Adult Services:**
- Central East Mental Health Service: 1300 721 927
- Manningham Community Health Service: (03) 8841 3000

**Parent and Children Services:**
- Child and Adolescent Mental Health Service (CAHMS): 1300 721 927
- Manningham Maternal and Child Health: (03) 9840 9188
- Manningham Children Services: (03) 9840 0333

**Senior Services:**
- Manningham Aged and Disability Services: (03) 9840 9700

**Advice Lines:**
- Mental Health Advice Line: 1300 280 737
- Lifeline Australia: 13 11 14
- Beyond Blue: 1300 224 636
- Mens line: 1300 78 99 78

**Some Useful Websites:**
- Beyond Blue: [www.beyondblue.org.au](http://www.beyondblue.org.au)
- Mental Health Navigation Tool: [www.gephmhtool.com](http://www.gephmhtool.com)

If you need interpreting services to access any of the services ask for an interpreter from the service you are calling or please call TIS interpreting service on 131 450 (this may incur a fee)
## Finding the Right Help for Mental Health Problems:

### Services for culturally diverse people in the Eastern Region

Note: All mental health services in the eastern region are open to people from culturally diverse backgrounds. Organisations listed below offer services in a culturally sensitive manner.

<table>
<thead>
<tr>
<th>Organisation/Service Name</th>
<th>Service provided</th>
<th>Languages</th>
<th>Cost</th>
<th>Location &amp; Contact</th>
<th>Website</th>
<th>Referral Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>EAH (Eastern Area Health) Family Relationship services for Carers</td>
<td>The Family Relationship Services for Carers (FRSC) is a state-wide service providing counselling support to family members caring for someone of any age, with a disability, including Mental Health, social, relationship difficulties.</td>
<td>Bilingual interpreters available, Interpreters also used.</td>
<td>Free for Carers</td>
<td>Building 2 295 Canterbury Road Box Hill Vic. 3128</td>
<td><a href="http://www.eah.com.au">www.eah.com.au</a></td>
<td>GP, Family, Self referral</td>
</tr>
<tr>
<td>Whitehorse Community Health Service</td>
<td>The Counselling andCasework Support services offer both individual and group therapy sessions to people with a range of concerns including depression, anxiety, relationship difficulties,</td>
<td>Free</td>
<td>Whitehorse Community Health Service Ltd Level 2 343 Camberwell Road Box Hill Vic. 3128</td>
<td><a href="http://www.whitehorse.org.au">www.whitehorse.org.au</a></td>
<td>Self referral</td>
<td></td>
</tr>
<tr>
<td>Monash Link Community Health Service Limited</td>
<td>Provides physically accessible and culturally appropriate counselling services to adults, adolescents, children and families. Its services assist people with a wide range of concerns including domestic violence, alcohol and drug use, depression, anxiety, relationship issues.</td>
<td>Small Fee</td>
<td>Glen Waverley Clinic 1216/1218 Waverley Rd, Glen Waverley Vic. 3150</td>
<td><a href="http://www.monashlink.org.au">www.monashlink.org.au</a></td>
<td>Self referral, via a friend, family member, case, local GP, hospital or other health professionals</td>
<td></td>
</tr>
<tr>
<td>Manningham Community Health Service</td>
<td>Counselling for individuals and couples including Cross cultural counselling, migration and adjustment conflict, life stresses including grief and loss and family violence.</td>
<td>Free</td>
<td>Unit 1, 1020 Doncaster Road, Doncaster East Vic. 3109</td>
<td><a href="http://www.manningham.org.au">www.manningham.org.au</a></td>
<td>Self referral, GP, family members and external agencies</td>
<td></td>
</tr>
<tr>
<td>Carers Support Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Villa Maria Carer Support</td>
<td>Villa Maria's Eastern Community Services Carer Support Programme assists carers of people with disability or mental illness to access services in the community.</td>
<td>Free</td>
<td>Villa Maria Registed Office 8 Clapham Park Road Kew Vic. 3101 Tel (03) 9865 7650 FAX (03) 9865 7648</td>
<td><a href="http://www.villamaria.com.au">www.villamaria.com.au</a></td>
<td>No referral required</td>
<td></td>
</tr>
<tr>
<td>Carers Victoria</td>
<td>Carers Victoria provides services and supports to caring families from a wide range of cultural and language backgrounds.</td>
<td>Free</td>
<td>Head Office Level 7/37 Albert Street Footscray Vic. 3011 Tel 9396 3300 Free call 1800 242 834</td>
<td><a href="http://www.carersvictoria.org.au">www.carersvictoria.org.au</a></td>
<td>No referral required</td>
<td></td>
</tr>
<tr>
<td>Uniting Care Community</td>
<td>Provides a range of community-based services for other people, people with disabilities, those with a mental illness, their families and carers as well as other vulnerable and disadvantaged people living in Melbourne's South &amp; East.</td>
<td>Free</td>
<td>Building 5, Brandon Office Park 830 - 840 Springvale Road Glen Waverley Vic. 3150</td>
<td><a href="http://www.uniting.org.au">www.uniting.org.au</a></td>
<td>No referral required</td>
<td></td>
</tr>
</tbody>
</table>
### Psychiatric Disability Rehabilitation and Support (PDRSS)

<table>
<thead>
<tr>
<th>Service</th>
<th>Location</th>
<th>Description</th>
<th>Interpreter or Bilingual worker required</th>
<th>Contact Details</th>
<th>Website</th>
<th>Referral required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Illness Fellowship Victoria - C'Wren House</td>
<td>Mallee</td>
<td>Offers Multicultural responses, which take into account the needs of people from culturally and linguistically diverse backgrounds and tailor programs to suit.</td>
<td>Enhanced and Multicultural workers and interpreters used</td>
<td>Free: Tel: (03) 9673 2250</td>
<td><a href="http://www.mfellowship.org">www.mfellowship.org</a></td>
<td>Referral required</td>
</tr>
<tr>
<td>Haloyn Centres - Eastern Access Community Health</td>
<td>Victoria</td>
<td>Haloyn provides a range of services designed to enhance the quality of life and the living skills of people with a psychiatric disability. The services provided at the centre are divided into these streams: individual support, group activities, drop-in.</td>
<td>Free</td>
<td>Head Office: 3 The Avenue Ferntree Gully Vic: 3156; Ph: (03) 9758 8508; Fax: (03) 9758 8586</td>
<td><a href="http://www.each.com.au">www.each.com.au</a></td>
<td>Referral required</td>
</tr>
<tr>
<td>Mind (formerly Richmond Fellowship of Victoria)</td>
<td>Victoria</td>
<td>Mind offers a range of services to assist people in their recovery from a mental illness and to secure safe and stable accommodation.</td>
<td>Enhanced and Multicultural workers and interpreters used</td>
<td>Head Office: 11515, 11525, 11535, 11545, 11555</td>
<td><a href="http://www.mindsaustralia.org.au">www.mindsaustralia.org.au</a></td>
<td>No</td>
</tr>
</tbody>
</table>

### Psychological / Psychiatry Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Location</th>
<th>Description</th>
<th>Interpreter or Bilingual worker required</th>
<th>Contact Details</th>
<th>Website</th>
<th>Referral required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Health Adult Mental Health Services</td>
<td>Victoria</td>
<td>Eastern Health provides a range of clinical treatment services for those experiencing an episode of severe mental illness.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.easternhealth.org.au/services/mentalhealth">www.easternhealth.org.au/services/mentalhealth</a></td>
<td>Yes</td>
</tr>
<tr>
<td>Central East CAT (crisis and assessment team)</td>
<td>Victoria</td>
<td>Emergency services, Case management services.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.easternhealth.org.au/services/mentalhealth">www.easternhealth.org.au/services/mentalhealth</a></td>
<td>Self Referral</td>
</tr>
<tr>
<td>Kooringa Community Mental Health Service</td>
<td>Victoria</td>
<td>Psychiatric assessment, treatment and ongoing support. Mobile Support and Treatment Services.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.easternhealth.org.au/services/mentalhealth">www.easternhealth.org.au/services/mentalhealth</a></td>
<td>Self Referral</td>
</tr>
<tr>
<td>Aged persons mental health service (APMHS)</td>
<td>Victoria</td>
<td>Provides a range of specialist mental health services for people over the age of 65 years with a mental illness. They experiencing behavioural disturbances due to dementia.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.easternhealth.org.au/services/mentalhealth">www.easternhealth.org.au/services/mentalhealth</a></td>
<td>Self Referral</td>
</tr>
<tr>
<td>Child, Youth &amp; Family Mental Health Service</td>
<td>Victoria</td>
<td>Eastern Health CAWHS is a localised mental health service for children and young people up to the age of 18 years who are experiencing symptoms of a psychiatric disorder or severe emotional and behavioral disturbance.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.easternhealth.org.au/services/mentalhealth">www.easternhealth.org.au/services/mentalhealth</a></td>
<td>Self referral or referred by family, friends, health care providers and other service providers</td>
</tr>
<tr>
<td>Waverley Community Mental Health Service</td>
<td>Victoria</td>
<td>Case management, Psychiatric Disability services.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.easternhealth.org.au/services/mentalhealth">www.easternhealth.org.au/services/mentalhealth</a></td>
<td>Referral Required</td>
</tr>
</tbody>
</table>

### Help Lines

<table>
<thead>
<tr>
<th>Service</th>
<th>Location</th>
<th>Description</th>
<th>Interpreter or Bilingual worker required</th>
<th>Contact Details</th>
<th>Website</th>
<th>Referral required</th>
</tr>
</thead>
<tbody>
<tr>
<td>MensLine services</td>
<td>Victoria</td>
<td>MensLine provides confidential counseling services to men from all backgrounds who have relationship or family concerns.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.mensline.org.au">www.mensline.org.au</a></td>
<td>Self Referral</td>
</tr>
<tr>
<td>Beyond Blue</td>
<td>Victoria</td>
<td>Provides telephone counseling services for those with Depression and Anxiety disorders.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.beyondblue.org">www.beyondblue.org</a></td>
<td>Self Referral</td>
</tr>
<tr>
<td>Immigrant Women's Domestic Violence Service</td>
<td>Victoria</td>
<td>A state-wide service providing culturally sensitive services to meet the needs of women and children from culturally and linguistically diverse backgrounds affected by domestic violence.</td>
<td>Free</td>
<td>Tel: (03) 9842 5888; Fax: (03) 9842 5888; AH: 1300 721 927</td>
<td><a href="http://www.immi.gov.au">www.immi.gov.au</a></td>
<td>No referral required</td>
</tr>
</tbody>
</table>

### Directories of Mental Health

Marrinham Mental Health Help Card
Final Edition - April 2012. For Additions, deletions and queries email info@addc.org.au or Phone: (03) 9455 1661
This resource was developed by ADEC with support from Marrinham City Council. It is also available to download from www.addc.org.au.

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Acknowledgements

Mayor Cr. Jennifer Yang
Manningham Council

Vicki Martinez & Kirsten Reedy,
Manningham Social Planning and Development Program

Manningham City Council’s Community Development Grant Program

Manningham Mental Health Working Group

Garry Nolan
President, Manningham Interfaith network

Rashda Haque
Member, Manningham Interfaith network

Sheikh Issa Abdo

Imam and faith leaders of the Umma Islamic Centre, Doncaster

Yarra Deanery Pastoral Care Workers

Charles Balnaves
Yarra Deanery Resource Coordinator

Evan Bichara
Consumer Advocate
Victorian Transcultural Psychiatry Unit

St. Peter and Paul Parish Church