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Where's the Door?

A report into community-focused, collective impact approaches to improve knowledge of, and connection with, available supports



September 2021



Acknowledgements

Imagined Futures operates on the traditional lands of the Whadjuk Noongar people. We recognise their continuing connection to land, waters and culture, and pay our respects to their Elders, ancestors and emerging leaders.

This report has been developed drawing on the experience and knowledge of Imagined Futures members, including the Where's the Door Sub-Committee participants. The report also draws on the input and knowledge sharing of the wider Imagined Futures network and the 159 people who took the time to complete the short survey.

The report was prepared for Imagined Futures by Pauline Logan Consulting & Associates.

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About Imagined Futures

Established in 2013, Imagined Futures is a Collective Impact Initiative that brings innovation to addressing complex social issues for communities in Fremantle, Cockburn, and Melville. Imagined Futures recognises that tackling complex social issues is beyond the capacity of any single organisation and the only way to effect large-scale change is by working together, pooling and mobilising the resources available in our community to achieve shared goals.

Our mission is to mobilise the collective resources of not-for-profit organisations, local, state and commonwealth government agencies, business and community members, to provide all individuals and families in the South West Metropolitan region with the opportunity to achieve their full potential.

Imagined Futures is based on a collective impact approach and attracts a blend of financial and in-kind contributions, including state government funding, local government contributions, Lotterywest and other grant funding, and other member contributions. Imagined Futures is auspiced by St Patrick's Community Support Centre. IF is recognised by the Western Australian State Government as the District Leadership Group for the South West Metropolitan Region.

Imagined Futures has a proven track record of accomplishment in bringing a new way of working, fostering collaboration that is beyond information exchange and about strategy, action and implementation.

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Executive Summary

Overview

The Where's the Door? Project was initiated in 2020 in recognition that COVID-19 was impacting increasing numbers of people who were new to hardship and vulnerability and didn't know about available community supports and services.

A Lotterywest grant was received in 2021 to support Imagined Futures (IF) to improve and test new ways of connecting vulnerable people to available supports, targeting the areas of mental health, family and domestic violence and financial hardship. Initial plans were to develop a Triage Model. Following developments since the project first commenced, and discussion with the project sub-committee and IF Leadership Group, it was agreed to shift the exploration to a multi-pronged model.

The project approach included:

- Consultation with stakeholders in the IF network and more widely.
- The development and distribution of a community survey through the IF network and other networks, including Home Hub and WACOSS e-news, to better understand how people currently connect with community help and supports, and where people go to look for information.
- The exploration of other initiatives that have emerged since the project was first initiated, including Anglicare's Friend in Need project.
- A brief environmental scan towards a model for action including insights from people with lived experience, Hilary Cottam's research, collaboration and collective impact approaches, integrated service delivery, community engagement principles, brand and marketing approaches, other community capacity building initiatives and resources including Directories and tools.

Recommended strategies for a community-focused, collective impact approach

A range of strategies are recommended for the IF partners to consider, prioritise, and develop into an action plan to work collectively and improve outcomes for community members new to hardship and vulnerability.

The overarching recommendation is to develop a multi-pronged community engagement and capacity building approach, putting people at the heart, and developing and leveraging natural community connectors and supports, and the resources and strengths of the IF collective impact partnership.

A key theme for the approach from the consultations and environmental scan was to KEEP IT SIMPLE, harness what's available and integrate the strategies with existing services and approaches where possible.

The strategies for the IF partners to explore are:

Take a collective approach to community engagement and capacity building

There is untapped potential to harness and direct the collective engagement efforts of the IF partners to strengthen their impact. A suggested path is to:

- Map the ecosystem of community touchpoints from the perspective of targeted community members, informed by the community survey responses.
- Map current engagement activities of IF partners and where they overlap with touchpoints.
- Identify gaps, aligned with the insights from the community survey and IF partner knowledge, and identify opportunities to expand engagement to address the gaps and for integrated approaches. For example, a quick win could be to expand the Alliance Against Depression work targeting GP's for a more integrated and holistic approach to health to provide GP's with information across all focus areas. This also recognises the interrelationship for people between the focus areas.
- Develop a coordinated IF partner engagement plan. Sample mapping tools for touchpoints and engagement are provided at Appendix 5.
- Explore and include cross-partner engagement.
- Explore and include cross regional collaboration – e.g., for targeting business.
- Leverage the engagement activities of others working in the IF region.
- Align place-based approaches with sector / target group approaches such as CLCWA, Playgroup WA, GRAI Village Hub and Home Hub.
- Link with and be informed by other initiatives e.g., 100 Families WA, Social Ventures Australia.

Build a community connector movement

- Build a capability focused Community Connector movement, skilled in community connection and support, across the wider eco-system including local government and community service front line workers (including library staff, recreation centre staff, community safety officers, rangers, visitor centre staff), sporting clubs,; community organisations such as Men's Sheds and Rotary Clubs; Befriend; Act, Belong, Commit; community and neighbourhood centres; Town Teams; playgroups; new parent classes and other community programs; schools; Parent & Citizen Associations; GP's (newer GP's can be more likely to see people in crisis); other health workers; hospital staff; hospital visitors; local councillors; HR staff in workplaces; counsellors; churches and religious groups; local businesses; and business networks; cultural groups and informal networks and community influencers.
- Explore building on the Neighbourhood Connect initiative.
- Consider a collective program name / branded approach to focus on reaching out to, and connecting with, people in the community. This could build on the successful connector work that has already been happening with the recently extended Library Connect project and the Neighbour-to-Neighbour program. For example, branding to the *Imagined Futures – Community Connectors* program. A place-based focus could also be incorporated with names such as *Connector Fremantle*, *Connector Melville*, *Connector Cockburn* and for target groups such as *Connector Families* and for network members and champions such as *Connector Businesses* and *Connector GP's*.

Build community literacy on available supports and services

Ensure engagement activities include a focus on literacy building:

- For community members, including informal community leaders and influencers, on available supports and services.
- For community service workers and volunteers on available supports and services.

- Through the Friend in Need tools (workshop and App) being provided via IF partners through a train the trainer model, both as a stand-alone tool and integrated with other agency programs and services. This could building on the work that Uniting WA is doing with Anglicare to help develop a train the trainer model.
- Through integrating other tools such as the CLCWA legal health check tool for those experiencing family and domestic violence.
- Through targeting groups who are a key source of community connection and support. For example, with the role GPs play for people, there is an opportunity to work with Notre Dame (and other education institutions) to improve awareness of the GP connector role and sources of support.

Expand and target messaging and promotion

- Expand marketing, promotion, and messaging to utilise a range of channels and digital platforms informed by the community survey responses. For example, posting to community Facebook pages.
- Leverage specialised skills and resources within IF partners for digital marketing and promotion, responding to the results of the community survey and partner knowledge of their communities.
- Explore effective ways of marketing to target audiences and consistent, simple messages for initial engagement. Keep messaging simple for example – link to a couple of initial entry points.
- Explore a coordinated community campaign in the IF partners region to build awareness and accessibility to available supports. This could be aligned with building a Community Connector brand and movement.

Develop more integrated service approaches

- Develop principles for ways of working, building on successful strategies such as FWHC and FRFSN (and no doubt others) providing ‘warm’ referrals, minimising the need for people to re-tell their story, and linking people with interim supports so they have a sense of hope while they wait for a particular service.
- Ensure workers have up to date tools to support effective referrals and links to interim supports.
- Consider an integrated induction process for new workers to link with other IF partners to help build knowledge and relationships quickly and effectively.
- Explore opportunities for collaborating and improving worker knowledge and referral pathways with the local Centrelink offices.
- Explore technology tools to support holistic case management with an early intervention and collaboration focus such as offered by ECINS (Empowering Communities with Integrated Network Systems).

Provide an ongoing forum for sharing and developing good practice

- Provide for broad sharing across the IF collective on strategies implemented and learnings, emerging areas of need and new initiatives, including digital marketing and communications.
- Explore ways to involve relevant IF partner staff.
- Consider creating a lived experience reference group or processes to involve people with lived experience.

- Build worker knowledge of current (and continually changing) support and service options

Leverage and improve tools, directories, and resources

- Leverage and promote existing resources better:
 - Links to a selection of Directories on IF partner websites (if not already).
 - Develop tiles for general and social media promotion and target specific cohorts and postcodes.
 - Strengthen search engine optimisation and Ads e.g., for WA Connect and local government directories. Link with Anglicare and learn from their digital work.
- Approach owners of Directories and tools to provide a better user experience such as no use of acronyms, inclusion of a service description, inclusion of online resources, real time data – update if long waitlist. WACOSS indicated they are open to quick win enhancements.
- Have a Directory update day – like replace your smoke alarm battery day.
- Ensure all IF partner services list with all relevant Directories that users may access.
- Participate in testing the Friend in Need App currently in development.
- Explore IF partner interest in, and feasibility of, a curated referral tool for the IF region.

Capture data on collective efforts and share learnings

- Develop a simple data collection and shared reporting approach for IF partners on engagement and connector strategies to maintain a collective focus and track progress.
- Share learnings and stories with the IF network to celebrate success and enhance ways of connecting vulnerable people to available support.

Project background

The project was developed as part of the IF COVID-19 Response Plan, in response to the social and economic impact of COVID-19 on the community, and the greater numbers of people needing assistance, many of whom have never accessed social services before.

Aims

The project aims are to improve and test new ways of connecting vulnerable people to available supports and:

- Enable timely access to services by ensuring people are aware of the supports available to them and how to access relevant supports.
- A broad understanding and increased literacy for community members to help support and link family, friends, and neighbours to available supports.
- Build on existing knowledge and approaches and develop the best approach to ensuring people seeking assistance across the Southwest Metropolitan region receive the right help, at the right time, by identifying and engaging early with people seeking or needing assistance.

Focus areas

Focus areas include:

- Family and domestic violence
- Mental health
- Financial hardship / those seeking Centrelink assistance for the first time (including housing and tenancy supports)

Success measures

Success measures were identified as:

- A shared understanding of available services, supports and referral processes between Imagined Futures partners.
- A co-designed approach to improve the literacy of the wider community to available supports, leveraging existing resources and infrastructure.
- A shared approach to data collection to capture demand (including needs met and unmet) by people newly seeking support.

Project approach

The project approach comprised:

- **Consultation** - including:
 - People from the emerging cohort seeking assistance for the first time,
 - Sector stakeholder and community networks to ascertain requirements, learnings from current initiatives, available resources and effective methods of engagement, and
 - The Anglicare Friend in Need project and learnings from workshops
- **Environmental scan** – to build on the consultation and towards a model for action.
- **Model development** – develop a Model for action based on the findings from consultations and environmental scan.

Initiatives to be leveraged and built upon were identified as:

- Anglicare – Friend in Need model and exploring and adapting the model to be delivered by the Imagined Futures network, including relevant content on available services and resources for priority focus areas.
- Imagined Futures – Alliance Against Depression project, community development approach and implementation plan
- Fremantle Library Connect project learnings and resources
- Local government initiatives to connect with community members
- Hygge’s Home Hub platform learnings and resources
- Fremantle Women’s Health Centre Community Connector project learnings and resources
- Fremantle Rockingham Family Support Network experience learnings and resources
- Existing tools and resources

Stakeholder consultations

Overview

Stakeholder engagement, including semi structured interviews, was undertaken with a range of stakeholders within the Imagined Futures network and more widely between July and September 2021.

A wider consultation was undertaken than originally planned to inform the agreed shift to exploring a multi-pronged model.

Appendix 1 provides details of the people consulted.

Anglicare – Friend in Need (FIN) project

The project was identified by IF as a key strategy to explore for the Where's the Door? project following a presentation by Anglicare at a project rescoping workshop on 26 May 2021.

FIN workshops

- The project is an education program initiated by Anglicare as a COVID-19 crisis response to help build community capacity to respond to the crisis.
- Workshops (2 hours) are provided to help develop the skills, knowledge, and confidence of community members to support others going through issues such as mental health, relationship of financial difficulty. A broad overview of the workshop is provided at Appendix 2.
- Anglicare is funded to provide workshops (2 hours) to the end of 2021.
- The FIN workshops have been offered by LGAs in the IF region as well as other LGAs, Men's Sheds, Community Resource Centres, multicultural organisations, and TAFE – English as a second language classes.

FIN train the trainer model

- There is scope for a train the trainer / building community of practice type model – BGC have adapted workshop materials for their workforce on the agreement that they share changes with Anglicare.
- The IF Leadership Group have endorsed implementing a train the trainer approach for the FIN workshops.
- Uniting WA is linking with Anglicare to take forward the train the trainer model and co-design to roll out via IF and the Alliance Against Depression (AAD). WACOSS and LGAs are also keen. The Family Support Network may be able to incorporate key aspects into their intensive case management and assessment and coordination work, taking an integration approach to add to people's toolbox as and when they need it / have capacity.
- Workshops can be standalone or combined with other activities. The AAD project worked with Melville Care Hubs (which aim to respond to people's social isolation and create opportunities for engagement) to offer a workshop on where to get help information (Fremantle Mind and Anglicare) combined with other activities (yoga and golf).

- Anglicare would be happy to present the workshop to the IF network and for IF partners to further explore implementing a train the trainer model of delivery and adapting the content where appropriate.
- There may be value to build a community of practice with those who are trained and deliver the workshops / materials.

FIN App and potential FDV tool

- Anglicare is also developing an App and are exploring how to promote and connect better with people digitally.
- The App, funded by Lotterywest, provides an A – Z Directory of life events e.g., divorce, suicide – giving a brief snapshot of life events, what people may feel in a particular situation, links to resources and services (WA Connect and others), what people can do to help in the short, medium, and longer term and sources of professional help.
- The App could be a useful tool for families who like online.
- There is the opportunity to register and participate in App testing app (late 2021) - <https://www.friendinneed.org.au>
- Anglicare also developed an Escape pack targeting people escaping family and domestic violence. The pack didn't proceed as it was not successful in securing funding. There may be an opportunity to explore and adapt the tool. Noting that some stakeholders expressed concerns that a one size fits all type of resource is not always effective and can get out of date quickly.

Project learnings

- Feedback in workshops has confirmed the experience that when in crisis people can't always look at the bigger picture or are not likely to ask for help.
- Workshops (adapted to workshop audiences) have been well received - equipping people with literacy on signs of struggle, how to offer practical support and link to existing resources and sources of information.
- Survey feedback showed that:
 - 96% of participants felt more confident to help a friend who is struggling
 - 98% found the training useful
 - 78% of participants were inspired to act
- Face to face workshops achieve more engagement and foster relationship building than online workshops.
- The main interest in workshops has been from 40- to 50-year-old women.

Consultation themes

There was overall interest and enthusiasm for a multi-pronged model. Several of the proposed strategies were canvased and refined with feedback others resulted from discussions with those consulted.

Themes from consultations included:

Needs, barriers and access – people seeking support

- There are different demographics and needs across the IF region.
- Reaching those new to hardship is difficult through existing systems.
- Those new to hardship may be reaching out for the first time.
- People often lack awareness of available supports and can be reluctant to approach services / experience stigma.
- Reaching out and linking with supports can be more challenging for people with low literacy and where English not their first language.
- Some people new to hardship can be generally high functioning but seeking support with a life event.
- Some people may be seeking support with an issue they have recently identified and experience uncertainty and challenges in pursuing support and may need support over several attempts to link with services.
- People can often link through accidental / incidental ways e.g., friend of a friend and word of mouth.
- People can often want to deal with their own issues and be empowered towards this or to be supported within their family or community network.

Service approaches – strengths and challenges

- How people experience services is fundamental, particular in their initial connection and when they haven't previously accessed formal services.
- Active / warm referrals and calling a service ahead to check capacity are better than giving people numbers to navigate the system and experience barriers and become hopeless and give up.
- Connector and support roles providing connection for people in the interim to receiving formal services has been effective at helping people not feel hopeless about their situation and to enable access to other supports while waiting.
- Relational approaches to working have strength. They also be a double-edged sword; when worker moves on and people may not want to start working with a new person, or want to follow the previous worker, which can challenge agency boundaries and eligibility.
- Workers can be reluctant to refer to available supports if they are not familiar with them.
- Case workers can feel disheartened and lose hope with the severity and complexity of challenges people are experiencing and limitations in service options.
- Sharing stories of change and hope and improved knowledge and confidence in wider resources and supports can be helpful.

Collective impact and community focus

- Keep a collective impact focus for the project.

- Harness the positives coming out of COVID-19 – increased neighbour engagement, growing empathy, recognition that uncertainty is more widespread and there is not enough funding or supports, increased collaboration and sharing available resources.
- Informal family, friends and informal networks are important to help sustain people through life challenges.
- Leverage community-based support systems and upskill people to become champions / ambassadors.
- Amplify and develop community touchpoints.
- Promote whole of community responsibility.
- Build a community focused narrative – like RUOK? campaign concept.
- Several organisations within the IF collective and more widely are developing approaches to build community capacity. Map these and identify gaps and ways to extend community reach.

Focus areas

- Maintain the focus areas of family and domestic violence, mental health, and financial hardship.
- At-risk youth, including First Nations young people and unemployed, and empowering young people to know where to look and how to access pathways for support were also noted as a focus area for local governments.
- Seniors, including isolated seniors. Melville are linking with Connect Groups and developing the Melville Aged Friendly Business Network towards this.
- Focus across all IF regions and explore opportunities for cross-regional strategies.

Considerations for model / approach

- KEEP IT SIMPLE.
- There is not one model to fit all circumstances.
- Be responsive to the diversity of community members and needs and provide a range of strategies rather than a one model fits all approach, including online and face to face.
- Strong support for a multi-pronged approach.
- When developing information, adopt best practice, simple language and keep universal while providing scope for materials to be tailored and adapted to target audiences.

Leveraging the Alliance Against Depression project

IF is implementing the 18-month Alliance Against Depression (AAD) project to implement a framework for integration and collective impact to improve care for people living with depression and preventing suicidal behaviour. The framework has four target areas:

- General public: depression awareness campaign
- Community facilitators and stakeholders
- Patients, high-risk groups and relatives
- Primary care and mental health care

Current activities include the development and delivery of community engagement activities to reach and support people living with depression, and to develop a

measurement framework, tools and reporting approach to track and learn from the project and its outcomes.

Tools currently in development include posters with QR codes to link to an App with more information and support. Also, expanding the My Community Directory to have a stronger place based mental health focus by providing listings and supports under the headings:

- Need help now?
- Phone and online support
- Online resources (non-crisis)
- Face-to-face support (non-crisis)
- Unsure what to do? (non-crisis)

The project recently provided a workshop to local Police focusing on building knowledge in mental health and key referral sources as part of the strategy to build the literacy of frontline workers. The capacity building of staff is being taken further by Police through their formal mental health training. The session was provided by a member of the IF team and a partner organisation.

There is potential to learn from AAD strategies and expand on these for the family and domestic violence and financial hardship focus areas.

Other opportunities for leveraging

- Harness and build on existing strengths, capabilities, IF partner roles, community connections and range of initiatives across the partnership and leverage and coordinate.
- IF's Local government partners are undertaking community development approaches and have access and inclusion initiatives that can be leveraged and expanded upon. Cockburn has more of a service delivery focus than Fremantle and Melville and can tap into those new to vulnerability.
- Services and organisations have networks that can be built upon for a wider focus.
- IF partners were interested in building their knowledge on the full range of services and new initiatives, including across sectors.
- Maintain relational working – link newer workers to longer term workers, within and across agencies.
- The Anglicare tracker during COVID was very helpful.
- The capacity of social services for outreach can be limited but is effective when it can happen and is well-targeted.
- LGA employees are generally well-informed about local services and supports. This provides a good foundation to build on.
- Businesses, business networks and local Chambers of Commerce are untapped networks. There may be scope to link business networks and companies such as Hawaiian and Stockland across regions.
- There is the opportunity to engage community touchpoints to play a stronger role including local government and community service front line workers (including library staff; recreation centre staff; community safety officers; rangers; visitor centre staff); sporting clubs; community organisations such as Men's Sheds and Rotary Clubs; Befriend; Act, Belong, Commit; community and neighbourhood centres; playgroups; new parent classes; schools; GP's (noting newer GP's can be

more likely to see people in crisis); other health workers; hospital staff; hospital visitors; local councillors; HR staff in workplaces; counsellors; churches and religious groups; local businesses; and business networks.

- Find ways of connecting that resonate with different target groups through inreach as well as outreach.
- Centrelink is a key touchpoint for people new to hardship but can be hit and miss – can depend on the worker relationship. The Social Worker is often a useful person and referral point.
- Financial counsellors can be a key link and knowledgeable resources.
- The Community Connector roles (Fremantle Library, Fremantle Women’s Health Service and Davis Park) are well utilised and effective and offer opportunities for learning.
- Mutual aid and natural community networks have enormous potential. The City of Fremantle Neighbour-to-Neighbour program currently has 700 volunteers and provides scope to leverage. Connect Groups provides link with hundreds of self-help groups.
- Piggyback with other initiatives like Act, Belong, Commit and their promotion channels.
- Explore campaign potential and leveraging social media and more targeted materials and marketing.
- Text is increasingly being used by services to connect with people.
- Learn from what hasn’t worked. An IF community service partner shared that an outreach initiative to connect with people via shopping centres wasn’t successful. The evaluation was that people were there for another purpose and / or were reluctant to approach due to stigma.

Data and reporting

- IF partners use a range of data tools, systems, and reporting.
- The data and reporting are limited in helping address the issue of connecting with those new to hardship.
- There are challenges and limitations in trying to achieve shared data and reporting e.g. the experience of the Family Support Network with the Fusion system has been challenged and added administrative burden without adding commensurate value.
- Be clear on the use and purpose of data and reporting and not to add to the administrative burden for agencies.
- Technology tools are emerging to support holistic case management with an early intervention and collaboration focus such as offered by ECINS (Empowering Communities with Integrated Network Systems). These may be useful to explore and monitor.

Tools, directories, and resources

- A range of tools, directories, and resources are utilised by IF partners such as WA Connect, My Community, Ask Izzy, Home Hub, Homelessness links to services, local government Directories and webpages, the Emergency Relief and Food Access Service (ERFAS), the Ruah Aboriginal Resources Directory and Ruah Guide to Mental Health Recovery.

- WAPHA and the City of Fremantle are promoting My Community. St Pat's, Anglicare and the City of Melville are promoting WA Connect. The City of Cockburn is promoting Ask Izzy.
- Don't reinvent the wheel; utilise existing tools and resources and strengthen their promotion.
- Make sure information and listings are up to date.
- Leverage the potential of technology for those comfortable with digital tools.
- Tailor the promotion of tools, directories, and resources to the target audience.
- The promotion of resources won't overcome people's barriers to access, and self-directed referrals can be self-limiting by a lack of knowledge.
- Ask Izzy provides listings from a series of selections and questions. Some people find the number of steps involved off putting, while others find the level of curation to individual circumstances helpful.
- The WACOSS Community Relief and Resilience Forum developed a hardship poster and social media tiles during COVID-19 that may be able to be re-used or built upon.
- WACOSS have recently launched the CORE platform, the Community Organised Resource Exchange – Local resources Exchanged for Good! - to create a space for business to share local surplus resources with local charities to help address unmet community need.
- There was interest in exploring a 'prescription spreadsheet / curated referral tool' to help IF partner staff to provide tailored and more personalised information to people they are supporting from a selection of available services and supports.

Community survey

Background

A brief community survey was added in place of two stakeholder interviews with people new to hardship. The survey, open from 12 August to 17 September 2021, sought to improve understanding of how people can know about and connect with community help and support. Distribution to people was via agencies in the IF network, Home Hub and WACOSS e-news.

Survey questions covered:

- the types of supports people had connected with in the last 12 months,
- whether people were able to access the support they were wanting,
- where people would go to find out about supports,
- whether people used digital tools and which ones, and
- respondent demographic details.

Links and helpline numbers were also provided at the end of the survey if people were wanting to connect with immediate support. The full survey content is provided at Appendix 3.

Overview of survey results

A total of 159 survey responses were received. The average time to complete the survey was 3 minutes 39 seconds. In the main the people responding were those who had sought support for themselves and it seems there were also some people who responded who were community service employees.

An infographic snapshot of survey responses is provided below. Of note:

Community supports

- 90% of respondents said they were able to access the services they were wanting. Perhaps reflecting that people who responded were mainly those already linked with a service.
- The reasons those who couldn't access support included too expensive, couldn't find information and difficulty getting an appointment or getting through to a service, as well as didn't connect emotionally with service provider, didn't cater for people with disabilities, too far away / too hard to get to, inconvenient opening hours, didn't know what they needed and no face-to-face service.
- People accessed support through diverse sources. The GP was nominated by the most people as a source of support (90%), perhaps reflecting that it is stressful being new to hardship or vulnerability and that this can lead to health impacts and connection with the GP. It may also reflect which services the people responding related to. For example, some of the open-ended responses relate to Fremantle Women's Health Centre.
- The next highest sources of support were library (48%), leisure or physical activity group (39%), Centrelink (26%), social group (26%), counselling (23%), community program or workshop (20%), mental health service (19%), school (19%), and other health service (19%). The breadth of touchpoints reinforces having a wide community engagement and literacy building approach.

Digital access

- There were high levels of digital access. Perhaps reflecting the profile of respondents.
- 80% of people said they used the internet when seeking services.
- Information from friends (57%), existing service supports (33%), social media (30%), the local paper (22%), library (19%), local government (17%), neighbour (13%), family (9%) and school (8%) were other sources for connecting with supports.
- There was strong use of digital tools with the Internet the most utilised tool (91%) followed by Facebook (72%), YouTube (57%), Instagram (44%), Online Directories (30%), Tik Tok (6%) and Linked In.

Profile of the people responding

- Most of the people responding were from the IF regions of Cockburn (23%), Fremantle (55%) and Melville (23%). Responses were also received from people in other metropolitan areas and a non-metro region (Busselton and Bridgetown).
- People who identified as female were 90% of respondents, males were 7% of respondents and 3% of people who responded identified as non-binary.
- The main age range of people responding was between 45 and 74 years. 3% of people were younger than 25 years and 4% were people 75 years and over.
- People spanned a range of cultural backgrounds with the majority identifying as having an Australian, British, or Anglo background. People identified as having background from elsewhere including Asian, African and European backgrounds.
- People responding spanned employment status categories with 35% in part-time employment, 21% in full-time employment, 20% retired, 9% not in the labour force and 6% unable to work.
- A high level of people were home owners (38%) or home owners with a mortgage (34%). Others were private renters (17%), staying with family or friends (6%), renting public housing (4%), renting social housing (2%). No responses were received from people who were homeless.

Some people also took the time to share an open-ended response. A copy is provided at Appendix 4.

Overall, the survey responses are useful to help inform IF and the strategies to help improve community knowledge of available supports. The full data file for the survey responses has been provided to IF.

Connecting with Community Supports

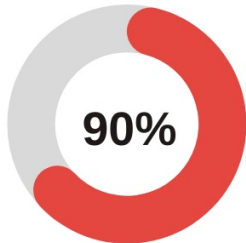
Survey Results

Imagined Futures



These are the results from the survey to build understanding of how people connect with community supports and the tools they access. A total of **159** responses were received.

COMMUNITY SUPPORT



of people said they were able to access the supports they were wanting.

For the **10%** that weren't able to access a support service. These were the top 3 reasons.

- Too expensive
- Couldn't find information
- Difficulty getting an appointment

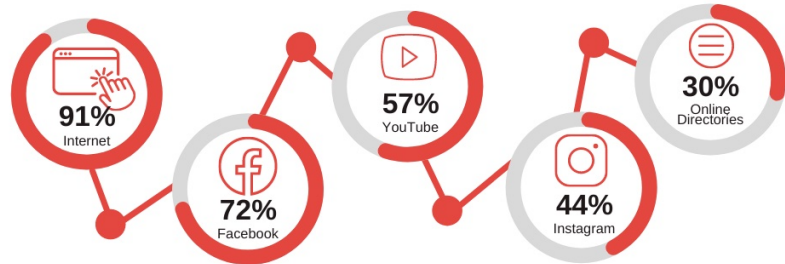
TOP 10 SUPPORTS



DIGITAL ACCESS

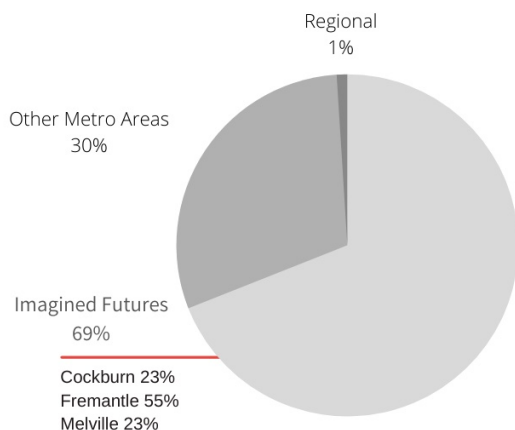


of people said they use the internet when seeking services. With recommendations from friends (57%) and existing service supports (33%) were voted second and third options.



Top 5 accessed digital tools. There was also small interest in TikTok and other platforms such as LinkedIn.

PROFILE OF PEOPLE RESPONDING



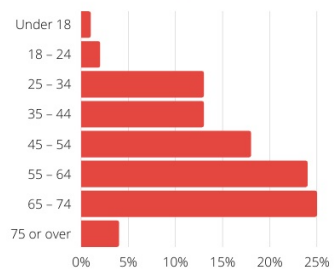
GENDER



Majority of the people considered themselves female (90%) with the remaining being male (7%), non-binary (3%) and preferring not to say (1%).

AGE

25% of the people were in the 65 - 74 age category with 24% (55-64) and 18% (45-54).



the people who were in part-time employment. 21% of people were employed full-time, 20% were retired and 9% were not in the labour force. 6% were unable to work due to a health condition or disability.



of the people were home-owners and 34% were home-owners with a mortgage. 6% were staying with family and friends.

Environmental scan

An environmental scan was undertaken to build on the information provided in consultations and to support the development of a community-focused, collective impact approach to improve knowledge of, and connection with, available supports.

Building on insights from lived experience and community perceptions

There is growing recognition on valuing and learning from people with lived experience and including people in service, policy, and program design. Western Australia now has the benefit of comprehensive local action research to inform its practice and translate into locally based strategies.

100 Families WA research and co-design

The final report, providing insights from the 100 Families WA collaborative action research project, was launched on 6 August 2021. The project's vision is to address the issue of entrenched disadvantage as experienced by families living in Western Australia.

Main insights

The main insights from the research phase included:

- Multiple and compounding life events compound disadvantage.
- Families draw on multiply formal and informal supports. Social networks are important; informal supports and connections were the first go to places including family, social networks, neighbourhood, and extended networks. For some their networks had been severed.
- Families continue to bear the burden of stigmatisation.
- Support the whole person and recognise their multidimensionality.
- Families can face multiple barriers to access support, including eligibility.
- Positive service experiences involve being listened to, acknowledged, respected, and supported according to individual circumstance and needs.
- Families positively contribute to society above and beyond labour market participation and should be supported to do so.
- Encourage transformation not just survival.
- Cooperative working across multiple agencies was key, and to not send people from one agency to another and or require people to continually tell their story.
- Find ways to integrate the self-help nature of the informal with formal service provision.
- Offer ways of people contributing outside of formal structures and via informal structures and cultivate informal networks including peer support.
- Offer support to people in the community and build community networks and relationships.
- Services valued highly drew on Hilary Cottam's radical help approach and what might be possible and developed personalised and relational focused services. Families shared that sometimes building new relationships was too traumatic.

Families reported that through participation in the research they felt listened to, safe and that they were contributing to something worthwhile for others and felt worthy. For some it was first time they had shared about their issues. Participation in the project helped some people feel empowered to go to other meetings - such as with their child's school or to

attend training and employment opportunities. Families wanted to be part of creating change and be involved in deciding if a program is successful. People didn't want to be represented as numbers; each person should be acknowledged as an individual. Anecdotal information should be as valid as other data to build the bigger picture.

Welcome to our World portal

The 100 Families project has developed an interactive portal; *Welcome to our World* to help create awareness, empathy and generate action by sharing stories of different people's experience. The stories were co-authored and narrated by individuals. The portal also provides links to online support.

Translating research to action stage

The 100 Families project has received Lotterywest support for a further 12 months and will focus on actions to take the research and findings forward.

Co-designed ideas for action

The Report launch included a co-design session, led by Nina Ulyett, Anglicare with a focus on how we can all better support families through community. Some focus areas and action outputs from the session included:

- Co-design and collaboration alongside community stakeholders
 - Develop community advisory groups
 - Truly collaborate and be responsible together
 - Multi-disciplinary partnerships that tackle complex issues alongside families
 - More closely align lived experience, policy makers and services with systemic support
- Community-led place based
 - Integrate place-based contracts
 - Be accountable to and led by communities
 - Create safe, accessible spaces for people to spend time, connect and access stigma free supports
 - Reactivate / activate community spaces where people can connect (community gardens, community centres, libraries)
 - Engage existing community groups and supports and develop a network
 - Champion and mentor community led approaches
 - Conduct a community capacity audit
 - More outreach
 - Person and place-based focus promoting cultural safety and supportive service design and delivery
 - Recognise informal support networks
 - Recognise importance of community and a sense of belonging
 - Foster relationships with community groups
- Learning and awareness
 - Simplify paths to access support
 - Create collaborative learning opportunities alongside people with lived experience
 - Increase information sharing
 - Education and information sessions by LGAs and community services
 - Create an accessible bank of links to local services

- Build understanding of lived experience
- National / state public campaign to shift perception
- Build awareness of issues across community, debunk myths
- Create greater community awareness through truth / storytelling through podcasts, videos, reports etc
- Learning hubs for staff, students (school, university etc)
- Lived experience
 - Define clear pathways for community to engage in and progress along
 - Work alongside community stakeholders with expertise
 - Create peer support groups (informal and formal)
 - Peer mentoring into work opportunities
 - Employ people with lived experience
 - Create community champions
 - Integrate lived experience in service design and policy
 - Co-design and develop initiatives
- Systems change
 - Family connector roles
 - Innovate service access improvements
 - Remove barriers to effective service delivery
 - Remove eligibility criteria
 - Better use of technology
 - Invest in first point of contact staff
 - No wrong door / one front door approach
 - Lived experience evaluation of organisation spaces, services etc

Changing community perceptions

The WA Alliance to End Homelessness and Shelter WA jointly commissioned research in 2020 which found that community perceptions about the causes and responses to homelessness increasingly recognise the various factors that contribute to homelessness; and that many in our community are vulnerable, particularly when they experience life circumstances such as unemployment, family / relationship breakdown, mental health, domestic violence, drug or alcohol addiction as well as precarious work, a lack of savings, intergenerational poverty and high rental costs. COVID-19 has led to greater recognition of how vulnerable people are, of how much is taken for granted by others not in a vulnerable situation, that homelessness could happen to anyone, and that society was more fragile than originally thought.

Creating deep local change responding to those with lived experience

Hilary Cottam recently undertook a project, *Radical Way*, to build on her book *Radical Help*. Cottam explored the collaborative processes and paths needed to implement the capability shift described in *Radical Help* (to move away from a needs based / crisis intervention focused welfare state). The project involved consultation with local government CEOs and leading innovation practitioners to explore what is needed to address current social challenges and overcome the issues in taking forward *Radical Help*.

The project highlighted that there is currently a renewed community focus, being driven by more than UK government austerity measures, and that place-based work can unleash the power and potential in people to create local social solutions and make decisions in ways that are responsive and effective for those with lived experience. The project identified

factors needed to re-imagine the relationship between the local state / systems and communities and create a better future as:

- Genuine commitment to a renewed common purpose and ways of working together
- Developing a new infrastructure for imagining a future story
- Practice in place that builds local skills
- Finance that re-capitalises a shared local infrastructure – created and maintained through the new relationships from the changed ways of working

Collaboration and collective impact as a tool for change

Ingredients for effective collaboration and collective impact efforts

The importance of collaboration between government and the community services sector, including to provide integrated responses to needs in the community was confirmed by the Supporting Communities Collaboration Working Group in their November 2019 report. Distinctions were made between collaboration, coordination and cooperation and that collaboration involves commitment to shared goals and actions, joint planning, the prioritisation of efforts and resources, inclusive engagement processes and requires long term, relational timeframes to achieve results. Strategies for including consumers, families, carers, and local communities were also important, and for this to happen early. Also, the evaluation and measurement of progress and effectiveness and opportunities for sharing learnings.

Kania and Kramer's 2011, Stanford Social Innovation Review *Collective Impact* article saw the coining of the term 'collective impact'; highlighting that collective of agencies can achieve a wider impact than a single organisation, large-scale social change is more effective when it happens across sectors, is coordinated around a common agenda for solving a complex problem and is supported by shared measurement, ongoing communications, and backbone support.

Cabaj and Weaver from the Tamarack Institute evolved the Kania and Kramer framework to expand on the conditions for collective impact and share principles of practice. Through this they emphasised the importance of:

- Movement building and reforming and transforming systems and approaches.
- Authentic and inclusive community engagement and putting community at the centre of the process.
- Developing shared aspirations that are ambitious and go beyond individual agency objectives.
- Strategic learning and evaluation with real-time feedback and co-evolve with changing strategies.
- A focus on high leverage opportunities for broad change with shared responsibility for the outcomes.
- Backbone support to collective impact efforts and the key role the backbone group can play.

Early Childhood Development Field Catalyst

The Early Childhood Development Field Catalyst is a current BHP Foundation funded collective impact initiative focusing on the early-years system to improve outcomes for children and families. The initiative is being supported by Social Ventures Australia as the

backbone organisation working with 13 leaders and researchers to develop a system-wide approach to addressing the root causes of disadvantage for young children from birth to 5 years. There may be opportunities for learning and leveraging from this initiative.

Best practice integrated service delivery – family and domestic violence

In 2020 and 2021, Social Ventures Australia, funded by the Commonwealth Bank of Australia, led a collaborative project to capture and illustrate best practice integrated service delivery and provide insights from organisations that are working together to improve outcomes for victim-survivors of Family and Domestic Violence. The project developed a range of information and resources to share the learnings and recommendations from the collaboration including an overview on integrated service delivery, a model for working together, how funding can support integrated service delivery and templates and resources to support integrated service delivery.

Community engagement as a key strategy to improve outcomes

Australian Institute of Family Studies insights on community engagement

The Australian Institute of Family Studies undertook research to help clarify what community engagement involves, how it relates to other practice and ways it can help improve outcomes for families and communities.

Key insights were that traditional service approaches are limited in their capacity to effectively support families with the challenges they face, and that community engagement provides the potential for services to be more responsive. Guiding characteristics for effective community engagement were identified, drawing on evidence from well-established fields of service delivery. These include:

- Start from the community's needs and priorities
- Invite and build local autonomy and leadership, and acting as a resource towards this
- Build capacity for people and community to meet their own needs
- Provide flexible service systems responsive to local needs
- Build partnerships between services and users built on trust and respect
- Work *with* community, not do to or for community
- Share information to enable community members to make informed decisions
- Offer choices of services and intervention and support options

The research also noted that effective community engagement requires service and system changes to embedded practices in ongoing governance arrangements, provide more policy and funding flexibility to support and respect local decision-making and priorities and to seek regular community feedback.

Local government role in inclusive and connected communities

Local governments play a key role in community engagement and help build inclusive and connected communities. If local government partners undertake a range of planning and community building and development initiatives. These are reflected in plans including Disability Access and Inclusion Plans, Reconciliation Action Plans, Corporate Business Plans and Strategic Community Plans. The plans are supported by a wide range of community development and community building strategies targeting the demographics and needs in

each area. The local government partners consulted were keen to explore ways of improving their reach and engagement with community and working collectively.

Being person centric - ways to successfully connect and engage

Insights from brand and marketing approaches

Brand and marketing approaches also offer insights on how to successfully connect and engage with people, including in crisis and during events like quarantine and lockdown. Simple and well-targeted communications (including using a variety of channels) are increasingly important in a confusing climate.

McKinsey and Company's article on connecting with customers in times of crisis stressed the importance of leading with empathy, genuinely addressing people's needs, strengthening relationships and creating seamless, convenient, and engaging customer journeys.

Forbes article on how brands can successfully engage with people during COVID-19 quarantine suggested being innovative and creative in communication and drawing on the special opportunity for innovative engagement offered by social media channels as effective strategies for educating audiences on social impact initiatives or entertaining and promoting a brand. Suggestions included engage 'homefluencers' – influencers who aren't relying so much on location to connect with followers. Also, to deliver simple, human centric, messages that address issues, are obvious and informative.

The media can also provide a channel for generating stories that share about people in hardship situations and pathways to sources of support. Local media, including local newspapers and radio, can be useful channels to share information, build knowledge of community supports, reducing stigma, break down barriers and promote belonging and connection opportunities.

Other community capacity building and engagement initiatives

Other organisations beyond the IF partnership and those identified during consultations are working to help build community capacity and engagement and help overcome isolation and vulnerability. Those identified during the project include:

Community Legal WA Family and Domestic Violence Legal Health Check project

Community Legal WA has received funding for a new initiative, the Family and Domestic Violence Legal Health Check project. The project will work with community legal centres and other community organisations supporting women experiencing family and domestic violence to be trained in a legal health check tool and develop referral pathways and collaborative relationships across sectors.

Village Hub for older LGBTI people

GLBTI Rights in Ageing Inc (GRAI) is currently managing a project with Village Hub funding to help alleviate loneliness and social isolation in older Australians. GRAI's Village Hub will be led by and for older LGBTI people and offer peer support and service development for the community and a one-on-one befriending service for vulnerable and isolated individuals. Work towards creating culturally safe referral pathways and links to

mainstream services such as medical, aged care services or housing supports will be developed.

First 1,000 days project for children and families

Playgroup WA recently commenced the First 1,000 days project to improve the quality of relationships and connections that children and families experience in their community. The project is focusing on the South West region of WA (in partnership with the regional based Radiance Network) and North-West Metropolitan Perth over an initial two year term from 2021 to 2023. While the target regions don't overlap there may be the opportunity to build on the project strategies and learnings.

The project is modelled on the successful New Zealand Harakeke initiative to build stronger communities through parent-led support based on the premise that when parents are connected to and supported by other parents, they parent better and that this is even more important for families on low incomes.

Neighbourhood Connect

Neighbourhood Connect is a national community organisation which encourages people to create neighbourhood groups and help build belonging through happier, safer, and more connected communities. The Neighbourhood Connect website includes groups in Hilton, Bullcreek, East Fremantle, White Gum Valley and Davies Street Fremantle and may be something IF partners across the region can build upon.

Directories and resources

There is a wide range of general and specific Directories, helplines and resources including:

- WA Connect
- My Community
- Ask Izzy
- Local government Directories and webpages
- Youth Services Directory
- Reach Out
- Carer's gateway
- Emergency Relief Referral and Support (ERFAS) line
- HUGS Helpline
- Home Hub
- Financial Toolbox
- Moneysmart
- Financial Counsellors Network
- National Debt Helpline
- Beyond Blue
- Crisis Care
- Mensline
- Kid's Helpline
- Lifeline
- Crisis Care
- Headspace
- Collaborative and Responsive Engagement Hub – CARE (WAAMH)
- Connect Groups

- Health direct
- 1800 Respect
- Relationships Australia

Limitations

From a high-level exploration of the range of Directories and resources it was apparent that they are not all up to date. Not all are easy to navigate and can require users to have a knowledge of services and acronyms. The promotion of Directories also varies and in many instances is reliant on people's web searches.

My Best Life curated tool

The consultation included an idea for a more curated tool. New Philanthropy Capital (NPC) has recently developed the NPC My Best Life site, targeting young people 13 – 19 in Lambeth, England, to find support and things to do near where they are. The site offers general listings as well as the opportunity for users to find available support relevant to their needs and interests through answering a series of questions about what's on their mind, how they are feeling, and triaging if people need help now or are looking for more general information aligned with their interests, age and gender identity.

Recommended strategies for a community-focused, collective impact approach

A range of strategies are recommended for the IF partners to consider, prioritise, and develop into an action plan to work collectively and improve outcomes for community members new to hardship and vulnerability.

The overarching recommendation is to develop a multi-pronged community engagement and capacity building approach, putting people at the heart, and developing and leveraging natural community connectors and supports, and the resources and strengths of the IF collective impact partnership.

A key theme for the approach from the consultations and environmental scan was to KEEP IT SIMPLE, harness what's available and integrate the strategies with existing services and approaches where possible.

The strategies for the IF partners to explore are:

Take a collective approach to community engagement and capacity building

There is untapped potential to harness and direct the collective engagement efforts of the IF partners to strengthen their impact. A suggested path is to:

- Map the ecosystem of community touchpoints from the perspective of targeted community members, informed by the community survey responses.
- Map current engagement activities of IF partners and where they overlap with touchpoints.
- Identify gaps, aligned with the insights from the community survey and IF partner knowledge, and identify opportunities to expand engagement to address the gaps and for integrated approaches. For example, a quick win could be to expand the Alliance Against Depression work targeting GP's for a more integrated and holistic approach to health to provide GP's with information across all focus areas. This also recognises the interrelationship for people between the focus areas.
- Develop a coordinated IF partner engagement plan. Sample mapping tools for touchpoints and engagement are provided at Appendix 5.
- Explore and include cross-partner engagement.
- Explore and include cross regional collaboration – e.g., for targeting business.
- Leverage the engagement activities of others working in the IF region.
- Align place-based approaches with sector / target group approaches such as CLCWA, Playgroup WA, GRAI Village Hub and Home Hub.
- Link with and be informed by other initiatives e.g., 100 Families WA, Social Ventures Australia.

Build a community connector movement

- Build a capability focused Community Connector movement, skilled in community connection and support, across the wider eco-system including local government and community service front line workers (including library staff, recreation centre staff, community safety officers, rangers, visitor centre staff), sporting clubs;; community organisations such as Men's Sheds and Rotary Clubs; Befriend; Act, Belong, Commit; community and neighbourhood centres; Town Teams; playgroups; new parent classes and other community programs; schools; Parent & Citizen Associations; GP's (newer GP's can be more likely to see people in crisis); other

health workers; hospital staff; hospital visitors; local councillors; HR staff in workplaces; counsellors; churches and religious groups; local businesses; and business networks; cultural groups and informal networks and community influencers.

- Explore building on the Neighbourhood Connect initiative.
- Consider a collective program name / branded approach to focus on reaching out to, and connecting with, people in the community. This could build on the successful connector work that has already been happening with the recently extended Library Connect project and the Neighbour-to-Neighbour program. For example, branding to the *Imagined Futures – Community Connectors* program. A place-based focus could also be incorporated with names such as *Connector Fremantle*, *Connector Melville*, *Connector Cockburn* and for target groups such as *Connector Families* and for network members and champions such as *Connector Businesses* and *Connector GP's*.

Build community literacy on available supports and services

Ensure engagement activities include a focus on literacy building:

- For community members, including informal community leaders and influencers, on available supports and services.
- For community service workers and volunteers on available supports and services.
- Through the Friend in Need tools (workshop and App) being provided via IF partners through a train the trainer model, both as a stand-alone tool and integrated with other agency programs and services. This could building on the work that Uniting WA is doing with Anglicare to help develop a train the trainer model.
- Through integrating other tools such as the CLCWA legal health check tool for those experiencing family and domestic violence.
- Through targeting groups who are a key source of community connection and support. For example, with the role GPs play for people, there is an opportunity to work with Notre Dame (and other education institutions) to improve awareness of the GP connector role and sources of support.

Expand and target messaging and promotion

- Expand marketing, promotion, and messaging to utilise a range of channels and digital platforms informed by the community survey responses. For example, posting to community Facebook pages.
- Leverage specialised skills and resources within IF partners for digital marketing and promotion, responding to the results of the community survey and partner knowledge of their communities.
- Explore effective ways of marketing to target audiences and consistent, simple messages for initial engagement. Keep messaging simple for example – link to a couple of initial entry points.
- Explore a coordinated community campaign in the IF partners region to build awareness and accessibility to available supports. This could be aligned with building a Community Connector brand and movement.

Develop more integrated service approaches

- Develop principles for ways of working, building on successful strategies such as FWHC and RKFSN (and no doubt others) providing 'warm' referrals, minimising the

need for people to re-tell their story, and linking people with interim supports so they have a sense of hope while they wait for a particular service.

- Ensure workers have up to date tools to support effective referrals and links to interim supports.
- Consider an integrated induction process for new workers to link with other IF partners to help build knowledge and relationships quickly and effectively.
- Explore opportunities for collaborating and improving worker knowledge and referral pathways with the local Centrelink offices.
- Explore technology tools to support holistic case management with an early intervention and collaboration focus such as offered by ECINS (Empowering Communities with Integrated Network Systems).

Provide an ongoing forum for sharing and developing good practice

- Provide for broad sharing across the IF collective on strategies implemented and learnings, emerging areas of need and new initiatives, including digital marketing and communications.
- Explore ways to involve relevant IF partner staff.
- Consider creating a lived experience reference group or processes to involve people with lived experience.
- Build worker knowledge of current (and continually changing) support and service options

Leverage and improve tools, directories, and resources

- Leverage and promote existing resources better:
 - Links to a selection of Directories on IF partner websites (if not already).
 - Develop tiles for general and social media promotion and target specific cohorts and postcodes.
 - Strengthen search engine optimisation and Ads e.g., for WA Connect and local government directories. Link with Anglicare and learn from their digital work.
- Approach owners of Directories and tools to provide a better user experience such as no use of acronyms, inclusion of a service description, inclusion of online resources, real time data – update if long waitlist. WACOSS indicated they are open to quick win enhancements.
- Have a Directory update day – like replace your smoke alarm battery day.
- Ensure all IF partner services list with all relevant Directories that users may access.
- Participate in testing the Friend in Need App currently in development.
- Explore IF partner interest in, and feasibility of, a curated referral tool for the IF region.

Capture data on collective efforts and share learnings

- Develop a simple data collection and shared reporting approach for IF partners on engagement and connector strategies to maintain a collective focus and track progress.
- Share learnings and stories with the IF network to celebrate success and enhance ways of connecting vulnerable people to available support.

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Appendix 1: List of stakeholders

The following people were consulted to inform this project:

- Leigh Sinclair – Imagined Futures
- Peta Wootton – Fremantle Women’s Health Centre
- Kayleigh Ellis – City of Melville
- Nina Ulyett – Anglicare Friend in Need project
- Traci Cascioli - St Patrick’s Community Support Centre, Fremantle
- Sophie Doy – City of Fremantle
- Alex Hughes – 100 Families WA project
- Karoline Jamieson – City of Cockburn
- Suellen Althaus – Imagined Futures (Alliance Against Depression)
- Sakina Bindahneem – Fremantle Women’s Health Centre
- Annette Boyle - Uniting WA
- Michael Chester – Uniting WA
- Iain Shields – Hygge Home Hub
- Sue Nickkison – Rockingham Kwinana Family Support Network
- Jill Symons – Imagined Futures (Community Facilitator)
- Michael Piu – St Patrick’s Community Support Centre
- Leela James – WACOSS – Community Resilience and Relief Forum and WA Connect
- Chelsea McKinney – Community Legal Western Australia

Appendix 2: Overview - Friend in Need workshop

A Friend in Need workshop, presented by Anglicare, was attended on 15 September at the City of Bayswater as part of the City's Community Upskillers program, offering a series of free community training and information session. The workshop ran for 2 hours but can be compressed to half an hour. It was supported by handouts providing resources and links on where to go for help, who can help with family and relationships, who can help with money management and who can help with mental health.

The workshop targets everyday people in the community wanting to be a community support to educate and empower people and to destigmatise the seeking of support from professional services.

Workshop content covered:

- Identifying signs of trouble
- Reaching out and talking about sensitive topics
- Offering emotional and practical support
- Identifying what services are available and where to find them
- Inspiring people to take action

100 Families WA data was shared from a survey on people who could ask for different types of support in times of crisis, and in turn, the significant numbers of people who couldn't to underpin that it is hard for many people to ask for help and to encourage wider community members to be proactive in offering help.

Examples and information were provided to highlight signs of struggle are not always visible; people can feel stigma and reluctance to share about their challenges; reaching out and talking with and connecting to people to offer support and guidance on what helps can be transformative and doesn't need to come from people close to the person or from professional services. Guidance was also provided in the event of a person feeling suicidal.

What helps? areas covered:

- Phone help lines
- Counsellors
- Support groups
- Taking part on the community
- Looking after oneself

Information was also provided on what works and what doesn't, and that people can face barriers to access and ways to help overcome this. Some available resources to support people experiencing mental health, relationship and / or financial difficulties and what to be aware of were shared including:

- Websites
- Helplines
- Practical support
- Apps
- Professional helpers
- Impacts on children

The workshop ended with 5 key messages:

- If things don't seem right, they're probably not – dig deeper
- Listening and empathy go a long way
- Look for ways to connect, empower and educate
- There is a lot of help. Start with Ask Izzy and WA Connect
- Be the one who makes a difference

Appendix 3: Imagined Futures survey content

Survey period: 12th August – 17 September 2021

MS Forms link: <https://forms.office.com/r/Uwd5zBWaDV>

Survey Title: Connecting with community supports			
Intro	<p>Thank you for your time in doing this short survey. Imagined Futures, a group of organisations working together in Cockburn, Fremantle, and Melville, are doing a project to improve how people can know about and connect with community help and supports.</p> <p>Your responses to the survey questions are confidential. They will be used to help develop better ways for people to connect with the support they need.</p>		
		Response	Measurement
	Supports		
Q1	<p>Have you connected with any of the following in the last 12 months? (You can select more than one):</p> <ul style="list-style-type: none"> GP Library School Counselling Mental health Other health Drug and Alcohol Housing Family & domestic violence Centrelink Financial counselling Childcare or Early Learning Playgroup Community program or workshop Community centre Community group such as Men’s Shed, Rotary, Lions Leisure or physical activity group 	Multi-selection	Quantitative % + qualitative

	<p>Sporting group Social group Faith based group Other - please provide more details</p>		
Q2	<p>Were you able to access the support you were wanting? Yes – branch to next question No – branch to "Please tell us why you weren't able to get support?"</p> <p>Couldn't find information I didn't know what I needed Inconvenient opening hours Difficulty getting through on the phone Difficulty getting an appointment Took too long to respond Too expensive Too far away / too hard to get to Didn't cater for people with disabilities No face to face service No online service No translated information Other – please provide details</p>	<p>Radio button/free-text</p>	<p>Quantitative % + qualitative</p>
Q3	<p>Where would you go to find out about available supports? (You can select more than one): Family Service or support already connected with Social media Friend</p>	<p>Multi-selection</p>	<p>Quantitative % + Qualitative</p>

	Neighbour Local paper Internet search Library School Local government Other - please provide more details		
Q4	Do you use any of the following digital tools? <ul style="list-style-type: none"> • Facebook • Instagram • Tik Tok • Internet • You Tube • Online Directories • None of the above 	Multi-selection	Quantitative %
	I		
	Demographics		
	We'd like to understand more about you.		
Q5	What is your age? <ul style="list-style-type: none"> • Under 18 • 18 – 24 • 25 – 34 • 35 – 44 • 45 – 54 • 55 – 64 • 65 – 74 • 75 or over 	Radio button	Quantitative %
Q6	Which gender do you identify most with? <ul style="list-style-type: none"> • Female • Male • Non-binary • Prefer not to say 	Radio button	Quantitative %
Q7	What is your cultural background?	Free text	Quantitative
Q8	What is your current employment status?	Radio button	Quantitative %

	<ul style="list-style-type: none"> • Full-time employment • Part-time employment • Not in labour force – looking for work • Not in labour force – home duties • Not in labour force – student • Not in labour force – retired • Not engaged in work and not actively looking for work • Unable to work due to health condition or disability • Self-employed 		
Q9	Suburb where you are currently staying?	Free text. Can put more than one suburb if relevant	Qualitative %
Q10	What is your current housing arrangement? <ul style="list-style-type: none"> • Homeless – rough sleeping • Staying in crisis accommodation • Staying with friends or family • Renting privately • Renting public housing • Renting social housing • Home owner (with mortgage) • Home owner 	Radio button	

Q11	is there anything else you would like to tell us?	Free-text	Qualitative
Close	<p>Thank you for your time. The numbers and links below may be helpful if you are wanting to connect with immediate support:</p> <p>Beyond Blue for immediate support and links to other help call 1300 22 4636 or free chat via www.beyondblue.org.au/</p> <p>Lifeline for crisis support and suicide prevention support call 13 11 44 or free chat via www.lifeline.org.au</p> <p>1800Respect to support people impacted by sexual assault, domestic or family violence and abuse call 1800 737 732 or free chat via www.1800respect.org.au</p> <p>National Debt Helpline to contact a financial counsellor on 1800 007 007 or free chat via https://ndh.org.au</p> <p>Emergency Relief and Food Access Service, for general information and help to connect with support near you please call 1800 979 777</p>		

Appendix 4: Open ended survey responses

Below are all the open-ended survey responses (as provided by respondents) adding to the information in the survey snapshot.

Thank you for your service provision.

The families we work with access many communities services and have outstanding needs

I think we are blessed to have a number of good services and community groups that support us in our area. There is good information available through fb pages and services such as Meerilinga, Portcare, Cooby Cares City of Cockburn, City of Fremantle.

As an autistic adult, I'm dreading the return of "normal" forced social interactions. The current distanced interactions are much more comfortable for me, and I have much less stress and mental health issues for the first time in my life.

It's a pity that the normal community can't see how exclusionary they are to neurodiverse people. The past 18 months has shown how much can be done to accommodate the needs of the normal community when it is required. If anything, it just reinforces how worthless the community in general considers autistic people to be.

During my time working, I was told on a number of occasions, the needs of 1 person are secondary to the needs of the majority - in the workplace I was required to accommodate the needs for communication and socialisation styles of my colleagues and completely suppress my own needs until I burnt out and had to resign.

Easier then the Census 😊

I know of clients that do not have easy access as I do with the internet and they get very frustrated with not having the ability to get the help they need. This is very scary fir them especially the very vulnerable.

Fremantle Women's Health Centre are impossible to book at anymore, I understand it's probably due to the current climate but they were a great GP and I'm really disappointed I can't go there anymore.

Would like access to cheaper incontinence strategies

60% of my current allowance is being spent on healthcare due to a chronic health problem. I have very little faith in the governments ability to provide the care I require. The public health system is grossly under funded.

I have attended Fremantle Woman's Health for many years and have recommended to many friends A pleasure to attend

No

Thank you for your service. Fortunately, I am managing and I still have my husband.

keep up the great work on local issues

Covid has meant that community notice boards are difficult to use and has driven my connectivity to community online. This means that groups that are not online or struggle to be online are pressured by me or not getting my attention at all

Please run the yoga classes again. Thank you.

I think too many people rely on TV, films & mobile phones for their everyday problems, instead of counting the many blessings of living in this country, with so much help available, they really don't know how lucky they are. Half their problems they've brought on themselves through drink, drugs & not taking advantage of schooling early in life.

Education is priority, helping people be informed, so important!!

Just finding life a bit lonely at moment, as 3 of my 4 children live 45 minutes away and with me working full time and looking after my own house (maintenance etc) find it hard to just drop in and see them. I only usually get a phone call if they require help with something or think they should give me a call spasmodically. I usually have to phone them and organise things. My mum is very old in a home and I'm the only one visiting her and not very well now (not eating or conversing anymore). Very sad for her.

I have suffered from feet pain. It stopped me from working at my present job(standing job..cafe) I'm looking for sitting down jobs.. like receptionist, but don't have experience in that field. So having difficulty to get a job.

Do you have any ideas, what I should do?

nil

No

No

I would like a book club at womens centre and more exercise for older women

More support for people at risk of homelessness families, individuals couples and children. More support for women and children escaping domestic and family violence. More early intervention services for people experiencing mental health issues.

Your survey is a bit confusing, I think I received it as a professional who works in mental health, but it was asking me from a personal (not professional) perspective...so that's how I answered, however it wasn't clear.

Good luck!

I live alone and don't go out, except maybe to the shops and to walk my dog. I would be 'lost' without my dog.

Yes, we are in state housing, we are in a bad area for drugs, I know we are luckier than some, but at our age and after having to sell our own home because of the Wool Trade collapsing this is where we have ended up and I dislike it as does my husband we can not see things improving sadly but we have each other,

No

No

I come down to Fremantle from Yanchep every week to go to the Fremantle markets or to teach choir and play music at Fibonacci or Kidogo and I love Fremantle .Lets not Lose Freo's great spirit . Lets keep respect for the community high as thats why people like me who wish they could live in Freo still travel over an hour to come there and get inspiration !

Just stick to the core business of local govt and stop trying to save the world

I'm very close to moving into my car. Keep loosing my job. Have no family

I didn't feel support or listened to, only referred to a pain specialist. I communicated that I have had multiple specialist visits and my regular GP was a man and had told me to meditate try and go to yoga, I believed there was something wrong with my left ovary but it wasn't acknowledged, I left my appointment feeling desperate and dismissed. After this visit which I felt would be supportive if anything, I searched on the internet out of desperation for pelvic pain help and found a pelvic pain physio in Alfred Cove. I made an appointment saw a physio who listened and help me get on top of my pain then suggested I see the Women Centre in Subiaco. I saw a Gynie there who sent me to Aurora Imaging in Subiaco (female centric service) they listened to me and within 1/2 an hour identified endometriosis on my left ovary and once I had a laparoscopy (my second in 5 years for this issue) it was also found on my bladder and bowel. I have since had surgery and I am now finally pain free and coming off my pain meds for which I have been on for 5 years.

Please listen to your patients who come to your practice because its female centric. Endometriosis is so under diagnosed yet a common reality for a lot of women however not the first thought for diagnosis. WHY?

I resolved my issue because I didn't give up not because your practice helped.

No, Im fine.

I find accessing information about help and assistance almost impossible

Isolation is just one of the things I have had to face & the depression that goes along with low moods due to no motivation as I have no contact with others due to PTSD.

Reestablishing myself after living in the Pilbara for 13 years & isolated has affected my health and that of my daughter. People are suffering in Silence with no people contact which is devastating communities' not wanting to get too close to others also this is due to covid -19 etc...

Hoping to connect with extra support soon...

Thank you hope 🙏 this helps I am a single mum out of work doing my very best after losing my home my car now I battle to pay my electricity due to low income!

I catch public transportation or walk.

We need to get more money spent on community mental health programs

I'd love to be involved in volunteering work n learn more in workshops

The public health system is appalling, with very poor collaboration and care-coordination with community services.

I have loved using your service wherever I have needed to.

Appendix 5: Sample mapping tools for touchpoints and engagement

IF and its partners may already have mapping tools. If not, below is an excerpt from a simple mapping tool that has been created for the IF partnership to use as a starting point to map the various community touchpoints and partners who are already / can engage to share information and build literacy on community supports. A copy of the Excel document with more details has been provided to IF.

Community touchpoints (and expand on for each category with details provided by partners engaging) and IF partner engaging with community	Imagined Futures - Alliance Against Depression project	City of Cockburn	City of Fremantle	City of Melville	Town of East Fremantle
<i>GPs</i>	X				
<i>Library staff</i>		X	X	X	
<i>Library users</i>		X	X	X	
<i>Leisure and physical activity groups</i>					
<i>Sporting groups</i>					
<i>Centrelink</i>					
<i>Social groups</i>					
<i>Informal networks eg neighbour 2 neighbour, Neighbourhood Connect</i>					
<i>Counselling services</i>					
<i>Community programs</i>					
<i>* Parenting classes</i>					
<i>Mental health services</i>					
<i>Schools</i>					
<i>Men's Sheds</i>					
<i>Rotary Clubs</i>					
<i>Community & Neighbourhood Centres</i>					
<i>Multicultural organisations and groups</i>					

The mapping may then be collated graphically to show the touchpoints and the engagement partners. Colour coding for partners could help easily show how partners map across touchpoints and the opportunities for collaboration. An rough 'flower' diagram could be created – more 'petals' may be added depending on the number of partners engaging with a particular community touchpoint ('heart') and the flowers for each touchpoint presented together as a 'community garden'.

