



inBalance

Mental Health Association of Central Australia Inc
Quarterly Newsletter • March - May 2004

Filling in the Gaps: Evaluating our Strategic Plan

MHACA is in the process of reviewing and evaluating its current 3-year Strategic Plan approved until July 2004.

The objectives of the evaluation are to assess what we have and haven't been doing well, identify priorities as well as gaps in services, and make recommendations for consideration in the development of our new Plan.

The contract to conduct the evaluation has been won by management consultants Burdon Torzillo and Associates, who will be contacting a selection of key stakeholders in the near future, including consumers of MHACA services, staff, committee members, partner organisations and funding bodies . . .

Consumer Forum

18 March 2004
at MHACA, 12.30pm

We are keen to know how we can improve our services to consumers. Please come along and have your say . . .

"Have confidence that if you have done a little thing well, you can do a bigger thing well too." *David Storey*

Advocacy Training for Consumers and Carers

On 2 February 2004 the Mental Health Council of Australia, through Team Health, ran an Advocacy Skills Workshop for consumers and carers, a day-long course held at Darwin's Tamarind Centre (Community Mental Health Services). MHACA reps Sarah Chunys and Leo Welin attended ...

Unity within our diversity

One noticeable feature of the people that attended was that while we all came from diverse backgrounds, we all shared similar experiences and frustrations when dealing with society and our illnesses.

There were people who had suffered schizophrenia, OCD, anxiety and depression, and others who had a dual diagnosis, had been mis-diagnosed and some who wore two hats, as both carers and consumers. Yet there was a lot of mutual support, and we could take comfort in the fact

that most of us had been though the hospital system and could talk openly about it without fear or ridicule. All of us, at some time, had had negative experiences with hospitals, medication and not having our suicidal thoughts taken seriously.

Consumers to advocates

Presenter, trainer and magician extraordinaire Rick Austin had us all inspired, if not a little confused!, with his magic tricks helping to illustrate our role as advocates for mental health.

(cont. on page 6)



Participants at the Advocacy Training Workshop: informative and inspiring

inBalance is the quarterly newsletter of the Mental Health Association of Central Australia
PO Box 2326,
Alice Springs NT 0871
Ph: (08) 8952 3311
Fax: (08) 8953 5577
Email: mhaca@octa4.net.au

Staff

Manager: Claudia Manu-Preston
Bookkeeper: Lorene Schindler
Reception/bookkeeping trainee: Kathryn Buzzacott
Services Branch Manager: Megan Rackley
Pathways Program Officer: Lai Khum Law
Life Promotions Coordinator: Dianne Linton
Life Promotions Officer: Raymond Campbell

Committee

Chairperson: Steve Fisher
Deputy Chairperson: Jan Campbell
Secretary: Margaret Wait
Treasurer: Paul Hills
Public Officer: Maya Cifali
Org. Rep: Patti Farley ARAAFMI
Org. Rep: Christine Pilbrow, Salvation Army
Consumer Rep: Sarah Chunys
Consumer Rep: Leo Welin

Committee meetings

Are held on the 2nd Monday of each month. If you have any issues you would like to place on the agenda please contact Kathryn or your favourite committee member at least a week prior to each meeting.

Correspondence with Editor

Contact Rita Riedel c/- 8952 3311

Contributions are Welcome

Contributions to **inBalance** are welcome. Whether it is a meeting date for the mental health calendar, a review of a mental health book or program, information about mental health issues or a consumer or carer perspective on an issue, we look forward to receiving your information. The deadline for the next issue is 21 May 2004. Circulation is approx. 175 individuals and groups.

Disclaimer

Contributions to **inBalance** do not necessarily reflect the views of MHACA.

Manager's Update

Hello and welcome to the third edition of inBalance. How quickly time passes! It only seems like yesterday that we enjoyed our Christmas party and now it's already March.

The Christmas period was quiet with some staff away on leave. Everyone is back on board now and we look forward to the challenge of the new year.

It was good to catch up with everyone who attended the morning tea over the Christmas break. Thank you to Ken Guest from Anglicare Outreach for attending and enabling MHACA to have this morning get-together.

Evaluation of our Plan

The evaluation of the Strategic Plan 2001–2004 is being undertaken by Burdon Torzillo (see ad page 1). We are having a Consumer Forum on 18th March at 12:30pm to discuss the aims of the project and obtain feedback on the provision of our services to inform our new strategic plan.

Remote work

Welcome to Richard Pare, our new Ninti Pulka Project Officer (see page 11). This is our first project which is specifically remote-focussed, and as part of this I will be visiting the Kintore Community (1060 return kms west from Alice Springs) from 10-12 March to talk to people about remote issues and needs.

MHACA and Advocacy

MHACA provides advocacy at a broader systems level (we refer people with personal complaints to Disability Advocacy Service).

One of the advocacy projects I have been working on is the Central Australian Mental Health Service Project (see page 13).



Claudia Manu-Preston: Manager

This entails representing NTCAG and MHACA at different meetings, and is important advocacy work which enables us to influence policy, and therefore service quality and options.

The role of this project is to explore ways of extending the range and quality of mental health care options in Central Australia. This work involves knowledge of the local issues, being prepared through reading and research and actively participating in these forums to represent the views of MHACA's clients and carer's.

The feedback we receive about your issues and what you think informs and guides us when we undertake this broader advocacy work .

We welcome all feedback which you can provide in the following ways:

1. talk or write to MHACA staff
2. leave a message in the suggestion box in the MHACA kitchen
3. consumer complaints process (flyers in holders in the entrance)
4. come to a Consumer Business Lunch, Men's or Women's Group;
5. raise issues through Management Committee Meetings
6. give feedback through the Evaluation of the Strategic Plan.

Feedback on our services is important to us, and we look forward to hearing from you at any time.

Kind Regards, *Claudia*

Committee Profile:

Margaret Wait: Secretary

I first came to Alice in 1952. Until 1957 when I had my fourth child I seemed to be barefoot and pregnant for the first few years. Originally I thought I would only be here for a couple of years until we made our fortune... I'm still here without a fortune!

I have a nursing background and worked for the Commonwealth Department of Health and then NT health for 35 years, both at the Alice Springs Hospital and Community Health. My husband and I ran a small business for eight years in Gap Road opposite Traegar Park. Over the years we have worked as volunteers on school committees and I was involved in the Women's Shelter in its initial stages.

My involvement with Central Health goes back a long way and although the spirit is willing, sometimes the flesh is weak. I am currently a member of NTCAG and have held membership for almost six years; my term expires in November 2004. Until that time I will continue to vigorously work to improve services for Central Australia health clients and push for better understanding and acceptance of Dual Diagnosis. With four kids and six grandies all born in Alice we will be watching out for the welfare of this community for many years to come.

"No person was ever honoured for what he received. Honour has been the reward for what he gave."

Calvin Coolidge

Committee Update

Building effective governance

inBalance is a good way of describing the recent work of the Committee, as we have concentrated on achieving the right balance of effort between the ongoing business required to keep the organisation moving forward and prioritising the bigger tasks at hand. There is much to do if we are to achieve the Association we all want, and I will be reporting on new work as it develops during the year.



Steve Fisher: Chair

Evaluating our current strategy ...

Coincidental to the new Committee commencing its work is the need for us to consider what has been achieved and what has been learned during the period of the current Strategic Plan 2001-2004. This work starts soon, as we have appointed an independent person to undertake an evaluation and report back to the Association (see ad on page 1). A document describing the terms of reference for this work is available from the Association. My thanks to Claudia for putting great energy into getting this work started.

... And working towards a new one

From the outside or from a consumer point of view, organisations can sometimes seem obsessed with their strategies, devoting lots of time to workshops and consultation. Although I can sympathise with this view, in our case it really is vital that we set out clearly the overall objectives and priorities of MHACA and make sure everyone involved gets a chance to make a contribution. Strategies are long-term directions within which short-term decisions can be made. Without a strategy, the day-to-day work of delivering services can become less effective than it should be.

So, we plan an efficient and directed process for developing a new strategy. As should be the case for all organisations, but especially in remote areas, it will take proper account of what is happening in the wider world of mental health services. This includes the National Mental Health Plan 2003-2008 featured in the last issue of *inBalance*.

Governance training has positive outcome

The previous newsletter also gave an account of the governance training attended by Committee members in December 2003. A short report has been sent to us by Burdon Torzillo, facilitators of the workshop. It makes for interesting reading, with some useful diagrams and maps to illustrate some aspects of good governance for MHACA.

Supporting our staff a priority

As well as wanting the needs of consumers and carers addressed by MHACA it is equally important to provide support for the manager and staff team who work hard to achieve this. MHACA is an ambitious organisation and as chairperson it is important to me that staff feel they work in the right supportive and challenging environment to achieve those ambitions.

Choices

People whose lives are affected by mental health issues may have fewer life choices and less opportunities. The Pathways Program provides:

- Ongoing support to set and achieve personal goals
- Social skills training
- Help to access other services
- Opportunities to participate in a variety of social and recreational activities
- Assistance to education
- Help to engage in voluntary work / other types of employment
- Information on a variety of topics
- Resource materials on mental health issues
- A cuppa and a place to chat with others who understand

What Can You Do?

- Come and visit us with or without a referral
- Make an appointment with our Program Coordinator or Rehabilitation Worker
- Explore your choices and personal goals
- Design your own Individual Plan

Feedback From Consumers

"This program has helped me attend a computer course."

"I tried for three months to get a work placement – there was lots of talk. With the Pathways Program I was out doing voluntary work within a couple of hours."

For further info call:

Megan Rackley or Lai Khum Law at MHACA on 8952 3311 between 8.30am – 4.30pm Monday – Friday.

The Pathways Program

Recovery-based Rehabilitation Program

Coordinator: Megan Rackley; Pathways Officer: Lai Khum Law

update

Welcome to the New Year, we hope it is a good one for everyone. The start of the year is a busy time for us, with TAFE and various other courses starting, and work to get back into for those who had a Christmas break. And talking of work, the Rehab Program now has seventeen of its twenty-six clients out working - twelve people are in the open paid

workforce, four are in sheltered employment and one person is volunteering. A huge effort and well done to all. We do have opportunities for employment available so if you have some time on your hands and would like to volunteer or could do with some extra money come and talk to us. Special needs/hours can be catered for.

Women's Group and Men's Group

The Womens Group continues to be offered every Friday between 1-2pm, with varied activities and outings, and everyone is welcome. This group is facilitated by Lai Khum so give her a call on a Thursday or Friday morning to find out what is happening for that day.

◆ Next Women's Group is Friday 5 March at MHACA

The Mens Group is underway for 2004, again with Ken from Relationships Australia facilitating. It meets fortnightly on a Wednesday between 1-2pm. A light lunch is provided so come along for and meet some new people.

◆ Next Men's Group is Wednesday 17 March at MHACA

Housing Project

The Housing Program is up and running, with one of the units tenanted and applications being assessed for unit 2. The Housing Subcommittee (below) will meet again shortly; it comprises stakeholders and consumers who oversee the project, who are also responsible for the assessment of applications and allocation of the units. I would like to thank them for their time and commitment, their input has been invaluable.



This year we hope to reapply for more housing which will enable us to better meet the need for mental health supported housing.

That's about our lot,

Megan Rackley
Pathways Program
Coordinator

Life Promotion Program

Staying Strong Physically, Emotionally, Spiritually and Culturally

Coordinator: Dianne Linton; Life Promotions Officer: Raymond Campbell; Ninti Pulka Officer: Richard Ware

Update ● Update ● Update

Hi and Happy New Year to you all. Raymond and I hope everyone had a happy Christmas and holidays.

Welcome to Richard

We would like to welcome Richard Paré to the MHACA team this year. Richard is the new Project Officer for the "Ninti Pulka" Project (read more about Richard and the Project on page 11) and we look forward to supporting him and working in partnership with him.

Support Programs

Since our last edition of *inBalance* we have been busy planning for the year ahead. Raymond is going to be doing some exciting support programs with Larapinta Valley School and Irrekelantye working with young people, and we will report on our progress in the next edition.

Remote Workshops

The LPP team have been busy planning remote visits to deliver "Suicide Talk and Suicide Awareness" workshops. The communities we look forward to visiting are:

- Imanpa
- Harts Range
- Ikuntji (Haasts Bluff).

Consulting with schools

We have successfully been able to consult with schools to do some

Professional Development with teachers on suicide intervention. Our first workshop is with Anzac High School staff in March. We'll keep you posted on outcomes.

ASIST Suicide Intervention Training

We regularly help coordinate ASIST workshops throughout the year and the next one will be on 26-27 May. If you would like further information or want to register please contact Christine Palmer or Stephen Meredith at Congress on 8953 8988.

Local Support

Below is a list of services available if you or someone you know need support.

- Mental Health Services - 8951 7710 or 8951 7777 after hours
- Congress SEWB - 8953 8988
- Asyass Refuge - 8953 4200
- Reconnect (Gap Youth Centre) 89536344
- Tangentyere Youth Services - 8951 4222 or 8952 2999
- Police - 8951 8888
- Lifeline - 131114
- Crisis Line - 1800 019 116
- Kids Helpline - 1800 551 800
- LPP - 8952 3311

Dianne Linton
Life Promotion's Coordinator

Mission Statement

Promote the physical, spiritual, emotional and socio-cultural wellbeing of individuals, families and communities through community owned and developed initiatives as a means to reduce suicide and self-harm.

Purpose

To establish, coordinate and consolidate a comprehensive life promotion service and community network as an essential infrastructure to prevent and reduce suicide and its adverse consequences on individuals, families and communities.

The Life Promotion program provides an integrated approach to suicide prevention, intervention and post-vention through collaborative partnerships and community education.

Goals

- Health promotion
- Harm prevention strategies
- Early intervention and prevention
- Management and treatment of suicidal behaviour
- Community development, education and training
- Sharing of information
- Post-vention strategies

For further info call:

Dianne Linton or Raymond Campbell at MHACA on 8952 3311 between 8.30am – 4.30pm Monday – Friday.



(cont. from page 1)

Working with 'The Kit: A Guide to the Advocacy we Choose To Do' we were planting a seed that will hopefully one day blossom into a community where consumers can not only survive, but thrive as well. We now have the opportunity to take this information, build on it and share it with the wider community.

Rick reminded us that if we as consumers didn't have the inner strength, we wouldn't have come this far - we wouldn't have made the leap from consumer to consumer advocate.

We often forget there are a lot of people in society who aren't even diagnosed with a mental illness. Keeping this in mind, our knowledge becomes the power to inform, educate and enhance the quality of life for others. How can you get a diagnosis if you don't even know where to begin?



Getting appropriate support

Discussion on independence and growth also arose. A person doesn't go to a doctor every time they have a cold if they can manage it themselves; similarly, consumers should

have clinical access only when they need it, support which needs to be adequate, appropriate and sensitive to the needs of the client.

Among the personal stories one stood out. Rick talked about when he worked with a lady who had suffered from schizophrenia in the past who suddenly became distressed. Her doctor immediately diagnosed her as psychotic and changed her medication. Yet what had happened was completely normal: the woman was well, but had experienced problems with her mortgage and was experiencing healthy stress. Yet the doctor insisted, 'I am God, I know what's best for this patient' - his exact words. At this stage Rick pointed out to his superior that this doctor

was delusional and needed some medication for his own thoughts! (thinking he was a superior being).

It is a common expectation that once you're

considered 'well' you're not allowed to show any signs of distress, otherwise this may be interpreted as a relapse.

The flip-side to this, a lot of consumers agreed, is that once you leave the hospital you are expected to be 'cured'; some of us have been discharged with no follow up, no case-management and sometimes a care plan dictated by the doctor, not what the consumer feels comfortable with.

Yet there is little point to a care plan if the consumer has no input



or ownership of it. People will work when they are ready - they won't suddenly recover because they are thrust into the workforce. Getting well is all about consumers being allowed to inform the services which influence their recovery process.

Our positive stories need to be heard

Sadly, often the negative stories are highlighted, when we need to hear more about the positive stories. We all came to the conclusion that experts can be exposed to lots of training but if they aren't prepared to change their attitude towards those with an illness, then nothing will change.

The workshop was excellent. I came away motivated and inspired, realising what an important job consumer advocates have. My only regret was that it wasn't longer.

Sarah Chunys
with Leo Welin

MHACA Christmas Party 2003



Our Christmas party was held at MHACA on Friday 12th December. It was a great afternoon and everyone who attended was filled with festive cheer. The office was packed inside and out, and it was great to see everyone together enjoying this special time. Our Kris Kringle didn't work out as planned, however Sarah, Leo and Ken kept us amused with their light banter. The luncheon was a feast of traditional fare: turkey, ham, salads and Kathryn's fantastic fruit salad. Thank you to all the staff at MHACA for preparing their dishes, and special thanks to Dianne for her great organisation of the whole event.

**a
good
time
had
by
all**



"The real winners in life are the people who look at every situation with an expectation that they can make it work or make it better." *Barbara Pletcher*

Forum on Relapse Prevention

Pathways of recovery: Preventing relapse

A discussion paper on the role of relapse prevention in the recovery process for people who have been seriously affected by mental illness.

**9 March @ 12.30am
at MHACA
Everyone Welcome!**

A discussion paper on relapse prevention is being developed to address identified gaps in continuing care for people with mental illness. The paper represents a major national mental health initiative being undertaken under the Mental Health Plan 2003-2008 (see consultation questions for discussion in the adjoining box to the right).

All consumers and carers are welcome and encouraged to attend the forum, facilitated by consultant Debra Rickwood on behalf of the Promotion and Prevention Section of the Health Priorities and Suicide Prevention Branch of the Department of Health and Ageing.

Have your say on how relapse prevention can be used to strengthen the recovery paradigm.

Relapse prevention is an unexplored part of the recovery process. At first glance, the illness focus of relapse prevention appears to be in direct contrast to the wellness focus of recovery; however, incorporating relapse prevention within a recovery orientation may contribute to the empowerment of people with mental illness.

For further info phone Dr Debra Rickwood direct on (02) 6201 2701, fax (02) 6201 5753 or email Debra.Rickwood@canberra.edu.au

POSITION VACANT

WANTED: New Consumer Rep. on MHACA Committee

Due to a heavy work and study load this year Sarah Chunys is regrettably standing down from her position as Consumer Rep. on the MHACA Committee. If you are a consumer and would like to contribute to the Committee please give the MHACA office a call on 8952 3311. No contribution is too big or too small ... we'd love to hear from you.

"It's the little things you do that can make a big difference. What are you attempting to accomplish? What little thing can you do today that will make you more effective? You are probably only one step away from greatness."

Bob Proctor

Consultation around "Relapse Prevention" discussion paper

Some questions?

1. What does 'relapse' mean?
2. What does 'relapse prevention' mean?
3. How does relapse prevention relate to recovery and rehabilitation?
4. What is the role of medication in relapse prevention?
5. How do relationships between service providers impact on relapse and wellbeing?
6. In what way do the following factors affect risk of relapse?
 - accommodation
 - employment
 - social relationships (intimate relationships, family, community integration)
 - education
 - physical health
 - exercise
 - nutrition
 - spiritual wellbeing
7. Are there any other factors that affect relapse risk?
8. What should be in a relapse plan?
9. What are the roles for each of the following groups of people with regard to relapse?
 - consumers
 - family and carers
 - clinicians
 - service managers
 - service systems
 - policy makers
 - the whole community
10. What should be in the discussion paper?

Consumer Story:

Depression and Young People:

Early Intervention Can Help Break the Cycle

Sarah Chunys first experienced signs of depression at age 11, and attempted suicide at age 17. Since recovering from her suicide attempt three years ago and receiving intense treatment for her depression, Sarah has been advocating in the community on mental health issues. She is the national ambassador for Ybblue – the youth arm of the beyondblue initiative aimed at 12- to 25-year-olds, whose goal is to encourage depressed teenagers to seek help. This is part of Sarah's story (some excerpts reprinted from the article "Puberty Blues: Think Depression is an Adults-Only disease? Think Again" in Reader's Digest February 2004).

GROWING UP in Alice Springs I'd always been a fairly happy-go-lucky child, and especially enjoyed athletics at school. But around the age of 11, something changed. I became overwhelmed by a sense of despair I couldn't explain. Life felt empty and flat, despite the fact that a lot of good things were happening to me. My external world didn't match my internal feelings.

Over the next two years I began acting up at school and my grades slipped. But I told no one about my inner turmoil. As it got worse I cut and burned my arms, which distracted me and made the awful feelings to away, at least for a short time. When my parents noticed my wounds I chalked them up to accidents.

Sarah with John Howard at the Australian of the Year Awards



At 17, I was still swimming competitively. Despite a rigorous training schedule I was struggling to get my body fat down to the ideal percentage of an athlete. When I visited a doctor to find out why, he said that I had a condition called polycystic ovarian syndrome, and prescribed drugs to supplement my oestrogen levels

The hormones elevated my anxiety to boiling point. Within four weeks I was contemplating suicide, and within three months had made an attempt with a pill overdose. It was only

during my hospital recovery that I was correctly diagnosed with the depression that had haunted me throughout my adolescence.

I've since discovered that my case is not unusual. In a national mental-

In July 2003 Sarah won the Young Northern Territorian of the Year Award for her advocacy work regarding mental illness and young people. On 26 January 2004 she flew to Canberra to receive the prestigious Young Australian of the Year Award 2004. Sarah continues to be proactively involved in the local Alice Springs community, helping to raise awareness of mental health issues.

health survey commissioned by the federal government, as many as one in five young people – 100,000 kids nationwide – reported that at some point they had experienced symptoms of



Sarah (right) at the Australian of the Year Awards 2004

depression. The survey also revealed that up to five per cent of teenagers have severe symptoms of clinical depression.

According to Dr Jane Burns, senior program manager of beyondblue, a national depression initiative funded by the federal and state governments, this illness appears to be increasing among teenagers. Factors like soaring divorce rates and rising academic pressures can push kids to the brink. According to Burns, "The result is that for many



Sarah with Sandra Sully at the Awards

teenagers, adolescence is no longer just a moody period where they pop out well-adjusted on the other side. They can suffer the same chronic depression once considered an adult disease."

The effects can be devastating. Studies show depressed young people are more likely to fail at school, become promiscuous, and abuse alcohol or drugs. In extreme cases, someone can sink into a depression deep enough to commit suicide, currently the second leading cause of death after motor vehicle accidents among 15- to 25-year-olds.

But there's good news. Teenagers diagnosed with depression have an excellent change of recovery – even better than most adults with the condition. Why? As Burns explains, "With each episode of depression, negative thought processes become more and more entrenched, so that by adulthood they can be very hard to shake. But adolescents more readily learn the cognitive tools to help them battle depression."

Treatment typically involves up to 12 sessions of cognitive-behaviour therapy, in which teenagers talk with a therapist about sources of stress and coping strategies. In cases where a non-drug approach has failed, they may also be described anti-depressants.

Preventing depression is far easier than treating it. That's why, in the past five years, secondary schools have started to include anti-depression programs in the curricula. The aim is to raise awareness about the illness within the school community and to teach the students coping strategies. Sarah agrees this is the best way to

tackle the problem of teenage depression, and as a young person who has successfully learnt to live with and manage her depression Sarah has been



... and with Guy Sebastian

a strong voice in the community. She has been actively involved with MHACA, and helped to coordinate and facilitate Mental Health Week in October 2003.

As the national ambassador for Ybblue Sarah continues to work towards reducing the stigma associated with mental illness and to encourage depressed teenagers to seek help.

GETTING SUPPORT

The following organisations provide information and support to help people deal with depression, especially those who live in rural and remote areas (*specifically aimed at young people):

beyondblue - www.beyondblue.org.au
 Ybblue* - www.ybblue.com.au
 Reach Out!* - www.reachout.com.au
 MoodGYM* - moodgym.anu.edu.au
 SANE - www.sane.org
 BluePages - bluepages.anu.edu.au
 depressionNet - www.depressionnet.com.au

"Let your hopes, not your hurts, shape your future." *Robert Schuller*



DARWIN

GROW is an international community mental health organisation which has successfully been running self/mutual help groups in the NT since 1983.

GROW helps members to more effectively tackle rehabilitation after mental breakdown, for preventative purposes and/or simply for personal growth. Through mutual help-groups people are able to share common experiences in a friendly, caring, confidential atmosphere, and at the same time learn new coping techniques.

For more info or to receive the GROW newsletter phone 8945 4096 or email GROW at growinnt@octa4.net.au

'Ninti Pulka' Project - 'All Really Clever'

Hi everyone,

My name is Richard Paré and I recently joined MHACA as the Ninti Pulka Field Officer. I have been in Alice Springs for just over a year and moved here from Tennant Creek.



I moved to the Territory in the 1970s and was a fisherman for the next fifteen years. More recently, I have worked in the areas of Education, Sports and Recreation, Alcohol Rehabilitation, Disability Support, and have been a Gallery Manager. In my personal life I enjoy good movies, food and music. I have a keen interest in art although I rarely have the time to create these days.

Since starting as the Field Officer for the Ninti Pulka Project I have been familiarising myself with the project objectives and

developing a reporting system. In January Raymond Campbell from Life Promotions introduced me to Youth Organisations in Alice Springs which has aided me in understanding which services are available here. Dianne Linton from Life Promotions has also been very supportive and a wealth of information.

What is the Ninti Pulka Project?

I guess some people will be wondering what the Ninti Pulka Project is? Ninti Pulka means 'All Really Clever', and the goal

is to assist remote communities to develop programs where young people have been identified as being at risk from self harm or suicide. The Program aims are :

1. Increase the capacity of remote communities to address suicide and self-harm issues amongst young people
2. Encourage and support young people in increasing their "living skills", including problem solving, assertiveness, decision-making and related issues.

As Ninti Pulka Project is a partnership between Waltja Tjutangu Palyapayi Incorporated and Mental Health Association of Central Australia (MHACA) I have been working closely with Liz Archer and the Re-connect Team. I would especially like to thank Sarah Holder, the Re-connect Officer at Papunya for her time and hospitality when we were in the community.

Sarah introduced Liz and I to as many people as she could in the short time we were there. It was nice to meet with Traditional owners and listen to their issues. What I found hard was keeping my understanding separate, and seeing the problem from an Indigenous perspective. In time this will come easier as I learn to listen, and listen to learn, which will enable me to better support the needs of the communities.

I look forward to returning to the communities - to listening to their needs and delivering training that will enable the communities to deal with the challenging and sad issue of suicide and self-harm. I have always believed the only way forward is to empower people to be able to solve their own problems and make their own choices. I am grateful for the opportunity to be of service and pass on my skills to this worthy cause.

ARAFMI

Association of Relatives and Friends
of the Mentally Ill

Carer's Morning Tea
1st Tuesday of each month

at Royal Flying Doctors Cafe,
Stuart Tce, Alice Springs

Contact Olga Radke (08) 8955 0158
Fax: (08) 8942 2711 Email:
ntarafmi@octa4.net.au

NT Carers Meeting

3rd Thursday of every month
5.30-7.30pm

At NT Carers we recognise that every carer and their situation is unique, and should be treated as such. We work together with each carer to offer a range of services that specifically cater to them and their situation. Support is offered through referral to the Carer Respite Centre (right next door) and other appropriate services, counselling, support groups, advocacy, information, education and training.

For more info contact Sharon Kerber
8953 1669, PO Box 4929, Alice Springs



Alternatives to Violence

Creating Peaceful Pathways

Basic Workshop 13-14 March 2004

Anzac Hill High School
Wills Terrace, Alice Springs

The AVP Basic Workshop focuses on primary conflict resolution skills using step by step group exercises and experiences. The emphasis is on:

- Affirmation: building self-esteem
- Communication: improving both listening skills and assertive methods of expression
- Cooperation: developing cooperative attitudes that avoid competitive conflicts
- Creative conflict resolution
- Poor communication: builds frameworks for connecting with others
- Stereotyping: builds awareness of bias and prejudice
- Lack of forgiveness: builds the groundwork of reconciliation

The key messages of AVP:

- Respect for self
- Care for others
- Seek a non-violent path
- Think before reacting
- Transforming power

Cost: \$80 org. \$60 ind.
\$40 concession

For more info. please contact:
Stephen 8952 9970 (AH)
Ken 8952 7344 (BH)
www.avp.org.au

"There are two primary choices in life: to accept conditions as they exist, or to accept the responsibility for changing them." *Denis Waitley*

Anglicare Outreach Service

Anglicare Outreach Service provides support in daily living to people with mental illness in the Alice Springs community. We work in partnership with the Community Mental Health Service who provide professional case management to clients of the Outreach Service.



Relaxation workshop: Wayne, Paul, Rebecca, Judy and Mathew

A major aim of the

program is the active involvement of clients in the formulation and continuing review of their Case Management Plan.

Support and Workshops

We offer support with budgeting, shopping, menu planning, cooking and domestic duties. We also hold a cooking workshop on Tuesdays at St



Wayne and Ken

Mary's Campus. This has proved to be our most popular yet. After deciding a menu and shopping for the ingredients our clients prepare, cook and then bon appetite! And of course cleaning up afterwards...

A Relaxation Workshop is held on Monday and Thursday at the Green Room behind CAAODS. Stretching, deep breathing and ways to help manage stress are covered. For all our workshops transport is provided.

We also have a Transitional Housing Program where we aim to provide a safe, alcohol and drug free environment for people residing there, helping to prepare for independent living in the community.

Our vision for our clients is based on hope and the help to live meaningful, self-directed, fulfilling lives. We aim to promote a supported environment where people can come back, if need be, and try again.

Staff: Bill McFadzean, Judy Trend and Ken Guest



Contact

Contact Anglican Outreach on 8952 9984 or 0417 834165, The Lodge:16 Bath Street 9am-5pm.

Central Australian Mental Health Service Project

Improving the quality of mental health care

A project has been established to explore ways of extending the range and quality of mental health care options in the Top End and Central Australia.

The Reports on the Review of the Northern Territory Department of Health and Community Services (2003) and the Mental Service System Development Strategy Project (2003) highlighted that there have been increasing demands on mental health services in the NT over recent years. This situation has put pressure on limited staff and other resources that are already stretched to capacity.

The Central Australian Mental Health Service Project has been established to conduct a detailed analysis of the staffing and operations, costs and resourcing of inpatient and community-based mental health services. The Project will also explore alternative models of care that enable people to be provided with varying levels of support to prevent admissions and provide more intensive follow-up post-discharge. The main purpose of the project is to identify and

analyse options to enhance mental health care for our region.

Steering committee

The Project Steering Committee has been formed to provide input and advice to the project. It is chaired by Ms Carol Peltola, Assistant Secretary, Community Services, with membership comprising of departmental staff, non-government organisation representatives.

If you are interested in this project and would like input into the process contact Rebecca Orr/Brent Mansell on 8951 7710 or Claudia Manu-Preston at 8952 3311.

Senior staff meetings

The Mental Health Association has been invited to attend the Central Australian Mental Health Service Senior Staff Meeting. These meetings are held monthly, whose membership includes:

- Manager of CAMHS
- Team Leader, Community Mental Health Team
- Director of Psychiatry
- Nurse Consultant – Ward 1
- Manager, MHACA
- Consumer Consultant, MHACA

Terms of Reference

- To provide advice and input into the development of the service.
- To provide an update on the operations of the MHACA.
- To provide leadership and direction for the multidisciplinary CAMHS teams through:
 - ♦ reviewing policies, protocol and procedures, and work priorities relevant to the Inpatient Service, in line with legislation, regulations and professional standards;
 - ♦ instituting timely changes to existing policies and procedures as needed;
 - ♦ ensuring that changes and innovations are disseminated effectively to all Inpatient Team members;
 - ♦ making recommendations for improvements in service delivery;
 - ♦ forwarding proposed changes and new policies, protocols and procedures to TEMHS Executive through Inpatient QI Committee for endorsement.

The aim of these meetings is to work together on issues and problems leading to improvement of services for consumers.



Review of the Mental Health and Related Services Act – Have your say! 22 March @ 10.30am

The Department of Health and Community Services is conducting a review of the *Mental Health and Related Services Act 1998*. The Act is relatively new legislation and the purpose of this review is to identify any problems in its day-to-day application, and make amendment recommendations to the Minister for Community Services.

A *Mental Health and Related Services Act Issues Paper* is being circulated with the aim of encouraging organisations and individual members of the community to comment on the issues raised to date and on their preferences for the resolution of these issues. A Submission Form has also been prepared by the department for easy feedback.

If anyone would like to make comments on the review MHACA is holding a meeting on 22 March at 10.30am to discuss changes. Please come along or phone Claudia.



australian
mental
health
consumer
network

What is the Australian Mental Health Consumer Network?

The Australian Mental Health Consumer Network (AMHCN) is a nation wide network of consumers of mental health services. It exists to :

- Promote equity and access for mental health
- Empower consumers to utilise all means to achieve and maintain their mental health; and
- Promote the expansion of consumer participation and influence within the community.

Why do we need the Australian Mental Health Consumer Network?

- We need a national voice in mental health service planning, delivery and evaluation
- We need to be participants in the formulation of State and Federal laws
- We need to be directly in touch with fellow consumers
- We need research, including consumer-based research, about our opinions
- We need to be informed of our rights
- We need to know the effects of medications, and to have our feedback recognised
- We need to be able to make informed choices about our treatment options
- We need access and input to a range of holistic rehabilitation practices

Our key words:

- Access
- Communication
- Integrity
- Accountability
- Equity
- Confidentiality
- Dignity
- Social justice

For further information contact AMHCN

Phone: (02) 62850111

Fax: (02) 62850112

Email: secretariat@amhcn.com.au

Website: www.amhcn.com.au

Only Just Began

The horizon fresh
Just like the highway breeze pattern within
With an air of difference, seemly years away
That is leaving me longing
Because I've been, for too long a time
Walking a crooked trail
Through a night passage
And no more black nights
As being a long way from home
Because I've an air of beckoning inside
Of a journey, where it's my time
Taking hold like a silent whispering
That only Heaven knows
Where my new highway breeze pattern
Will lead me from here, enduringly
For the miles that lie ahead
Having a difference this time,
Of a pattern foreign to me
And it's a journey upon a highway
That has its sense of meaning and
wherefore
As one of giving and sharing
As I walk new and unknown country miles
Further down this path to that somewhere
Yearning within me
To follow its pattern
And its in that somewhere destination
I am aware of distinct purpose
Although I've yet to fully fathom it
Such as being perhaps still long away
But what matters most
After all these years
I'm no longer on the highway to nowhere

Leo "Helsinki" Welin

"Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around." *Leo Buscaglia*

Mental Health conquers Corporate Challenge!



Tony Fitzpatrick, Darryl Preston and Sarah Chunys: proud runner's up

The triumphant Mental Health trio of Sarah Chunys, Darryl Preston and Tony Fitzpatrick swam, ran and cycled their way into second place at the recent Corporate Challenge held on Saturday, 7 February 2004. Representing MHACA and the Community Mental Team Sarah, Darryl and Tony did local mental health services proud to finish closely behind JDFGP.

Delighted by their achievement the team have been inspired to compete again next year. For anyone interested we are hoping to enter a few teams, so chuck on your swimmers, strap on your runners or 'get on your bike!' ready for some corporate fun in 2005!

What is the National Mental Health Strategy?

IN THE last issue of *inBalance* we featured the government's release of the National Mental Health Plan 2003-2008 and how it identifies priorities in the mental health sector for the next five years. This plan is part of the government's larger National Mental Health Strategy (NMHS).

Overview of NMHS

The NMHS is a cooperative program between Commonwealth, State and Territory governments to improve mental health outcomes for the community. It was endorsed in April 1992 by Australian Health Ministers as the framework to guide mental health reform. The broad aims of the NMHS are to:

- promote the mental health of the Australian community
- where possible, prevent the development of mental disorder
- reduce the impact of mental disorder on individuals, families and the community

- assure the rights of people with mental disorder

The Strategy was articulated in four policy documents:

- The *National Mental Health Policy* defined the broad aims and objectives of mental health reform, promoting a shift from institutional to community care. Agreement to this document in April 1992 represented the formal commencement of the Strategy.
- The *Mental Health Statement of Rights and Responsibilities* endorsed the principles of United National Resolution 98B (on the Protection of Rights of People with Mental Illness). This document was agreed by all Health Ministers in 1991 and outlined the philosophical foundations of the Strategy in regard to civil and human rights.
- The *First National Mental Health Plan* (NMHP) provided an action plan for the period 1992-93 to 1997-98 and described how Commonwealth, State and



Territory governments would implement the aims and objectives of the National Mental Health Policy.

- The *Medicare Agreements* set out the Commonwealth, State and Territory roles in achieving reform of mental health services over the period 1993-1998.

Towards the close of the five-year period an independent evaluation concluded that much had been achieved but the reform agenda was far from complete. Acknowledging the unfinished agenda, a second five-year NMHP (1998-2003) was endorsed in 1998.

The NMHP 2003-2008 is the third and current plan guiding mental health reform in Australia.

Auseinet

Australian Network for the Promotion,
Prevention and Early Intervention for Mental Health



Major peak body providing useful resources on mental health

Auseinet, located at the Flinders University of South Australia, is a national project funded by the Australian Government Department of Health and Ageing under the NMHS and the National Suicide Prevention Strategy.

Auseinet supports a national network of people across many sectors to access and share information around good practice in mental health promotion, prevention of mental illness, early intervention (PPEI) and suicide prevention across the lifespan.

Project activities include:

- Support to a variety of **state and territory based networks** in a range of sectors around issues associated with mental health promotion, prevention, early intervention and suicide prevention across the lifespan
- Provision of support around **consumer and carer related issues** - a Consumer and Carer Consultative Committee with representatives from all states and territories has been formed to provide support and feedback concerning Auseinet's work
- A **comprehensive information and clearinghouse service** including an online searchable Resources Catalogue holding a range of resources relating to PPEI, mental health and wellbeing and suicide prevention in the form of: reports, research, books, videos, kits, conference papers,

journals, newsletters and online documents www.auseinet.com/resourcedb/index.php

- **Auseinetter newsletter** incl. guest editorials, state and territory based project summaries, Auseinet activities, useful publications and websites - three issues annually www.auseinet.com/resources/auseinet/

- **Australian e-Journal for the Advancement of Mental Health** - a peer reviewed electronic journal which aims to nurture understanding of mental health PPEI within a multidisciplinary forum - three issues annually www.auseinet.com/journal/

- In partnership with the Aust. Div. of General Practice, continue to develop and enhance the capacity of **general practitioners** and other professional personnel in this context to progress PPEI

- Ongoing participation in key national projects including **Mindframe** (resources for media professionals www.mindframe-media.info) and **COPMI** (children of parents with a mental illness project).

- Development of a range of publications

Objectives of Auseinet:

- To provide national coordination in the areas of Promotion, Prevention and Early Intervention (PPEI) for Mental Health and Suicide Prevention.
- To facilitate the implementation of the National Action Plan (NAP) for PPEI and the Life Framework across a range of sectors.

- To identify, collate and disseminate high quality information that promotes good practice and enhances information sharing in PPEI and Suicide Prevention for a range of sectors.

- To further enhance progress in the sustainable implementation of the NAP for PPEI and the Life Framework within the state/territory jurisdictions.

- To enhance the capacity of the consumer/carer sector to implement PPEI initiatives in their sector and to contribute to the implementation of PPEI at a national level.

- In collaboration with key stakeholders, ensure that promotion, prevention, early intervention and suicide prevention are being addressed in Indigenous communities.

- To facilitate the development and implementation of workforce development initiatives that enhance the capacity of the workforce(s) in the following sectors to implement PPEI and Suicide Prevention: mental health (including consumers and carers), community health, public health, general practice (primary care), Indigenous health and multicultural health.

- To produce high quality publications that increase the knowledge base of PPEI and Suicide Prevention research, policy and practice.

Contact the Auseinet team
on 08 8404 2999 or email:
auseinet@flinders.edu.au
website: www.auseinet.com



**Commonwealth
Carelink Centres**

**Your link
to Living
Independently**



Commonwealth Carelink Centres provide an information service to help put older Australians, people with disabilities and those who care for them in touch with a wide range of community, aged care and disability services. Anyone can visit a Commonwealth Carelink Centre or receive the information they need by calling:

FREECALL™ 1800 052 222*
www.comcarelink.health.gov.au
 TTY and modem callers may call through the
 National Relay Service by dialing 1800 555 677
 (then asking for 1800 052 222)

If you need an interpreter to contact your nearest Centre, telephone the Translating and Interpreting Service on 131 450.

* Calls from mobile phones are charged at applicable rates

"Don't blame others for your failure to be fully accountable for your own life. If others are to blame then you have given them control."

Bob Perks

Contributions to inBalance

If you would like to include any articles, news, stories or poems in the next edition of inBalance please email or send us your information before 21 May 2004

NTCAG Meeting

There will be an NTCAG meeting held 24 March. Members will be meeting the new Minister for Family and Community Services, Marion Scrymgour MLA.

If you have any issues you would like Claudia to raise at the meeting please give her a call on 8952 3311.

Women's Group

Are you looking for

- exciting actions
- relaxing afternoons
- interesting people to talk to
- laughter and fun...

Come and join in our Women's Group weekly activities.

When: Every Friday

Time: 1.30pm

Venue: MHACA

11 Stuart Tce, Alice Springs

For more information contact Lai Khum at MHACA on 8952 3311

"The best way to predict the future is to create it." *Peter Drucker*

Black Dog Institute:

Consumer and Carer Research Centre

(excerpt reprinted from Ausinet newsletter, article by Sue Drdovic, Project Officer)

The Black Dog Institute, based at the Prince of Wales Hospital in NSW, is an organisation dedicated towards raising clinical standards in diagnosing and treating mood disorders. It takes its name from the term used by Winston Churchill to describe his own episodes of depression, and illness from which he suffered for recurrent periods. In addition to providing educational programs for general practitioners, psychologists and others, telepsychiatry, rural and remote clinics, and population health approaches, the Institute offers a Consumer and Community Resource Centre, an exciting initiative which aims to:

- make available to consumers, carers and the community at large high quality, yet practical, information and other resources about depression and mood disorders
- develop strong links with consumers and the community, thereby allowing people who are affected first-hand to have substantial input into the resources and activities of the Institute; and
- coordinate a range of consumer, carer and community activities that help to promote an understanding of mood disorders as well as assist people in their recovery process.

Contact Sue Drdovic at the Resource Centre on (02) 9382 4516.

18th World Conference on Health Promotion and Health Education

26-30 April 2004, Melbourne

The main themes of the conference will be:

- Maintaining diversity in a global culture for health and wellbeing
- Shifting the balance of power: new forms of governance and participation
- Vision, purpose and leadership: exploring difference pathways to health
- Setting an agenda for promoting indigenous health
- Restoring the balance between environment, health and spirituality

Health 2004, (03) 9417 0888, Fax (03) 9417 0899
Email: Health2004@meetingplanners.com.au, www.health2004.com.au

6th Biennial VICSERV Conference: Challenging the Paradigm

29-30 April, Melbourne

A national psychosocial rehabilitation conference for mental health service staff and managers, consumers, carers and policy makers.

Ph (03) 9482 7111, email conference@vicserv.org.au, www.vicserv.org.au

Making a Difference

A conference for Direct Support Workers/Carers working in the field of disability

Darwin: 28-29 June 2004, Charles Darwin University,
Alice Springs: 30 June – 2 July 2004, Charles Darwin University

This conference aims to promote professional development, increase the capacity and involvement of Direct Support Staff in the ongoing development of disability services throughout the NT, enhance the status of Direct Support Workers and Carers, increase community awareness of people with disabilities and develop support networks for workers and people with a disability.

Perspectives on Recovery Conference

2-3 August 2004, Brisbane

Keynote speakers

Mary Ellen Copeland is a mental health consumer, author, educator and mental health recovery advocate from Vermont, USA. She specialises in the successful self-management of psychiatric symptoms. Her work is based on her studies of thousands of people who experience psychiatric symptoms and on her own personal struggle with these symptoms — rising from total incapacitation to enjoying a rich and rewarding life. (www.mentalhealthrecovery.com)

Mary O'Hagan has experience of ongoing mental illness. She initiated the mental health service user movement in New Zealand in the late 1980s, and was the first chair person of the World Federation of Psychiatric Users between 1991 and 1995. Mary has experience working in consumer organisations, in mental health policy and funding agencies, and as a consultant. She has represented service users in national and international forums. Mary is currently a Commissioner for the Mental Health Com. in NZ.

Phone the Australian
Mental Health Consumer Network
on (02) 6285 0111
or email amhcn.com.au

HARVESTING HOPE



ACROSS THE LIFESPAN

14th Annual THEMHS conference: Harvesting Hope: Across the Lifespan

1-3 Sept 2004, Gold Coast

This years theme reflects key mental health messages that recovery is about developing and sustaining hope and that maintaining good mental health is a central issue for all age groups. An international forum attracting over 1000 participants.

Ph: (02) 9810 8700, email info@themhs.org, www.themhs.org



Auseinet Publications

Model projects for early intervention in the mental health of young people: Reorientation of services.

A guide for professionals and health administrators considering reorienting their own service (\$11.00 per copy).

Early intervention in the mental health of young people: A literature review

(\$11.00 per copy).

Clinical approaches to early intervention in child and adolescent mental health

This is an edited series aimed mainly at health professionals who work with young people, but may be of interest to others. Each volume in the series is a stand-alone document (\$11.00 per copy). Complete set - Early Intervention and Clinical Approaches series, 7 books - \$55.00)

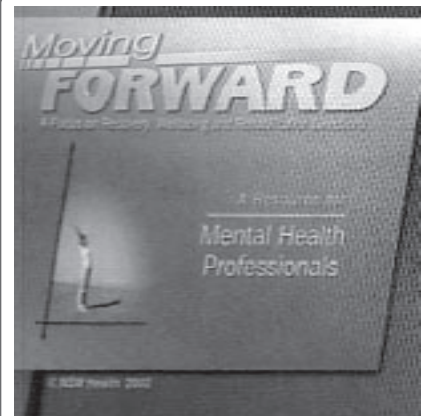
Building capacity for mental health: A two and a half year follow-up of the Auseinet reorientation of services projects

From 1998 to 1999, Auseinet supported eight agencies that provided services to children and young people to reorient their services to an early intervention approach. In this follow-up report, a capacity building framework has been used to evaluate the extent to which the strategies developed by the agencies have been sustained or expanded two and a half years later. Available online: www.auseinet.com/resources/auseinet/

Staying Alive: Saying 'No' to Suicide

The SANE Guide to Staying Alive provides practical advice and hope to people with a mental illness whose lives are plagued by suicidal thoughts. People living with mental illness, particularly depression, are at much greater risk of suicide than the general population and are especially vulnerable in the year following discharge from hospital. The Guide has been written to help people recognise when they are at risk of suicidal feelings, what support they need, and to understand what they can do to get on with life again after an attempt. It also has a section for families and friends about helping someone who is suicidal.

The Guide is available from SANE on 1 800 688 382 or www.org.au



Moving Forward: A Resource for Mental Health Professionals

is a resource tool developed for mental health professionals (both government and non-govt). It covers key issues and interventions related to psychiatric rehabilitation and recovery offering professionals a 'place to start', and is divided into five comprehensive modules:

1. Overview: outlines key concepts, definitions, principles and service-related issues
2. Essential Elements: covers goal-setting, planning and assessment, interventions and outcomes
3. Strategies: on six key approaches: family interventions, cognitive and behavioural interventions, skill development, accommodation support, vocational planning and support, and case management
4. Groups with Special Needs: outlines interventions for a wide range of different consumers
5. References and Resources: includes a comprehensive reference list for each section with links to other web sites and resources

To order a copy (\$29.95 plus \$7.95 postage and handling) contact the Hunter Institute of Mental Health (02) 4924 6721, fax (02) 4924 6724, himh@hunter.health.nsw.gov.au or visit www.himh.org.au.



Mental Health Diary



Date and Time	Meeting Description	Location	Contact
Every Friday 1.30pm	Women's Group	MHACA office	Lai Khum 89523311
Mon. 8 Mar. 12.30pm	Committee Meeting	MHACA office	Claudia 89523311
Wed. 17 Mar. 1.00pm	Men's Group	MHACA office	Megan 89523311
Wed. 31 Mar. 1.00pm	Men's Group	MHACA office	Megan 89523311
Thurs. 1 Apr. 1.00pm	Consumer Business Lunch	MHACA office	Claudia 89523311
Mon. 12 Apr. 12.30pm	Committee Meeting	MHACA office	Claudia 89523311
Wed. 14 Apr. 1.00pm	Men's Group	MHACA office	Megan 89523311
Wed. 28 Apr. 1.00pm	Men's Group	MHACA office	Megan 89523311
Thurs. 6 May 1.00pm	Consumer Business Lunch	MHACA office	Claudia 89523311
Mon. 10 May 12.30pm	Committee Meeting	MHACA office	Claudia 89523311

"A life of reaction is a life of slavery, intellectually and spiritually. One must fight for a life of action, not reaction." *Rita Mae Brown*

About MHACA - Building a Better Community

The Mental Health Association of Central Australia (MHACA)

is a non-profit community-based organisation that endeavours to:

- Provide non-clinical support to people who have a mental disability
- Offer psychosocial rehabilitation and continuity of care that is recovery-oriented
- Assist community understanding of mental health issues
- Reduce the stigma attached to mental illness
- Restore human dignity and social, emotional and spiritual wellbeing in all people

Services Offered

MHACA offers three main services:

Pathways Program:

This program helps people whose lives are affected by mental health issues achieve self-directed goals. We have assisted people to pursue a range of activities, including TAFE courses, and volunteer and paid work.

Life Promotion Program:

This program aims to support the central Australian community in Alice Springs and remote areas to prevent suicide. The LPP team have a range of resources to help agencies, individuals and groups learn more about life promotion and suicide prevention.

Advocacy and Participation:

- We host a monthly Consumer Forum and Afternoon Tea where consumers can meet and discuss important issues in mental health.
- We have a small library of information, including Advocacy Kits which can be loaned for free.
- For carers we can put you in touch with a local support network.
- You can become a member of the Association and receive our bimonthly newsletter.
- You may wish to nominate for our voluntary Committee, or you can mail your issue to us for the Committee or Consumer Forum to consider.

For further information please contact the MHACA office on 8952 3311

MHACA Membership

If you would like to become a member of the Mental Health Association of Central Australia and receive a copy of our quarterly newsletter **inBalance**, please send us your details:

Name: _____

Organisation/Dept (if applicable): _____

Address: _____ Code: _____

Phone: _____ Fax: _____ Email: _____