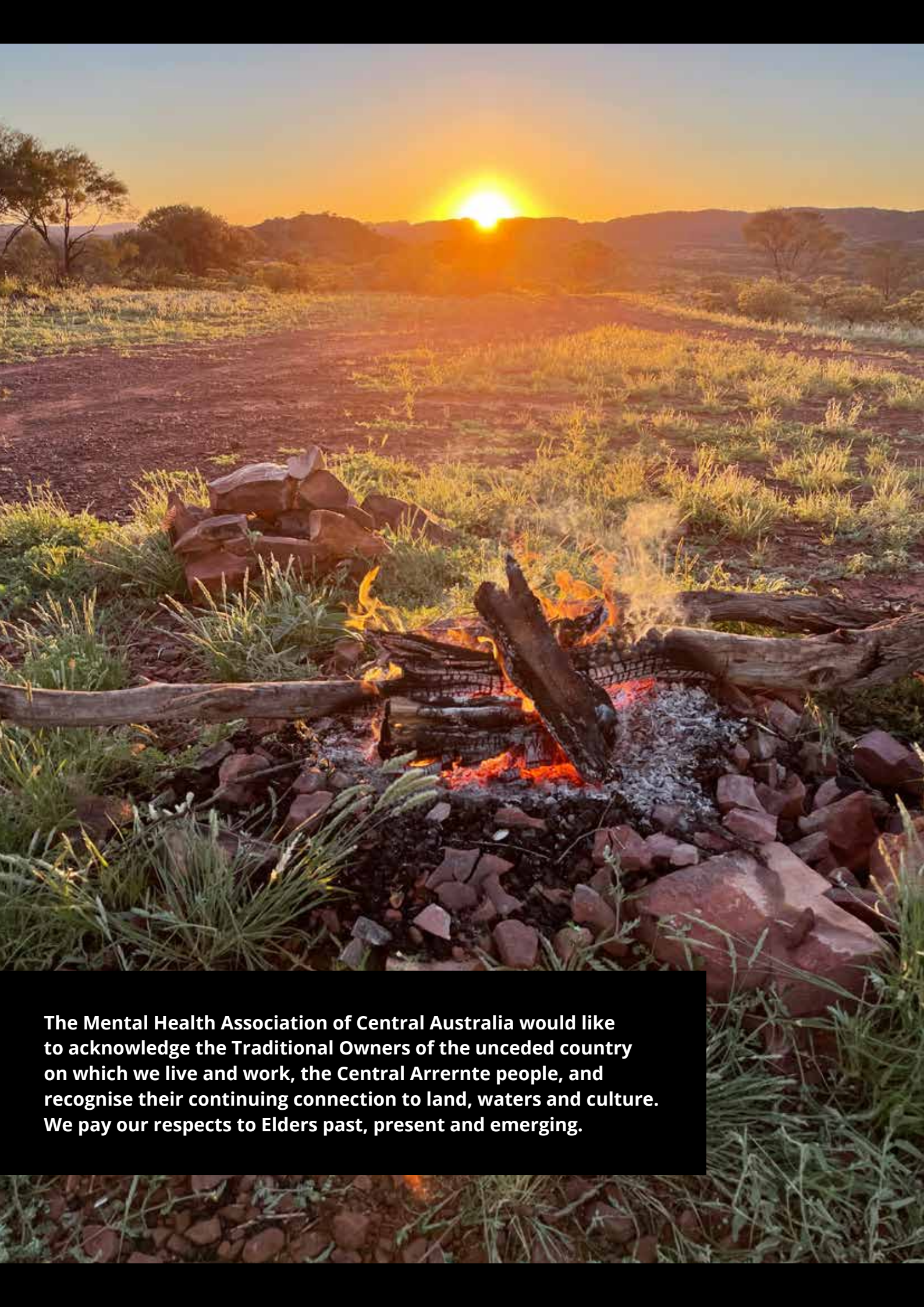




MHACA
Mental Health
Association of
Central Australia

ANNUAL REPORT

2020 – 2021



The Mental Health Association of Central Australia would like to acknowledge the Traditional Owners of the unceded country on which we live and work, the Central Arrernte people, and recognise their continuing connection to land, waters and culture. We pay our respects to Elders past, present and emerging.

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The Mental Health Association of Central Australia (MHACA) has offered psychosocial support services and health promotion programs aimed at enhancing the mental health and wellbeing of people living in Central Australia for almost 30 years.

CHAIRPERSON MESSAGE

Thank you for your interest and involvement with the Mental Health Association of Central Australia (MHACA). I would like to acknowledge that we are privileged to be able to deliver our services from Arrernte country, with our main office here in Mbantua (Alice Springs).

I acknowledge the cultural richness and continuing connection to country of the Arrernte people as custodians and traditional owners of these amazing lands and pay my respects to their elders past and present, as well as acknowledging the contributions of their emerging leaders.

It gives me great pleasure to present MHACA's 2021 Annual report. The report highlights the many achievements of the organisation throughout 2020/21. We continue our work to lead and support a range of mental health initiatives in the region.

Our primary goal is supporting local communities with comprehensive and quality services and facilities that enhance peoples' quality of life and enable them

to manage and potentially resolve any mental health issues that may impact their lives.

Once again, COVID-19 has presented the whole community, indeed the whole world, with ongoing challenges. I would like to acknowledge the work of the MHACA management team, staff, and participants in continuing to adapt to the challenges of COVID and ensuring the ongoing delivery of quality programs and services for our community.

It has been my first year as Chairperson of MHACA and I would like to extend my thanks to my fellow Board members for their ongoing support and engagement around the work of the organisation. We are fortunate to have an active and committed Board who continue to work diligently on the current needs and future sustainability of our services and support for participants.

The last 12 months and more has seen MHACA progress on the journey of understanding and engaging with the National Disability Insurance Scheme (NDIS). This has meant supporting participants and other community members in their transition to an NDIS based support model, as well as developing the organisational capability to operate effectively in this new environment.

It is important to acknowledge the adaptability, patience and enthusiasm which has characterised the work of the MHACA team as we explore this new world, while still maintaining our historical systems, supports and services.

In closing I would like to acknowledge the critical support of our funding bodies & partners, the MHACA staff & participants, my fellow Board members, and the Central Australian community. We are fortunate to have so much support and good will from many people and organisations, working together with us, as we deliver this vital work around mental health in the Central Australian community.

Peter Riley
Chairperson



FOSTERING MENTAL HEALTH

Our Vision

Central Australia is a safe and inclusive community that actively fosters and supports good mental health.

Our Mission

MHACA supports participant-driven recovery and promotes mental health and wellbeing in our community.



MHACA participants and staff at the Healthy Bodies Support Healthy Minds Picnic June 2021

OUR VALUES

We value lived experience.

The knowledge and understanding of participants, communities, and others with a lived experience of mental illness and distressing life episodes underpins and continually improves our service delivery.

We value respect.

We respect the experience and contributions of participants, colleagues, communities, and stakeholders. Staff demonstrate respectful behaviour in all aspects of their work.

We value diversity.

We actively seek the voices of diverse peoples to enrich our approach and ensure our organisation responds to their needs. We value that MHACA participants and staff have a range of abilities and backgrounds. We acknowledge local Aboriginal cultures and embrace multiculturalism, gender equality and LGBTQIAP+ peoples.

We value creativity and innovation.

We continuously review and improve our services and support each other to explore creative responses that will make our services and organisation stronger.

We value safety.

We understand how critical it is that people feel safe. We will create an environment grounded in kindness and hope where people are supported to increase their skills and where recovery can occur.

We value sustainability.

We are here for the long term and will equip ourselves to stay strong in the face of social, economic, and environmental changes, by making informed decisions to manage and optimise resources.

OUR STRATEGIC GOALS

1

Goal 1:

MHACA will provide quality, evidence informed services to our clients.

2

Goal 2:

MHACA will work collaboratively in the development and delivery of high quality and effective mental health programs.

3

Goal 3:

MHACA will work toward reducing the stigma associated with mental illness and promote mental health and wellbeing in our community.

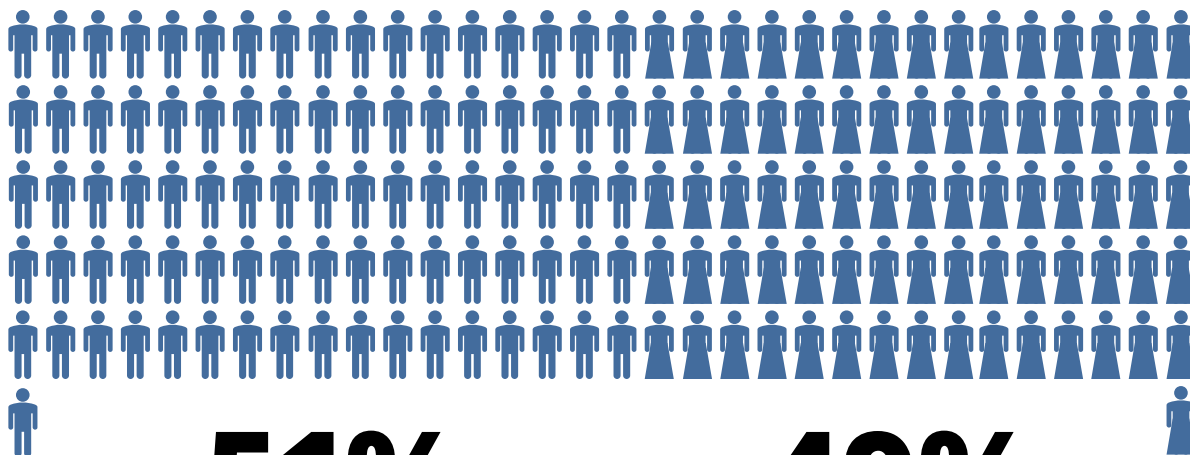
4

Goal 4:

MHACA will strengthen our organisation to effectively and efficiently navigate changes in the service delivery system and respond to emerging needs in the community.

162

people received a MHACA service

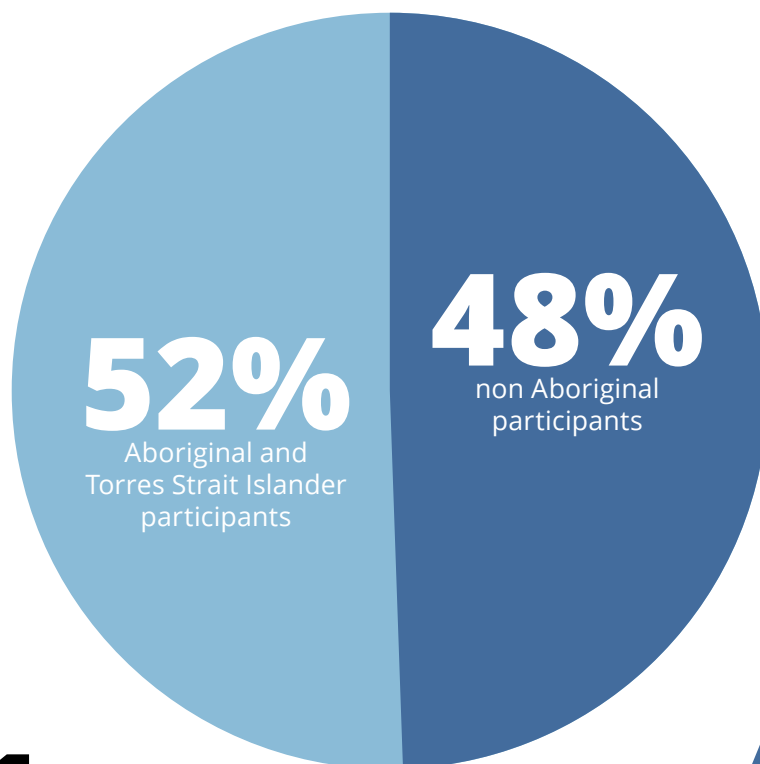


51%

male participants

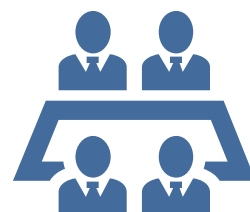
49%

female participants



21

new NDIS applications



6

Alice Springs
Mental Health
Professionals
Interagency
Meetings



66

intake
interviews



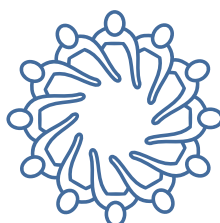
9511

Drop-in Centre hours



3419

hours of one-on-one
support provided



4419

group activities
hours of support



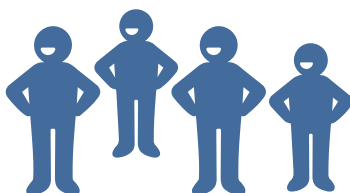
93

support coordination participants



33

health promotion
events



3471

health promotion
event attendees



1060

website visits
per month



Like

540

Facebook page
likes



119

Instagram followers

THE YEAR IN REVIEW

The last year has been a challenging time for humanity however it has also reminded us of the incredible resilience of people and communities.

While COVID-19 has placed many stresses on people and organisations it has also created opportunities to innovate. Being adaptable and creative have led to new ways of providing services and keeping connected to each other.

MHACA continues to play an important role in the Alice Springs community through providing supports to people living with mental illness and delivering mental health promotion and suicide prevention campaigns.

COVID-19 Response

As with organisations across Australia MHACA faced many challenges associated with the COVID pandemic this year. Staff and participants worked together to create a safe place to be and improved our hygiene and physical distancing measures.

At a day-to-day level MHACA focused on continuing to ensure that participants had the supports they needed. Our Health Promotion Team did a mighty job ensuring that the local community was aware of the pathways to obtaining supports.

New services were established and a Territory-wide project offering face-to-face training in peer work and mentoring for managers all happened despite the many challenges and complications.

Increasing Access and Diversity

Alice Springs is home to an increasingly diverse community, and it is estimated that up to one third of residents were born outside Australia. MHACA wasn't seeing this reflected in the people who use our services, so we launched a project to explore the unmet mental health needs in the local multicultural and LGBTQIAP+ communities.

Centred in Choice facilitated a series of interviews and focus groups to build a better understanding of the needs of these communities and proposed a range of strategies to address the perceived barriers to access.

The report identified seven key areas of focus and over the next twelve months we will be implementing a strategy to enhance service access.

Refreshing Our Approach

In the past we have primarily described ourselves as a psychosocial support service for people with enduring mental illness. Our Strategic Plan and the pandemic prompted a shift to MHACA having a stronger focus on the health and wellbeing of our whole community.

Over the last year we:

- centralised our intake processes to include a triage and referral service
- upgraded our IT systems to support remote work
- focused our health promotion on lifestyle interventions to promote wellbeing, the development of resources targeted to vulnerable groups and implemented a broad-ranging communications strategy
- built our social media presence to share mental health information.

Collaboration

A successful organisation does not work alone. MHACA facilitates and participates in:

- local networks
- collaborative events
- co-design processes
- creating opportunities for shared training

Our partnerships with the Central Australia Health Service Mental Health teams, Office of the Public Guardian, Suicide Story Aboriginal Advisory Group, Community Housing Central Australia, AnglicareNT, Mission Australia, Disability Advocacy Service, NT Shelter, Central Australian Aboriginal Congress and the NT Primary Health Network as well as the many other dedicated providers in Alice Springs have continued to grow and develop.

One of our key activities is hosting the Alice Springs Mental Health Professionals Network. This group brings together people with a common interest in mental health for information-sharing and professional development. It meets bi-monthly and this year we facilitated presentations from:

- Le Smith - Executive Manager Health Commissioning, Northern Territory Primary Health Network
- Kate Argentino - Social Emotional Wellbeing, Central Australian Aboriginal Congress
- Stephanie Milosavljevic - NT Working Women's Centre
- Dorothy Belperio - Building the Mental Health Peer Workforce
- Arthur Cooper - Saltbush Mental Health Services
- Bronwyn Hall - Manager Wellbeing Team, Ayers Rock Resort
- Andrew McClelland - Senior Lecturer in Mental Health, Centre for Remote Health
- Wendy Morton - Executive Officer, Northern Territory Mental Health Coalition
- Lucinda Moody - Healthy Communities Program, Alice Springs Town Council



The Suicide Story handover meeting with NT PHN and AMSANT, January 2021.



CEO's Message

MHACA is an exceptional organisation offering high quality recovery focused services to some of the most vulnerable people in our community.

I am extremely proud of our staff team's achievements this year. COVID has presented huge challenges to people both in their work and personal lives, and they have continued to offer high quality services to participants and produce amazing work.

Merrilee Cox
CEO

NDIS Transition

One of the other major achievements this year was the successful completion of our NDIS Transition Implementation Strategy. All eligible participants were supported to test their eligibility for NDIS supports, and for those who were eligible to make the transition to individualised funding.

The organisation has bedded down systems and processes to maximise the viability of our NDIS services and feels confident in our capacity to continue to deliver high quality recovery focused support to participants.

Whilst the NDIS poses ongoing challenges at an organisational level, it has had some wonderful outcomes for participants.

We were very proud to be assessed as fully meeting the NDIS Quality and Safeguards Standards. We will continue to review our practices to ensure we maintain this high standard.

Innovation

MHACA continues to have a strong focus on innovation and developing responsiveness to unmet needs in the community. Some of the key developments this year were:

- the renegotiation of our funding agreement with the Northern Territory Government Department of Health to pilot an intensive housing and support program for people with complex needs. The Collaborative Living on Arrernte Country (CLOAC) program is a partnership between clinical services, MHACA and housing agencies in Alice Springs
- working alongside the Suicide Story Aboriginal Advisory Group to complete the transition of the Suicide Story program to Aboriginal community control after 12 years of facilitation by MHACA. AMSANT was awarded the contract by the Northern Territory Primary Health Network
- successfully attracting funds through the NDIS Innovation Grants for the Promoting Peer Work Project to support further development of peer work in the Territory through training for peers and capacity building within the mental health services sector.

Healthy Bodies Support Healthy Minds

People with mental health difficulties have significantly poorer physical health than the general community. There are many reasons for this and MHACA is committed to implementing strategies that address the risk factors including nutrition, health literacy, tobacco, physical fitness, oral health and participation. Our Health Promotion Unit is leading an organisation-wide strategy to build awareness for both staff and participants, promote healthy behaviours and support participants to make healthy choices.

What's Ahead

We have some major projects in the year ahead including the development of a Lived Experience and Consumer Participation Framework, expansion of the range of services we offer, implementation of our Diversity Strategy and the introduction of a new Clients Services database.

In 2023 MHACA will be celebrating our 30th birthday. Discussions will begin on how we will acknowledge the achievements of this organisation, which started as a small advocacy group and now has a strong presence and reputation in the community.



Participants attended the Alice Springs Desert Park as a MHACA weekend group activity.

GOVERNANCE



Members of the MHACA Board:

Peter Riley, Susan Brooks, Ali Thorn, Mary Menotti, Maree Corbo, Lavenia Saville, Marcus Tabart.

MHACA is fortunate to have a skilled and committed Board which meets monthly and provides active guidance and support to the organisation. This year Peter Riley relinquished the role of Treasurer to take up the Chair position. New Board member Lavenia Saville stepped into the Treasurer position. Dira Horne took up the role of Deputy Chair.

Board Members participated in formal governance training throughout the year and Matrix Consulting facilitated a workshop on Risk Management and Appetite in late 2020. A key project of the Board this year was a review of the MHACA Constitution to ensure it reflects contemporary expectations of governance.

Board Members

- Peter Riley – Chair
- Dira Horne – Deputy Chair
- Lavenia Saville – Treasurer
- Jo Nixon
- Mary Menotti
- Maree Corbo
- Frank Curtis
- Marcus Tabart
- Susan Brooks
- Ali Thorn
- Alison Cunynghame

OUR HIGHLIGHTS

Governor General Visit

In August 2020 MHACA hosted a visit by His Excellency General, The Honourable David Hurley and Mrs Linda Hurley. They enjoyed a tour of the premises and the opportunity to hear directly from participants about their experiences. Mrs Hurley is passionate about the benefits of community singing and led MHACA staff and participants in a chorus after a performance by the MHACA Kututu Wattle Seeds Group.



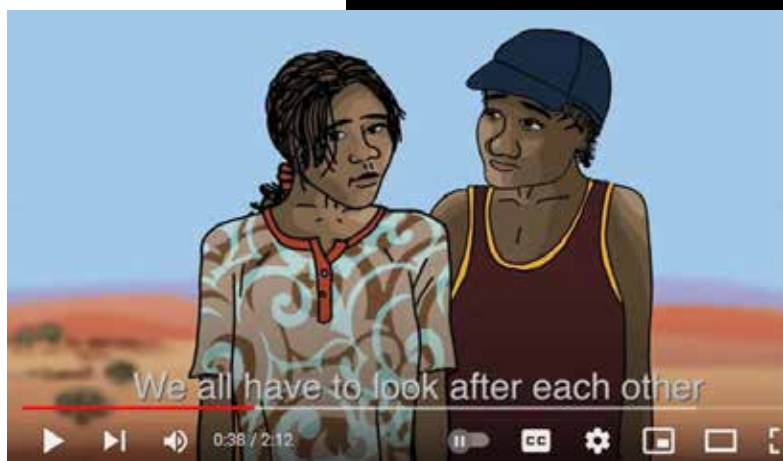
Community Event of the Year

In its 7th year the Stress Less in the Park event was held on the Civic Centre Lawns as part of Mental Health Week in October 2020. 350 people attended and received information from 19 local service providers with stalls. MHACA took on the coordinating role of the event in 2020 with the support of a committee. The event was nominated for the 2021 Australia Day awards and won the Community Event of the Year Award.



New Health Promotion Animations

'Taking Care of People with Worries' is a short animation that provides some suggestions for how to care for someone who has too many worries and may want to hurt themselves or even end their life. This video aired on Imparja, ICTV and social media. 'Keeping Everyone Safe' provides advice for when someone threatens to end their life to get something they want. The animation was developed by the MHACA, with the support of the Central Australian Life Promotion Network and is adapted from the Little Red Threat Book.





Men's Yarning Circle

The Men's Yarning Circle started in 2019 and was initially funded through a Northern Territory Government Suicide Prevention Community Grant. The project focussed on decreasing the stigma associated with suicide. It provided a safe place for Aboriginal men to 'yarn' about mental health and discuss the supports which can help reduce stigma and feelings of shame. Due to its success the Mens Yarning Circle is now a weekly therapeutic support group at MHACA with activities from Optimal Health, Brain Story, and Birds and The Bees. Participants also enjoy local outings with a focus on exercise and healthy eating.

The Little Red Threat Book



A community response to suicide as a threat

SPA Life Awards

MHACA was successful in winning two nominations for the Suicide Prevention Australia Life Awards. The Outstanding Achievement Award in the Northern Territory was won by Laurencia Grant, Suicide Prevention Project Officer at MHACA. The Priority Populations Award in the Northern Territory went to the Little Red Threat Book which was accepted by MHACA on behalf of the Central Australia Life Promotion Network.



New All Access Door

MHACA was very appreciative to receive support this year through the Federal Government Strengthening Communities and Northern Territory Government Community Benefits Fund to improve the accessibility of our building. This followed feedback from the community that our very large metal front door presented both a physical and psychological barrier. Our new automatic opening door now provides a much more welcoming entry to the service.

Collaborative Living on Arrernte Country (CLOAC) Pilot Program

CLOAC is an intensive housing and support program which aims to support homeless people with complex needs who do not meet the eligibility criteria for public housing and who do not want to live in congregate care settings. The project commenced in September 2020 and has been successful in stabilising housing for four clients to date. All have been chronically homeless or in unsuitable settings for protracted periods prior to entering the program. The program is offering an opportunity for people to succeed in making a home for themselves, to reconnect with family and begin exploring employment as a next step. This would not be possible without our key partners Northern Territory Department of Health, Central Australian Mental Health Service, Northern Territory Families, Housing and Communities, AnglicareNT and Community Housing Central Australia.

Alice Springs Community Discos

The NDIS Support Coordination Team have been part of a group of local providers who have been working with the participants to run local discos, including a Christmas disco held in December 2020. We established a working group of participants from across Alice Springs who helped pick the theme, music, and food. It was held at the Gap View Hotel and a great time was had by all.



COMMUNICATING THE VISION

MHACA has a strong commitment to representing the voices of lived experience and advocating for changes in the mental health sector to improve service delivery. We are keen to represent the specific impact of policies in a remote context.

Review of the NT Mental Health and Related Services Act

In the last year MHACA had strong engagement with the review of the Northern Territory Government Mental Health and Related Services Act.

MHACA is a board member of the Northern Territory Mental Health Coalition, the peak body for community managed mental health services, which organised Territory wide consumer consultations about the review of the Act.

MHACA supported the community consultation process in Central Australia and made sure the voices of MHACA participants, many who have had direct experiences with the Act, were heard.

MHACA's submission strongly supported:

- including principles of recovery into the Act
- for the Act to reflect a human rights perspective
- providing an emphasis on person-centred and culturally and trauma informed care.

NT Community Housing Growth Strategy

There is a strong association between mental health and homelessness. MHACA supported the key aims of the NT Community Housing Growth Strategy 2021-2030 as access to safe, affordable housing is a significant challenge in Alice Springs, particularly for vulnerable people in our community.

Two key actions for addressing homelessness in Central Australia are:

- targeted investment in social and community housing infrastructure in Central Australia
- investment in long term supported housing programs, and those based on a Housing First model.

Health Promotion Manager Helen Lambert, Member for Lingiari Warren Snowden, and CEO Merrilee Cox.

Submission to the NDIS Access and Eligibility Policy – Independent Assessment

MHACA has significant concerns on how the proposed NDIS Independent Assessments could impact people with a psychosocial disability living in very remote settings.

A real understanding is required of the compounding impacts of social and cultural factors including:

- intergenerational trauma
- poverty
- homelessness
- co-existing substance use
- personal safety
- health literacy
- limited mainstream services

MHACA believes:

- face to face assessments are non-negotiable
- there must be interpreters available, and a support person and other stakeholders should be present at the assessments
- participants should also have the option of conducting the assessment over several sessions.

The NDIS has now moved away from its initial plans following vigorous advocacy from the sector. MHACA will continue to be involved in the discussions about how to achieve equity in access to supports through the NDIS.



NDIS Review of Support Coordination

MHACA consulted with participants and staff to inform its submission on the review of Support Coordination conducted by the NDIS. As with many other aspects of the Scheme we believe that a “one size fits all” approach

cannot work and that there needs to be enough flexibility to respond to the context in which supports are delivered. There has been no final report of the review process to date.

MHACA also contributed to the Group Pricing Review, various Thin Market research and projects and to the NDIS Framework for Recovery Oriented Practice.



Support Coordination Manager Kelly Dennis, Minister Kate Worden, CEO Merrilee Cox and Julian Kerr.

Ministerial Visits

MHACA was pleased to meet with Minister Kate Worden shortly after she commenced in her role as Minister for Territory Families, Housing and Community. Her portfolio also includes responsibility for the Office of Disability. We appreciated her interest in our experience of the NDIS, housing issues and the unmet needs emerging in the community.

We had the great pleasure of meeting with Senator Warren Snowden a few times this year and appreciated his support in relation to the NDIS Independent Assessment matter.

Representation on Boards and Networks

- NT Shelter Board – Merrilee Cox
- Disability Advocacy Service Board – Merrilee Cox
- NT Mental Health Coalition Board – Merrilee Cox
- Central Australian Family Violence Network – Christine Boocock

- ADANT Alice Springs Network - Sharon Simpson
- Alice Springs Accommodation Action Group – Ruby Shoko
- Alice Springs Homelessness Reference Group – Ruby Shoko
- StandBy Northern Territory Advisory Group – Helen Lambert
- Northern Territory Community of Social Services (NTCOSS) Service Directory Steering Committee – Nicole Pietsch
- NTCOSS Interagency Meetings – Nicole Pietsch
- NT Mental Health Week Committee – Nicole Pietsch
- Australian Health Promotion Association - membership
- Suicide Prevention Australia - membership and representation on NT/QLD State Committee
- Central Australia Life Promotion Network - Helen Lambert

VALUING LIVED EXPERIENCE

A key strength of MHACA is the contribution made by participants, communities, and others with a lived experience of mental illness and distressing life episodes. Their knowledge and understanding underpins and continually improves our service delivery and mental health promotion work.

Involving people with lived experience helps build understanding, reduces stigma, and supports the design of programs that are relevant to the people who are accessing them.

MHACA offers many ways participants can contribute:

- dedicated board positions
- working groups including MHACA's Little Enviro Group
- collaborative projects such as the annual Your Experience of Service (YES) Survey
- group program planning days
- training opportunities for participants
- regular staff and participant meetings
- input to policy positions and submissions.

This year participants were actively involved in bringing their lived experience and views to MHACA submissions:

- Review of the Mental Health and Related Services Act
- NDIS Support Coordination Review
- NDIS Independent Assessments

MHACA is committed to employing staff with a lived experience across all roles. We have specific positions for people with a lived experience in supporting our day program. Our Hearing Voices group is co-facilitated by people who experience voices or intrusive thoughts, and our day program assistants are people with a lived experience.

Promoting Peer Work in NT

MHACA encourages people with a lived experience to engage in training opportunities to build their skills and support them where possible to complete accredited training. This year we were successful in attracting funds through the NDIS Innovation Grants to support further development of peer work in the Territory through training for peers and capacity building within the mental health services sector.

The project provided opportunities for accredited and non-accredited training for peers as well as a series of forums and sector development opportunities. The project culminated in the first ever peer work forum in the NT offering stimulating presentations from Queensland's Brook RED and SA Peer Connexion. The forum was attended by a wide-ranging group of stakeholders, all with a passion for promoting lived experience contribution and opportunities.

In the year ahead MHACA plans to embed this commitment in a Lived Experience and Consumer Participation Framework.

"I've been coming to MHACA for 10 years. It's the only place I can be me." Rick

"I come to MHACA every day and I enjoy the people and Men's Group. I really like MHACA." Juan

"MHACA is awesome, it's a wonderful place to come make friends, learn new skills and feel safe and supported." Seli

"MHACA is a safe place to come, its non-judgemental and staff help me with my recovery journey." Mandy

"MHACA is like a small family and a home to a lot of us." MHACA participant

"Without MHACA there would be just dirt and dust." Darren

"MHACA is an escape from home, and its lovely being with others and learning craft." MHACA participant

CULLEY'S STORY

My name is Culley and I have been living in Alice Springs for about a year. I have been living with mental health challenges for about 15 years with a diagnosis of Schizo-affective Disorder and Bipolar Disorder. I had heard from a few people about MHACA, and another participant recommended I go through an intake interview to access MHACA services. I had heard about MHACA though even before I got here to Alice Springs.

For me personally it really has been so helpful having a place to drop in to. I have never had access to a Drop-in Centre before and I've lived in several places in Queensland and around Australia. I love being able to come and make a coffee, and there's great facilities including showers, washing machines, computers, and food to eat. I don't use all these services but for the people who need them I am sure it is a blessing.

I also enjoy participating in the group activities. I often join the music groups or the Women's Recovery Group. I've loved being part of the MHACA music groups, they are lots of fun and they also inspire me to keep playing music. I hope to work more on my songs, write new music and record an album one day.

It's good to be able to come and just talk to a MHACA staff member or some of the other MHACA participants. It's so important to be able to have friendly faces and just someone to talk to about how my day or week has

been. I have lived in other towns and my mental illness has made it really isolating, I'd lost contact with a lot of people I knew.

The great thing about MHACA is the social environment and the face-to-face contact with other people, building relationships with others and a support network, and having meaningful conversations...it is really a wonderful place to come.

I have had quite a rough journey with my mental health, I have been in and out of hospital every six to seven months for quite a few years now. I have a daughter who lives with my mother and if I can stay well, I hope to be able to be reunited with her.

My other goals are being able to maintain working, which I have recently been able to do again. I have been out of hospital for 8 months now and MHACA is a big part of that. I have somewhere to come if I am not doing well, someone to speak to who can support me.

MHACA is such a beautiful facility, and everyone who works here is great. You can really feel it when you walk in the door, everyone you walk past says hello. It's just friendly and welcoming. Every town should have a MHACA.

Culley



SUPPORTING RECOVERY

Pathways to Recovery is a psychosocial recovery-oriented program which provides individual support to people living with a diagnosed mental illness.

Recovery-oriented practice is a key principle underpinning the services participants receive from MHACA. This supports people to recognise and take responsibility for their own mental health and wellbeing, and to define their own goals.

In the last financial year MHACA provided 3,418 hours of supports assisting participants with their journey of recovery. Services were provided to people with and without a NDIS plan.

128 participants had at least one contact with MHACA.



66

intake interviews



82

new referrals

3418

hours of participant supports





MHACA participants enjoyed a shared health lunch as part of Healthy Eating Week in February 2021. Jenna Pauli from Central Australian Aboriginal Congress made a presentation on hidden sugar in drinks.

MHACA had 82 new referrals in the last year and conducted 66 intake interviews.

Once a participant is accepted into MHACA a more comprehensive assessment is done with a Mental Health Support Worker. An Individual Recovery Plan is then developed from what the person would like to achieve.

Individual recovery plans can include goals like:

- strategies for maintaining wellness
- gaining meaningful employment
- studying or learning new skills
- engaging in community activities
- learning to do tasks like online shopping.

MHACA support workers can meet with participants in their home, at MHACA or elsewhere in the community.

Having a consistent and stable support worker helps people to achieve their recovery goals.

MHACA support workers can:

- assist people to attend appointments
- assist with forms and administration
- help build life skills
- break isolation and keep people connected.

The NDIS has given participants with a plan the choice to access MHACA individual services as well as other services at MHACA including group activities, weekend activities and the Drop-in Centre.

One of the highlights for the year was supporting a participant to successfully transition into the CLOAC Program and become more independent.

Christine Boocock
Programs Manager

CULTIVATING CONNECTION

Whilst COVID-19 has had less of an impact in the Northern Territory than Eastern states, it has highlighted the incredible importance of social connection for everyone.

An important component of the Pathways to Recovery Program is the monthly group activities calendar which provides opportunities for people to come together, socialise, build skills and gain confidence.

77 people participated in MHACA's group activities over the last year and the most popular group activities have included the Women's Recovery Group and the Men's

Yarning Circle (therapeutic groups for women and men living with mental illness), Hearing Voices (a group for people living with schizophrenia or intrusive thoughts) and the Thursday craft activity.

The Friday Music jam has been a new addition to the monthly calendar which has proved to be a great way to end the week with many people enjoying singing some of the great classics.

Other group activities throughout the year have included board games, creative writing, swimming, basic exercise, and monthly community nurses' health checks.

In the last year MHACA has introduced weekly Saturday social activities which include:

- local picnics and BBQ's
- visiting the Araluen Art Centre
- watching movies at the Alice Springs Cinema
- engaging in some friendly competition at Ten Pin Bowling
- enjoying outings to places like Standley Chasm and Ross River

The MHACA Drop-in Centre is another important place of social connection with the facility being open Monday 8.30 am-1.30 pm, and Tuesday-Friday from 8.30 am to 3.00 pm. The Drop-in Centre is a welcoming space where people can come and work on their recovery in a variety of ways and includes:

- a comfy lounge area with massage chairs
- computers with internet access
- activities such as board games, reading library, DVD's, music, art and craft
- kitchen, laundry, shower and bathroom facilities.

In the last financial year 9510 hours were spent in the Drop-in centre; it's an integral component of the services that MHACA provides.

Christine Boocock
Programs Manager



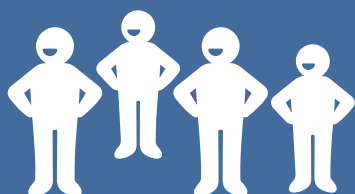
9510

Hours were spent in the Drop-in Centre



77

people participated in MHACA's group activities



427

hours of group



Participants enjoy the Friday Music Jam in the MHACA Drop-in Centre.

HEARING VOICES

Hearing Voices is a global network for people who hear voices, see visions or have other unusual perceptions.

MHACA provides a weekly safe and understanding Hearing Voices support group which explores a range of support strategies and provides participants with a safe space to talk about their experiences.

Some people who attend the group live with Schizophrenia, a common mental health condition which can affect people's thinking, perceptions, and behaviour. Up to one in a 100 people will experience schizophrenia worldwide. Schizophrenia is treatable, and with the right supports people can lead full and meaningful lives. However not all people who hear voices have schizophrenia.

In the last year 18 individuals participated in Hearing Voices, accessing 427 hours of group time on 215 occasions.

"Imagine going out for coffee and sitting close to other people and you can hear them talking – that's what schizophrenia can be like. Sometimes it is difficult to be around people and hard to focus. A key thing to remember is that people who hear voices or have intrusive thoughts are everyday people who are trying to do the best that they can." Sarah



Hearing Voices facilitators and participants with a Hearing Voices toolbox.

REDUCING STIGMA AND IMPROVING WELLBEING

Health promotion supports people to take better control over their health by making more informed choices. In the context of mental illness health promotion can provide:

- a better understanding of diagnosed conditions
- information on support services
- key lifestyle interventions
- tools that empower people to make informed choices that support wellbeing.

Improving Mental Health Literacy

MHACA is improving mental health literacy in Central Australia through the development and distribution of resources that encourage community members to seek help for mental health challenges and that promote support options.

In the last year MHACA produced two new animations which aired on Imparja, ICTV and social media. 'Taking Care of People with Worries' provides suggestions for Aboriginal community members on how to care for someone who has too many worries. 'Keeping Everyone Safe' provides advice for when someone threatens to end their life to get something they want. Both videos utilise co-design principles and were also shared widely with community services in Central Australia.

MHACA produced new printed resources including 'Support for Parents with Teenagers in Crisis' and 'Support for Carers' which provided support and self-care information for both target groups. MHACA also adapted the 'Feeling Sad or Worried' flyer to include

support options for the Yulara community with 500 copies being distributed to new Aboriginal trainees.

MHACA has a strong online presence through website, social media, and stakeholder communications. Despite the local newspaper shutting down, MHACA maintained a public presence through local ABC and CAAMA radio interviews, and health promotion advertising on radio, television, and online platforms.

11 E-newsletters were produced during the year and included upcoming events, training and workshops, community events and mental health information. 497 stakeholders and community members are on the mailing list.

MHACA continued to support improving mental health literacy in the community services sector by facilitating the Alice Springs Mental Health Professionals Interagency, a bimonthly meeting held to discuss emerging issues and supports available from local services. MHACA facilitated 6 Interagency meetings with a total of 100 attendees.

In the next year MHACA will be delivering Mental Health in the Workplace workshops for local businesses.



International Women's Day March 2021. MHACA was a member of the organising committee.



Suicide prevention advocate Joe Williams, and MHACA staff and participants, at the Men's Mental Wellbeing BBQ in June 2021.

Collaboration

Collaboration is a key component of the work of the Health Promotion Unit and in the last year MHACA has worked with:

Mental Illness Fellowship Australia NT, headspace Alice Springs, Central Australian Aboriginal Congress, Tangentyere Council, National Indigenous Australians Agency, Drug and Alcohol Services Australia, Lifeline NT, Anglicare, Mission Australia, Central Australia Health Service, Alice Springs Town Council, Drug and Alcohol Services Australia, Uti Kulintjaku Program NPY Women's Council, Waltja, Akeyulerre, Women's Safety Services of Central Australia, Central Australia Women's Legal Service, Multicultural Community Services Central Australia, Desert Knowledge Australia, Women's Museum of Australia, NT Police Fire and Emergency Services, NT Education Department, NT Department of Territory Families, National Disability Insurance Agency and Children's Ground, Northern Territory Mental Health Coalition, headspace Darwin, TeamHEALTH, Mission Australia Darwin and Katherine, CatholicCare Darwin, Sabrina's Reach 4 Life, Remote Midwifery team, SANE Australia, Roses in the Ocean, Jesuit Social Services, Wesley LifeForce, and R U OK?



Mombassa Day Spa and Hair Lounge provided haircuts and nail treatments to participants at the Participant Pamper Day in July 2020.

Community Engagement

The challenges of the COVID-19 pandemic made face to face community engagement harder in the last year, with the one of the biggest community engagement opportunities, the Alice Springs Show, being cancelled in July 2020.

After months of organisation the NAIDOC Week celebrations were postponed in July. NAIDOC events went ahead in November, including the successful Community Day which saw more than 500 people attend.

MHACA's Mental Health Week program was able to proceed in October and included:

- a Mental Health Week Launch at Yaye's Cafe
- the popular film screening of 'My Year of Living Mindfully'
- a morning tea at MHACA
- relaxation workshops in collaboration with the Alice Springs Town Council
- Stress Less in The Park which had 350 people attend
- A Heart Foundation Walk for World Mental Health Day.

1250 'Mental Health Matters' branded biodegradable coffee cups were also distributed to local cafes for use during the week.

Throughout the year MHACA organised two events to provide a focus on the wellbeing of carers, Tea for Me – a Carers Morning Tea and a Supporting Carers Lunch.

MHACA also collaborated to organise or participate in other events including:

- Schizophrenia Awareness Week
- Men's Health Week
- Women's Health Week
- Equal Futures International Women's Day Fair
- National Sorry Day
- Centralian Middle School Health Expo
- All That Jazz – a fundraiser for a MHACA Suicide Bereavement Support Group.



33

health promotion
events



3471

health promotion
event attendees



6

Alice Springs
Mental Health
Professionals
Interagency
Meetings

Healthy Bodies Support Healthy Minds Campaign

The Healthy Bodies Support Healthy Minds Strategy aims to improve the physical health of MHACA participants through a whole of organisation focus and a range of activities.

The strategy was developed by the Health Promotion Unit and the goals include:

- introducing a Health Prompt
- introducing a Healthy Eating Policy
- providing a focus on exercise
- providing a focus on oral care
- providing smoking cessation education.

Some highlights from the year included:

- Participant Pamper Day. Held in July 2020 to encourage better lifestyle choices by MHACA participants. Participants enjoyed massages, nail care, haircuts, and a healthy lunch. They heard from a guest speaker who provided lifestyle tips on eating well, exercise and sleep hygiene.
- Fun at the Pool with Lucinda. Participants attended a water aerobics class at the Alice Springs Aquatic Centre facilitated by Lucinda Moody, Alice Springs Town Council Healthy Communities Program.
- Central Australian Aboriginal Congress Tackling Indigenous Tobacco Team. Assessed the MHACA premises and gave feedback on ways to improve non-smoking signage as well as provided smoking cessation education to participants and staff.

In the year ahead MHACA plans to implement regular health prompts to support participants to take better control of their health and wellbeing.

Helen Lambert

Health Promotion Manager



Communications and Health Promotion Officer Nicole Pietsch at a health promotion consultation with women from Santa Teresa.

SUPPORT FOR PARENTS WITH TEENAGERS IN CRISIS

The teenage years are a period of intense physical, intellectual and emotional growth which can be a demanding time for parents and caregivers.

Challenging and concerning behaviours from young people can include isolation/not leaving the room, not doing well at school/dropping out, addictions to online gaming/social media/alcohol and other drugs, social problems, not eating, not sleeping, lack of physical activity, lack of communication, mood swings, anger, unsafe sexual activities, risk taking, self-harm, suicidal thoughts and ideation.

If you are concerned about a young person a first step is to encourage them to visit a GP or go to headspace Alice Springs for an assessment. If the young person's symptoms are deemed moderate or higher risk they will be referred to the Child and Youth Mental Health Team as part of the Central Australia Health Service.

Whilst professional help is integral in assessing the level of support required, some teenagers refuse help or are hard to engage in therapeutic supports. This puts a lot of pressure on parents to help manage mental health and other issues. It can be an isolating experience and can impact on the whole of the family's wellbeing.

It is important parents reach out and seek help for their own mental health. Share concerns with family and friends, share experiences with other parents, see your GP and consider a mental health care plan, or check if your workplace has an Employee Assistance Program.

There are a range of services available to provide support including online and phone services where parents can access self-help information, community forums and counselling. There are a number of organisations in Central Australia that can also provide help.

The most important thing to remember is that you are not alone and many other parents are experiencing the same challenges. Reaching out to others, accessing support services and practising self-care are important strategies to support your own mental health during difficult times.



MHACA
Mental Health
Association of
Central Australia

Mental Health Association of Central Australia

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[MentalHealthAssociationCentralAustralia](https://www.facebook.com/MentalHealthAssociationCentralAustralia)

SUPPORTING YOUR MENTAL HEALTH AS A CARER

Caring for someone can be both a rewarding and challenging experience.

Carers are people who provide unpaid care and support for family members or friends who have a disability, mental illness, chronic condition, terminal illness or who are elderly.

Beyond physical and personal care, carers provide emotional and social support and are often in long-term caring roles.

The role of a carer can be demanding. It is important that carers take time to look after their own physical and mental health to support overall wellbeing.

Take Care of the Basics

Eating well, regularly exercising, getting enough sleep and taking time to do things you enjoy are integral to supporting good mental health.

Take a Break

Taking a break from caring responsibilities when needed is an important step in self care. Find out what respite services exist in your area or reach out to friends and family.

Reach Out for Help

If you are feeling overwhelmed, depressed or isolated reach out. Let friends and family know, access carer support services or call the **Mental Health Carer Helpline** on **1300 554 660** or **Lifeline** on **13 11 14**



CONNECTING COMMUNITIES IN RESPONSE TO SUICIDE

MHACA continues to play a leading role in suicide prevention in Central Australia by connecting community members, providing education, resources, and training. This work is supported by the Northern Territory Government Department of Health and the Northern Territory Primary Health Network.

National Communications Charter

In the last year MHACA became a signatory to the National Communications Charter. This aligns our work with its guiding principles and key messages. Some of the actions undertaken include:

- the provision of signage in the MHACA buildings on appropriate language to use for discussing mental health and suicide
- signage that promotes telephone support lines
- the inclusion of our commitment to the Charter on staff email signatures
- the acknowledgment of people with lived experience of mental ill-health and suicide at the commencement of key public forums, interviews and MHACA meetings.

Are They Ok? Presentations

MHACA developed a free 60-minute presentation to equip sector staff and community members with basic information to support others who may be thinking about suicide or are in crisis. The focus of the information is to learn how to notice, learn how to have a conversation and learn about options for support.

The “Are They Ok?” Presentation was delivered on seven occasions to a total of 54 attendees from:

- Disability Advocacy Service Alice Springs
- Alice Springs Hospital Emergency Department and Intensive Care Unit nurses
- Ministers Fellowship Alice Springs
- Central Australian Mental Health Interagency
- Alice Springs Trucking Yards residents
- Red Cross.

Life Promotion Network

The Life Promotion Network (LPN) supports a coordinated approach to suicide prevention in Central Australia. MHACA held a leadership role in the facilitation of the LPN during this reporting period. The LPN met on 4 occasions with a total of 64 attendees.

The network is inclusive of membership across the NT providing leadership to other established and emerging networks in Katherine, Tennant Creek, and Darwin.

Suicide Prevention Networks reflect a key objective of

Australia’s National Framework for Suicide Prevention (the LIFE framework), that suicide prevention rests with individuals, organisations, professional groups, and services across the community. This includes people with a lived experience of suicide.

LPN members can share ideas, apply for funding, and act on suicide prevention initiatives in this region. One of these was for MHACA to produce an animation to convey the key messages in the Little Red Threat Book which was revised in 2019.

A Reflection and Planning Session was facilitated in November 2020 to identify key priorities for the next year.



World Suicide Prevention Day September 2020.

Bereavement Support Groups

MHACA responded to several calls from community to develop a Bereavement Support Group and funding was provided by Northern Territory Primary Health Network. MHACA arranged specialist loss and grief training delivered by Jesuit Social Services. 18 community sector staff and 4 people with lived experience completed the two-day workshop.

Arrangements were made to deliver regular bereavement group sessions, but they were not well attended. Further consultations with stakeholders occurred and more work is being done to facilitate sessions informed by community feedback.

World Suicide Prevention Day

World Suicide Prevention Day was celebrated in Alice Springs on September 10 with 120 people attending the event. The theme of the event was 'Working Together to Keep Each Other Safe' and there was a local focus on the issue of suicide and its impact on Aboriginal men. Guest speakers included Ingkintja Men's program, the Ride for Life project, and Life's Highway project by Tangentyere Council.

Transition of Suicide Story

After 12 years of management of the Suicide Story Program, an evaluation in the previous year recommended the program be managed by an Aboriginal Community Controlled Organisation.

MHACA worked with funder Northern Territory Primary Health Network and the program was successfully transitioned to AMSANT in March 2021. We look forward to seeing this very important program continue to thrive under new management.

Helen Lambert
Health Promotion Manager



Suicide Prevention Project Officer Laurencia Grant delivered the 'Are They OK?' Suicide Prevention Presentation to the Emergency Department nurses at the Alice Springs Hospital.

HOMELESSNESS SUPPORT

MHACA works towards its vision that Central Australia is a safe and inclusive community that actively fosters and supports good mental health by recognising the importance of safe and secure housing for vulnerable people.

People with mental illness and psychosocial disability are more likely to experience homelessness and housing instability and have poorer social and economic outcomes. Stigma relating to mental illness can create a significant barrier for people to access services.

Access to safe, affordable housing is a significant challenge in Alice Springs. The biggest barrier continues to be the inadequate supply of housing stock as well as limited housing options. Short term accommodation options such as hostels cannot accommodate people for long periods which means while people are waiting to be housed they either sleep rough or couch surf which contributes to overcrowding. Private rentals are largely out of reach.

In the last year MHACA has been able to support people with mental illness to find secure housing through two programs.

Tenancy Support Program

The Tenancy Support Program (TSP) is a person-centred, short term support service for people with mental health difficulties who are homeless or at risk of homelessness.

The TSP supports the development of a tailored plan to meet the specific needs of individuals and to help sustain their tenancies through advocacy, case management, financial planning, and referrals to other services.

In the last year TSP supported 36 clients, 18 of whom were new to the program. 56% of the participants who accessed the program identified as Aboriginal.

Of the 36 clients supported, 80.5% have a diagnosed mental illness and are currently receiving treatment from mental health services.

In the last year there have been 33 referrals to the program demonstrating ongoing need for housing support.

Not all homeless people are seeking a permanent home. TSP supports participants by making sure that they are camping on secure sites and by providing tents, swags, blankets, and any other necessities to ensure they are safe.

TSP maintains close links with the Department of Territory Families, Housing & Communities (TFHC) through regular liaison regarding clients on the waiting list as well as those that are housed that may need assistance engaging with the department due to their mental health issues.

The TSP is a member of NT Shelter which is the peak body for affordable housing and homelessness in the Northern Territory. TSP involvement in the Homelessness Response Group and Accommodation Action Group directly contributes to advocacy, research, and policy development in the sector.

A key focus of the last year has been implementing some of the learnings from our Evaluation Frameworks and developing some new data collection tools that meet the monitoring, evaluation, learning, and reporting requirements for TSP.

A great outcome for the year has been supporting 5 participants to be housed after waiting for 6 years on average for housing.

Ruby Shoko

Tenancy Support Teamleader

Tenancy Support Team Leader Ruby Shoko speaking about MHACA's homelessness services at the AADANT Forum in Alice Springs August 2020.

Coordinated Living on Arrernte Country

MHACA has steadily been working toward establishing a Housing First-type program for nearly ten years. Housing First was developed over twenty years ago as an evidence-based approach using recovery-oriented practice, abolishing the multiple steps to secure housing, swiftly enabling a secure tenancy and the client's recovery pathway.

Coordinated Living on Arrernte Country (CLOAC) is a new pilot program that provides services that are individualised, holistic, integrated, culturally responsive safe and flexible, to enable people with mental illness to remain living as independently as possible in the community and their environment of choice.

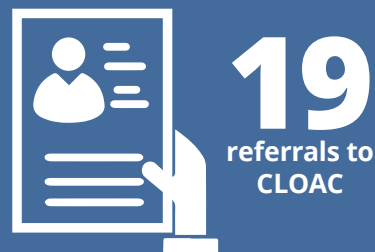
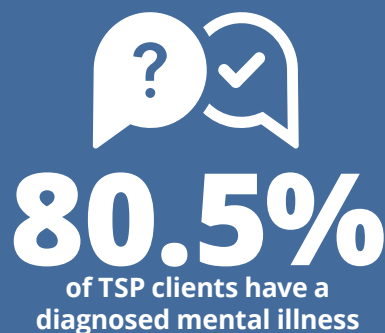
The program officially began in September 2020 after consultation with stakeholders and a reallocation of Northern Territory Government funding within MHACA.

The target group for the service are people with a diagnosed mental illness who are homeless, at risk of homelessness or inappropriately housed and require intensive support to gain or sustain housing in the community.

CLOAC is a partnership between MHACA and the Northern Territory Department of Health, Central Australian Mental Health Service, Northern Territory Families, Housing and Communities, AnglicareNT and Community Housing Central Australia.

Initial results from the program indicate that there is a need for the program in Alice Springs as there have been 19 referrals received to date. 7 participants were supported in the last year.

Christine Boocock
Programs Manager



LAVERSON'S STORY

My name is Laverson and I come from Utopia. I was living in the Alice Springs Mental Health Sub Acute facility for 4 years until I became part of the CLOAC program in December 2020.

I now live in a one-bedroom unit and receive support from several organisations.

A support worker helps me with:

- cooking
- cleaning
- shopping
- money management
- weekday activities

I take part in the Life Skills Program that teaches me how to cook.

Activities I enjoy include horse riding and walking. I really love music.

Since I have been part of CLOAC I have become more independent with everyday activities.

I love living on my own and my family visits me regularly.

Laverson



SUPPORT COORDINATION

MHACA is a specialist NDIS mental health provider with a focus on recovery and making positive changes to support participant health and wellbeing.

Support Coordination at MHACA is to have someone walk beside a participant through their NDIS journey. We respect that each participant's journey is different, and that one size will not fit all.

When the participant is ready a Support Coordinator will sit with them and go through their NDIS goals. We can assist them to understand what funding they received and how they can use that funding.

We work towards building a participant's capacity to understand their plans. We can step through how to use the NDIA portal, sit with participants to break down their budgets so they can understand how they are using their funding, help them source new providers and encourage them to speak up if they are not satisfied.

Currently there are 93 participants receiving Support Coordination from MHACA.

Choice and Control

One of the greatest parts of having an NDIS plan is that the participant has the right to decide who provides supports to them. If they are not happy with that service, including Support Coordination, a Support Coordinator will help them negotiate with that service or help find a new service.

A Support Coordinator also assists participants to connect with services that are not NDIS funded such as health and employment services. We also make sure that the participants family is involved if they wish.

It is important for the Support Coordinators to know they are empowering participants to understand their plans and their rights.

We have been able to assist participants in connecting with supports and services they may not have been able to before. Participants have been supported to access employment opportunities, access new providers and supports to engage in community activities that they have wanted to do like:

- boxing
- art therapy
- Aikido
- cooking classes.

Even something like having someone to have a coffee with can be organised.

Participants have wanted to move from the houses they have been living in and by having an NDIS plan and a Support Coordinator, they have been able to realise this and move somewhere where they feel happy and safe.

The NDIS landscape can be difficult for Support Coordinators and participants to navigate; price guide changes every year, uncertainty of funding, new terminology, and decisions being made by the NDIA.

But through it all the Support Coordinators at MHACA always have the participant at the centre of what they do.

"MHACA Support Coordination helped me to get into a digital arts course that I was really interested in." Support Coordination participant.

Transition

One of the first steps towards accessing NDIS supports at MHACA has been through the Transition team. This team assisted those wanting to test their eligibility to access the NDIS.

The staff in the Transition team build a relationship with the participant to help them understand what the NDIS is and how it can support them.

Once a participant is ready their staff member gathers information for their NDIS application, contacting their supports and services for assistance.

MHACA staff can support assessments to be completed that may be required for an application and then compile the information to be sent off to the NDIA.

If the application is not successful, and if the participant wishes to, the staff will continue to gather further information and resubmit.

Once a participant has 'met access', the Transition staff then worked with the participant to build their goals and aspirations in preparation for a planning meeting. The staff are beside the participant when they talk with the NDIS about their goals that is used to help develop their plan.

Once their plan is ready, the Transition team member assists with handing over the information to their new Support Coordinator.

In total there were over 70 participants that MHACA assisted to gather information and apply to the NDIS.

Sadly, this program concluded at the end of this financial year however MHACA still has capacity to support people to test their eligibility for the NDIS through the Pathways to Recovery Program.



"The MHACA NDIS Support Coordination team has helped me in a good way."
Tiffany



Disability and Sexuality Workshops

In the last year the MHACA Support Coordination Team facilitated Jodi Rodgers from Birds and Bees (of Love on the Spectrum fame) to come back to Alice Springs to provide disability and sexuality workshops for participants and staff, as well as counselling for participants. The professional development day was sold out, highlighting this as a need within the community.

Being so remote, it can be difficult to get professionals to come to Alice Springs. For MHACA to be able to support the disability and sexuality workshops has been a win for development in the sector.

Kelly Dennis

Support Coordination Manager



Building Confidence with the NDIS

Bevan has been building confidence and skills through boxing lessons. Bevan is a Support Coordination participant at MHACA and indicated that he would like to include boxing as part of his NDIS plan. Bevan's Support Coordinator was able to link Bevan up with a local trainer and now Bevan enjoys a boxing session weekly.

MENTAL HEALTH WORKFORCE

Amy – Specialist Support Coordinator

I came to MHACA as a Masters of Social Work student from Northern NSW. I was interested in working in a remote setting in a mental health context to increase my knowledge and experience.

Completing my social work placement at MHACA gave me practical experience and good insight into the organisation. The staff and management go above and beyond when it comes to walking and working alongside the participants. It was great to see true person-centred work and the recovery model being applied and hearing the voices of participants come through.

The two-way learning that occurs through the employment of peer workers with lived experience makes such a difference along with the knowledge and insights of Aboriginal staff members. When you see people valuing and learning from one another it's very inspiring.

I decided after my placement to apply for a position and was successful in gaining the Specialist Support Coordinator role.

A Support Coordinator acts as a point of connection for an NDIS participant. It is my job to ensure that participants know all their available options and support them to achieve their goals. We link participants to NDIS and broader support options, helping them to identify and consider options that are appropriate and available to them.

Where possible and practical, we work to create a support and action plan and help the participant to implement it to their satisfaction. I have also assisted in crisis resolution, helping participants to resolve points of crisis while also helping participants to develop a capable and resilient support network.

With the transition to the NDIS funding model in the mental health sector I have learnt how difficult it is supporting people in remote and very remote areas.

While my values espouse to providing as much choice and control as possible to NDIS participants there are many systems barriers, particularly for Aboriginal people, including:



- limited services,
- a lack of housing
- many people have complex co-morbid conditions along with their disability.

The importance of having good relationships and collaboration in a town like Alice Springs is key.

Every day is different at MHACA and there are many great moments. The MHACA Drop-in Centre is the place to be! It has a hustling, bustling vibe with great activities and different people. It's great to see that participants have a busy social life and keep coming back as they see it like their home. I've had so many laughs and smiles there.

MHACA has been a great place to work and it's a privilege to work alongside participants and see people achieve their goals no matter how big or small.

Amy Davidson
Specialist Support Coordinator

Damien - Mental Health Recovery Support Worker

Before I came to MHACA I worked at Lutheran Community Care for nearly 5 years and helped clients with financial problems.

I support participants in many ways including one-on-one support. I help them work towards their goals in their Individual Recovery Plan. I help with activities like shopping and going on social outings. I also help with group activities like the Men's Yarning Circle.

From working at MHACA I have learnt a lot more about mental health. Mental health issues are real and are medical conditions where people need help.

A recent highlight for me is that one of my participants got accepted into supported independent living. He was living in a town camp without any support before that. He now seems happier and healthier and engages more with other people.

I enjoy working at MHACA and with the participants. I have great managers and enjoy working with the other staff. I particularly enjoy working with the Men's Yarning Circle group which is helping Aboriginal men with their challenges.

Damien Marlowe

Mental Health Recovery Support Worker



DELIVERING QUALITY SERVICES

MHACA has a commitment to providing quality services for our participants, family, friends and the general community and a safe working environment for our staff.

Our Quality Committee guides our work to ensure we meet industry accreditation standards and provide a high-quality service. This year MHACA was successfully accredited against the NDIS Quality and Safeguarding standards. We were complimented on the high standards we maintain and had no corrective actions.

Safety is our highest priority and our WHS committee oversees safety improvements. This year the committee has covered a wide range of issues including COVID-19 and vaccinations, transport, home visiting, and manual handling.

Participant satisfaction

Annually we survey both our participants and our staff to assess our performance and identify areas of improvement. We use the Your Experience of Service (YES) survey to hear participant's view of the services that we provide.

This year our completion rate was boosted by YES Burger events, where people who completed their surveys were able to share in a healthy lunch.

The results from this survey were overwhelmingly positive with 97% of respondents stating that their overall experience of service had been positive. The survey did however highlight some areas for improvement in our communication processes and involvement of families in care planning, which will be worked on in the year ahead.

Healthy workplace

MHACA makes a strong investment in staff health and wellbeing. This was acknowledged in Mental Health Week when we received the Northern Territory Mental Health Coalition Mentally Healthy Workplace Award.

MHACA consistently records a high level of staff satisfaction. The annual staff survey was overwhelmingly positive with 95% of respondents stating that they would recommend MHACA as an employer to others, which is a great result considering the changes involved in the NDIS transition.

A new approach to our monthly full staff meetings and commitment to greater senior staff input to team meetings was implemented in response to the feedback.

David Busuttil
Corporate Services Manager

The Central Australian Aboriginal Congress Tackling Indigenous Tobacco Team provided education on smoking cessation to MHACA staff and participants in October 2020.



Training and Development

MHACA's Learning and Development Framework continues to inform and track mandatory training within our workforce. A PowerPoint induction package for new staff covers Policy and Procedures and Work Health and Safety requirements.

Training undertaken by staff includes:

- Supervision for Managers
- Introduction to Central Aboriginal Cultures and Context
- Understanding Unconscious Bias
- Bullying and Harassment for Managers
- Smart Move Manual Handling
- Stay Strong - Train the Trainer
- Fire Warden training
- Support Coordination Intensive
- Microsoft Excel
- NDIS Worker Orientation
- Creating Programs of Support Workshop
- CPR and First Aid
- Knowledge Translation Workshop
- Suicide Bereavement Facilitator Training
- Rebuilding Day Programs
- Infection Control training – COVID 19
- Comply with Infection Prevention and Control Policies and Procedures
- 4WD Training
- Foundations of Recovery Oriented Practice
- Wellbeing Coaching
- Motivational Interviewing
- De-escalation Techniques
- Trauma Informed Practice
- Understanding Abuse – Zero Tolerance
- Optimal Health Practitioner
- The Hearing Voices Approach
- Vicarious Trauma and Self-Care
- safeTALK.

MHACA continues to develop training opportunities to minimise the stigma associated with mental illness in Central Australia. The training is open to both organisations and individuals.

Aboriginal Mental Health First Aid was attended by 52 people over 5 deliveries. safeTALK training was delivered to 10 sector staff.



97%
YES

Survey respondents said their overall experience of service had been positive



95%
of staff survey respondents stated that they would recommend MHACA as an employer

52

people attended
Aboriginal Mental
Health First Aid





MHACA Mental Health Recovery Support Worker Sarah Irwin won the NT Mental Health Week Lived Experience Award, and Amanda Russelhuber accepted the Excellence in Mental Health Workplace Award on behalf of MHACA in Darwin October 2020.

Little Environment Group

The Little Environment Group was developed to help MHACA take actions to reduce its environmental footprint. The group of 7 members meets monthly and is informed by the MHACA Environmental Audit developed in 2019.

The group met on 8 occasions and have:

- introduced a comprehensive recycling program

- changed procurement to recycled products
- reduced single use plastic by purchasing bioware for public and MHACA events
- developed water saving signage for participants.

Staff are encouraged to reduce printing, timers have been set on electric appliances, and air conditioners have been set for winter and summer recommendations. MHACA has also invested in solar panels which is offsetting our energy costs.

Helen Lambert

Health Promotion Manager



TREASURER'S MESSAGE

As the incoming Treasurer, I am pleased to report that MHACA continues to show a slow and steady growth in income this year with a 7% increase in income compared to the previous year.

In line with our financial strategy, diversification of our revenue sources has continued to be the primary focus to strengthen our financial position. We are building our capacity to navigate changes effectively and efficiently in service delivery through monitoring and reporting systems.

The Board Finance Committee has worked closely with the CEO and Corporate Services Manager to shape reporting to ensure that the Board is well-informed and able to make good financial management decisions.

This is largely prompted by the introduction of the NDIS which offers complex challenges and an increased administrative burden on the organisation. This year we have made several improvements to ensure we are well-placed to work in this evolving environment, including developing an NDIS Monitoring Framework and the decision to introduce a new Client Management System.

We have continued to attract funds for short-term projects and have negotiated revised contracts with the

Northern Territory Government to support innovative approaches in both our Health Promotions area and diversification under the Pathways funding.

Our Support Coordination program has now been operating for close to four years and many of our participants from other programs have now transitioned to the NDIS. This poses some challenges to the organisation's ongoing financial position due to the pricing structure for these items.

Recognising the financial uncertainty under the NDIS model, in recent years we have taken steps to reduce our cost base. This year we sold one of our houses. The funds from this sale are being used to fund the ongoing operations of our remaining housing stock.

For the 2020/21 financial year MHACA delivered a surplus of \$396,590 which was influenced by a strong Support Coordination surplus through the NDIS plus some additional short-term grants received during the fiscal year.

The organisation has a sound financial base to navigate the challenges in the coming years.

Lavenia Saville
Treasurer



FINANCIAL SUMMARY

MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INCORPORATED

**AUDITORS INDEPENDENCE DECLARATION UNDER SECTION 60-40 AUSTRALIAN
CHARITIES AND NOT-FOR-PROFITS COMMISSION ACT 2012**

**To the board of Mental Health Association of Central Australia
Incorporated**

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2021,
there have been no contraventions of any applicable code of professional conduct in relation
to the audit.



**T A Basso - Director
Basso Newman Audit Pty Ltd
Chartered Accountants
286 Flinders Street, Adelaide
Dated this 26th day of October 2021**

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INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INCORPORATED

Opinion

We have audited the financial report of Mental Health Association of Central Australia Incorporated ("the entity") which comprises the statement of financial position as at 30 June 2021, the statement of profit or loss and comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the statement by members of the committee.

In our opinion, the accompanying financial report of the Mental Health Association of Central Australia Incorporated is in accordance with Div 60 of the Australian Charities and Not-for-profits Commission Act 2012 and the Associations Act 2003, including:

- a) giving a true and fair view of the entity's financial position as at 30 June 2021 and of its financial performance and cash flows for the year then ended; and
- b) complying with Australian Accounting Standards–Reduced Disclosure Requirements and the Australian Charities and Not-for-profits Commission Regulation 2013.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the entity in accordance with the auditor independence requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* ("the Code") that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Report

Management is responsible for the preparation of the financial report that gives a true and fair view in accordance with the Australian Accounting Standards–Reduced Disclosure Requirements, the Australian Charities and Not-for-profits Commission Act 2012 and the Associations Act 2003 and for such internal control as management determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, management is responsible for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intend to liquidate the entity or to cease operations, or have no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Entity's financial reporting process.

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**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INCORPORATED**

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the management.
- Conclude on the appropriateness of the management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the entity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide the those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.



Trevor Basso - Director
Basso Newman Audit Pty Ltd
Chartered Accountants
286 Flinders Street, Adelaide
Dated this 26th day of October 2021

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MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INC

STATEMENT BY MEMBERS OF THE COMMITTEE

The members of the committee declare that, in the committee's opinion:

1. The financial statements and notes, as set out on pages 1 to 17, are in accordance with *the Australian Charities and Not-for-profits Commission Act 2012* and:

- a. comply with Australian Accounting Standards - Reduced Disclosure Requirements ;
and
- b. give a true and fair view of the financial position of the Mental Health Association of Central Australia Inc as at 30 June 2021 and of its performance for the year ended on that date.

2. There are reasonable grounds to believe that the Mental Health Association on Central Australia Inc will be able to pay its debts as and when they become due and payable.

This statement is made in accordance with subs 60.15(2) of the Australian Charities and Not-for-profits Commission Regulation 2013 and by resolution of the board:


Board member

Peter Riley (Chairperson)


Board member

Lavenia Saville (Treasurer)

Dated this 19th day of October 2021

MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INC

ABN : 91 804 704 259

**STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE YEAR ENDED 30 JUNE 2021**

	Note	2021 \$	2020 \$
Revenue and other income	2	4,370,022	4,073,512
Employee benefits expenses		(3,047,600)	(2,845,566)
Depreciation and amortisation expenses	7,8	(129,075)	(142,384)
Motor Vehicle Expenses		(42,809)	(36,967)
Interest		(1,720)	(4,835)
Repairs and Maintenance		(46,697)	(38,103)
Accounting fees		-	(696)
Auditor remuneration		(11,153)	(14,614)
Health promotions		(90,079)	(109,899)
Health and Safety		(6,856)	(11,448)
Business Planning, Reporting and Evaluation Costs		-	(5,474)
Bad Debts		-	(5,046)
Consulting services		(84,141)	(71,822)
Client Consumables		(36,307)	(46,113)
Computer and Telecommunication Expenses		(120,931)	(64,453)
Equipment		(7,720)	(26,341)
Office Expenses		(79,625)	(79,959)
Insurance		(24,643)	(70,172)
Printing and Stationery		(26,487)	(25,887)
Recruitment		(11,363)	(12,960)
Other expenses		(23,643)	(29,169)
Rental property expenses		(47,426)	(47,469)
Travel expenses		(28,395)	(62,403)
Training and Development		(79,412)	(32,524)
Workshops and Conferences		(27,350)	(32,924)
Current year surplus (deficit) before income tax		396,590	256,284
Income tax expense		-	-
Net Current year surplus (deficit)		396,590	256,284
Total comprehensive income attributable to members of the entity		396,590	256,284

The above Statement of Profit or Loss and Other Comprehensive Income should be read in conjunction with the accompanying notes

MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INC

ABN : 91 804 704 259

STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2021

	Note	2021 \$	2020 \$
CURRENT ASSETS			
Cash and cash equivalents	3	1,235,654	1,591,094
Accounts receivable and other debtors	4	94,060	110,500
Other current assets	5	74,854	83,708
TOTAL CURRENT ASSETS		<u>1,404,568</u>	<u>1,785,302</u>
NON-CURRENT ASSETS			
Property, plant and equipment	6	2,661,055	2,922,655
Long Term Investments	8	500	500
Right of use assets	7	116,862	38,303
TOTAL NON-CURRENT ASSETS		<u>2,778,417</u>	<u>2,961,458</u>
TOTAL ASSETS		<u>4,182,985</u>	<u>4,746,760</u>
CURRENT LIABILITIES			
Accounts payable and other payables	9	207,347	214,393
Contract liabilities		375,417	883,931
Income in advance		-	87,108
Lease liabilities		37,497	39,230
Employee provisions	10	226,961	180,423
TOTAL CURRENT LIABILITIES		<u>847,222</u>	<u>1,405,085</u>
NON-CURRENT LIABILITIES			
Borrowings	11	3,892	502,875
Employee provisions	10	68,090	50,974
Lease Liability		79,365	-
TOTAL NON-CURRENT LIABILITIES		<u>151,347</u>	<u>553,849</u>
TOTAL LIABILITIES		<u>998,569</u>	<u>1,958,934</u>
NET ASSETS		<u>3,184,416</u>	<u>2,787,826</u>
EQUITY			
Retained surplus		3,058,783	2,662,193
Asset revaluation surplus	12	125,633	125,633
TOTAL EQUITY		<u>3,184,416</u>	<u>2,787,826</u>

The above Statement of Financial Position should be read in conjunction with the accompanying notes

Page 2

MENTAL HEALTH ASSOCIATION OF CENTRAL AUSTRALIA INC
ABN : 91 804 704 259

STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 30 JUNE 2021

	Retained Surplus	Asset Revaluation Surplus	Total
	\$	\$	\$
Balance at 1 July 2019	2,405,909	125,633	2,531,542
Comprehensive income			
Net surplus (deficit) for the year	256,284	-	256,284
Total comprehensive income for the year	256,284	-	256,284
Balance at 30 June 2020	2,662,193	125,633	2,787,826
Balance at 1 July 2020	2,662,193	125,633	2,787,826
Comprehensive income			
Net surplus (deficit) for the year	396,590	-	396,590
Total comprehensive income for the year	396,590	-	396,590
Balance at 30 June 2021	3,058,783	125,633	3,184,416





CONTACTS

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