Annual Report
2025-2026



MHACA
Mental Health Association of Central Australia

The Mental Health Association of Central Australia would like to acknowledge the Traditional Owners of the 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 and present.

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

We acknowledge people with a personal experience of mental health challenges and suicide, and the voices of lived experience inform the work that we do. As an inclusive organisation we celebrate people of all backgrounds, genders, sexualities, cultures, bodies and abilities.



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Chairperson's Message

I am pleased to present MHACA's Annual Report for 2025-26.

It has been another busy and rewarding year for MHACA, with much to celebrate and reflect on.

A major milestone this year was the purchase of a new property, and we look forward to starting renovations which will provide more space for staff and participants at MHACA. This is an important investment in MHACA's future, supporting the long-term sustainability of the organisation and providing greater capacity for our services to grow and respond to the needs of our community.

MHACA achieved its strongest accreditation results to date across the National Safety and Quality Mental Health Standards for Community Managed Organisations, QIC Health and Community Services Standards and the NDIS Practice Standards. This is a significant achievement and reflects the commitment of staff across the organisation to quality, continuous improvement and delivering the best possible services to our participants.

This year has also brought its share of challenges. MHACA continued to support our participants through flooding, a diphtheria outbreak and tragedy within our community.

Working in mental health brings unique pressures, and the past 12 months have asked even more of our staff. I would like to sincerely thank them for continuing to show up for the participants who rely on our services, while also supporting and caring for one another.

I would like to acknowledge and thank our CEO, Nicole Pietsch, for her tireless advocacy for MHACA and her leadership, with the support of the Senior Leadership Team. It has been great to have members of the SLT regularly attend Board meetings this year, giving the Board greater insight into the work happening across the organisation.

"I would like to sincerely thank [our staff] for continuing to show up for the participants who rely on our services, while also supporting and caring for one another."

I sincerely thank my fellow Board members for their support and commitment over the past 12 months. I am grateful for the knowledge and experience they generously bring to their voluntary roles. This year we farewelled Tobias Churchill who was a Board member for 2 years and Mary Menotti who was a Board member for 7 years. On behalf of the Board, I thank our departing members for their valued service to MHACA.

When I look back at how much MHACA has achieved over the past 12 months, there is so much to be proud of. I'm excited to see what the year ahead brings and the continued impact of our service on supporting the most vulnerable in our community.

Victoria Orpin
Chairperson



CEO Message

This vibrant annual report is a great representation of the work of MHACA. It demonstrates the many outcomes that happen when we work together with the focus on recovery and providing meaningful supports to community members.

MHACA has evolved from being primarily an advocacy organisation set up by a group of passionate volunteers more than 30 years ago, to now being a community managed non-clinical mental health organisation that delivers 8 different programs and services.

In a time of greater global uncertainty, with a range of factors impacting both people and organisations, I am proud of the work we do to support people's wellbeing in Central Australia.

In 2026 the service landscape faces many challenges including funding instability, significant changes to the NDIS, increases in operating costs, and chronic workforce shortages and staff turnover.

All require assessment, strategic thinking, forward planning, creative approaches and flexibility.

I would like to acknowledge our Board members who volunteer their time to oversee MHACA's service delivery. Their governance is not only essential but also deeply appreciated.

I acknowledge the incredible resilience of our participants, some who live with significant complexity. MHACA is a voluntary service and as such participants set their own goals and are active in the support process. Their lived experiences inform the work we do, and we actively seek ways to elevate participant voices when advocating for systemic change.

The passion and commitment of our employees is to be commended, and staff work hard to find the best outcomes for participants and to engage with community members on improving mental health and wellbeing.

CEO Message

“I acknowledge the incredible resilience of our participants, some who live with significant complexity. MHACA is a voluntary service and as such participants set their own goals and are active in the support process.”

Collaboration is key, and we can achieve so much more when we work collectively. MHACA values all our partners and stakeholders and participates in a range of networks, forums and meetings.

Connecting with others is an important way to not only debrief about the big issues, but also to find new solutions together.

Nicole Pietsch
CEO



Governance

Being an independent community-based organisation is a strength of MHACA's, and it enables local decision making and a responsiveness to emerging issues.

As an incorporated entity MHACA is a membership -based association governed by a volunteer Board. In the last year there has been a focus on reviewing and updating Board reporting formats to meet governance requirements. Some of MHACA's Board members undertook Australian Institute of Company Directors training which has supported the review process.

MHACA's Board met 6 times in the last year to review MHACA's finances, strategic risk and opportunities. The Board also met out of session through the Finance and Governance Subcommittee.

This year we farewelled Tobias Churchill after 2 years on the Board, and Mary Menotti who retired from the Board after 7 years of volunteer service. Thank you, Mary for this significant contribution.

We are incredibly thankful that we have engaged Board members to support the governance of MHACA.

Board members:

Chair
Victoria Orpin
Treasurer
Lavenia Saville

General Members
Mary Menotti
Alice Campell-Jones
Toby Churchill
Adeyinka Hussain
Tessa Snowden
Kate Muir



Annual General Meeting 2025


MHACA staff celebrating a successful audit at a team ten-pin bowling outing.



Smoking Ceremony at MHACA.

Our Impact

220 people received a MHACA support service

46.8% male participants

44.5% female participants

0.5% other-gendered participants

50% Aboriginal participants

39.1% Non-Aboriginal participants

76 New participants

3,874 hours of one-on-one support provided

21,863 hours accessed at the Drop-in Centre

4,328 hours accessed of group activities

104 NDIS Coordination of Supports participants

5,067 hours of NDIS Coordination of Supports provided

36 health promotion events and presentations

1,869 event and stall engagements

1,883 Facebook followers

512 Instagram followers

828 newsletter opens

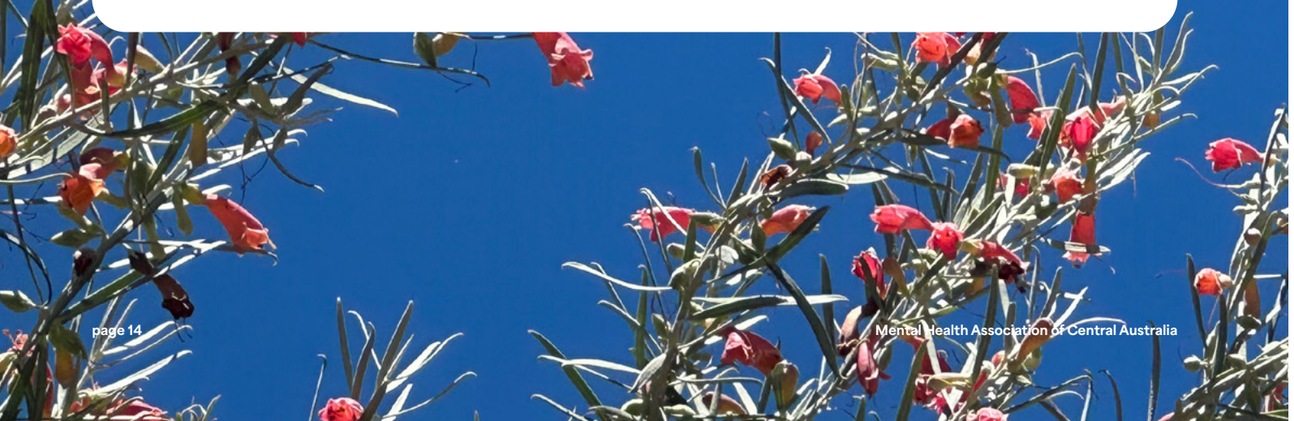
Highlights of the Year

Maintaining National Accreditation

MHACA has successfully maintained accreditation across 3 national standards – the NDIS Practice Standards, QIC Health and Community Services Standards and National Safety and Quality Mental Health Standards for Community Managed Organisations (NSQMHSCMO). Onsite audits were held in March 2026 and across all accreditation activities no major non-conformities or critical risks were identified. Auditors consistently recognised MHACA's strong governance, quality systems, participant-centred practice, workforce capability, safeguarding systems and continuous improvement culture.

Emergency Disaster Management Plan Activation

The unexpected flooding event in February 2026 provided the opportunity for MHACA to enact its Emergency and Disaster Management Plan. The plan outlines how MHACA will respond in the event of an emergency or disaster, and how we will support our participants. Whilst the flood itself was not a highlight and there were some challenges in enacting the plan, MHACA participants' needs were identified and they were effectively supported during the flooding which was an important outcome. Formal evaluation of the emergency event response has enabled lessons learnt to be incorporated into future planning and supports MHACA's commitment to continuous improvement. MHACA acknowledges the impact these emergency events had on the broader community and across the Territory.



Embedding the NT Aftercare Service

MHACA is proud to have delivered the NT Aftercare Service for 1 full year, after referrals opened in July 2025. The NT Aftercare Service provides non-clinical psychosocial supports for all non-Aboriginal adults (18+) living in Alice Springs, who have recently experienced suicidal thoughts or a suicide attempt. Whilst it has taken time to raise awareness of the service, which has included regular meetings with clinical mental health services and other sector providers, by the second half of the year the program has received more referrals and is becoming better known in the community. Participants engaged in the program have reported significant benefit from having non-judgemental and practical support in their recovery journey.

Capacity Building Project

With some significant complexity in the service environment, as well as upcoming changes to the NDIS, MHACA secured funding from the Northern Territory Primary Health Network to engage a consultant to undertake a business model review. The aim is to review MHACA's existing structure and programs, identify potential additional funding streams, cost-saving opportunities, and strategies to help embed improved management systems. Matrix on Board have been contracted to lead the work and have engaged MHACA staff as well as external stakeholders in the review. The report will be finalised in October 2026 and will provide a range of recommendations for the MHACA Board and management team to consider.

Staff Wellbeing Days

MHACA has continued to invest in staff wellbeing and has held quarterly staff wellbeing afternoons in the last year. This is to acknowledge the demands of working in the mental health and community services sector, and to provide opportunities for staff to take a moment for self-care and connection with other colleagues. Activities have included ten pin bowling and a games afternoon, with plans for a pool afternoon before the end of the year.

Collaboration

Collaboration is a key value of MHACA's and where possible we look to partner with other organisations to seek the best outcomes for participants and the broader community.

Key Partnerships

1. The Northern Territory Department of Health
2. The Northern Territory Department of Children and Families
3. Northern Territory Primary Health Network
4. Mental Health and Alcohol and Other Drugs - Central Australian Region
5. Central Australian Aboriginal Congress
6. Headspace Alice Springs
7. Community Housing Central Australia
8. Lutheran Care
9. Human Services Australia
10. Suicide Prevention Australia
11. SANE Australia
12. StandBy Support After Suicide
13. Thirrili

MHACA Networks and Committees

1. NT Mental Health Coalition Board
2. NTCOSS Interagency
3. Suicide Prevention Australia NT Committee
4. NT Specialist Housing Reform Group
5. Alice Springs Homelessness Reference Group
6. Alice Springs Accommodation Action Group
7. Alice Springs Mental Health Professionals Interagency
8. Central Australia Life Promotion Network
9. International Women's Day Event Committee
10. 16 Days of Activism Against Gender-Based Violence
11. Alice Springs Town Council All Abilities Network



MHACA and StandBy Support After Suicide teams at the World Suicide Prevention Day event.



Assistant Minister for Mental Health and Suicide Prevention, Emma McBride MP, visiting MHACA in September 2025.

Sabrina’s Story

I’ve been a participant at MHACA for a long time, more than two years. It was easy to come to MHACA.

I was nervous the first time I came in, but only for a couple of days. The staff were nice and I also liked the food, having a shower and washing my clothes. Now I come every day.

I’ve had a housing case worker for a long time and also a support worker from the Pathways program since maybe one month ago.

I like coming to MHACA every day for a cup of tea, to relax and to listen to music. I can also get clothes, and the staff and the other participants here are good to me.

I love walking and I would like to travel around soon.

I love it here at MHACA. I feel safe and people are kind.



John’s Story

I first came to MHACA in August 2025. I had lost my partner a few years earlier and was going through a really difficult time. After she died, I lost the focus and purpose I’d had in my life, and eventually I reached a point where I was struggling with thoughts of suicide.

I wasn’t really looking for support when I found MHACA. I happened to run into someone I knew who worked there and she invited me in for a coffee. That eventually led to me being connected with the Aftercare program support worker.

At first, the support was quite intensive. What the support worker did for me wasn’t about finding an answer to depression. It was about helping me understand what was going on in my head and come to terms with what I was feeling. That’s what I needed.

I also appreciated that the support wasn’t always formal or sitting in an office. Sometimes we would meet at the Telegraph Station or Olive Pink. The worker never pushed me. She would encourage me to try things and helped me understand what other supports were available if I needed them. Those conversations really opened my mind.

After finishing with the 3-month Aftercare program, I started coming to MHACA’s Drop-in Centre. I was reluctant at first, but I kept feeling that I needed to maintain that connection.

I still come in, usually once a week during my work lunch break. I enjoy having a coffee and talking with other people, but the most important thing for me is knowing that people who care are nearby if I need them. I know I can talk about how I’m feeling without judgement.

My Aftercare support worker also encouraged me to get out more, join a walking group and think about returning to work. I now work in a senior IT role and I’m enjoying using skills that I hadn’t had the opportunity to use properly for many years.

Grief is still a big part of my life and I still miss my partner every day. I don’t have everything worked out and I take life day by day. That’s part of why maintaining my connection with MHACA is still important to me.

The support I received helped me understand what I was going through and showed me that there are people I can turn to when I need them.



Northern Territory Aftercare Service

Support After a Suicidal Crisis

The MHACA Aftercare Program provides short-term, recovery-oriented support to non-Aboriginal adults over 18 years old experiencing suicidal distress or following a suicidal crisis. The program offers compassionate, person-centred care that supports individuals throughout their recovery journey.

The program aims to reduce suicidal distress, increase safety and connectedness, strengthen coping strategies and support participants to regain confidence and independence. Support focuses on helping participants rebuild hope, strengthen protective factors, reconnect with their community and work towards meaningful, self-directed recovery.

Throughout the 2025-2026 period, the program experienced a steady increase in demand. It received 40 stakeholder referrals, self-referrals and enquiries through General Practice clinics, Alice Springs Hospital, the Alcohol and Other Drugs Service of Central Australia (ADSCA) and community members. Of these, 27 people completed an intake and received ongoing Aftercare support. Several others received brief engagement to address an immediate need or connect them with another appropriate service.

A defining strength of the Aftercare Program is its responsiveness. Every person who contacted the service or was referred to it was contacted back on the same day, unless the referral was received over a weekend. Early contact helps reduce barriers to support during periods of vulnerability and reflects MHACA's commitment to accessible, timely and respectful care.

Across this reporting period, the Aftercare Service delivered 977 engagements, including 285 face-to-face engagements, 219 phone calls and 45% of all engagements by text message. This flexible approach allows participants to receive support in ways that feel safe, practical and manageable for them.

Participants who accessed the service represented a broad cross-section of the Central Australian community, primarily aged between 25 and 54 years. At the time of receiving support, 39% were engaged in paid employment.

A key strength of the program is its ability to build strong working relationships with clinical services, therapy providers, General Practitioners, hospitals, allied health professionals and community organisations. These partnerships support timely referrals and help connect participants with services that are best suited to their individual needs and most likely to strengthen their recovery.

Northern Territory Aftercare Service

Advocacy is also an important component of Aftercare support. Recovery workers assist participants to navigate clinical systems, attend appointments, communicate their needs, understand available options and feel safer and more supported within clinical environments.

For participants, receiving Aftercare support means being met with compassion, consistency and respect during a difficult period of their life. The program provides a trusted connection between suicidal crisis and longer-term recovery, ensuring participants feel heard, informed, supported and less alone as they move forward.

Iris Imison
NT Aftercare Service Recovery Worker

Aftercare Service in the Community

- Stress Less in the Plaza community event: Promoted the service and connected with community members through meaningful conversations about mental health and lived experience.
- PALM (Pacific Australia Labour Mobility) Scheme information session: Presented the program to more than 80 workers and provided safety plans, crisis contacts and information about free mental health supports available in Central Australia.
- Central Australia Suicide Prevention Forum: Shared insights from the program's first year of service delivery and facilitated an interactive safety planning workshop, providing practical tools to support wellbeing.

What our Participants Say

> “I have learned so much about myself, who I am, how I deal with challenges that I am confronted with in life. I have now achieved a conscious level of where I am at emotionally and I have tools and contacts that can help me through a crisis. ”

> “This hasn’t been easy. I was very ill when I first engaged with the program. Most recently, the support in December really saved my life. ”

> “I am learning to value myself more. I always felt deeply cared for and understood. ”

> “I am deeply grateful that you continued to support me beyond the three months. Those extra check-ins meant more than I can say. My aftercare support worker helped me rebuild something I didn’t fully have before - my sense of agency and belonging in this world. ”



Aftercare at SPF:
Safety Planning Workshop at the Central Australian Suicide Prevention Forum.

Feeling like ending your life?

Lifeline 13 11 14
13 YARN 13 92 76 (for First Nations people)
Suicide Call Back Service 1300 659 467
NT Mental Health Line 1800 682 288
Brother to Brother 1800 435 799 (for Aboriginal men)

If a life is in danger

Call 000 or go to the **Emergency room at the Hospital.**

MHACA Mental Health Association of Central Australia

MHACA provides free support to non-Aboriginal people after a suicidal crisis

Call 0447 884 324 or
Email recovery@mhaca.org.au
Mon-Fri 8am-4pm

If you are Aboriginal, please contact Congress on 1800 142 900

MHACA Mental Health Association of Central Australia

Pathways to Recovery

The Pathways to Recovery Program is a psychosocial, recovery-focused program that provides individualised support to people experiencing mental health challenges across Central Australia. The program aims to support participants in achieving greater stability and independence, strengthening their wellbeing and remaining connected to their community.

A key focus of the program is assisting participants to access the supports and services they need to live in a safe and secure environment while maintaining their independence. The team works alongside participants to identify their individual needs, strengths, goals and aspirations and develop a personalised Recovery Plan.

Recovery is different for every person. Building a trusting and respectful relationship with participants is an important part of the program. Support workers take the time to understand each participant's strengths, challenges, circumstances and priorities. By building on existing strengths and providing practical support to address barriers and challenges, participants are supported to increase their confidence, develop skills and work towards an improved quality of life.

Support is flexible and tailored to each participant and may include:

- Advocating with and on behalf of participants.
- Supporting the development of independent living and daily life skills.
- Providing outreach support and home visits.
- Supporting participants to engage in MHACA group programs and community-based activities.
- Providing support to attend health, housing, Centrelink and other appointments.
- Connecting participants with community, health, housing and specialist service providers.
- Supporting participants to strengthen social connections and reduce isolation.
- Assisting participants to identify and work towards their individual recovery goals.

The most rewarding aspect of the program is seeing participants make meaningful progress towards their goals. Each achievement, whether large or small, represents an important step in a participant's recovery journey.

Providing Support Regardless of NDIS Status

A key strength of the Pathways to Recovery Program is the ability to provide psychosocial support to people both with and without NDIS plans. Funding from the Northern Territory Government and the Northern Territory Primary Health Network (NTPHN) through the Commonwealth Psychosocial Program enables MHACA to support people who may not be eligible for the NDIS or are awaiting an NDIS outcome. This helps reduce gaps in service delivery and ensures participants can continue to access the recovery-focused support they need.

Learning and Innovation Through The Mental Health Services (TheMHS) Conference

Some members of the Pathways team attended TheMHS Conference, providing an opportunity to learn about innovative approaches, programs and practices being delivered by mental health services across Australia. The team heard from other organisations, people with lived experience and mental health professionals and brought back new approaches to strengthen the support provided to participants in Central Australia.

Participant Good News Story

One of our participants self-referred to MHACA while experiencing significant mental health challenges, including depression, social isolation and suicidal thoughts, and a history of self-harm and heavy alcohol use. At the beginning, he felt embarrassed about seeking help but he took the important step of reaching out regardless.

After being allocated a MHACA Support Worker, he gradually developed trust and began engaging openly in his recovery. Together, they developed a personalised recovery plan focused on improving his wellbeing, establishing healthy routines and reconnecting with the community.

Since developing his plan, he has started attending the gym, getting out into the community more often and has commenced counselling to develop additional coping strategies.

While he acknowledges his recovery journey is ongoing, he has already made meaningful progress. His story demonstrates the positive impact of consistent, person-centred support and, most importantly, his own resilience and determination to work towards his future.

Christine Boocock
Senior Programs Manager



Cooking kangaroo tails during a camping trip to Ross River Resort.



A daily game of UNO at MHACA's Drop-in Centre.



Christmas celebrations at MHACA's Drop-in Centre.



Staff and participants at a sports day organised by Reclink.

Activities at the Centre

The MHACA Day Program provides a safe and welcoming space where participants can socialise, access support and take part in activities that promote recovery and wellbeing. Open weekdays, the Day Program offers a relaxed environment where participants can enjoy a meal, have a coffee, use the computers, access laundry and shower facilities or simply spend time with others in a safe setting.

Participants complete an intake process before joining the program and are encouraged to attend to support their individual recovery journey. For many people, having a consistent place to come provides routine, structure and a sense of belonging. The Day Program can be a first step towards building confidence and reconnecting with the community.

Throughout the year, participants took part in a wide range of activities at MHACA and in the community including cooking groups, arts and crafts, music, exercise, games, recovery and wellbeing groups, educational sessions, visits from local services, pickleball, swimming, walking groups, the Imparja Cup, AFL Footy for Life Program, community events and day trips.

The monthly activity calendar is developed with participant feedback in mind, helping ensure activities remain relevant, enjoyable and meaningful. This year, MHACA re-engaged a Peer Reference Group, giving participants another opportunity to share ideas, provide feedback and have a genuine say in the future direction of MHACA.

While the activities themselves are important, the biggest outcomes often come from the connections participants make along the way. Participants build friendships, gain confidence in social situations, develop practical living skills and become more involved in their community. Having a safe place where people feel welcomed, accepted and valued can have a significant impact on their overall wellbeing.

Healthy Cooking Group

Healthy Cooking continues to be a popular activity in the Day Program. Each week participants come together to prepare and enjoy a shared lunch.

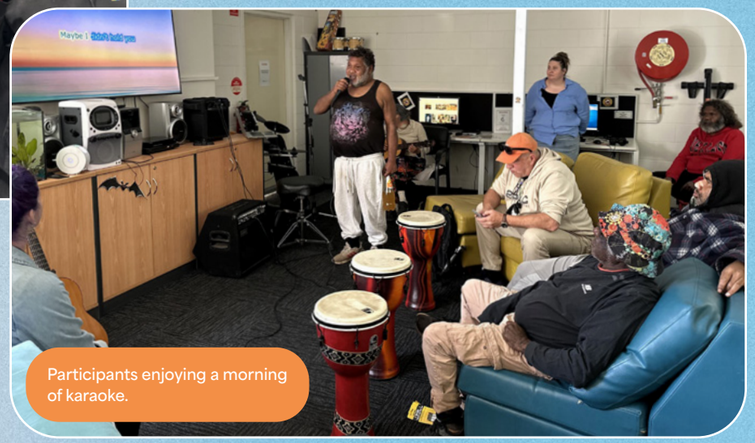
The group is about much more than cooking. It gives participants the chance to build confidence in the kitchen, develop everyday cooking skills and work alongside others in a relaxed and supportive environment. Whether helping prepare ingredients, setting up the kitchen or simply enjoying the meal, everyone can be involved and feel included.

The Day Program team regularly asks participants what they would like to eat and looks for new meals to try. Sharing a meal together has become one of the highlights of the week and another way for participants to connect, build friendships and feel part of the MHACA community.

Matthew Honeysett
Day Program Manager



Staff and participants celebrating Halloween.



Participants enjoying a morning of karaoke.



Staff and participants after a fun footy trivia session.



Staff serving lunch prepared during MHACA's healthy cooking activity.

Housing and Homelessness

MHACA's Housing and Homelessness Program delivers two programs: the Tenancy Sustainability Program and the Housing Psychosocial Support Program. Both provide participant-centred, trauma-informed support to people experiencing mental health challenges alongside housing instability or homelessness.

Tenancy Sustainability Program

The Tenancy Sustainability Program supports people experiencing mental health challenges to maintain and sustain their tenancies. During 2025-2026, the program supported 36 participants living in transitional housing, long-term public or community housing and private rental accommodation.

The program aims to empower participants to develop and use the living skills needed to sustain their tenancy and increase their independence. Case workers advocate for participants and support them to manage tenancy agreements, repairs and maintenance and financial matters, while collaborating with health care teams and other services to provide holistic support.

Housing availability continues to present significant challenges for participants. The team supports participants to navigate waiting times across public, community, social and transitional housing, including waitlists of up to ten years for permanent housing and eight years for priority housing.

These extended timeframes can have a significant impact on participants gaining safe and secure housing. Housing case workers provide outreach support to participants across Alice Springs.

The team uses the Menzies AimHi Stay Strong app with participants to develop individual support plans, identify life goals and recognise what helps them feel strong, as well as areas where additional support may be needed. The Australian Homelessness Vulnerability Triage Tool (AHVTT) is also used to assess individual needs and risks relating to homelessness.

These tools support a trauma-informed and participant-centred approach, with participants fully involved in decision-making. The program aims to provide participants with a clear and consistent way of sustaining their tenancies, fostering independence while recognising that mental health challenges may require a broader level of compassion and understanding.

Supporting Sustainable Housing

- One participant relocating to Darwin was supported to transfer to transitional housing and other services providing one-to-one support for people with complex needs. MHACA continued to monitor the participant's care for a month to ensure their needs and goals were being met before exiting them from the program.

- Another participant came to the program needing immediate crisis accommodation. While the Tenancy Sustainability Program does not provide crisis accommodation, the team worked with Mission Australia's Stuart Lodge Accommodation to secure a safe place to stay.

- The team also supported a participant experiencing health and housing challenges who was awaiting longer-term accommodation. Following admission to Alice Springs Hospital with a heart condition, MHACA provided brokerage towards temporary accommodation so the participant had a safe place to recover after discharge. This accommodation later led to an opportunity for a long-term private rental, with MHACA and other services providing support to help the participant sustain their tenancy.

Housing Psychosocial Support Program

The Housing Psychosocial Support Program (HPSP) provides more intensive support to people experiencing complex and interconnected factors affecting their wellbeing, including homelessness or risk of homelessness and mental health challenges. Referrals come mainly from mental health services in Alice Springs.

Participants may also experience other psychosocial factors including financial or family abuse, alcohol and other drug use, physical health conditions, difficulties accessing the NDIS or Disability Support Pension, and a lack of service coordination.

The program uses the Menzies AimHi Stay Strong app and the Australian Homelessness Vulnerability Triage Tool (AHVTT) to identify each participant's needs, risks and goals and develop an individual support plan.

Due to the high level of complexity involved in coordinating and collaborating around participants' needs, the program has a caseload capacity of eight participants at any one time. Support is delivered through a trauma-informed approach that places the participant at the centre of decision-making. The goal is to work alongside participants experiencing mental health challenges, empowering them to reach their goals and establish greater safety and stability.

Building Trust and Coordinating Support

- **For participants experiencing multiple and complex challenges, building trust can be an important first step. One participant experiencing homelessness, addiction, family and domestic violence, mental health challenges and financial instability had fractured trust in organisations and services. Engagement was initially intermittent, but over time and with calm encouragement, the participant began engaging more regularly, including through the MHACA Day Program. The team continues to work towards building sufficient trust to progress housing applications and support access to safe and secure housing.**

- **Another participant was referred to MHACA following an extended admission to the Alice Springs Mental Health Unit and subsequent stay in the subacute facility. The participant had experienced significant family trauma, mental health challenges and could not return to the family home. Through collaboration and coordination with other services, MHACA supported a NDIS access request while the clinical team progressed Guardianship arrangements. Over time, this coordinated support contributed to improved safety and financial security and ultimately resulted in permanent Supported Independent Living.**

Lee McSweeny
Housing and Homelessness Manager



Participants enjoying winter-themed bingo during MHACA's Winter Day, focusing on how to prepare for the colder months.

Health Promotion and Improving Wellbeing

Health promotion is about helping people and communities connect with each other and build the knowledge and confidence to support healthy lives and strong wellbeing.

Mental health promotion happens where everyday life happens - in our homes, workplaces, schools and community spaces. By working alongside local organisations and community members, MHACA creates opportunities for people to connect, learn and talk about mental health.

MHACA's Health Promotion work for 2022-2027 focuses on four key goals:

- Reduce stigma around mental health issues and suicide and encourage help-seeking in the Central Australian community.
- Build the capacity of the community services sector to respond to people experiencing mental health difficulties.
- Support sector communication about suicide and promote suicide prevention resources.
- Promote lifestyle interventions that support mental health and wellbeing.

Throughout 2025-26, MHACA connected with people across Central Australia through community events, health promotion activities, sector networks, participant programs, workshops and public awareness campaigns.

The team's approach remained responsive and trauma-informed, with activities and communications adjusted in response to significant community events. This included considering when and how mental health and suicide prevention messages were shared to ensure they were appropriate and sensitive to what was happening in the community.

Community Engagement

Community events provide important opportunities to start conversations about mental health, share practical information and connect people with support. Highlights included the Alice Springs Show, NAIDOC Week Community Day, Homelessness Awareness Week, Seniors Expo, Heads Up Youth Wellbeing, Equal Futures Fair and Big Day Out in Harmony.

Interactive activities helped make mental health conversations approachable, including spinning-wheel prompts, the What Keeps You Strong Tree, wellbeing surveys and a new smoothie bike combining physical activity, healthy eating and fun.

Mental Health Week

During Mental Health Week, MHACA delivered free creative workshops for participants and community members, providing an opportunity to slow down from everyday life. Workshops included plant-based dyeing, ceramic painting, basket weaving and polymer clay with all sessions sold out.

The week concluded with Stress Less at Alice Plaza, bringing more than 400 community members together to connect with local services and take part in wellbeing activities focused on mental health, social connection, fun and relaxation.

Healthy Bodies Support Healthy Minds

Promoting the connection between physical and mental health remains a strong focus across MHACA's health promotion activities and campaigns to encourage participants and the broader community to make small and sustainable healthy lifestyle choices that can have a positive impact on mental health and wellbeing.

During 2025-26, a new Healthy Bodies Activities Officer increased the capacity to deliver wellbeing activities for participants at the Drop-in Centre. Activities included Healthy Cooking, Healthy Eating Week, a Participant Wellbeing Day, winter preparedness, Men's Health Week and a Heart Health information session delivered with the Flynn Drive Community Health Centre Dietitians team.

This work supports participants and the broader community to make healthier lifestyle choices that can have a positive impact on mental health, wellbeing and recovery.



Weaving workshop during Mental Health Week.

Collaboration

Working collaboratively is a key value of MHACA.

We continued to coordinate the Alice Springs Mental Health Professionals Interagency Network, providing opportunities for local services to share information, strengthen relationships and work together on mental health and suicide prevention. This year the Terms of Reference were developed in consultation with members to help ensure the network remains a safe and collaborative space.

MHACA contributed to the organising committees for the Equal Futures Fair and 16 Days of Activism Against Gender-Based Violence and collaborated with a wide range of local and national organisations across mental health, community services and suicide prevention.

Mental Health Messages Beyond Alice Springs

While most of MHACA's mental health promotion work takes place in Mparntwe/ Alice Springs, the team continues to seek opportunities and collaborations to extend mental health and wellbeing messages to remote communities.

During the year, MHACA participated in a Healthy Communities event at Titjikala organised by MacDonnell Regional Council and delivered a wellbeing session to community members at Ampilatwatja supported by the Barkly Regional Council.

Presentations and Resources

MHACA shared mental health and wellbeing messages through presentations, workshops, social media, radio and television, monthly newsletters, animations translated into local languages and practical resources.

- **Presented Alice Springs - More Than Just Bad Media: Mental Health in a Remote Context at the Rural and Remote Mental Health Conference in Hobart.**
- **Presented on the importance of psychological safety in supporting workforce wellbeing at the Social and Emotional Wellbeing Forum in Melbourne.**
- **Regularly joined the Arvos with Andy show on 8CCC Community Radio to share ideas about looking after our mental health.**
- **Developed a wallet-sized card with information about available supports for people experiencing suicidal thoughts.**

Josefina Olmedo
Senior Marketing Officer



MHACA's spinning wheel at the COTA Seniors Expo, sharing simple ideas to support mental health and wellbeing.



MHACA facilitated a smoothie bike activity at the Big Day Out in Harmony event.



MHACA presenting at the Rural and Remote Mental Health Conference in Hobart in November 2025.



Participants with their creations at a plant-based dyeing workshop at MHACA.



Alice Springs Mental Health Interagency Network end-of-the-year lunch.

Keeping Everyone Safe

MHACA continues to play a strong role in leading the conversation around suicide prevention in Central Australia.

MHACA now delivers two programs with a focus on suicide prevention - The NT Aftercare Service (follow-up supports for non-Aboriginal people experiencing suicidal thoughts or a mental health crisis) and the Central Australian Suicide Prevention Training Program (accredited suicide prevention training).

CEO Nicole Pietsch is also the Chair of the Suicide Prevention Australia NT Committee. The committee discusses national suicide prevention strategy and provides opportunities for committee members to provide feedback on local perspectives.

Central Australia Suicide Prevention Forum

The Central Australian Suicide Prevention Forum was held in Alice Springs on 10 and 11 June 2026 at the DoubleTree by Hilton Hotel.

The Forum brought together community members, sector professionals and leaders to share knowledge and strengthen suicide prevention and postvention across the region.

The event offered 24 different experience options across 2 full days of learning, including:

- speakers from local initiatives and research projects
- aftercare supports
- learnings from suicide prevention training
- interactive workshops
- lived experience presentations
- a safety planning group activity
- self-care activities
- networking opportunities.

Life Promotion Network

The Life Promotion Network is a suicide prevention network focused on Central Australia, although there are members from across the Territory.

The network has existed in some form since 1999, which demonstrates a long-term collective commitment to keeping connected around suicide prevention and postvention in our region.

The network meets bimonthly with a mixture of online and face to face meetings - the online meetings enable people outside of Alice Springs to keep connected to suicide prevention work across the Territory.

There were 4 meetings held in the 2025-2026 year. Organisations represented in the meetings included: Central Australian Aboriginal Congress, StandBy Support After Suicide, NT Health, Alice Springs Hospital Aboriginal Engagement and Strategy Unit, AMSANT, Thirrili, Mission Australia, Be You and NT Department of Education.

The Terms of Reference for the meetings were updated during the year to support expectations around respectful behaviour and discussion and ensuring the network remains a safe and inclusive space.

World Suicide Prevention Day

On World Suicide Prevention Day 10 September 2025, MHACA coordinated an event that included a contemplative walk, free breakfast and coffee, a Smoking Ceremony and a Hope and Remembrance Tree, where attendees could write their hopes for the future or remember a loved one they had lost. Signs of hope and positive affirmations were placed along the walk.

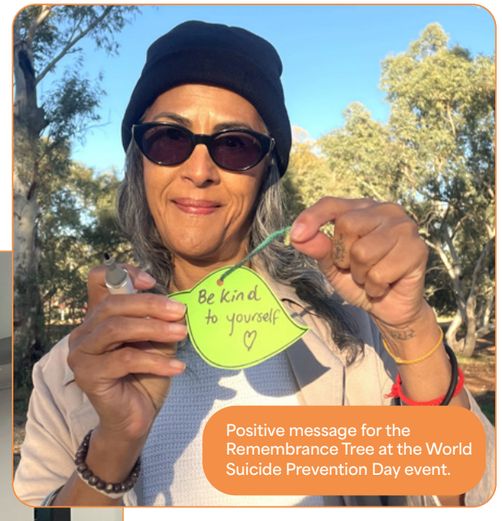
MHACA partnered with organisations StandBy - Support After Suicide, Central Australian Aboriginal Congress, Thirrili and Alice Springs Town Council to deliver the event.

Feedback from attendees was extremely positive. The event provided an opportunity to reflect on the impact of suicide in our communities, and the importance of coming together to support each other through challenging times.

Nicole Pietsch
CEO



Discussion Panel at the Central Australian Suicide Prevention Forum



Positive message for the Remembrance Tree at the World Suicide Prevention Day event.

NDIS Support Coordination

MHACA's NDIS Support Coordination program supports people with psychosocial and other disabilities to understand their NDIS plans and funding, connect with appropriate services and use their funding to work towards goals that are meaningful to them.

During 2025-26, the program supported approximately 100 participants at any given time, including people receiving Level 2 Support Coordination and Level 3 Specialist Support Coordination.

Support includes:

- **Identifying and engaging suitable providers.**
- **Coordinating services.**
- **Addressing gaps in supports.**
- **Preparing for NDIS plan reassessments and changes.**
- **Building confidence in making decisions about their own lives.**

For participants with more complex circumstances, Specialist Support Coordination provides a more intensive response, bringing together multiple services and navigating the interaction between disability, mental health, physical health, justice, guardianship and other systems. Coordinators work alongside participants, with an emphasis on strengthening choice, control and capacity over time.

The impact of Support Coordination can be seen in practical changes to people's everyday lives, including:

- **Accessing assistive technology.**
- **Reconnecting with family and Country.**
- **Pursuing individual interests.**
- **Participating in community activities.**
- **Securing stable Supported Independent Living (SIL).**
- **Using NDIS plans more confidently and independently.**

Supporting Complex Transitions and Maintaining Stability

Throughout 2025-26, Support Coordination worked with participants experiencing complex and intersecting needs, including justice involvement, psychosocial disability challenges and limited informal supports.

A significant outcome was supporting a participant with a long history of housing instability and unsuccessful placements to secure a new Supported Independent Living home aligned with her preferences and support needs. The participant remained central to the decision-making process and chose a provider she felt comfortable with and trusted.

Meaningful Participant-Led Outcomes

A strong focus throughout the year was helping participants understand and use their NDIS funding in flexible and purposeful ways to achieve goals that matter to them.

One participant was supported to use available flexible funding for an intensive period of assistance to organise their home - a goal they had been working towards for several years. The participant actively directed how and when their funding was used, demonstrating increased confidence and capacity in managing their own supports.

Communication, Participation and Connection

The team worked collaboratively across participants' support networks to create opportunities for greater independence, communication, cultural connection and community participation.

- **Following several years of trials, assessments and advocacy, a non-verbal participant received funding for a speech-generating communication device. The device is now being incorporated into her daily life, giving her greater capacity to communicate her needs, preferences and choices and participate in decisions that affect her such as what colour nail polish she likes.**
- **Through coordinated support, one participant developed her artistic practice and was selected as a featured artist at Parrtjima, where her textile artwork and artist story were displayed.**

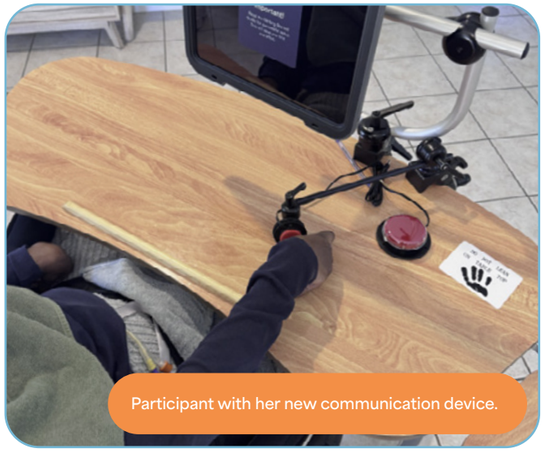
Samuel's Journey Back to Employment

Samuel's participation in Evora Care's Car Wash Employment Program marked an important milestone after several years away from the workforce.

With encouragement, planning and collaboration from his support network, Samuel explored an employment opportunity that better suited his interests and support needs. He engaged positively with staff, learned tasks quickly and enjoyed earning an income through his own work.

Returning to work represents a meaningful step towards greater independence, skill development and community participation, while creating a positive foundation for future employment opportunities.

Ebony Jarratt
NDIS Support Coordination Manager



Participant with her new communication device.



Samuel participating in Evora Care's Car Wash Employment Program.



Support Coordination team assisted participants' travel to Melbourne to represent the Northern Territory in AFL competition.

Central Australia Suicide Prevention Training Program

In 2025-2026, the Central Australia Suicide Prevention Training (CASPT) program continued to grow its reach and impact, equipping people across Central Australia with the knowledge, confidence and practical skills to recognise and respond to suicide risk. CASPT strengthened culturally responsive training, expanded access to free community courses, returned training to Tennant Creek, and introduced enhanced psychological safety measures. Through training, community engagement and sector collaboration, CASPT continues to build local capacity for suicide prevention where it matters most, in workplaces, services, families and communities.

Growth in Training Participation

CASPT recorded 359 participants across its training program, a 21% increase from 297 in the previous reporting period, despite a shorter delivery period. The largest attendance was safeTALK (118), followed by Standard Mental Health First Aid (63), ASIST (54) and I-ASIST (43).

Strong demand continued for ASIST, I-ASIST, safeTALK, safeYARN and Mental Health First Aid training, while increased complimentary community courses helped reduce financial barriers to participation.

Safer and More Responsive Training

Following a temporary pause in training in June and July 2025, MHACA strengthened CASPT's psychological safety measures. A Pre-Training Self-Check Form was introduced and embedded across training, alongside designated support people for ASIST and I-ASIST and improved monitoring of community events that could affect participant wellbeing. These measures strengthened participant preparedness, trainer confidence and psychologically safe delivery.

Expanding Training and Regional Reach

CASPT reintroduced Youth Mental Health First Aid (YMHFA) after it had not been delivered for more than a year. Training also returned to Tennant Creek for the first time in over a year, including safeYARN delivery. CASPT supported this regional return through three Tennant Creek community engagements: engagement ahead of training, the Tennant Creek Show, and the Desert Harmony Festival. Demand also continued from remote communities across Central Australia and the Barkly.

Sector Leadership and Collaboration

CASPT trainers contributed to MHACA's 2026 Central Australia Suicide Prevention Forum as panel speakers, with two trainers also delivering well-received workshops to Forum attendees. Throughout the year, CASPT strengthened relationships with Aboriginal organisations, government, health services, schools, community organisations and major employers, while participating in regional stakeholder and community safety forums.

Community Reach

CASPT continued to engage with a range of stakeholders across Central Australia and the Barkly. Organisations participating in training included:
Akeyulerre Aboriginal Corporation, Central Australian Aboriginal Congress, Children's Ground, Tangentyere Council, NPY Women's Council, AMSANT, CAYLUS, Tjuwanpa Outstation Resource Centre - Hermannsburg, Marlungku-Kari - Julalikari Child and Family Centre, Anglicare NT, CatholicCare NT, Carers NT, NT Health, NT Legal Aid, NAAJA, CAAFLU, Purple House, WOSSCA, OLSH College, Karguru Education Centre Tennant Creek, WANTA and WALTJA.

Looking Ahead

CASPT enters the next year with strong foundations and growing community demand. Building on increased participation, renewed regional delivery and stronger partnerships, MHACA will continue working to make high-quality, culturally responsive suicide prevention training accessible across Central Australia. Every person trained strengthens the community's capacity to recognise risk, start important conversations and respond when someone needs support.

Jane Ndove
Senior Health Promotion and Suicide Prevention Manager

Central Australian Suicide Prevention Training Program



ASIST training.



CASPT team promoting upcoming training at Tennant Creek Community event.



Attendees after completing the 2-day I-ASIST training.

Living Skills Program

The Living Skills Program is a partnership between MHACA and Community Housing Central Australia (CHCA), funded by the Northern Territory Government under the National Agreement on Social Housing and Homelessness.

The project aims to co-design and co-produce a culturally appropriate, strengths-based Living Skills Program informed by people with lived experience of homelessness and living in social or community housing. It supports people to maintain sustainable tenancies through practical living skills, while strengthening health, wellbeing and community connections.

The project has received a six-month extension and will now finish on 31 December 2027, with resources and learnings to be shared across the housing and homelessness sector.

Informed by Lived Experience

Lived experience has been central to the project. At the commencement of the project, 133 people were consulted along with 23 stakeholders representing the housing sector.

Consultations identified key areas where tenants wanted additional support and information:

- **Tenant rights and responsibilities.**
- **Understanding a lease.**
- **Budgeting for a tenancy.**
- **Property inspections.**
- **Landlord responsibilities.**
- **Being a good neighbour.**
- **Visitor management.**

These themes informed the development of the project's animations, workbooks and workshops.

The current phase will further embed co-production by involving tenants in the development and facilitation of workshops and establishing a lived experience advisory committee. Testing and refining resources alongside tenants will help ensure the program is practical, culturally responsive and informed by lived experience.

Partnerships and Community Reach

Strong partnerships have helped extend the project's reach and connect with tenants in community settings. Collaboration with CHCA has continued to strengthen, with outreach activities delivered alongside CHCA, Central Australian Aboriginal Congress and Orange Sky at key housing estates.

These partnerships provide opportunities to connect directly with tenants, test and refine resources and strengthen the project's community reach.



The Living Skills team ready for a consultation day.

Meet Pip, Living Skills Peer Worker

Pip joined the project as the Living Skills Peer Worker, bringing knowledge from her professional practice and lived experience, as well as local knowledge of Alice Springs and connections across the sector.

Her role helps ensure co-design and lived experience remain at the heart of the Living Skills Project. Workshops have also commenced at a CHCA estate, with content being refined and adapted in response to tenant needs and input to strengthen tenancy sustainability, health and wellbeing.

Mark Samec
Living Skills Manager



MHACA and iTALK organised a focus group when developing the animations.

Locky's Story

I wanted to work in mental health because people in my family have experienced mental health challenges, and I wanted to better understand and support them. I had worked in the community sector for about 20 years, including as a youth worker, trainer and assessor, financial counsellor and supervisor. I also worked in petrol-sniffing (volatile substance misuse) prevention, educating young people about the effects it can have on the brain and physical health.

A good mate who was working as a team leader encouraged me to apply for a position at MHACA. He told me it was a good organisation, so when a job came up in the Tenancy Support Program, I applied. I worked in that program for 12 months before moving into Pathways to Recovery, where I have now worked for seven years.

My role is different every day because it depends on what each participant needs and what their priorities are. I might support someone to attend an appointment, go shopping or banking, collect medication or work towards a personal goal.

I have supported participants to go horse riding, apply for a driver licence and move into their own home. Sometimes people are going through a difficult time and need extra support, including attending hospital with them and making sure they feel supported while they are there.

One of the most important things I have learned is how valuable it is to build a relationship with participants. When you know someone well, you understand their usual routine and can recognise changes in their mood or behaviour that might mean something is wrong.

I have also learned the importance of compliance with medication, professional boundaries and looking after yourself. If you do not practise self-care, you cannot give participants the support they need.

One of the best moments was seeing a participant who had lived in supported accommodation for many years achieve his goal of moving into his own unit. Having his own place gave him independence, security and a safe space where he could choose when to have visitors.

I have also enjoyed supporting participants to play in the Imparja Cup over the past three years. The participants love being involved and reaching the grand final two years ago was a great moment for everyone.

What I like best about working at MHACA is interacting with participants and seeing them reach their goals. It is rewarding to know that I supported someone and helped them get there. Every participant has different goals, and it is our job to support them through the process.

I love MHACA and would recommend it to anybody, as a participant or an employee.

- Locky



Chesni's Story

I have always been passionate about working with people and supporting their wellbeing. I completed two bachelor's degrees in psychology and education in Sri Lanka, and before joining MHACA, I worked across both the community services and education sectors. Over time, I became increasingly interested in mental health and the difference that the right support can make in someone's life.

When I learned more about MHACA and the work it does in the community, I was really impressed by the way participants are supported to work towards their goals, build independence and improve their wellbeing. I felt that MHACA was an organisation where I could bring my knowledge, skills and experience to make a valuable contribution to participants and the wider community, while continuing to develop professionally.

I now work as an NDIS Support Coordinator at MHACA. My role involves supporting participants to understand and navigate their NDIS plans, connect with appropriate services and providers, coordinate their supports, and work towards the goals that matter to them. Every participant has a different story, different needs and different priorities, so no two days are the same.

One of the most rewarding parts of my role is seeing participants make progress. Sometimes it may be a big achievement, and sometimes it may be a small step that has taken a lot of encouragement, planning and coordination.

Seeing a participant become more engaged in the community, connect with a suitable support service, or achieve something that is important to them is always a great reminder of why this work matters.

What I enjoy most about MHACA is the people and the culture. I feel very fortunate to be part of a diverse, supportive and positive workplace, especially within the NDIS Support Coordination team. There is a genuine sense of welcoming and teamwork, and I really value the organisation's focus on employee wellbeing, professional development and supportive leadership.

For me, working at MHACA is not only a career, but also an opportunity to keep learning, growing and contributing to positive changes in people's lives.

- Chesni



Treasurer's Message

Mental Health Association of Central Australia
For the year ended 30 June 2026

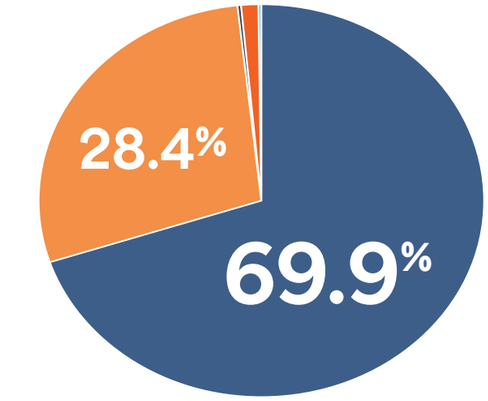
I am pleased to present MHACA's financial results for the year ended 30 June 2026. MHACA achieved an operating surplus of $261,202 and remains in a sound financial position. The overall result was a deficit of $848,715, reflecting the one-off transfer of six properties during the year. It is important to explain this separately from the operating result so members can understand both the year's performance and the change in our assets.

Financial Performance

Total revenue increased by 18.7% to $6.03 million, supported by new and expanded grant funding. Grant income increased by 38.3% to $4.22 million, while NDIS income decreased by 8.0% to $1.72 million.

Total expenses increased by 26.2% to $5.77 million, reflecting the additional service delivery supported by this funding. Employee costs remained our largest expense, accounting for 76% of total expenses. With expenses increasing faster than revenue, keeping costs within available funding remains a priority as management prepares the 2027 budgets.

Total Revenue - $6.03 Million



- Grants 69.9%
- NDIS 28.4%
- Interest 1.2%
- Other Income 0.2%
- Rental Income 0.2%
- Training Income 0.1%

Property Changes

During the year, MHACA transferred six properties to Central Australian Affordable Housing Company Ltd without receiving payment. Their recorded value was $1,166,231. After taking account of the related asset revaluation surplus of $56,314, the draft financial statements report a net loss on the transfer of $1,109,917. This was a one-off, non-cash item, reported separately from the operating result. Although it reduced MHACA's assets, it did not represent a cash payment or an operating loss from delivery services.

The purchase of 13 Lindsay Avenue, approved by the Board in the previous financial year, settled in September 2025 and added $760,778 to land and buildings. It was funded equally by MHACA's reserves and a commercial loan from Bendigo Bank. Surplus funds were subsequently paid into the loan redraw facility, reducing the loan balance to $3,514 at year end. These funds remain available to be redrawn if needed.

Financial Position

On 30 June 2026, MHACA held $2.54 million in cash, compared with $3.60 million a year earlier. The reduction reflects the property purchase; funds paid into the loan redraw facility and the use of grant funding received in previous years. Unspent and prepaid funding reduced from $1.78 million
to $1.11 million. Net assets were $2.95 million.

MHACA continues to have sufficient funds to meet its current liabilities as they fall due. At year end, current assets were 1.52 times current liabilities, compared with 1.60 times in the previous year. Careful monitoring of cash flow and funding commitments remains important.

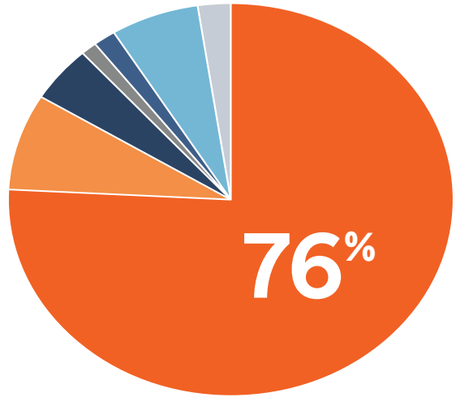
Looking Ahead

Our focus remains on maintaining services, managing costs and securing funding that supports MHACA's work. Changes in funding policies will continue to be monitored for their impact on operations, reporting and governance. The growth in grant income this year is encouraging, and maintaining relationships with funders and exploring new partnerships will remain important.

I thank my fellow Board members, management, staff and our accountant for their contributions throughout the year. Their work supports both the organisation's financial management and the services MHACA provides to our community.

Lavenia Saville
Treasurer

How We Spent Our Money - $5.77 Million



- Employee Related Costs 76%
- Administration Costs 8%
- Health Promotion and Advertising 6%
- Consultancy Fees 5%
- Client Deliverables 2%
- Depreciation and Amortisation 2%
- Property and Occupancy Costs 1%





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