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Vision
A society that understands, values and actively supports the best possible mental health and wellbeing for people.

Purpose
• To work in partnership with others to address the stigma around mental illness, and to promote mental health and wellbeing through education, support and advocacy
• To work in an inclusive, non-discriminatory way using a whole-of-community approach

Values
The Mental Health Association values:
• Integrity and accountability
• A commitment to excellence
• Inclusivity and respect for diversity
• Social justice
• The empowerment of consumers and carers
• And is committed to independence within the not-for-profit sector

The Way We Work
• In partnership and collaboration
• Inclusive of the whole-of-community
• Promoting Peer Support
• Demonstrating empathy and compassion and person centred practice
• Promoting recovery and optimism

The Mental Health Association NSW (MHA) is a not-for-profit, non-political, community organisation.

One of the oldest mental health advocacy organisations in Australia, MHA was established in 1932 and the organisation celebrated its 80th birthday in 2012.

As a registered charity MHA relies on funding granted by NSW Health, as well as membership contributions and donations from individuals and organisations.

The primary focus of MHA includes:
• The provision of information about mental health as well as actively engaging and supporting consumers, their families, and carers, through the Facing Anxiety Program which specialises in anxiety disorders
• Advocacy on mental health issues in NSW
• Promotion of good mental health through public education

A core team of staff operate from Sydney and MHA’s voluntary Board of Management is elected annually from among its members.
President’s message

This year has been a productive one for the Association. The Association expanded a number of programs in the past year although mental health promotion remains a key part of our program and our enthusiastic staff achieved a high profile for the organisation in this area in 2012-2013.

On a political note, the year began uncertainly with both national and state governments developing mental health reforms. The state government is currently reviewing the grant program for non-government agencies. This program is the main source of funding for a number of mental health and drug and alcohol treatment programs that are delivered by non-government agencies. The formation of the Mental Health Commission and our transfer to the Commission’s funding responsibilities has been a major relief and also means that the Association can be closely involved with the development of innovative mental health services. The Association welcomes and congratulates the four Deputy Mental Health Commissioners - Professor Alan Rosen, Dr Robyn Shields, Fay Jackson and Bradley Foxlewin. We look forward to working with Commissioner John Feneley and the deputy commissioners to develop a vision and action plan for mental health reform across NSW in the coming year.

As you will see from the pages that follow in the Annual Report, the Association has been active in a number of exciting initiatives in mental health in this past year. More funding than ever before has now been allocated to mental health by both national and state Governments. The Association maintains a vigilant watch on the appropriate use of this funding to ensure it benefits people living with mental illness, their families, and carers.

The Association continues the tradition of initiating innovative programs in mental health and our history involves the participation of a number of high-profile advocates in mental health. Members are always welcome to bring new ideas to the Board to keep our Association at the cutting edge of change and innovation in community mental health care.

My special thanks go to all the Board members of the MHA past and present, who have volunteered their time and energy to develop the Association, and who have contributed so much to the excellent reputation this organisation enjoys. I look forward to working with all members of the Association in the coming year.

Assoc Prof Meg Smith OAM
President

Chief Executive Officer’s message

Welcome to MHAs 2012-13 annual report. The past year has been a challenging, sometimes frustrating year for MHA.

Following a decision by NSW Health in December 2008 to review the NGO funding program and accordingly, restructure the Health Department, MHA along with others have been in a waiting game. We are unsure how the review and its recommendations will affect how we do our business and the culture and relationship between the not for profit sector and government funders.

There has been little opportunity to talk innovation
and ideas for new programs with government and for the last five years it has been very much status quo and “be patient” until the tender system is introduced and we learn how to compete in a new and challenging environment.

On the up side, the NSW Mental Health Commissioner took office at the beginning of this financial year. John Feneley has been expanding the commission staff, consulting stakeholders and starting the process of producing the Commissions strategy plan. He is supportive and keen to listen, learn and provide advice and is proving to be a voice of support for our sector. We are pleased to have him as a partner in our work.

MHA was asked if we would consent to our 2 grants currently administered by the Mental Health Drug & Alcohol Office (MHDAO) moved from MHDAO to the Mental Health Commission (MHC). We did consent and the grants, our co-location grant and Mental Health Month grant for the 2013-14 financial year will be administered by the MHC. We expect this will strengthen our relationship with the MHC and facilitate partnership opportunities that are not so likely due to the bureaucracy of government. At this stage our other grants remain with South East Sydney Illawarra LHD. MHA enjoys a close relationship with the local LHD staff who are always on hand to provide information and guidance to us.

Thanks to our co-location partners, NSW Consumer Advisory Group (Mental Health) and Mental Health Carers (ARAFMI) we have been able to better access the views and needs of consumers and carers, see firsthand and applaud the increased influence they have in determining government policy and priorities. We are proud to be their partners in mental health.

One of the biggest frustrations this year has been the slow progress in having our NSW directory of mental health services, Way Ahead up and functioning on the internet and free for everyone to use. Over the years this database has been praised and supported by many key mental health organisations in our campaign for funding to maintain the directory and ensure it remains current. We have made submissions to the Minister and to MHDAO and others only to be told it is an excellent idea and a must-have resource but there is no money. The directory depends on how current its information is, and keeping it current takes time and money. We continue to talk to possible funders and are looking at all options. We hope that we can report positively over the next 12 months and that this excellent resource will be available to all people in NSW. It is a must-have for many.

Finally I would like to thank my board and my staff. The board has been a very supportive employer to me and uncompromisingly committed to the work and purpose of the MHA.

Many have been with MHA for decades and have a historical understanding that isn’t available in books. Others are new and come with a fresh perspective that together provide interesting discussion and decision making based on past experiences and on a vision for the future; embracing new technology and the needs of a younger generation.

The MHA staff continues to work hard for the cause of promoting mental health and wellbeing. We are a small team doing a lot. Most are responsible for all aspects of their own project and I depend on them being able to deliver without a lot of help along the way. I am seldom disappointed.

We did lose three staff this year, but all went to work in new and exciting areas and we were pleased to help them develop their skills during their time here. Katrina Davis our Mental Health Promotion Manager is currently on secondment with the Mental Health Commission, working on policy. She is enjoying her time there and we are proud she is representing our staff and our organisation in such a positive manner.

Finally I would like to thank all those people and organisations who continue to support MHA through membership, committee representation, friendship and willingness to talk about possibilities. They contribute to MHAs work and place in the sector and we would be very isolated without them.

Thankyou to everyone who crossed paths with MHA over the last 12 months. We hope the contact was as valuable to you as it was for us and that it will continue over the next 12 months and beyond.

Elizabeth Priestley
Chief Executive Officer
Highlights from 2012 – 2013

1. The WayAhead Directory now has over 3,600 listings in the database and it is continuing to grow each week. In addition, there have been some major changes on the website in order to make it more user friendly. There are now three different types of search available and a new logging system for staff receiving information enquiries. A new reporting system will also capture and cross reference a large amount of data. The level of feedback regarding this resource continues to be positive and ongoing about how it needs to be online for everyone to access.

2. The Facing Anxiety Self-Help Group Program has continued to flourish and is regarded as the most sought after placement opportunity at the Australian College of Applied Psychology.

3. Following the establishment of the NSW Mental Health Commission, MHA has had the opportunity, along with others, to discuss our work and priorities and build a close working relationship. We expect this good relationship will continue into the future.

4. MHA was thrilled to have the opportunity of working with the Centre for Emotional Health (Macquarie University) on the trial of an online anxiety treatment program. Two of our staff were involved and unofficial trial results indicate success. The trial outcomes will be published soon. We hope we will be able to continue the program on a permanent basis.

6. The Workplace Health Promotion Network (WHPN) expanded beyond Sydney and NSW to include Brisbane and Queensland. The new Brisbane network kicked off to great success in September 2012, and continues to expand.

7. MHA celebrated our 80th anniversary in 2012. Members, supporters and stakeholders gathered at our 2012 Annual General Meeting at the Sydney Opera House to celebrate 80 years of good mental health. Read on to find out more about our work over the last eighty years.
80 years of the Mental Health Association NSW (MHA)

We have come a long way in 80 years! Today it is difficult to believe that our organisation was first called the NSW Council for Mental Hygiene. The following is an excerpt from our ‘80 years of mental health in New South Wales’ timeline detailing some of MHA’s history. It was first published in the Spring 2012 edition of our Mental Health Matters magazine.

1932

NSW Council for Mental Hygiene (later to become Mental Health Association NSW) is established as a response to the World Mental Health Congress in 1930 by professionals and people with mental illness. The first president of the NSW Council for Mental Hygiene is Harvey Sutton, a Professor of Psychiatry from Sydney University.

The immediate concerns of Council for Mental Hygiene for NSW are:

- Prevention
- Children
- Parent education
- Mental health care coordination
- Reducing stigma
- Public education
- Improve facilities in mental health care
- Improve education for workers and public

Sub-committees created included:

- Mental deficiency sub-committee
- Problem child sub-committee
- Delinquency and criminality

1945

NSW Council for Mental Hygiene initiates public lectures, articles for journals, and participation in Health Week activities and other mental health projects.

1956

The Council for Mental Hygiene is renamed as NSW Association for Mental Health.

The first meeting is convened by NSW Council of Social Service (NCOSS) with more than 250 people in attendance including: Dr. Morven Brown, Professor W.S Dawson, Dr. Donald S. Fraser (Inspector General of the Insane), Mr. Justice McLelland, Miss Kate Ogilve, Miss Norma Parker, Professor William H Trethowan, and Mr. Paul Henningham.

1958

The first Mental Health Act in 1958 is proposed and developed from research conducted by Professor William H. Trethowan, who says this about the NSW Association for Mental Health:
“Many professionals – practising psychiatrists, psychologists, social workers, nurses, together with a number of influential lay men and women, constituted a powerful pressure group leaning towards the improvement of the care of the mentally ill in NSW.

The Association gave me great support in carrying out some of the reforms that I was endeavouring to bring about. Indeed it can be said that the efforts of the NSW Association for Mental Health made mental health in NSW a political issue, one that the state government could no longer afford to disregard...good mental health care inevitably depends on good legislation.”

1959
First ever ‘Mental Health Year’ – an initiative of the NSW Association for Mental Health

1960 – 1973
NSW Association for Mental Health trains 100 people from the Community Education Committee to be group leaders, half of which became the Parent Discussion group leaders

The NSW Association for Mental Health helps to establish the Companionship and Help for Unmarried Mothers Service (CHUMS)

1967
NSW Association for Mental Health develops a relationship with the Health Education section of the Department of Health, which has active members of the NSW Association for Mental Health within it. This results in the publication of useful pamphlets and booklets about mental health

1975
The Association of Relatives and Friends of the Mentally Ill (ARAFMI) is formed by Mrs. Margaret Lukes, a social worker at the NSW Association for Mental Health

1982
Alzheimer’s Disease and Related Disorders (now Alzheimer’s Australia NSW) is established as a response to the overwhelming amount of dementia cases encountered by mental health organisations such as the NSW Association for Mental Health
for Mental Health; which is receiving many telephone calls from concerned friends and relatives seeking help and support.

1984
First ever *Mental Health Week* is launched - a project of Australian National Association for Mental Health. It is celebrated and promoted by *NSW Association for Mental Health* in first week of July 1984. The theme is ‘Mental Health and the Elderly’

1992
Australian Health Ministers adopt the National Mental Health Strategy and the official and strategic implementation of promotion of mental health, as well as the prevention and early intervention of mental illness. This officially gives the *Mental Health Association NSW* a clear mandate that now aligns with government policy.

2012
Mental Health Association NSW celebrates 80 years of mental health advocacy and mental health promotion

Our Vision
A society that values, promotes and protects mental health and wellbeing of its citizens

Our Mission
Our mission is to promote opportunities for the people of NSW to achieve their optimal level of mental health through providing information, education about mental health, mutual support and advocacy services

The full ‘80 years of mental health in NSW’ timeline was first published in the Spring 2012 edition of our Mental Health Matters magazine. If you haven’t seen it and want to know more, electronic back copies of our 2012-2013 magazines are available to new MHA financial members on request.
Goal 1
Program growth and impact - Expanded reach and impact of programs and services

Mental Health Information Service

Mental Health Information Service and Anxiety Disorders Information Service Phonelines

The Mental Health Information Service (MHIS) and the Anxiety Disorders Information Service (ADIS) provide members of the public, mental health professionals, and service providers with an up-to-date and reliable referral service using the WayAhead Directory.

The service provides personalised and anonymous information and referral to a range of government and non-government mental health, welfare and support services across NSW. It is operated via two 1300 telephone information lines during working hours: the Mental Health Information Service, and the Anxiety Disorders Information Service.

During 2012-2013, the information lines responded to a total of 4263 enquiries.

The WayAhead Directory, listing more than 3600 services, is constantly being updated in preparation to become available to the public as an independent website. More information can be found about the WayAhead Directory on pages 11-12.

Analysis of Callers

In line with previous years, the majority of callers to the service were female (63%) compared to male (30%). The remaining callers were unspecified or not recorded (7%).

The majority of enquiries were from people identifying themselves as:

- Consumers (35.5%)
- Family (26.5%)
- Service providers and professionals (14%)
- Carers and friends (10%)
- Unknown (11%)
- Remaining callers were students, neighbours or young people (total 3%)

Most calls were handled within 10 minutes (77%), while others took between 10 and 20 minutes (16%), with the remainder taking longer than 20 minutes (7%).

The majority of callers identified themselves as being from within NSW in the following areas:
The WayAhead Directory

The WayAhead Directory is a comprehensive mental health resource that has been updated annually since 1985 by the Mental Health Association NSW (MHA). The directory includes a variety of services related mental health sector used by staff to answer calls on the Mental Health Information Service.

Previous editions of the WayAhead Directory have been sold in print and CD formats. However, key stakeholders in the mental health sector have since lobbied for the Way Ahead to be made free-of-charge so that it can be accessible at any time for consumers, carers, health professionals, and the general public.

The number of listings within the directory has been increased from over 2000 to over 3600 services during 2012-2013.

WayAhead Online

A focus group was held in July 2012 to determine what changes were necessary to make the WayAhead website more user friendly and accessible. Since this time MHA has been working closely with a web developer to implement improvements that will make the website accessible to a wider range of individuals.

The new website allows users to conduct a variety of searches for mental health related services. The different search capabilities now include searches by the name of service, as well as location and category based searches. The search features also include visibility of services in particular areas, surrounding areas, state-wide services and also nation-wide services. Additionally there are special components such as predictive text, tags for keywords and Google maps to increase the user-friendliness and accessibility of the website.

There is general mental health information available on the site, as well as an added feature for users to submit mental health

*Note: data gathered using WayAhead which has historically been configured for AHS areas. We look forward to utilising the new online WayAhead and gathering data by LHD next year.*
information enquiries to the website and to provide any feedback and/or new service listing suggestions.

MHA held a community demonstration of the WayAhead website in July 2013 to showcase new key features of the website and to gain feedback about how the site can attract more financial support and promotion within the mental health sector. Representatives from various organisations attended the demonstration including Justice Health, St Vincent's Hospital, Pharmaceutical Society of Australia, NSW Health and the Mental Health Commission.

MHA’s Board made the difficult decision to take the WayAhead website offline until more funding could be secured for the website. Key stakeholders have been approached about the financial situation of WA and the ongoing need for such a valuable resource, and MHA is currently pursuing new partnerships in the mental health sector.

**Factsheets and resources**

It is estimated that about 4000 printed factsheets about mental health issues were distributed at conferences and community events this year, and about 6000 factsheets are estimated to have been printed and placed on the factsheet stand in the William Street Resource Centre.

Many of these factsheets were mailed out to people requesting them through the MHIS. MHA staff have made a conscious effort to reduce the use of paper in the office, and where possible have sent information electronically, or have encouraged people to download information from our website. The number of factsheets printed and distributed have therefore dropped since last year.

There are now 57 factsheets, providing information about a range of mental health issues, and all are available for download on MHA’s website.

New factsheets that have been developed include the following subjects:

- Your GP and mental healthcare
- Hoarding
- Child Abuse
- Smoking and mental health
- Mental Illness: Information for family and friends

**Distribution of Factsheets to the Community**

In addition to our new focus on online distribution methods, MHIS was also active in promoting its services and knowledge of
Small Steps

MHA runs Small Steps seminars for both parents and teachers of primary school children. The seminars aim to raise awareness of anxiety disorders by discussing the most common types of anxiety disorders in children, the signs and symptoms, and what can be done to support children with anxiety concerns.

Over the past year, 29 seminars were held with 842 attendees. Of the 29 seminars 16 were presented to parents and 13 were presented to teachers. Evaluations showed that 91% of Teachers and 98% of parents were more aware of anxiety disorders after the seminar.

Self Help Groups

The Facing Anxiety Self Help Groups are run as a 12-week structured behaviour therapy program. The groups are free-of-charge for participants, and are suitable for people with social anxiety disorder, obsessive compulsive disorder, panic disorder and specific phobias.

The program is continuing to grow and the partnership with the Australia College of Applied Psychology (ACAP) has proven to be a valuable asset. ACAP selects students who have an interest in undertaking placement as group leaders with the self help group program and who meet the criteria to undertake placement in this role. The criteria take into account the maturity of the students and the subjects that they are studying. Each self-help group is also run by two group leaders who are trained to facilitate groups and are supported by staff at MHA.

More than 28 groups ran during 2012-2013, across locations including Bankstown, Bathurst, Bondi Junction, Burwood, Central Coast, Dee Why, East Sydney, Five Dock, Lane Cove, Manly, Maroubra, Mosman, Neutral Bay, Paddington, Port Macquarie and Redfern.
A Memorandum of Understanding was also drawn up with Aftercare in Bathurst, who will continue to run the anxiety self-help group in the area with some of their clients and outside clients on a regular basis.

Two Anxiety Self Help Group leader training days were held during 2012-2013. Evaluations showed that the extent of the participants’ knowledge about anxiety disorders, and the use of the Self Help Groups as a strategy to assist people with anxiety disorders, were both increased by approximately 85%. The level of satisfaction with the self help groups as evidenced by self-reporting questionnaires was 74%.

**Anxiety Disorders Support Groups**

The Anxiety Disorders Support Groups are free, monthly support groups led by trained volunteer facilitators, and provide support, education and information to people living with problem anxiety as well as family and friends of people with anxiety. Group members meet in a friendly atmosphere to offer each other support and share their experiences of the disorder.

MHA ran 23 support groups for people with problem anxiety or Obsessive Compulsive Disorder (OCD) in 23 locations, which provided 1300 occasions of service to participants during the year, an increase of 36% on last year. New anxiety support groups were also established in Lalor Park, Penrith, Blacktown, Fairfield, Wyoming and Dee Why, and a new OCD support group was established in Chatswood.

Attendees were asked to complete an evaluation form about their experience of the groups during the year, with a 65% return rate. Respondents said they participated in support group meetings to learn strategies for managing their anxiety and to interact more with others. Of those, 91% reported that these objectives were achieved.

Support Groups for people with problem anxiety ran in the following locations:

- Bankstown
- Blacktown
- Blue Haven
- Bondi Junction
- Chatswood
- Dee Why
- East Sydney
- Epping
- Fairfield
Anxiety Disorders Public Forums

A Public Forum was held on the 10th October 2012 at the Rooty Hill RSL on Anxiety Disorders. Elizabeth Priestley, CEO of MHA, was the MC along with Associate Professor Rocco Crino who gave an overview of Anxiety Disorders. Julie Leitch spoke about her experience of living with Obsessive Compulsive Disorder.

It was attended by 45 people. Many (95%) reported finding the forum to be very beneficial, while others (5%) reporting finding the forum somewhat beneficial. Other responses included evaluations of the evening as being excellent (98%), and many people (over 95%) reported finding both Rocco Crino and Julie Leitch to be very informative. The majority of people who attended the forum were consumers, followed closely by carers and health professionals.

After the presentations the audience asked the speakers many questions and took advantage of all the literature available on the night.

A Public Forum was also held in partnership between the MHA and ADAN (Anxiety Disorders Association NSW) on the 27th November, 2012 at the Dougherty Community Centre, Chatswood.

Jenny Learmont, President of ADAN, MC of the public forum in Chatswood, with Dr Lisa Lampe providing an overview of Anxiety Disorders and then Julie Leitch gave her perspective of living with Obsessive Compulsive Disorder.

Thirty-five people attended the forum with many (98%) describing the event as excellent, and all attendees reported finding both Dr Lisa Lampe and Julie Leitch to be very informative.
Mental Health Promotion

Mental Health Month

Formerly known as Mental Health Week, Mental Health Month NSW is part of a national mental health promotion campaign held in October each year. Mental Health Month centres around World Mental Health Day on October 10 and aims to promote mental health and wellbeing among the population of NSW, increase mental health literacy and reduce stigma.

A total of 169 events were registered with the MHA in 2012 and local organisers estimated that approximately 31,832 people attended Mental Health Month events.

For the first time in 2012 the MHA partnered with the ACON Peace of Mind project, which sponsored 5 small grants totalling $5,000 specifically for activities involving LGBTI communities.

Also for the first time in 2012, the MHA produced a number of electronic resources including a 10 Tips video and Mental Health Month desktop and email signature images.

In 2012 orders for free resources continued to rise. A total of 914 orders were received, an increase from 791 in 2011.

In 2012, a total of 43 Grants of $500 and $1,000 were available, totalling $27,500, up from $22,900 the year before.

Following the trend of previous years many more grants applications were received than could be filled; a total of 132 applications were received for just 43 grants.

Postnatal Depression Awareness Week (PDAW)

The National Perinatal Depression Initiative (2008-2013) aimed to improve prevention and early detection of antenatal and postnatal depression (PND), and provide better support and treatment for expectant and new mothers experiencing depression.

In line with these goals, the Mental Health Association NSW (MHA), with support from
the Mental Health and Drug and Alcohol Office, MH-Kids (NSW Health), coordinated the second ever Postnatal Depression Awareness Week (PDAW) campaign for during 18-24 November 2012.

The 2012 PDAW campaign promoted and supported local community events in NSW during the week. These ‘Parents Events’ targeted expectant and new mums and dads with the dual aims of providing information about perinatal mental health, and offering a time of fun, relaxation and social support.

A total of 648 PND packs, which comprised of 19,440 postcards and brochures, were distributed for use during PDAW, and a total of 20 small grants were awarded, 10 of $1,000 and 10 of $500. Thirty-four grant applications were received in 2012, almost double the 18 applications received in 2011.

A minimum of 24 PDAW events occurred during Postnatal Depression Awareness Week in 2012, although it is possible that events were held that we are not aware of.

Feedback from participants was very positive and one activity funded by a small grant also acted as an impromptu pilot, resulting in the organisation committing their own resources to the establishment of a year-long program for new parents.

Given that the original 3 year funding for the PDAW campaigns originated from the National Perinatal Depression Initiative which is now complete, MHA is currently pursuing new funding opportunities to continuing running the week from 2013 into the future.
Young and Parenting Project

The Young and Parenting Project began in 2011-2012 with a scoping phase which involved focus group and survey research with young parents aged 20 years and younger, and then expanded to include the development of a mental health promotion campaign aimed at young parents.

MHA staff have continued working on the development of a literacy based website as part of the Young and Parenting Project, with the support of MH-Kids, Mental Health and Drug and Alcohol Office, NSW Health. Work on the website has been successfully completed during 2012-2013, however the launch date has been delayed from the original February 2013 date due to changes in staffing at MHA. We now look forward to launching the website and campaign during the upcoming financial year.

Workplace Health Promotion Network

The Workplace Health Promotion Network (WHPN) was formed in October 2006 in Sydney with the aim of improving the health of the Australian working population. WHPN works towards this goal by supporting organisations to create healthy workplaces.

As of the end of July 2013 we have 53 Sydney members and 6 Brisbane members.

The number of events and attendance at each for 2012-2013 year were as follows:

<table>
<thead>
<tr>
<th>Sydney Network (established 2006)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2012</td>
<td>35 attended</td>
</tr>
<tr>
<td>November 2012</td>
<td>39 attended</td>
</tr>
<tr>
<td>February 2013</td>
<td>46 attended</td>
</tr>
<tr>
<td>April 2013</td>
<td>34 attended</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Brisbane Network (established late 2012)*</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2012</td>
<td>52 attended</td>
</tr>
<tr>
<td>February 2013</td>
<td>17 attended</td>
</tr>
<tr>
<td>June 2013</td>
<td>14 attended</td>
</tr>
</tbody>
</table>

*Note: the initial event was free to generate interest in the new network, and the third meeting was delayed due to the staffing change in the WHPN Coordinator role.

The Sydney Annual Forum for 2012-13

This was held in July instead of June due to the new WHPN Coordinator starting in her role. There were 77 attendees at the forum, and 4 paid exhibitor tables.
Selection of WHPN speakers from 2012-2013

- Dr Nicola Reavley, Melbourne School of Population Health, University of Melbourne
- Dr Susan Feldman, Healthy Ageing Research Unit, Monash University
- Professor Niki Ellis, CEO of the Institute of Safety, Compensation and Recovery Research at Monash University
- Nan Austin, Australian Red Cross Blood Service
- Chris Tzarimas, Chair of EIM (Exercise is Medicine)
- Christina Bolger, Comcare
- Stephen Cook, Royal Australian Mint
- Julia Cohen, Injury Management and Workers Compensation Group, University of Sydney
- John Feneley, Mental Health Commissioner, Mental Health Commission NSW
- Graeme Cowan, ThriveCentral
- Wayne Wigham, Black Dog Institute
- Ingrid Ozols, Mental Health @ Work
- Julie Leitch, Mental Health Association NSW
- Angela Turney and Marion Wands, Connetica
- Katrina Walton, Wellness Designs
- Professor Philip Bohle, Ageing, Work and Health Research Unit, Faculty of Health Sciences, University of Sydney
- Di Schultze, Kristen O’Keefe, and Kirsten Way, Workplace Health and Safety Queensland

New WHPN Co-ordinator Sharon Leadbetter (above) and Speaker Kirsten Way presenting to members at the Brisbane WHPN meeting in June 2013 (below)
## Mental Health Matters Award Winners for 2012!

<table>
<thead>
<tr>
<th>Category</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cross Sector Collaboration Award</td>
<td>The Children’s Hospital at Westmead, School-Link Initiative for Mental Health and Intellectual Disability</td>
</tr>
<tr>
<td>Excellence in Service or Program Delivery Award (split)</td>
<td>Hunter New England Mental Health, Rural and remote area psychologist’s project (RRAPP)</td>
</tr>
<tr>
<td>Excellence in Service or Program Delivery Award (split)</td>
<td>Kids Helpline</td>
</tr>
<tr>
<td>Family and Carer Involvement and Engagement Award</td>
<td>Family &amp; Carer Mental Health Program, Far West Local Health District, Intangible Storytelling Project</td>
</tr>
<tr>
<td>Media Award - Local</td>
<td>Eva Tejszerski, St George &amp; Sutherland Shire Leader</td>
</tr>
<tr>
<td>Media Award - National/Statewide</td>
<td>Amy Corderoy, Sydney Morning Herald</td>
</tr>
<tr>
<td>Mental Health Promoting Workplace Award</td>
<td>Ramsay Health Care, Ramsay Wellness program – NSW Hospitals</td>
</tr>
<tr>
<td>Mental Health Promotion, Prevention and Early Intervention Award (split)</td>
<td>Tamworth High School and Rural Mental Health Services, (Hunter New England Local Health District), The ‘Mindzone’ Youth Mental health and Wellbeing Resource</td>
</tr>
<tr>
<td>Mental Health Promotion, Prevention and Early Intervention Award (split)</td>
<td>The College of Law course Wellbeing and resilience for lawyers</td>
</tr>
<tr>
<td>Consumer Involvement and Engagement Award</td>
<td>Inner City Mental Health Working Group (ICMHWG)</td>
</tr>
<tr>
<td>Indigenous Social and Emotional Wellbeing Award</td>
<td>Andrew-James (AJ) Williams Tchen, Girraway Ganyi Consultancy</td>
</tr>
</tbody>
</table>
Groupsnet was established in August 2011 to support and resource support group leaders across NSW by holding informational ‘Meet and Greet’ events with guest speakers.

During this financial year Groupsnet enjoyed wider acceptance in the community and our membership rose to 100 support groups. Our bi-monthly newsletter was distributed to 300 recipients and attracted some very positive feedback.

Four Meet-and-Greet meetings were held for support groups leaders, and issues of discussion included:

- groups for carers of people with borderline personality disorder,
- eating disorders,
- bereavement after suicide, and
- depression and anxiety in cancer patients and their families.

Unfortunately, Groupsnet was unsuccessful in obtaining funds to continue and as a result the project was forced to close.

We would like to thank and acknowledge the organisations who hosted our Meet-and-Greet events:

- Bradfield Park Carers Program at Milsons point (part of the Kirribilli Neighbourhood Centre)
- College of Professional Psychology (COPP)
- Lifeline Balgowlah
- Candle Cancer Support Group Inc. and especially Lyn Smith and Greg Smith

We also would like to acknowledge the speakers and facilitators who presented at these meetings:

- Irene Gallagher and Akiko Tomioka, Bradfield Park
- Jacqueline Lee, The Butterfly Foundation
- Noel Braun and Anne-Maree Glennon,

Mental Health Matters Awards

The Mental Health Matters Awards are unique awards designed to recognise the achievements of individuals and organisations who have worked to improve understanding, awareness, service provision and the general mental health of our community during the previous 12 months.

In spite of increased promotion, Mental Health Matters Award nominations only rose marginally in 2012. This is an area of potential improvement and we look forward to reporting on greater progress in the next Annual Report.

MHA President Meg Smith (left) and The Hon. Kevin Humphries MP, Minister for Mental Health (right) speaking at the Mental Health Matters Awards presentation
Lifeline Northern Beaches

• Sue McConaghey & Dr. Sian Keane, Central Coast LHD

A special thank you for all who contributed to our newsletter and shared their stories:

• David Harper, Ryde Bipolar Support Group

• Julie Leitch, Mental Health Association NSW

• Lyn Smith, Candle Cancer Support Group Inc.

• Laeonie Forster, Anxiety Support Group Sutherland

• Jacqueline Lee, Butterfly Foundation

• Vassilka Dimitrova-Isbell, Mental Health Association NSW

• Carers NSW

• Kamilla Haufort, Heath Foundation

• Alzheimer’s Association NSW

Partnerships

Official Visitors Answering Service

MHA continues to provide the answering service for the NSW Official Visitor Service, as we have been doing since 2004. The official visitors are appointed by the minister for Health to inspect hospital and community based mental health services on a regular basis. Our staff answers the Official Visitor calls and passes on the details to the specific Official Visitor rostered for that day.

The number of calls have been consistent, only differing slightly from last year. This year 1624 calls were taken on the Official Visitor line, compared to 1674 during the last financial year.

Formal links with clinical services

The Mental Health Association NSW successfully completed an open trial of The Wellbeing Course, an online Cognitive Behavioural Therapy-based educational course developed by the eCentreClinic at Macquarie University. The course aimed to teach people core skills to help them to manage symptoms of anxiety and depression. The MHA, in collaboration with Macquarie University, was interested in exploring just how effective The Wellbeing Course would be for clients of the Mental Health Association.

The trial began 8th August 2012 and included participants with symptoms of depression, generalised anxiety disorder, social phobia, and panic disorder. The course ran for 8 weeks and was guided by Terry Kirkpatrick and Linda Manoukian. The course is designed to improve and maintain good emotional wellbeing and indeed, the results of the trial indicate that the participants’ symptoms of anxiety significantly improved as a result of having undergone The Wellbeing Course. Results of the trial are currently pending publication.
Joint projects with co-location partners (Partners in Mental Health (PIMH))

MHA continues to work closely with our partners in the office – Mental Health Carers (ARAFMI) and the NSW Consumer Advisory Group – Mental Health (CAG). We remain independent organisations but share some back office support, advice and information. We also endeavour to work on joint programs whenever possible.

Our joint resource centre welcomed 561 visitors during the year.

A total of 370 meetings and events took place in the shared boardroom, and 18 outside organisations used the facilities for their own activities.

There were 5 co-location meetings held this year, however a greater number of informal meetings occurred on a regular basis.

Although no formal feedback was sought, all partners have indicated they are eager to continue the arrangement and that the advantages of shared services and knowledge has been positive for all. This includes our clients, outside partners, three governing boards and other stakeholders and keen supporters.

Our current lease expires on 30 June 2014 and we hope to stay in our premises under the current arrangements. We are very grateful for the ongoing support of NSW Health that enables us to stay as co-location partners in William Street.

Reaching out to Aboriginal and CALD communities

MHA sat on the Social and Emotional Wellbeing Week committee facilitated by the Aboriginal Health & Medical Research Centre.

The Mental Health Month small grants program again provided small grants for activities targeting Aboriginal and Culturally and Linguistically Diverse Communities. The Mental Health Matters Awards also presented an award in the Indigenous Social and Emotional Wellbeing category.

Local organisers of Mental Health Month activities were asked to specify the target groups for their event. 24% of respondents included Indigenous communities and 17% included CALD communities.

Partnership with Transcultural Mental Health

In 2012 the Transcultural Mental Health Centre (TMHC) funded and arranged for the translation of the Mental Health Month factsheet into 11 languages other than English including Arabic, both simplified and traditional Chinese, French, Greek, Hindi, Italian, Korean, Spanish, Dari, Burmese, and Vietnamese. The translated factsheets were made available online at the MHA and TMHC websites and were distributed by the MHA via USB. TMHC distributed these factsheets via targeted mailouts to several language specific community organisations.

The TMHC also generously funded the small grants to groups planning Mental Health Month activities focusing specifically on various CALD communities.
Goal 2
Profile and influence - Leadership and advocacy in mental health promotion and support

MHA strives to establish formal and informal partnerships with a variety of mental health and allied health agencies.

The Mental Health Association NSW (MHA) has signed formal Memorandums of Understandings with the following organisations:

- ACON (Mental Health Month)
- Australian College of Applied Psychology (ACAP) - (Self-Help Groups)
- Bathurst Aftercare (Self-Help Groups)
- CAPA International Education (Students on placement with MHA)
- Centre for Emotional Health Macquarie University (Online Clinic)
- Crisis Support Services (suicide support)
- Jansen Newman Institute (Student placements)
- NSW Institute of Psychiatry (Training and professional development)
- NSW Consumer Advisory Group – Mental Health (office co-location partner)
- Mental Health Carers (ARAFMI) NSW (office co-location partner)
- Mental Health Council of Tasmania (Mental Health Month)
- State-wide and Mental Health Services (Tasmania) (Mental Health Month)
- Transcultural Mental Health Centre (Mental Health Month)
- Western Australian Association of Mental Health (Mental Health Month)

Engagement with Mental Health Interagencies

During the last 12 months MHA participated in the following:

- Anti-Poverty Week Committee meetings
- Anxiety Professionals Network facilitated by Westmead Hospital
- Community Guidelines for Reporting
Suicide Working Group facilitated by MHDAO and Ministry of Health
• Energy and Water Ombudsman (EWON) Council representing people on low incomes
• Family and Friends of Missing Persons Unit Interagency meetings
• Farmers’ Federation Rural Network
• Forum of Non-Government Agencies
• Mental Health Council of Australia (MHCA)
• Mental Health Day/Week/Month State Coordinators Committee
• Mental Health Professionals Network facilitated by Sydney Central Division of GPs
• Mental Health Sports Network facilitated by Schizophrenia Fellowship
• Mindframe Communication Managers Advisory Group
• NSW Health Promotion, Prevention and Early intervention Sub-Committee
• NSW Health NGO Advisory Committee
• NSW Mental Health Commission Forum
• NCOSS Health Policy Advisory Group
• National Anxiety Disorders Organisation Network (NADON)
• NADA Health Promotion subcommittee
• NSW Institute of Psychiatry’s Community Education Committee
• Oral Health Alliance
• Physical Health Industry Reference Group facilitated by MHCC and Richmond PRA.
• Pharmacy Mental Health Project Advisory Group facilitated by Pharmacy Society NSW
• Psychology Council NSW
• Rural Mental Health Network
• Social and Emotional Wellbeing Week Committee run by the AH&MRC
• Sydney Mental Health Advisory Forum facilitated by Department of Human Services and Centrelink
• Steering Committee overseeing the Hunter New England Health Research project for Community Guidelines for Reporting Suicide Working Group facilitated by MHDAO and Ministry of Health
• Psychology Council NSW

Provide sector and associated organisations with appropriate training and information sessions

The Mental Health Association NSW (MHA) provided mental health training or information sessions to:

• UNSW (Master of Public Health Program)
• Electoral Office Staff at Parliament House
• Northside Community Connect staff
• Northside Community Connect carers program
• Lalor Park Community Centre
• Cromer Community Centre
• BUPA Workplace Mental Health Education
• FBEU State Committee of Management Surry Hills
• FBEU State Delegates Conference
• UTS (Undergraduate Social Sciences Program)
• National Centre of Indigenous Excellence
• Parramatta Neighbourhood Centre
• Physical and Mental Health Conference at Wesley Centre
• NSW Association of Children with a Disability
• Kareena Hospital
• Healthy Workplace Forum facilitated by Meadowbank TAFE
• Mental Health and Diabetes Forum Macquarie Hospital
• Lifeline Telephone Counsellors
• YMCA Fitness Leaders for Brightside Program
• Macquarie University Graduate Psychology Program
• Community Service students at Western Sydney Institute of TAFE
• Inner City Men’s Aboriginal Group
Grow MHA profile through the use of media

MHA has continued to grow and develop our online presence and to create and update content on our websites and across our social media accounts.

Our websites and social media continue to function as a means of providing useful online resources direct to the general public, and we continue to improve in our ability to attract traffic to our websites and effectively promote our programs to the media and online.

MHA Websites
During 2012-2013 MHA primarily operated two websites – www.mentalhealth.asn.au and www.whpn.org. Currently we are developing plans for management of multiple online assets which will include mha.asn.au and whpn.org, as well as new websites expected to launch over the next 12-18 months.

Website traffic statistics for MHA’s website (mentalhealth.asn.au) during 2012-2013:
• 66,800 unique visitors (133% increase from 2011-2012)
• 93,300 total visitors (123% increase from 2011-2012)

Website traffic statistics for WHPN’s new website (www.whpn.org) during 2012-2013:
• 1,263 unique visitors
• 1,908 total visitors

Facebook
During 2012-2013 MHA has continued to successfully operate a popular Facebook page. The page continues to be used most successfully for wellbeing and health promotion messages, with people continuing to respond well to visual messages encouraging positive behaviour changes.

By the end of 2012-2013 the MHA Facebook page had received 2891 ‘likes’ (63% increase from 2011-2012). The most popular post during 2012-2013 was once again an image of our Stress Less postcard artwork from the Mental Health Month campaign, with the post reaching over 20,000 people (67% increase from 2011-2012).
Our Facebook page also provides us with another way to distribute mental health information and referrals via private direct messages, form partnerships and communicate with other mental health organisations operating Facebook pages, and individuals participating in MHA services and campaigns.

Other Social Media
During 2012-2013 MHA has also continued to successfully operate a popular Twitter page. During the course of the year this has enabled MHA to connect with participants in our programs and campaigns, media personalities and journalists, and other organisations MHA within the sector, as well as the general public.

By the end of 2012-2013 the MHA Twitter account had received 5960 ‘followers’ (65% increase from 2011-2012).

MHA also continues to maintain a presence on a selection of other platforms, including the website HealthShare, and social media platforms YouTube and LinkedIn.

MHA Online Newsletter
MHA also sends out a monthly eNews The Mind Reader to over 3800 people.

Press and Media
Approximately 40–50 press releases were again distributed by MHA during 2012-2013. A strategic media plan was also executed for Mental Health Month and Postnatal Depression Awareness Week.

MHA has continued our relationship with the Mindframe project and has also been working in contact with the new NSW Mental Health Commission media team, and look forward to continuous improvement and success in our media work.

A small selection of MHA press coverage (below)
Goal 3
Sustainability - Dynamic, accountable and sustainable organisation

Financial Sustainability

This year has been a difficult year with funds for new projects being hard to acquire and no increase in current grants, other than the CPI increase, which does not cover the cost of doing business.

It has been this way for several years and we are finding that we must rely on donations and bequests to make up the difference between our project income and project costs. Increase in electricity, salaries, rent and travel costs continue to put a dent in our bottom line.

The need for us to find an independent funding source remains a priority for MHA and will be a priority in the next strategic plan for 2014-2018.
Our grants for 2012-2013

Four recurrent NSW Ministry of Health grants

1. Core/Anxiety Program grant (two grants now rolled into one)
2. The Mental Health Promotion grant
3. The Mental Health Month grant
4. The Partners in Mental Health Co-location Grant

MHA had three project grants

1. Postnatal Depression Awareness Week Grant (MH-Kids)
2. Young and Parenting Project Grant
3. Mental Health Coordinating Council Research Grant

Strong Governance

At the AGM held in September 2012 we were fortunate enough to have more candidates for the Board than we had positions. We conducted an election with the incumbents being re-elected to their positions. MHA is fortunate to have Board members who hold a long history with us, as well as new members with a fresh approach and skills that are valuable to our organisation moving forward.

This year we also conducted an external Board evaluation through the services of the Queensland University of Technology. This highlighted some positive results, and provided information on where we can improve performance. We have developed a priority list and will be working on the recommendations over the next three years. Thank you to the QUT for their valuable assistance with this evaluation.

Maintain Continuous Quality Improvement

Continuous quality improvement is now well embedded in the culture of the MHA and is reflected in all aspects of the way we work, including all our internal procedures and systems. The MHA was externally reviewed by an independent organisation, Quality Management Services, in 2012 against the standards established by the Quality Improvement Council (QIC) for community organisations. The MHA met or exceeded all the benchmarks and was accredited by QIC until 2015.

The MHA was pleased to be included in the funding provided by NSW Health that allowed non-government organisations to achieve their initial accreditation with QIC. The cost of ongoing accreditation makes it difficult for small organisations who rely on government funding. However, the MHA values the improvements in our internal procedures and processes as well as in client and sector services that have been brought to our program by the process of continuous quality improvement and the regular external review of our progress, and we have continued to fund this program internally.
## Board Members and Meeting Reports

<table>
<thead>
<tr>
<th>Officers of the Board:</th>
<th>Attendance at Executive Committee Meetings (out of possible 9)</th>
<th>Attendance at Board Meetings (out of possible 5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Meg Smith OAM – President</td>
<td>4#</td>
<td>4#</td>
</tr>
<tr>
<td>Ms Jill Faddy OAM-Vice-President</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>Mr Frank Flannery – Vice President</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>A/Prof Janette Perz – Honorary Secretary</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Mr Stephen Jasek – Honorary Treasurer</td>
<td>9</td>
<td>4</td>
</tr>
<tr>
<td>Mr Peter Trebilco OAM - Chairperson</td>
<td>8</td>
<td>5</td>
</tr>
</tbody>
</table>

**Ordinary Members:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Attendance at Executive Committee Meetings (out of possible 9)</th>
<th>Attendance at Board Meetings (out of possible 5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Nick O’Connor – Deputy Chairperson</td>
<td>1#</td>
<td>5</td>
</tr>
<tr>
<td>Mr Scott Mahony</td>
<td>5*</td>
<td>4</td>
</tr>
<tr>
<td>Mr Fred Kong</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MS Sharyn McGee</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Ms Megan Wintle</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Mr Ken Neyle</td>
<td>1#</td>
<td></td>
</tr>
<tr>
<td>Mr Gary Moore</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Mr David Harper</td>
<td>7*</td>
<td>5</td>
</tr>
<tr>
<td>Mr Les Bursill OAM</td>
<td>2#</td>
<td></td>
</tr>
<tr>
<td>Ms Katrina Davis (Staff rep.)</td>
<td>1#</td>
<td></td>
</tr>
</tbody>
</table>

*Indicates that board members were not constitutionally required to attend the meetings but did so anyway.

# Indicates board member was granted extended leave.

---

MHA Board Members at the 2012 AGM
Members of standing, advisory and steering committees

Advocacy and Policy Committee
- Mr Fred Kong – Chair
- Mr Jonathan Harms
- Ms Jill Faddy OAM
- Dr Terry Kirkpatrick
- Ms Sharyn McGee
- Mr Gary Moore
- Ms Elizabeth Priestley
- A/Prof Meg Smith OAM

Recovery Bus Project Advisory Committee
- Dr Nick O’Connor, Chair
- Ms Paula Hanlon
- Ms Lynda Hennessy
- Mr Douglas Holmes
- Ms Elizabeth Priestley

Mental Health Promotion Reference Group Members
- Lucy Abbott, Aboriginal Health & Medical Research Centre
- Ms Jenice Alliston, Central Coast Mental Health Service, Northern Sydney Central

Coast Health
- Dr Alan Avery, Hunter/New England LHD
- Karen Bedford, Australian Health Promotion Association NSW Branch
- Ms Cherie Carlton, NSW Institute of Psychiatry
- Tony Cotton, Australian Public Service Commission
- Ms Vicky Coumbe, ACON
- Ms Gillian Murphy, University of Western Sydney
- Ms Julie Osborne, Mental Health Drug and Alcohol Officer, NSW Health
- Ms Esther Pavel-Wood, NSW Consumer Advisory Group
- Julie Proctor, Greater Western LHD
- Ms Michele Sapucci, Transcultural Mental Health Centre
- Tim Sharpe, The Happiness Institute
- Husna Razee, University of NSW
- Mr Peter Trebilco OAM, Mental Health Association NSW

Publications Advisory Committee
- Ms Jill Faddy OAM, Chair
- Dr Nick O’Connor
- Associate Professor Meg Smith OAM
- Ms Megan Wintle
- Mr Peter Trebilco OAM ED
Our staff members

- Ms Elizabeth Priestley, Chief Executive Officer
- Dr Terry Kirkpatrick, Deputy CEO
- Ms Katrina Davis (on secondment NSW Mental Health Commission)
- Ms Lai Ha Wu, Finance Manager
- Ms Ci’an Kemp, Senior Project Officer, Communications
- Ms Madeleine Fabian, Senior Project Officer, Mental Health Promotion
- Ms Sharon Leadbetter, Workplace Health Promotion Network Coordinator (WHPN)
- Ms Mehna Alacozy, Project Assistant, Mental Health Promotion
- Ms Linda Junee, Facing Anxiety Self Help Groups Officer
- Ms Julie Leitch, Small Steps/Anxiety Information Officer
- Ms Vassilka Dimitrova-Isbell, MHIS/ADIS Information Officer/GroupsNet
- Ms Linda Manoukian, Anxiety Support Groups/Anxiety Information Officer
- Ms Terri Marsh, MHIS Information Officer/Resource Centre Officer
- Ms Ellen Woodcock, WayAhead Project Officer/Student Coordinator/Mental Health Information Service
- Ms Suzanne Weber, Administration/Membership Officer

Staff Farewells

- Ms Kate Odgers, Administration Officer
- Ms Natasha Webb, Communications Manager
- Ms Stacey Young, Mental Health Promotion Officer

Some of our current MHA staff members
Our volunteers and students

Over the last 12 months MHA has taken a more proactive approach to recruiting and engaging with students and volunteers. All volunteer enquiries are responded to and kept on a protected database, and volunteers are contacted as needed, based upon their skills and experience.

Volunteers regularly meet with supervising staff and are given opportunities to attend occasional training, such as phoneline training and Mental Health First Aid Training. As part of the orientation process, all students and volunteers receive information about MHA’s various programs and have access to the Annual Report.

In the past year there have been many new students and volunteers on placement with MHA. Most students are studying psychology, counselling or other related courses at university and are particularly interested in mental health.

Many of the students who completed a first placement with the Mental Health Information Service and WayAhead continued to build upon this knowledge and completed a second placement with the Anxiety Self-Help groups.

Students and Interns

- Romila Bonney
- Clare Cronan
- Huy Pham
- Melisa Tonge
- Jessica Tsui
- James Whyte
- Catherine Arnott
- David Bryant
- Megan Davis
- Glen D’Costa
- Patricia Dell’Olio
- Isabelle Dwyer
- Amy Dryden
- Ci’an Kemp
- Nicole Liz
- Natalie Mell
- Milena Mijas

Volunteers

- Mehna Alacozy
- Madeleine Pollard
- Aleco Sioco

Anxiety Disorders Support group volunteers

- Debbie Admoni
- Rebecca Cefai
- John Cranfield
- Kathleen Dack
- Jacqueline Davies

Honorary Life Members

- Ms Janet Meagher AM
- Dr Donald Scott-Orr

MHA NSW Advisers

- Ms Janet Meagher AM, Consumer Advisor
- Mr Richard Neal, Honorary Solicitor (Teece, Hodgson and Ward)
• Tonia-Marie Dempsey
• Rachel Flint
• Laeonia Forster
• Lyn Fouracre
• Brett Freeman
• William Fu
• Simon Garisch
• Danielle Goldstein
• Sarah Hariz
• Liz Hickey
• Rebecca Holt
• Danielle Koncz
• Julie Leitch
• Joyce Ma
• Danielle McEvoy
• Andrew Murnieks
• Jasmine Roberts
• Christie Smirnios
• Mark Smith
• Greg Swan
• Marie Richards
• Agnes Starnawski
• Frances Szabo
• Grant Tomkins
• Jennifer Tomkins
• Claudia Virgona
• Michael Williams

• Anthony Winning
• Alison Young
• John Young

Self help group students and volunteers

• Laura Abley
• Cashel Ardouin
• Fatmata Bangura
• Bezabih Barasa
• Deanna Bayeh
• Steven Bonanno
• Romilla Bonney
• Teija Boscoe
• Alexandra Bowen
• Marguerite Brenac
• Nathaniel Casella
• Deidre de Haas
• Sarah Dean
• Xenia Demetriou
• Natasha Dertadian
• Kirsten Deveney
• Arabella El Alami
• Gavin Entwistle
• Daria Floria
• Anna Ford
• Emma Gillyon
• Benjamin Green
• Toby Guildford
• Martin Hall
• Jennifer Hogarth
• Quang Huy Pham
• Andrew Jerovich
• Lynda Kennedy
• Linda Kim
• Cindy Lee
• Gail Lee
• Caren Lockhart
• Janis Macdonald
• Tara Maloney
• Donna Marsh
• Hayley Mayer
• Pippa McFall
• Kathryn McKenna
• Yvette Miley
• Amanda Mitchell
• Jody Morris
• Vivienne Morrow
• Kathy Nguyen
• Angela Petritsis
• Anna Pockaj
• Renae Puckeridge
• Alexis Rabin
• Karine Rayson
• Ashley Rebecchi
• Vanessa Rebello
• Niccole Rowe
• Nicola Scotcher
• Sharon Stevenson
• Olga Sukhovskaya
• Joanne Sullivan
• Angela Susanto
• Myrene Tabas
• Melisa Tonge
• Jason Usher
• Rochelle Vila
• Archana Waller
• Greg White
• Elizabeth Yepez

Photos of MHA board, staff and volunteers with other attendees at Mental Health Month launch & AGM
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

STATEMENT BY MEMBERS OF THE COMMITTEE

The Committee has determined that the Association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In the opinion of the Committee the financial report:

1. Presents a true and fair view of the financial position of Mental Health Association NSW Inc. as at 30 June 2013 and its performance for the year ended on that date.

2. At the date of this statement, there are reasonable grounds to believe that Mental Health Association NSW Inc. will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Committee and is signed for and on behalf of the Committee by:

Jill Faddy OAM
Vice President

Stephen Jasek
Treasurer

20/8/2013

SYDNEY.
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

STATEMENT OF FINANCIAL POSITION
AS AT 30TH JUNE 2013

<table>
<thead>
<tr>
<th>Notes</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
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<tr>
<td>Cash assets</td>
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<tr>
<td>Receivables</td>
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<tr>
<td>Inventories</td>
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<td>2,085</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
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<td>1,021,203</td>
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<tr>
<td><strong>Non-current assets</strong></td>
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<tr>
<td>Property, plant and equipment</td>
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<td>27,123</td>
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<tr>
<td><strong>Total non-current assets</strong></td>
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<td>27,123</td>
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<tr>
<td><strong>Total assets</strong></td>
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<td><strong>Current liabilities</strong></td>
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<tr>
<td>Payables</td>
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<tr>
<td>Provisions</td>
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<td>89,043</td>
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<tr>
<td>Other</td>
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<tr>
<td><strong>Total current liabilities</strong></td>
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<td>465,094</td>
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<tr>
<td><strong>Non-current liabilities</strong></td>
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<tr>
<td>Provisions</td>
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<td>56,297</td>
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<tr>
<td><strong>Total non-current liabilities</strong></td>
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<td>56,297</td>
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<tr>
<td><strong>Total liabilities</strong></td>
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<td>521,391</td>
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<tr>
<td><strong>Net assets</strong></td>
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<tr>
<td><strong>Members Funds</strong></td>
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<tr>
<td>Retained funds</td>
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<td>526,935</td>
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<tr>
<td><strong>Total Members Funds</strong></td>
<td></td>
<td>526,935</td>
</tr>
</tbody>
</table>
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

STATEMENT OF PROFIT OR LOSS AND COMPREHENSIVE INCOME
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

<table>
<thead>
<tr>
<th>Notes</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Revenue from ordinary activities</td>
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<td>1,682,205</td>
</tr>
<tr>
<td>Expenses from ordinary activities:</td>
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<td></td>
</tr>
<tr>
<td>Cost of goods sold</td>
<td>3</td>
<td>628</td>
</tr>
<tr>
<td>Employee expenses</td>
<td></td>
<td>887,944</td>
</tr>
<tr>
<td>Professional and consultancy fees</td>
<td></td>
<td>14,664</td>
</tr>
<tr>
<td>Occupancy expenses</td>
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<td>233,645</td>
</tr>
<tr>
<td>Other expenses from ordinary activities</td>
<td></td>
<td>522,797</td>
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<tr>
<td>Surplus / (deficit) from ordinary activities before income tax expense</td>
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<td>22,527</td>
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<tr>
<td>Income tax revenue / (expense) relating to ordinary activities</td>
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<td>-</td>
</tr>
<tr>
<td>Surplus / (deficit) from ordinary activities after related income tax expense</td>
<td></td>
<td>22,527</td>
</tr>
<tr>
<td>Other comprehensive income</td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>Total comprehensive income attributable to the members of the entity</td>
<td></td>
<td>22,527</td>
</tr>
</tbody>
</table>

The Statement of Profit or Loss and Other Comprehensive Income should be read in conjunction with the notes to the financial statements.
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

Note 1 - Statement of significant accounting policies

The financial statements are special purpose financial statements prepared for use by the committee of the association. The Committee members have determined that the association is not a reporting entity.

The financial statements have been prepared in accordance with the requirements of the following Australian Accounting Standards:

AASB 1031 Materiality
AASB 110 Events after the Reporting Period

No other Australian Accounting Standards or other authoritative pronouncements of the Australian Accounting Standards Board have been applied.

The financial statements are prepared on an accruals basis and are based on historic costs and do not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following specific accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of the financial statements.

(a) Current investments

Investments are brought to account at cost or at Committee members' valuation. The carrying amount of investments is reviewed annually by the Committee to ensure it is not in excess of the recoverable amount of these investments. The recoverable amount is assessed from the investments' current market value. The gains or losses, whether realised or unrealised, are included in net profit.

(b) Plant and equipment

Plant and equipment is brought to account at cost or at an independent Committee's valuation.

The depreciable amount of all plant and equipment is depreciated on a straight line basis over the useful lives of the assets of the Association commencing from the time the asset is held ready for use.

The carrying amount of plant and equipment is reviewed annually by the Committee to ensure it is not in excess of the recoverable amount from these assets.

The recoverable amount is assessed on the basis of the expected net cash flows which will be received from the assets employment and subsequent disposal. The expected net cash flows have not been discounted to their present values in determining recoverable amounts.

(c) Inventories

Inventories are measured at the lower of cost and net realisable value.
Note 1 - Statement of significant accounting policies (continued)

(d) Employee entitlements

Provision is made for the Association's liability for employee entitlements arising from services rendered by employees to balance date. Employee entitlements expected to be settled within one year together with entitlements arising from wages and salaries, annual leave and sick leave which will be settled after one year, have been measured at their nominal amount. Other employee entitlements payable later than one year have been measured at the present value of the estimated future cash outflows to be made for those benefits.

Contributions are made by the Association to employee superannuation funds and are charged as expenses when incurred.

(e) Taxation

The activities of the Association are exempt from income tax.

(f) Revenue recognition

Amounts disclosed as revenue are net of returns, trade allowances and duties and taxes paid. Revenue is recognised for the major operating activities as follows:

(i) Government grants

Grants received are brought to account as income on a progressive basis over either the period to which the grant relates or the period over which the grant is expended.

(g) Receivables

All trade debtors are recognised at the amounts receivable as they are due for settlement no more than 30 days from the date of recognition.

Collectability of trade debtors is reviewed on an ongoing basis. Debts which are known to be uncollectible are written off. A provision for doubtful debts is raised when some doubt as to collection exists.

(h) Deferred income / divisional results

Grants received are brought to account as income on a progressive basis over either the period to which the grant relates or the period over which the grant is expended.

Accordingly, where grants are brought to account on a progressive basis over the period to which the grant relates, there exists the likelihood that grant income will exceed costs associated with the project in some financial periods (divisional profit), and that such a divisional profit will be absorbed in future periods by subsequent divisional losses.

Where the grant is recognised as income in advance of the expenditure being incurred, the divisional profit will form part of the retained profits.

(i) Bequests

Bequests received by the Association are included in Other Current Liabilities (being deferred income) in the Statement of Financial Position and are used for specific projects.
MENTAL HEALTH ASSOCIATION NSW INC.  
A.B.N. 11 326 005 224  

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013  

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Note 2 - Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenue from operating activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership fees</td>
<td>23,580</td>
<td>12,214</td>
</tr>
<tr>
<td>Publication / Promotional sales</td>
<td>2,439</td>
<td>3,789</td>
</tr>
<tr>
<td></td>
<td>26,019</td>
<td>16,003</td>
</tr>
<tr>
<td>Revenue from outside the operating activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and bequests</td>
<td>20,652</td>
<td>19,504</td>
</tr>
<tr>
<td>Co-location grants received</td>
<td>317,800</td>
<td>310,000</td>
</tr>
<tr>
<td>Grants received</td>
<td>1,212,173</td>
<td>1,126,199</td>
</tr>
<tr>
<td>Interest received</td>
<td>57,808</td>
<td>36,919</td>
</tr>
<tr>
<td>Other income</td>
<td>38,613</td>
<td>42,542</td>
</tr>
<tr>
<td>Income - Support</td>
<td>9,140</td>
<td>8,408</td>
</tr>
<tr>
<td></td>
<td>1,656,186</td>
<td>1,543,572</td>
</tr>
<tr>
<td>Revenue from ordinary activities</td>
<td>1,682,205</td>
<td>1,559,575</td>
</tr>
</tbody>
</table>

Note 3 - Surplus / (deficit) from ordinary activities  

Net gains and expenses  

Profit from ordinary activities before income tax expense includes the following specific net gains and expenses:  

Expenses  

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Cost of goods sold</td>
<td>628</td>
<td>3,481</td>
</tr>
<tr>
<td>Depreciation</td>
<td>18,607</td>
<td>40,175</td>
</tr>
<tr>
<td>Rental expense</td>
<td>233,645</td>
<td>224,417</td>
</tr>
</tbody>
</table>

Note 4 - Income tax  

As indicated in Note 1, the company is exempt from income tax.  

Note 5 - Current assets - Cash assets  

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Cash on hand</td>
<td>400</td>
<td>400</td>
</tr>
<tr>
<td>Cash at bank - Head office</td>
<td>235,473</td>
<td>403,573</td>
</tr>
<tr>
<td>Cash at bank - Mood Disorders Program</td>
<td>680</td>
<td>678</td>
</tr>
<tr>
<td>Term Deposit – Security for lease</td>
<td>58,412</td>
<td>58,412</td>
</tr>
<tr>
<td>Cash at bank - FAP</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cash at bank - Shipp fund</td>
<td>1,011</td>
<td>1,008</td>
</tr>
<tr>
<td>Cash at bank - Gilgandra</td>
<td>254</td>
<td>246</td>
</tr>
<tr>
<td>Short term deposits</td>
<td>680,478</td>
<td>538,215</td>
</tr>
<tr>
<td></td>
<td>976,708</td>
<td>1,002,532</td>
</tr>
</tbody>
</table>

Cash is bearing an interest rate of between 0% and 5.5%, (2012 0% and 6.10%) depending on the terms and conditions in respect of the various accounts.
### MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

<table>
<thead>
<tr>
<th>Note 6 - Current assets - Receivables</th>
<th>2013 $</th>
<th>2012 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security deposit</td>
<td>2,259</td>
<td>8,780</td>
</tr>
<tr>
<td>Sundry debtors</td>
<td>7,947</td>
<td>6,377</td>
</tr>
<tr>
<td>Trade debtors</td>
<td>32,204</td>
<td>9,549</td>
</tr>
<tr>
<td></td>
<td><strong>42,410</strong></td>
<td><strong>24,706</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Note 7 - Current assets - Inventories</th>
<th>2013 $</th>
<th>2012 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stock on hand - publications</td>
<td>2,085</td>
<td>1,776</td>
</tr>
<tr>
<td></td>
<td><strong>2,085</strong></td>
<td><strong>1,776</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Note 8 - Non-current assets - Property, plant and equipment</th>
<th>2013 $</th>
<th>2012 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plant and equipment - at cost</td>
<td>73,873</td>
<td>67,756</td>
</tr>
<tr>
<td>Less: accumulated depreciation</td>
<td>(63,332)</td>
<td>(57,187)</td>
</tr>
<tr>
<td></td>
<td><strong>10,541</strong></td>
<td><strong>10,569</strong></td>
</tr>
<tr>
<td>Office furniture and equipment - at cost</td>
<td>198,124</td>
<td>197,488</td>
</tr>
<tr>
<td>Less: accumulated depreciation</td>
<td>(190,362)</td>
<td>(183,672)</td>
</tr>
<tr>
<td></td>
<td><strong>7,762</strong></td>
<td><strong>13,816</strong></td>
</tr>
<tr>
<td>Telephone system - at cost</td>
<td>19,970</td>
<td>19,970</td>
</tr>
<tr>
<td>Less: accumulated depreciation</td>
<td>(19,969)</td>
<td>(19,969)</td>
</tr>
<tr>
<td></td>
<td><strong>1</strong></td>
<td><strong>1</strong></td>
</tr>
<tr>
<td>Motor vehicles - at cost</td>
<td>25,654</td>
<td>25,654</td>
</tr>
<tr>
<td>Less: accumulated depreciation</td>
<td>(16,835)</td>
<td>(11,063)</td>
</tr>
<tr>
<td></td>
<td><strong>8,819</strong></td>
<td><strong>14,591</strong></td>
</tr>
<tr>
<td></td>
<td><strong>27,123</strong></td>
<td><strong>38,977</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Note 9 - Current liabilities - Payables</th>
<th>2013 $</th>
<th>2012 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income received in advance (Note 16)</td>
<td>36,910</td>
<td>28,252</td>
</tr>
<tr>
<td>Grants in advance</td>
<td>6,815</td>
<td>124,205</td>
</tr>
<tr>
<td>Trade creditors</td>
<td>24,208</td>
<td>16,685</td>
</tr>
<tr>
<td>Sundry creditors &amp; Accruals</td>
<td>28,294</td>
<td>56,045</td>
</tr>
<tr>
<td></td>
<td><strong>96,227</strong></td>
<td><strong>225,187</strong></td>
</tr>
</tbody>
</table>
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

<table>
<thead>
<tr>
<th>Note 10- Provisions</th>
<th>2013 $</th>
<th>2012 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Current</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provision for annual leave</td>
<td>89,043</td>
<td>79,456</td>
</tr>
<tr>
<td></td>
<td>89,043</td>
<td>79,456</td>
</tr>
<tr>
<td>(b) Non-current</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provision for long service leave</td>
<td>56,297</td>
<td>52,438</td>
</tr>
<tr>
<td></td>
<td>56,297</td>
<td>52,438</td>
</tr>
</tbody>
</table>

| Note 11 - Current liabilities - Other |       |       |
| Wooton bequest | 160,988 | 154,666 |
| Cobbold bequest | 51,836 | 51,836 |
| S Nick           | 67,000 | -     |
|                   | 279,824 | 206,502 |

Note 12 - Segment reporting
Mental Health Association NSW Inc. is a non-government organisation actively involved in promoting the understanding of Mental Health problems in the community in New South Wales.

Note 13 - Statement of Cash Flows

(a) Reconciliation of cash
Cash at the end of the financial year as shown in the statement of cash flows is reconciled to the related items in the statement of financial position as follows:

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash on hand</td>
<td>400</td>
<td>400</td>
</tr>
<tr>
<td>Deposits at call</td>
<td>738,890</td>
<td>596,627</td>
</tr>
<tr>
<td>Cash at bank</td>
<td>237,418</td>
<td>405,505</td>
</tr>
<tr>
<td></td>
<td>976,708</td>
<td>1,002,532</td>
</tr>
</tbody>
</table>
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

<table>
<thead>
<tr>
<th>2013 $</th>
<th>2012 $</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Note 13 - Statement of Cash Flows (continued)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>(b) Reconciliation of cash provided by / (used) in operating activities</strong></td>
<td></td>
</tr>
<tr>
<td>Operating surplus / deficit</td>
<td>22,527</td>
</tr>
<tr>
<td>Non-cash flows in operating surplus</td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>18,607</td>
</tr>
<tr>
<td>Changes in assets and liabilities</td>
<td></td>
</tr>
<tr>
<td>(Increase) / decrease in receivables</td>
<td>(17,704)</td>
</tr>
<tr>
<td>(Increase) / decrease in inventories</td>
<td>(309)</td>
</tr>
<tr>
<td>Increase / (decrease) in payables</td>
<td>(128,960)</td>
</tr>
<tr>
<td>Increase / (decrease) in provisions</td>
<td>13,446</td>
</tr>
<tr>
<td></td>
<td><strong>(19,071)</strong></td>
</tr>
</tbody>
</table>

The Association has no credit stand-by or financing facilities in place.

There were no non-cash financing or investing activities during the period.

**Note 14 - Events subsequent to balance date**

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the association in financial years subsequent to the financial year ended 30 June 2013.

**Note 15 - Retained funds**

Movements in retained funds are summarised as follows:

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retained funds at the beginning of the financial year</td>
<td>504,408</td>
<td>499,149</td>
</tr>
<tr>
<td>Current year surplus / (deficit)</td>
<td>22,527</td>
<td>5,259</td>
</tr>
<tr>
<td>Retained funds at the end of the financial year</td>
<td>526,935</td>
<td>504,408</td>
</tr>
</tbody>
</table>
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

**Note 16- Income received in Advance**

Income received in advance represents subscription or other income received for the year beginning 1 July 2013.

The amounts included in Income received in advance are as follows

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income received in advance - others</td>
<td>35,937</td>
<td>27,279</td>
</tr>
<tr>
<td>Howarth Foundation</td>
<td>973</td>
<td>973</td>
</tr>
<tr>
<td></td>
<td>36,910</td>
<td>28,252</td>
</tr>
</tbody>
</table>

**Note 17 - Non-Cancellable Operating Lease Commitments**

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not later than one year</td>
<td>251,727</td>
<td>244,395</td>
</tr>
<tr>
<td>Later that one year but not later than two years</td>
<td>-</td>
<td>251,727</td>
</tr>
<tr>
<td>Later that two year but not later than five years</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Minimum lease payments</td>
<td>251,727</td>
<td>496,122</td>
</tr>
</tbody>
</table>

The Association receives a Co-location rental grant to cover these lease commitments.
MENTAL HEALTH ASSOCIATION NSW INC.
A.B.N. 11 326 005 224

STATEMENT OF CASH FLOWS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2013

<table>
<thead>
<tr>
<th>Notes</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Inflows (Outflows)</td>
<td>Inflows (Outflows)</td>
<td></td>
</tr>
<tr>
<td>Interest received</td>
<td>57,808</td>
<td>36,919</td>
</tr>
<tr>
<td>Receipts from government grants</td>
<td>1,389,928</td>
<td>1,514,881</td>
</tr>
<tr>
<td>Membership fees</td>
<td>23,580</td>
<td>12,214</td>
</tr>
<tr>
<td>Other receipts</td>
<td>152,342</td>
<td>103,615</td>
</tr>
<tr>
<td>Payments to suppliers and employees</td>
<td>(1,642,729)</td>
<td>(1,457,654)</td>
</tr>
<tr>
<td><strong>Net cash provided by / (used in) operating activities</strong></td>
<td>(19,071)</td>
<td>209,975</td>
</tr>
</tbody>
</table>

**Cash flow from investing activities**

<table>
<thead>
<tr>
<th>Notes</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Payments for property, plant and equipment</td>
<td>(6,753)</td>
<td>(13,294)</td>
</tr>
<tr>
<td>Proceeds from the sale of property, plant and equipment</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Net cash provided by / (used in) investing activities</strong></td>
<td>(6,753)</td>
<td>(13,294)</td>
</tr>
</tbody>
</table>

Net increase / (decrease) in cash held | (25,824) | 196,681 |
Cash at the beginning of the financial year | 1,002,532 | 805,851 |
**Cash at the end of the financial year** | 976,708 | 1,002,532 |

*The Statement of Cash Flows should be read in conjunction with the notes to the financial statements.*
INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF MENTAL HEALTH ASSOCIATION NSW INC.

ABN 11 326 005 224

We have audited the accompanying financial report, being a special purpose financial report, of Mental Health Association NSW Inc., which comprises the statement of financial position as at 30 June 2013, and the statement of profit or loss and comprehensive income and the statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information and the statement by the members of the committee.

The Responsibility of members of the committee for the Financial Report

The members of the committee of the association are responsible for the preparation of the financial report and have determined that the basis of preparation described in Note 1 is appropriate to meet the requirements of the Associations Incorporations Act 2009 NSW and is appropriate to meet the needs of the members. The Committee's responsibility also includes such internal control as the Committee determines is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial report that gives a true and fair view, 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. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Committee as well as evaluating the overall presentation of the financial report.

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

In our opinion, the financial report gives a true and fair view in all material respects, the financial position of Mental Health Association NSW Inc. as of 30 June 2013 and of its financial performance and its cash flows for the year then ended in accordance the financial reporting requirements of the Associations Incorporation Act 2009 NSW.

Basis of Accounting

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist Mental Health Association NSW Inc., to meet the requirements of the Associations Incorporation Act 2009 NSW. As a result, the financial report may not be suitable for another purpose.

THOMAS DAVIS & CO.

J G RYAN  PARTNER

Chartered Accountants

SYDNEY,

20 August 2013

Liability Limited by a scheme approved under professional standards legislation.
MHA’s Board gratefully acknowledges the ongoing support of NSW Health and the contribution of funds to its programs by our members and donors.

MHA offers special thanks to **Teece Hodgson & Ward**, our honorary solicitors providing pro bono legal advice.

<table>
<thead>
<tr>
<th>Donation $5 and over</th>
<th>Donation $100 and over</th>
</tr>
</thead>
<tbody>
<tr>
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