

**Mental Illness Fellowship of SA Inc  
ANNUAL REPORT  
2005-2006**

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## *Mission Statement*

To assist all South Australians affected by Mental Illness and their carers through education, information, support and advocacy.

## *Aims and Objectives*

- To provide a range of education, support, rehabilitation, information and advocacy services and programs which address comprehensively the needs and interests of:
  - people with Mental Illness and psychiatric disability; and
  - their carers.
- To promote the continued development of the community based rehabilitation and support sector for those with Mental Illness and their carers.
- To promote greater community knowledge, awareness, understanding and support about the effects of Mental Illness on individuals and their carers.
- To encourage research into the causes and treatment of Mental Illnesses.
- To encourage people with Mental Illness and their carers to effectively manage their mental health and to support each other.
- To advance the right of carers to be informed and consulted in the treatment of those with Mental Illness.
- To de-stigmatise Mental Illness and foster community awareness that Mental Illness is as manageable as a physical illness.
- To provide opportunities to Members and the community to contribute to the operation of the Association in a variety of roles, including as volunteers.

## Boards of Management 2005 — 2006

(concluding 31st March 2006)

### Mental Illness Fellowship of SA Inc & Mood Disorders Association SA Inc

President: David Meldrum  
 Vice President: Margaret Springgay  
 Treasurer: Vacant

Members:  
 Maxie Ashton  
 Chris Bock  
 Marion Croser  
 Brian Gardiner  
 Eli Rafalowicz  
 Emma Willoughby

President: Robert Burke  
 Vice President: Eddy Lynch  
 Treasurer: Michelle Van De Ven  
 & Denis Stocco

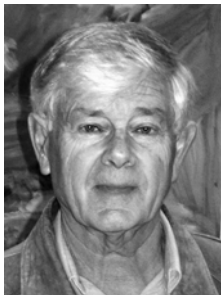
Members:  
 Reg Potter  
 Nick Nicola  
 Denis Stocco  
 Andrew Kelly  
 Barry Daly  
 Minute Secretary: Christopher Heath

## New MIFSA Board of Management

(Commencing 1st April 2006)



David Meldrum  
President



Robert Burke  
Vice President



Neville Rice  
Treasurer



Chris Bock



Marion Croser



Brian Gardiner



Eddy Lynch



Reg Potter



Dr Eli Rafalowicz



Margaret Springgay

**Public Officer**

Michael Becker

**Hon Medical Advisor**

Dr Harry Hustig and Dr Jo Lammersma

**Minute Secretary**

Brigid Downing

**Auditor**

Grant Thornton

**Hon Legal Advisor**

Suzanne Farrelly



## *MIFSA Staff*

### **Executive Director**

Natasha Miliotis

### **General Manager**

Monique van der Neut (from 1<sup>st</sup> April 2006)

### **Office Manager / Finance Manager**

Michael Becker

### **Finance Officer**

Liz McCarthy (from 1<sup>st</sup> April 2006)

### **Administration Officer / MIFSA News Editor**

Pam Kelly

### **Management & Program Assistant**

Carol Fuller (from 1<sup>st</sup> April 2006)

### **Education Program**

Maureen Lewis (5<sup>th</sup> September 2005 — 6<sup>th</sup> October 2005)

Jeanette Walsh ((5<sup>th</sup> July 2005 — 30<sup>th</sup> August 2005)

Pat Sutton (11<sup>th</sup> October 2005 — 9<sup>th</sup> March 2006)

Jeff Vuglar (from 1<sup>st</sup> April 2006)

Andrew Kelly (from 1<sup>st</sup> April 2006)

### **Peer Worker Program Coordinator**

Maggie Mars (from 13<sup>th</sup> October 2005)

### **Psychosocial Groups Program Coordinators**

Jane Dodding (from 14<sup>th</sup> November 2005)

Diane McBain (from 14<sup>th</sup> November 2005)

### **Psychosocial Groups Program Co-Facilitators**

Bernadette Maywald (from 2<sup>nd</sup> February 2006)

Sean Haynes (from 19<sup>th</sup> January 2006)

Yvonne Turner (from 10<sup>th</sup> May 2006)

### **Well Ways Program Coordinator**

Maureen Lewis

### **Keswick Activity Centre Coordinator**

Jenny Pessios

### **Keswick Activity Officers**

Sean Haynes

Katrina Kalaburnis

### **Panangga Activity Centre Coordinators**

Yvonne Turner

Prue Millingen

Bernadette Maywald

### **Accommodation Support Officers**

Chris Knightly

Chris Davidson (from 29<sup>th</sup> October 2005)

Mike Tarawa (from 13<sup>th</sup> March 2006)

Jane Hopton (from 16<sup>th</sup> March 2006)

### **Sunflower Shop Coordinator**

Steve Sanders (to 6<sup>th</sup> June 2006)

Aaron Powell (from 8<sup>th</sup> June 2006)

### **Hospital Outreach Worker**

Jane Borda (27<sup>th</sup> October 2005—8<sup>th</sup> June 2006)

Brian Gardiner (27<sup>th</sup> October 2005—19<sup>th</sup> June 2006)

Katrina Kalaburnis (30<sup>th</sup> June 2006—25<sup>th</sup> July 2006)

### **Sessional staff:**

**Computer Training** — Anton Keijzer

**Massage** — Bohdan Bierczynski

**Foot Reflexology** — Ray Shepherd

**Art** — Laura Michalenko

### **MHRC Administration Officer**

Carol Weston

## *President's Report*



It's a pleasure and an honour to be reporting to you on behalf of your Board. The 'new' MIFSA has enjoyed an exciting, challenging and sometimes exhausting year of change. These are all aimed at better services for our members, and in fact for all South Australians affected by mental illness.

The most obvious change was the coming together of the Mood Disorders Association and the 'old' MIFSA. As most of you know this was achieved formally in March 2006, followed by a meeting of the interim Board in June. Events are moving quickly now, and this year's AGM will see several vacancies filled by election, to complete the transition to an ongoing Board. The finance reports you will see in this report are the last ones built from separate ledgers, as we now have one integrated budget. That may sound easier than it was, and I want to pay particular acknowledgement to our finance 'guru', Michael Becker, who has put in many extra hours to achieve this.

In an action-packed year, a few highlights have been;

- progress with the 'Service Excellence Framework', which is a form of accreditation recognised by the SA Government. Natasha Miliotis and Monique van der Neut are leading staff through a comprehensive process of quality management that will culminate in the middle of next year. This is vital to future funding from government.
- funding to participate in the 'Mental Health Care Improvement Initiative' of the SA Department of Health. We have received \$10,000 which we will spend on several initiatives to give members and the public better access to information about services, including an upgrade of our web-site and an 'e-newsletter'.
- our increased input to the Mental Illness Fellowship of Australia (MIFA), including participation in raising national awareness of mental illness, reaching politicians in every state and territory and nationally, and the partnership with Pfizer to produce a national 'Health Report' on Schizophrenia. The MIFA connections have also been very useful to MIFSA in a period of rapid growth for us. The Victorian and New South Wales affiliates have been generous in their support, especially to Natasha and Monique.
- the lunch with Life Members of the 'old' MIFSA in March this year. This was a humbling experience for me, as I reflected on the struggles and sacrifices of people like these who have kept our services going over twenty-three years. I know MDA too has its stalwarts who have hung in over many lean years, almost all volunteers with only one object—to try to make things a bit better for people affected by mental illness. An annual lunch is a very modest recognition of their achievements, but it's important to celebrate when we get the chance!

Once again, it's a great honour to serve MIFSA in any capacity, and it gives all our Board members great satisfaction. I thank all of them, especially Brian Gardiner, Reg Potter, Margaret Springgay, Chris Bock, Eli Rafalowicz and Neville Rice who are finishing their terms this year.

**David Meldrum**  
**President**



## *Executive Director & General Manager's Report*



The last year has seen considerable change in mental health services in South Australia, particularly in the non-government, community mental health sector. One of the significant changes involved the merger of two leading community-based organisations the Mood Disorders Association of SA and the Mental Illness Fellowship of South Australia.

As a newly merged organisation the Mental Illness Fellowship of South Australia (incorporating the Mood Disorders Association) reaches about 35,000 South Australians a year through a range of education, support, rehabilitation and information services and programs for people with mental illness, their carers and the community. Our programs are delivered utilising the “lived experience” of people with mental illness and carers, and according to a psychosocial rehabilitation model and recovery philosophy and practice.

We would like to thank all the MDA and MIFSA members who attended public meetings, gave feedback and finally voted on the proposed merger. In February 2006 Special General Meetings for the Mental Illness Fellowship of South Australia and Mood Disorders Association were held and postal votes counted with overwhelming support for MDA and MIFSA to merge. More than 20% of the MIFSA membership voted with 96% in favour with more than 40% of the MDA membership voting, also with 96% in favour of merging the organisations.

MDA and MIFSA officially amalgamated on the 31<sup>st</sup> of March 2006. Merger tasks have included establishing an Interim Board, developing a new Constitution, publishing a merged website, moving offices within the Mental Health Resource Centre, distributing a press release re the merger and ensuring a smooth change management process for staff and members. Job descriptions were written and classifications against award structures independently evaluated, work agreements drafted and a new organisational structure developed. Programs merged, policies are being rewritten and a new look newsletter developed.

We have utilised the Service Excellence Framework as a tool for our ongoing quality improvement work and merger tasks. The Service Excellence Framework has been identified as the quality management tool relevant to MIFSA's organisational structure and we are working towards successful validation against the framework in 2007.

We have also managed a rapid expansion of programs due in part to non-recurrent funding allocated to the non-government sector in the last year. The grants allowed MIFSA to deliver and expand a range of programs which have not been available at MIFSA for several years due to lack of funding. The Well Ways Carer Education Program, Psychosocial Groups Program and Peer Worker Program are all vital programs delivering excellent outcomes and significantly building service provision in the community based sector.

Core programs such as the Education Program and Activity Centres continue to provide vital services with the Education Group winners of a Margaret Tobin Award in 2005 in the category of “Excellence in promoting an understanding of mental health in the community”. The Education group were also winners of a Recognition Award in the Eli Lilly Partnerships in Wellbeing 2005 Awards.

The last year included development of a Strategic Plan with every pre-merger MIFSA member receiving a questionnaire regarding input into MIFSA's strategic planning process. Post merger the plan has been revised to ensure both organisations strategic directions are represented. Developed from consultations with staff, Board, volunteers and members, the Strategic Plan has guided service planning and delivery according to four strategic directions:

- Provide effective advocacy on behalf of people affected by mental illness and psychiatric disability;
- Deliver effective services that meet the needs of our members and other people affected by mental illness with a primary focus on psychosocial supports, information and education;
- Ensure our ongoing viability;
- Retain our culture through a strong membership base and volunteer focus.

We extend a heartfelt thank you to all the members, volunteers and staff who have given their time, experience, and expertise to make MIFSA a leading and dynamic organisation in SA. We look forward to the challenges and successes of 2006/07.

*Natasha Miliotis and Monique van der Neut*

## The Year's Highlights

- Education Group; winners of the Margaret Tobin Award; Mental Health Week 2005
- Volunteers Acknowledgement Function
- Fifth Sunflower Shop opened, at Salisbury North
- Community Benefit SA Funding for a new van for the Sunflower Shops
- Inaugural Life Members Lunch
- MIFSA / MDA Merger
- Schizophrenia and Mental Health Awareness Weeks Activities
- Bread Tag Collection hits 400kg
- funding to participate in the 'Mental Health Care Improvement Initiative' of the SA Department of Health
- New Funding for :
  - Well Ways Carer Education Program
  - Peer Worker Program
  - Psychosocial Groups Program
- Melbourne Cup Lunch at Café Primo



## *Advocating for people with psychiatric disabilities*

During the year, MIFSA staff and Board members continued their involvement in a range of advisory and consultative meetings. These activities contribute to the advocacy aims of the Fellowship. Involvement included:

### **Carers SA**

*Natasha Miliotis*

Carers Support Strategy 10

- Wider Planning Group
- Partnership Group
- Reference Group

### **Carers Day TheMHS Advisory Group**

*Natasha Miliotis*

### **Carer's Mental Health Task Force**

*Margaret Springgay and Pat Sutton*

### **Glenside Consumer—Carer Advisory Council**

*Reg Potter*

### **Housing Council—Community Sector**

*Natasha Miliotis*

### **Mental Health Coalition of SA**

*Natasha Miliotis*

- Industry Development Project
- Mental Health Week Advisory Group 2005
- Mental Health Week Advisory Group 2006

### **Mental Health Coalition State Peak Body**

*David Meldrum and Robert Burke*

### **Mental Illness Fellowships of Australia**

*David Meldrum and Natasha Miliotis*

### **Ministerial Reference Group on Tobacco**

*Maxie Ashton*

### **Social Inclusion Board**

*Natasha Miliotis, Denis Stocco and Michelle van der Ven*

- Consumers and Advocates panel  
*Natasha Miliotis*
- Reference Group

### **South Australian Children of Parents with Mental Illness Partnership**

*Natasha Miliotis*

SA—COPMI Partnership Reference Group

### **Supported Residential Facilities Ministerial Advisory Committee**

*Maxie Ashton*

### **Uniting Care Wesley Consumer Advocate Reference Group**

*Maggie Mars*

## *Partnerships*

The Mental Illness Fellowship delivers a range of programs in partnership with other organisations. A few examples:

- The South Coast Exchange Programme in collaboration with Southern Fleurieu Health Service;
- Therapeutic groups in partnership with the Adelaide North East Division of GPs;
- Peer Worker Programme in collaboration with Baptist Community Services;
- Various initiatives and programmes in partnership with Mental Illness Fellowship of Australia

MIFSA auspices the funds for the Mental Health Resource Centre (MHRC) and is co-located in the MHRC with the Mood Disorders Association (SA) prior to merger (31/3/2006), Roofs SA Housing Association, and the Association of Relatives and Friends of the Mentally Ill.

## *Membership*

MIFSA is a member of the national organisation Mental Illness Fellowship of Australia, which is the largest member based organisation working in mental health in Australia representing consumers, carers and concerned citizens.

Locally, MIFSA attracts support from a wide range of people and organisations. Many hold formal membership and are entitled to participate in governance, provide input into program delivery and also to receive information via newsletters. At the end of the financial year, paid up memberships of the newly merged organisation of the Mental Illness Fellowship of SA totalled 1307.

## *Volunteers Program*

*“There are approximately 610,000 Volunteers in South Australia, I may be a little biased but I believe we have about 200 of the best!”*

*Natasha Miliotis*

### **Volunteers are vital at MIFSA!**

Each year approximately 50% of South Australians give their time volunteering, making South Australians the most generous of all Australians. Volunteering promotes a caring culture and contributes significantly to the community. Volunteers at MIFSA enable the delivery of a broad range of programs and services for people affected by mental illness.

Volunteers enrich programs with their wide range of skills and experiences in maintaining and expanding services to people with a mental illness, their families and the general community. MIFSA is greatly dependent on its volunteers for the services it provides to support people with a mental illness and their families. In fact more than 160 volunteers give MIFSA approximately 20,000 hours a year!

Volunteers are actively involved in all programs at MIFSA. Volunteer roles include:

- All positions on the Board of Management
- Community educators who form an education group and deliver education to the community
- Sunflower Shop volunteers in our five opportunity Shops who maintain the day to day running of the shops which raise revenue to supplement grant funding
- Activity Centres volunteers who participate in the accredited food service, delivering program activities, providing support, companionship and encouragement to consumers and carers
- Librarians who maintain the MIFSA library and its resources
- Support Groups leaders who facilitate the regionally based support groups
- Administration and office support volunteers who develop, produce and collate information kits of various types and assist with general office duties
- MIFSA News team who fold and prepare newsletters for posting
- Fundraising volunteers who assist through Badge Day collections and social functions
- Volunteers who participate in Advisory Groups to provide systems advocacy.

At MIFSA we strive to ensure that volunteers understand their role and have a high level of satisfaction with their involvement at the Fellowship, that paid staff understand their responsibilities and are able to manage volunteer programs effectively and that the services provided by volunteers are valued by the members and by the organisation.

Progress towards these aims in the past year has included development of a volunteers policy and related policies and procedures, advancement in updating the volunteers handbook, delivery of training specifically aimed at MIFSA volunteers, implementing a “Volunteers section” in the MIFSA News and a review and ongoing improvement to the variety of ways we recruit, train, support and retain MIFSA volunteers. Each year MIFSA also celebrates with a Volunteers Function to celebrate the work of volunteers and acknowledge their hard work and contributions.

Thank you to all MIFSA Volunteers; your dedication and generous giving of time and talents, is most appreciated.

## *Supporting Consumers*

### **KESWICK ACTIVITY CENTRE**

*“If I was feeling lost in the world, there is no other place I would rather be!*

*If I could imagine being part of a family, this is where I would want to come home to...*

*A place where I am made to feel welcome,*

*A place where I can be left alone and just be,*

*A place where I can be supported and get relief from life’s burdens.”*

VM

The Activity Centre is a consumer driven community based service that aims to promote wellbeing in a supportive environment by offering opportunities for individuals to progress their recovery and prevent relapse by improving their ability to manage their illness. This occurs by providing a place where people can build skills, develop friendships, be accepted and connect with the community. Any person affected by mental illness can access our services; no referral is required. This year attendances to the Centre have remained stable with a total of 5,072 attendances and an average of 20 people per day visiting.

The Activity Centre continued its strong commitment to increasing community integration opportunities by planning and promoting mainstream community activities, self help programs and opportunities to develop and enhance vocational skills. Our extensive consultation with members during members meetings and brain storming afternoons enabled us to implement new programs. This included a series of self help courses, which are being delivered in partnership with Relationships Australia, educational guest speakers and regular recreational and social outings. Members felt that they were given the opportunity to experience new environments and activities that they would not normally have felt confident accessing or been able to utilise as an individual because of illness, financial and/or transport constraints in addition to building friendships, social and vocational skills.

Following the one off funding we received last year by Eli Lilly to run two MindBodyLife Programs, we were able to run a further two programs. The ten week programs aimed to enable people affected by mental illness the opportunity to enhance their physical and mental well being by learning simple ways to make healthier lifestyle choices within an informal and supportive environment. Thirty two members completed the programs and feedback included that the program enabled participants to reflect on the principles of the program and put some useful strategies into practice. As a result, participants felt that the program provided:

- Strategies to achieve and maintain a healthier lifestyle;
- Education on balanced eating habits and the impact of medication on appetite;
- Skill development in choosing healthier food and drink options;
- Encouragement and motivation to increase physical activity;
- Support to set realistic and attainable healthier lifestyle goals;
- Identified barriers for making healthier lifestyle choices and implementing strategies to overcome them.

The Tobacco and Mental Illness Project conducted another quit smoking program at the Centre. The program was run over ten weeks, consisting of fifteen sessions. It supported participants to make significant changes to their smoking habits. Healthy snacks and nicotine replacement therapy were made available as part of the course. Thank you to Maxie Ashton, Sue Bertossa and Mark Weston for continuing to address policy and practice changes, raising awareness and conducting the tobacco programs.

*(Continued on page 12)*

## *Supporting Consumers*

### **KESWICK ACTIVITY CENTRE — continued**

*(Continued from page 11)*

The accredited “Foodsafe” Food Service provided 5,908 nutritional/low cost meals to members with lunches served five days a week and evening meals twice weekly. Our twice yearly inspections/audits by the Environmental Health Officer from the West Torrens City Council saw us maintain our accreditation for another year, with thirteen volunteers and staff trained in the Australian Institute of Environmental Health’s “FoodSafe Basic Food Handler Training Program”. We would like to take this opportunity to thank Foodbank SA, a not-for-profit charity that sources donations from the food and grocery industry. For a small handling and storage fee we are able to access a diverse range of food products to provide an affordable and varied food service, distribute free food products, cater for luncheons and awareness week activities for members as well as “rewarding” our volunteers for the work that they do. With the support of MIFSA volunteers and Foodbank SA, we were pleased to be able to continue to provide an accessible and affordable food service.

Members and volunteers continued to raise funds for the Activity Centre. They were busy with can recycling, sausage sizzles, raffles, selling recipe books and Kyton’s Bakery drives to name a few of the ongoing initiatives. Congratulations to members, volunteers and staff who continued to support this venture. Balance as of 30 June 2005 is \$1,793.81.

Last but certainly not least, the Activity Centre would like to take this opportunity to thank its thirty volunteers who without their dedication and support we would not be able to provide our accredited food service, program activities, support, companionship and encouragement to members.

**Jenny Pessios**  
**Coordinator, Keswick Activity Centre**

### **PANANGGA ACTIVITY CENTRE**

*“I really like coming here because I don’t feel under any pressure to talk to people if I don’t want to, and I don’t feel judged.”*

Panangga has finished the financial year with an ever-increasing membership, a far greater informed local community and stronger links with Noarlunga Mental Health Services and other Mental Health agencies. We have endeavoured to fulfill our requirements according to HACC referred to in 2005 report with the development of new proformas, extending our services to a wider community and maintaining member statistics using the HACC Minimum Data Set.

We are regularly reviewing our program, looking at what works and what needs adjustment or encouragement, and listening to members’ needs. As well as maintaining our regular activities, a few changes have been introduced, eg we have a regular forum on Wednesday mornings whereby a guest speaker is invited to address the members and answer questions. This year we have had psychiatrists from Adaire Clinic answering peoples’ individual concerns regarding their illness; Patricia Young (vocational consultant) from Uniting Care Wesley has spoken on a few occasions and has received great response from members who are actively seeking employment; our local MP John Hill visited recently and talked with members and others about his thoughts on health and answered questions pertinent not only to individuals but the wider community; and Renee Edwards (Occupational Therapist) from Morier has been bringing patients to Panangga and several, upon their discharge from hospital, have joined up as members and are now involving themselves in many of Panangga’s activities.

Members were treated to a very special dinner party recently which was held here on a Saturday night. It was a dinner for twelve with a three course meal. It gave each person an opportunity to dress up, feel a bit special, have a meal that they may not otherwise have had, spend an evening with people they know and feel comfortable with and best of all – dance to some great music! It may just be a one off but who knows?

*(Continued on page 13)*

## *Supporting Consumers*

### **PANANGGA ACTIVITY CENTRE — continued**

*(Continued from page 12)*

Our reputation as a place to come to for respite, and recovery is increasing and there have been several comments made by members regarding that. Some of the comments are:

*“I really like coming here because I don't feel under any pressure to talk to people if I don't want to and I don't feel judged.”*

*“I have made some good friends at Panangga and feel safe.”*

*“I don't know what I'd do without Panangga.”*

We are having increased levels of contact with organizations such as Richmond Fellowship, Centacare and UnitingCare Wesley who bring consumers along on a regular basis for their involvement in different activities. The South Coast Exchange Program continues to be a great success with the crossover activities being enjoyed by all.

Where would we be without our superb band of volunteers?? Unfortunately, though this year has seen quite a shift in our numbers of volunteers, one in particular. It was with great regret and sadness that we farewelled a loyal and wonderful man this year. Ron Hauser, who many would remember as our volunteer driver and all round great bloke who helped out wherever he could, died suddenly on 29<sup>th</sup> July 2006. He is fondly remembered by many here at Panangga and has indeed left a huge hole.

Maureen Gant, another loyal volunteer, has taken twelve months off for a very well earned rest. We wish her good health and look forward to her return or hearing that she has found another “green pasture” to add to this one.

On the plus side, we welcomed two new volunteers. Jenny Hennessey as our Tuesday Drop In Assistant and Nigel Abley as our Wednesday BBQ lunch assistant.

Our staffing has altered slightly over the year and Bernie Maywald is now ensconced at Keswick as part of the Psychosocial Group programs. We have just employed a new staff member for a new program beginning as we speak. The progress of this will all be revealed in next year's report. So stay tuned.

**Prue Millingen & Yvonne Turner**  
**Coordinators, Panangga**

### **PSYCHOSOCIAL GROUPS PROGRAM**

*“I found talking and working together and the homework very helpful and useful in my recovery process.”*

This program is funded under Mental Health Strategy 8: Group Based Rehabilitation. It provides group programs for adults aged between 18 and 65 with severe mental illness across metropolitan Adelaide.

The psychosocial groups are time limited, goal focused and support the principles of rehabilitation and recovery. These principles understand that there is hope after a diagnosis of mental illness, that many people live meaningful lives, with some remaining symptom free, whilst others adapt to recurring symptoms. The groups focus on supporting people to develop and/or maintain a key role in managing their own recovery, building strengths and achieving the best possible quality of life.

Initial and ongoing consultation with consumers and service providers assists to direct the aims and topics of groups offered.

Groups are generally held in community centres across metropolitan Adelaide and forensic services for two hours per week (with a break) for 6-10 weeks depending on the group topic. The number of participants are limited to eight with two facilitators. Groups offered to June 2006 include: “MindBodyLife”, “Collaborative Therapy”, “Psychosis?” and “All in For Mental Health” (in collaboration with the Adelaide North East Division of General Practice).

*(Continued on page 14)*

## *Supporting Consumers*

### PSYCHOSOCIAL GROUPS PROGRAM

*(Continued from page 13)*

Funding became available in July 2005. To the end of June 2006, the program has run 20 groups - 160 group sessions. There have been 154 referrals received with 106 of them attending at least one group program.

*“... really made me think much more deeply about my issues.*

*An excellent group all round with fantastic facilitators.”*

Data available since January 2006 shows that 60% of people referred attended at least one group session, and of those, 74% continued to attend at least three or more sessions. A similar number of men and women accessed the groups with only a few being of ATSI or CALD background. The majority of participants receive a government benefit and therefore only have a low income. Slightly more than half of participants live alone.

Participants were asked to complete the BASIS32 (mainly symptom rating scale) and WHOQoL (quality of life scale) at the beginning of the first group session and again at the end of the last session. Although the numbers are reasonably small they are sufficient to detect significant improvements in social relationships. Psychological improvements are also evident although not quite statistically significant. No significant change in physical health and living environment are evident, however there is a trend towards improvement for the latter domain too. This finding is encouraging given that the group programs are specifically developed to deliver psychological interventions to assist participants improve self-management of psychological and social issues.

Feed back from participants is also positive with the majority of them reporting being satisfied or very satisfied with the group they attended and would recommend the group program to others.

Most participants also reported that they learnt new skills and strategies to manage their mental illness. Below are some comments from participants about what they found helpful in the group:

*“I found talking and working together and the homework very helpful and useful in my recovery process.”*

*“Group discussion, very good activities, which really made me think much more deeply about my issues. An excellent group all round with fantastic facilitators.”*

*“Sharing experiences, group interaction. Structure and content of course. Depth of analysis and detail of treatment strategies- good balance. Strategies always practical, easy to apply.”*

*“Sharing with other people, knowing you are not alone.”*

*“Strategies to use when going through my illness.”*

*“The information that says what to do when I hear voices.”*

Although there have been some inevitable difficulties encountered developing and delivering the program, overall, the Psychosocial Groups Program is being well utilised by service providers and well attended by participants given that the program has only been developed since November 2005. It is acceptable to participants and appears to be assisting them to self-manage their psychosocial health.

There are a number of exciting opportunities that need exploring in the future and we intend to continue meeting with, and working in collaboration with public mental health services, and general practice to consider ways of becoming more responsive to regional mental health needs. This includes considering options for providing our service to specific cultural groups, continue working in the forensic services, contributing to a family holiday program, and focusing on developing a diverse range of group material.

**Jane Dodding & Diane McBain**  
**Psychosocial Groups Program Coordinators**

## *Supporting Consumers*

### **PEER WORKER PROGRAM**

In 2005 MIFSA received Strategy 9 funding from the Department of Health with the brief to *recruit, train, supervise and support* peer workers in the metropolitan area. A Steering Committee was established consisting of Natasha Miliotis, Maxie Ashton and Paul Nestor. The project Coordinator role commenced in October 2005. Consultation with stakeholders defined a peer worker as 'a person living well with a mental illness who is employed to assist the recovery of another person', ie a concept, not the title of a specific job. It further identified four steps necessary to recruit, train, supervise and support Peer Workers:

- Two-way Information Sessions for People who want to be Peer Workers.
- An 'Introduction to Peer Work' training course
- Peer Worker training specialised to meet employer needs
- Peer Worker Support Structures

To date we have had no difficulty in recruiting. Nearly 200 people have put their names on the interest list for information sessions, and the list grows weekly. About half the people who attend information sessions apply to do the Introduction to Peer Work course that we have developed. The information sessions and training courses are conducted jointly by MIFSA and Baptist Community Services which was also funded for a Peer Worker Project. Forty-two participants have completed the course and are keen to work. Many have filled the Peer Specialist positions in acute settings of Central Northern Adelaide Health Service (CNAHS) and the Hospital to Home Project positions in the South. Some work for non-government organisations. A number of people like to work for organisations on a sessional or casual basis performing roles such as committee work, staff training and recruitment. The newly established Peer Workforce can readily meet employers' staffing needs with trained Peer Workers.

Regardless of whether or not people are working, we recognise that we need to continue to support peer workers after training. In fact we have extended our support mechanisms to all peer workers in the metropolitan area in response to requests for further training and support by long-term peer workers.

*Recently one of our course participants told me that she was chatting informally to a medical professional who became very excited at the Peer Worker concept saying 'it's a whole other side to mental health'.*

The concept may be new(ish) in South Australia but is well understood and appreciated in other parts of the world. As **living** proof that Recovery is possible, Peer Workers are now an important feature of Recovery-oriented SA Mental Health Services. The challenge is to ensure that Peer Workers contribute to mental health services without surrendering what makes peer work unique.

**Maggie Mars**  
**Coordinator, Peer Worker Program**

### **ACCOMMODATION SUPPORT PROGRAM**

This service provides support some of the tenants of ROOFS Housing Association, to maintain independent living and establish social networks, ensuring each client reaches his/her full potential. Currently individuals are receiving support in the form of weekly home visits, and are assisted and encouraged to maintain their homes and recognise their level of independence.

This support service provides advice and assistance with maintaining daily living skills eg cooking, cleaning, shopping, diet, food preparation, budgeting, bill paying savings plan etc. Assistance and transport to appointments is also provided. An important component of support is to explore social activities and opportunities, which is encouraged. The wellbeing and mental health of individuals is continuously monitored and contact with Key Workers regarding any changes is followed up.

## *Supporting Consumers*

### **ACCOMMODATION ADVICE — HOUSING SA**

In September 2002 MIFSA entered into an agreement with the Marion Regional office of the (then) SA Housing Trust to provide an outreach advisory service to assist low income and special needs individuals and households access appropriate housing. This is achieved by direct provision of rental housing and through a variety of programs and services that are provided by Housing SA or in collaboration with other agencies.

The Marion Regional Office of Housing SA continues to provide this accommodation advisory service at the Keswick Centre. The service is available on the first and third Tuesday of each month from 1—4pm. The advisory service provides information and assistance in accessing the private rental market, provides advice on procedures to apply for public housing and advocates for both existing tenants and those in the private rental market. The service has been accessed by a broad group of people, particularly consumers, their relatives, carers and case managers.

## *Supporting Consumers and Carers*

MIFSA provides a range of supports to carers and consumers, through its increased program delivery, information sent on request, telephone and face to face support, and its diverse education program. MIFSA also facilitates a number of support groups that meet in both metro and country, both weekly and monthly, thanks to the huge efforts of our dedicated group leaders.

### *Support Groups for Consumers:*

#### **MURRAY BRIDGE**

Meetings are held every Monday afternoon, 1:30pm—3pm, at Murray Bridge Community House, 18 Beatty Terrace Murray Bridge.

#### **SUPPORT WORKS:**

For people who have depression or bipolar disorders and who wish to meet and interact with other people who are in similar circumstances.

### *Support Groups for Carers:*

#### **MARION SUPPORT GROUP (SOUTHERN METRO REGION)**

Meetings are held bi-monthly (February April, June, August, October & December) as social get-togethers over a meal at the Warradale Hotel.

#### **MOOD DISORDERS CARERS**

offers help and support to those in the role of caring for people with bi-polar affective disorder and depression.

#### **TEA TREE GULLY SUPPORT GROUP (NORTHERN METRO REGION)**

Meetings are held monthly at Woodleigh House, Hatherleigh Ave, Modbury

Thanks to Group Leaders: Narelle Gordon, Peter Gurner, Marcia Johnson-Timm, Michael Perry and Laurel Warneke for their dedication and hours of volunteer time they give to MIFSA in organising speakers, planning activities and conducting meetings.

## Supporting Carers

### WELL WAYS

In 2005 MIFSA received funding from the Department of Health to deliver Well Ways Carer Education Programs. The Wellways Program was developed to meet an identified national need for evidence based family education and support programs and was developed, trialed and evaluated to suit the Australian context.

Well Ways is designed to increase the capacity of families, carers and friends to care effectively for themselves, other family members and their relative living with mental illness. Well Ways is delivered by carers of a person with a mental illness to other carers. The 12 month program consists of formal 8 week structured modules which cover frameworks for the cause, treatment and recovery from mental illness, explores the emotional experience of families as well as details of the mental health, legal, health and carer support systems. It is followed by quarterly meetings for 12 months. The purposes of these meetings are to reinforce the learnings and to provide feedback and support for behavioural changes.

Five programs have been commenced since the Well Ways Program began near the end of last year, with the initial eight week sessions of three hours each completed by the end of June 2006. The venues included Keswick, Salisbury, Findon, Royston Park and Glandore. Two trained and evaluated Carer Facilitators conduct the program, each program has eight to fifteen people attending.

Two of the quarterly support workshops have been held at Keswick. These sessions form part of the follow-up support and education for Carers, family and friends who attend the programs.

Training of more carers to become Well Ways Facilitators has been addressed, giving strength to the numbers available with opportunity to deliver more Well Ways Programs in the future.

*“Due to skills learnt and knowledge gained during the Well Ways Program and after many years with mental illness affecting the family we now have a mental health service coming to our home for the first time, assisting our son and giving us respite, all thanks to the Program I attended”*

*Well Ways Participant  
Adelaide, 2006*

It has been rewarding to see the benefits to carers who have completed the Well Ways Program. Doors have opened due to the confidence carers gained and the information has empowered them to move forward knowing they may continue to live a full life even while they care for someone with a mental illness. In addition they have seen benefits for the individual whom they care for as well as for their wider family.

Participant views from their experience of the initial eight weeks:

*“The overall presentation was most helpful. I only wish this had been available years ago”.*

*“I learned more ...I have been inspired to re-connect with ...This is the best workshop I have ever been to. Thank you for the opportunity.”*

*“The Well Ways program emphasised that we need to focus on ourselves as carers and the importance of looking after our own emotional needs, apart from our caring role, to ensure we are ‘built up’ enough to continue a life of our own, plus with more strength and energy for the caring role”.*

*“This is the first time I have heard this disorder clearly outlined. Thank you for filling in a lot of blanks”.*

An elderly mother, who has a son with schizophrenia and worries about his future after she dies, disclosed at the end of the eighth session that she is much more secure in the knowledge that there are services she is able to encourage her son to access, and that she is not responsible for everything that appears to go wrong for her family.

Past participants are now recommending Well Ways to their friends and other carers, encouraging them to attend upcoming programs. Their recommendations both confirm the worth of the Well Ways Program and enables more carers and family members to benefit. The future of the Well Ways Program can only be curtailed by a monetary factor alone, as this is ‘the best evaluated program’ for carers, family and friends of people with a mental illness ever available in Australia.

**Maureen Lewis**  
**Coordinator, Well Ways Program**

## *Education Program*

MIFSA education programs, workshops, information displays and training have been extensive and rewarding, meeting varied needs, diverse audiences and delivered at many venues around the city. The program completed by Mood Disorders Association (MDA), prior to amalgamation, mirrors the work of MIFSA prior to merger and included education sessions presented in-house at the Mental Health Resource Centre and in the community to the general public, tertiary institutions, government services, non-government organisations, schools and community groups. These Sessions were well attended, covering information, treatment and management of mental illness, with frequent requests for more.

Mental Health Week in October and Schizophrenia Awareness Week in May were both eventful and successful in extensively highlighting mental illnesses and their impact on each and every person in the community. Open displays in Rundle Mall, workshops and information sessions at Community Centres throughout the city, mass mail-outs to service providers together with three hour workshops at the Mental Health Resource Centre for the public are just some of the events which were organised and attended.

Telephone support, 'face to face' support sessions, peer support groups and community events were maintained throughout the year. Resources such as leaflets, pamphlets and newsletters were distributed at every opportunity, with 1000's of specifically tailored information kits also distributed. Prior to merger MDA presented Focus Seminars in the Mental Health Resource Centre as part of the education program with seminars continuing in the "new" MIFSA. Guest speakers included psychiatrists and counsellors addressing topics such as medications information, trauma recovery, grief management, and illicit drug and alcohol use. Referrals and advocacy were carried out when required.

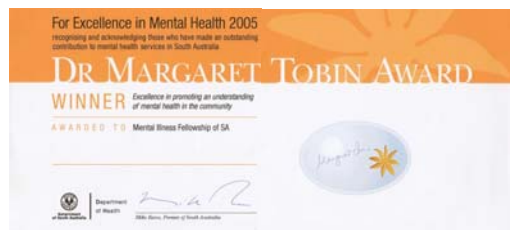
The Wednesday Support Works support group is structured with an education component making up the first hour of each meeting. Guest speakers representing various organisations and interest groups presented information to assist with recovery, as well as MDA running its own education content. At times the education content of the support group was opened up to the public and other MIFSA program attendees.

As always the great success of the education programs was achieved with the help of volunteers and community educators speaking from personal experience. The Education Coordinators, MIFSA Education Group and MDA community educators, both as separate organisations and then as a merged organisation, ensured a constant flow of education and information. Sessions occurred at Tertiary Colleges or TAFEs, Flinders and Adelaide University of Nursing or medical students, Political parties, Commonwealth Service Departments., MIFSA Education Group and Education Training, Supported Accommodation Houses, Indigenous Groups, Emergency Service Organisations, Volunteers and Carers Groups, Community Forums, Expos, Displays and Media, Service Clubs, General Practitioners, Psychiatric Trainees, Guardianship Board, James Nash House and non government organisations.

*(Continued on page 19)*

The MIFSA Education Group was awarded the  
**DR MARGARET TOBIN AWARD FOR EXCELLENCE IN PROMOTING AN UNDERSTANDING OF MENTAL HEALTH IN THE COMMUNITY**

The Award was presented to Education Group Chairperson, Marion Croser, at the Launch of 2005 Mental Health Week.



The Dr Margaret Tobin Awards were presented in five categories; 'leadership in and commitment to mental health reform', 'promoting an understanding of mental health in the community' and 'provision of mental health services for those most in need or at risk', including two new categories 'recognising excellence in media reporting' and 'Aboriginal mental health'.

## Education Program

*(Continued from page 18)*

Thirteen new volunteers completed an eight week MIFSA education training course, each week of two hour duration, to become community educators. The majority have the lived experience as individuals with a mental illness with two with lived experience as carers. Four have become active community educators, others showing interest in the MIFSA 'peer worker' project; great results for these people.

Comments from people who have a mental illness – “Friends do not want to know me!” – “Parents worry about what will happen to me!” – “No reliable emergency access when I become unwell” – Feedback from carers and consumers – “MIFSA’s new programs are great” – “Did not realise the extended services which MIFSA now offered”.

Plus feedback from local health and related services – “Will encourage use of MIFSA services” – “Can we bring clients to the MHRC to show your service to them?”

Many staff of Mental Health Services and other community groups have encouraged clients to take part in education sessions held by MIFSA, great news for MIFSA in its aim of promoting knowledge, awareness and understanding.

### Rural and Remote

*“We are happy to invite you to speak to the whole school on a regular basis please”*

*High School Principal*

The Country Outreach Program resulted in education sessions being presented in the following locations: Murray Bridge, Kingston S.E., Millicent, Bordertown, Clare, Owen, Mount Gambier, Port Augusta, Port Lincoln, Whyalla, Goolwa, Waikerie, Berri, Renmark, Coober Pedy, Copley, Leigh Creek, Pinnaroo and Karoonda. Community events and conferences were also attended by Education representatives.

Workshops, information sessions and participation at expos in the country region aim to interact with the entire country community. Presentations occur to Consumers, Carers and Families of people with a mental illness, the general public and providers of a service to people with a mental illness. The benefits of addressing school students, including teachers and counsellors, in different towns are remarkable. Requests to return regularly as part of school education is encouraging and rewarding.

The need for education on mental health issues in the rural and remote country areas is vitally important and is often the only assistance received in what can be a very trying time for rural families. Country residents often experience no access to psychiatrists, lack of mental health services and accommodation options and are often a long way from required services in Adelaide. It is often very hard financially and emotionally on the family and the person with the illness. The updated information, education and distribution of literature by the education program is vital.

Feedback from rural and remote communities shows the need for continued education services provided by the education program. “To have mental health education from people with the lived experience is fantastic.”- A comment from an Emergency Service personnel who would also like to be a part of regular sessions.

*“We are happy to invite you to speak to the whole school on a regular basis please”* High School Principal.

*“Coping skills and learning about the symptoms and medication side effects were very useful”*, a Carer who needed more local supports for her family.

*“I now feel less alone- many others are in my situation. Where does one go for this information when mental illness hits the ‘person’ and the family?”* from a desperate mother whose son was in Glenside at the time.

The education program continues to educate and inform the rural and remote areas of South Australia on all mental health issues, advocates for and is supportive of all people with a mental illness, their carers and families.

**Maureen Lewis**  
**Jeff Vuglar**  
**Andrew Kelly**

## Schizophrenia Awareness Week

**Schizophrenia Awareness Week was very successful with:**

**AN INFORMATION KIT** which included brochures and fact sheets, mailed to approximately 300 organisations. In addition distribution of our week's program and specific event fliers were emailed to all the Divisions of GPs, non-government organisations, regions of the mental health service as well as wide publicity with other sectors including SAPOL, Fire Departments and the Ambulance Service.

**KESWICK OPEN DAY** over sixty service providers and consumers visited Keswick for a fun-filled day of activities including 8 Ball and Table Tennis 'Showdowns' between MIFSA Keswick and Panangga members, Op Shop Fashion Parade, the Keswick Art Group's Gold Frame Collective; with a sausage sizzle for lunch. It was a great day. The fashion parade proved to be a winner with many of our members entering into the fun by offering to model clothes selected from MIFSA's five Sunflower Shops.



*Our happy band of fashion parade models*

### **INTERNATIONAL GUEST SPEAKER: MAJOR SAM COCHRAN**



A national speaking tour, courtesy of the Mental Illness Fellowship of Australia and funded by an educational grant from Eli Australia, brought Major Sam Cochran of the Memphis Police Dept to Adelaide for a Forum that MIFSA held at Annesley College, Wayville. MIFSA members and workers from service providers including SAPOL, SA Ambulance and the Metropolitan Fire Brigade were invited to hear about the Memphis Police Department's Crisis Intervention Team Model (also known as the "Memphis Model") developed by Major Cochran to assist more effectively when responding to incidents involving people with a mental illness. During the day Major Cochran was in town he conducted several radio interviews, a morning presentation to senior executives of SAPOL, an afternoon session to politicians and senior workers in the Mental Health Sector, and the evening Public Forum.

**MENTAL HEALTH EDUCATION WORKSHOP** it was full house in the conference room when approximately 35 people came to hear Dr Harry Hustig and Education Group member, Sandra Miller, talking about aspects of mental illness, symptoms, treatments and outcomes.

**A SUCCESSFUL BADGE DAY FUNDRAISER** was achieved by our enthusiastic band of volunteer collectors, positioned strategically around Adelaide and some suburbs to collect donations from the general public, giving badges, information on schizophrenia, and sunflower seeds in return. Thanks for all volunteers for their generosity in the time they gave and all their efforts on MIFSA's behalf. Through the generosity of the general public \$2,109 in gross donations was collected.



### **LIFE MEMBERS**



Long time members Len Downing and Pat Sutton were awarded Life Membership at this year's Schizophrenia Awareness Week Awards Dinner (see next page for more details). Unfortunately, both Len and Pat were unable to attend the Awards Dinner to accept their Certificate of Life Membership and Gold Pin of Service; however, we were fortunate to that Pat Sutton's daughters, Sarah and Catherine attended to accept on Pat's behalf, and Michael Becker accepted on Len's behalf.

## Schizophrenia Awareness Week Sunflower Awards



2006 was the 10th anniversary of MIFSA's Sunflower Awards. They have been celebrated since 1997 to acknowledge the contribution and dedication of individuals involved in the mental health sector in a professional or voluntary capacity. Since their inception, the Sunflower Awards have progressively grown in status and are now highly regarded across the mental health community of South Australia. The Awards are based on a poll of a wide range of largely South Australian consumers and carers who nominate people they perceive as having made a significant contribution to people affected by mental illness.



This year's Sunflower Awards Dinner was held on Saturday 20<sup>th</sup> May; to recognise the efforts of our award finalists, and enjoy a night of entertainment and celebration. MIFSA would like to thank Award Sponsors, **ELI LILLY**, **BRISTOL-MYERS SQUIBB**, and **JANSSEN CILAG** for their support of this event.

We were delighted also to have Channel Nine Personality, Xavier Minniecon, to host the evening.

### *Congratulations to our 2006 Sunflower Award Winners*

#### **SUNFLOWER AWARD FOR OUTSTANDING INDIVIDUAL**

*Alison Budden — Psychologist at McPhee Andrewartha*

#### **LILLY REINTEGRATION AWARD; sponsored by Eli Lilly Pharmaceuticals**

*Peter Chapman — Manager of Employment Accelerators*

#### **THE SUNFLOWER COMBATING STIGMA AWARD**

*The Pipeline Team — Semaphore Activity Centre*

#### **OUTSTANDING MENTAL HEALTH VOLUNTEER AWARD;**

**sponsored by Bristol-Myers Squibb**

*Jean Gibbons — Co-founder of Essence of Hope*

#### **SUNFLOWER AWARD FOR OUTSTANDING MIFSA VOLUNTEER**

*Peter Burak — a MIFSA member*



## *Fundraising*

*Thank you to our many donors and supporters!*

Fundraising continues to be an ongoing challenge to smaller NGOs like MIFSA, but even with constrained resources, good results have been achieved this year.

The Sunflower Shops remain our largest preoccupation, with the highlight being the opening in March of our fifth shop at Bagster Rd, Salisbury North. With additional inputs of time and energy from our experienced shop volunteers, the new shop was prepared and fitted out, and so many people were only too willing to help. Thank you everyone! The shop is now trading busily with a new group of local volunteers, and the local shoppers are pleased to have an op shop at their local shops again!

We were successful in receiving a grant in February from Community Benefit SA to purchase a delivery van. This not only provides a suitable vehicle for collection and delivery of clothing donations, but also allows our 12 seater commuter bus to be used primarily for “people” activities.

The shops experienced good trading conditions this year, and achieved an increase in sales revenue of over 11% on the previous year, excluding Salisbury North. This is an excellent result, and we congratulate our many volunteers for their ongoing commitment and dedication to making all shops operate successfully, and creating an invaluable source of independent income. Special thanks goes to our Coordinator Steve Sanders, whose energy and enthusiasm led to the motivation of many others. Steve left MIFSA in June to pursue other interests, with Aaron Powell now acting in the role of coordinating our shop volunteers.

Thank you too, to our many donors and supporters for your recycled clothing and household goods. Please keep them coming!

The Sunflower Badge Day was held in May again this year, and raised \$2,109 in gross donations. While this amount is lower than last year, it is a reasonable result given the reduced availability of collectors. This is a continuing trend for this event, and while it carries low costs and comparatively low risk, it would appear that its future viability will be dependent upon the quantity of suitable collectors.

The initiative to collect recycled bread tags has escalated markedly this year, with collection networks springing up everywhere! Schools, lunch shops, hospital canteens and local networks of friends are all saving their tags and donating them to us. The response from the broader community has been most encouraging!

After selling just 25 kg last year, this year we sold over 270 kg! We anticipate good sales again next year as we extend our product further into the market place.

A special thank you to Ray Shepherd for his volunteer time in weighing and sorting the tags into saleable quantities and storage.

We participated in the Australian Central Credit Union Community Lottery now for over a decade, but sadly our tickets were not amongst the winners. The lottery still provides good returns from a fundraising perspective, and perhaps that big prize winner is only one more year away! Thank you to all members for your ongoing support.

**Michael Becker**  
**Finance Manager**

## *Treasurer's Report*

The Mental Illness Fellowship of SA commenced the financial year in a sound financial position, given the receipt of \$1.2m from the SA Department of Health for developmental projects over the next three years. This new funding injected new enthusiasm into MIFSA, and in particular the staff team, with the recruitment of new people to build and deliver these new programs. It has also provided opportunities for existing staff to extend their working hours and develop skills and capacities.

The highlight of the year, from a governance point of view, was the merger of Mental Illness Fellowship of SA and Mood Disorders Association (SA). The Board was acutely aware of the need for broad consultation with the membership in order to fulfill this process effectively. All stakeholders are to be congratulated for the co-operative manner in which this process has been achieved.

Funding of recurrent programs however has remained static, other than indexation. This has led to the Board continuing its vigilant approach in offering affordable services within cost constraints. As a long term policy the Board remains determined to rekindle the financial viability of MIFSA, so that the Fellowship retains its reputation as a respected and well governed NGO in the community mental health sector in South Australia.

It is with some satisfaction that the Board reports an operating surplus for this financial year of \$55,810, and an accumulated surplus of \$125,978 at June 30 2006, after consolidation with the former Mood Disorders Association.

Prior to consolidation, MIFSA has recorded an operating surplus of \$52,065 for the financial year, and an accumulated surplus of \$86,855. MDA has recorded an operating deficit of \$(255) for the financial year, and an accumulated surplus of \$39,123. This has been achieved with the sustained effort of our staff, volunteers and members; and the Board sincerely thanks everyone that has played a part in this result.

The non government sector continues to receive positive endorsement from the State Government as service providers of the future. MIFSA has been encouraged to lodge funding submissions for new and varied projects funded by both the state and federal governments. MIFSA welcomes this challenge, and while it holds some concern at the non-recurrent nature of such funding, it believes that through both the performance and delivery of new programs, it will assure the future of organisations like MIFSA.

Once again the Sunflower Shops provided the mainstay of our fundraising revenue, with the highlight being the opening of our fifth shop at Salisbury North. The shops experienced good trading conditions this year, and achieved an increase in sales revenue of over 11% on the previous year, excluding Salisbury North. This is an excellent result, and we congratulate our many volunteers for their ongoing commitment and dedication to making all shops operate successfully, and creating an invaluable source of independent income. Thank you too, to our many donors and supporters for your recycled clothing and household goods. Please keep them coming!

Other successful fundraising sources included the Sunflower Badge Day, the sale of recycled bread tags and the ongoing participation in the Australian Central Credit Union Community Lottery.

The Mental Illness Fellowship Building Foundation has recorded another year of healthy capital growth, due mainly to the continuing appreciation of its portfolio of Australian shares. All investments yielded good to above average returns this year.

Finally the Board wishes to convey its sincere thanks to the membership for your ongoing loyalty and financial support, as we seek to address the issues ahead.

**Neville Rice**