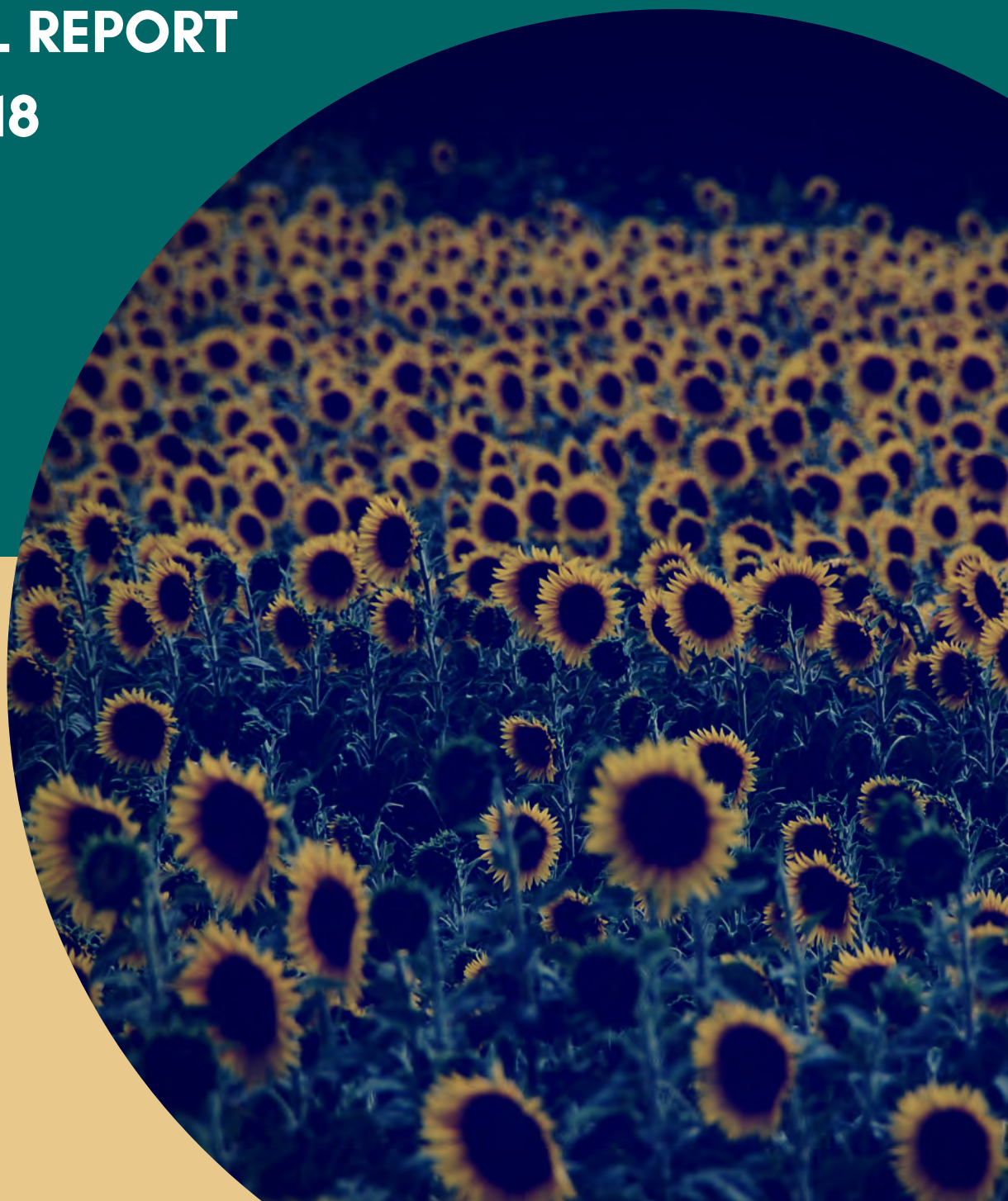




ANNUAL REPORT

2017-2018



OUR VISION

Australians have the best possible mental health and quality of life.

OUR MISSION

Our core strength is in amplifying the voice of people affected by severe mental illness, their families, and friends. We advocate for positive changes in all areas of social and public policy that impact on the quality of life of people affected, as well as families and friends. We create collaborative projects and communities of practice which support each other to be financially viable and deliver effective, quality supports.

OUR MEMBERS

"Succeeding together"



MIFA acknowledges our sponsors and supporters:



George Lewin Foundation

FROM THE PRESIDENT AND CEO

During the past 12 months, we have continued to see a great deal of change and reform in the mental health sector. Whilst change presents its own challenges and opportunities, at MIFA we have continued to strive towards our vision of having the best possible mental health and quality of life for all Australians.

As the National Disability Insurance Scheme (NDIS) rolls out in different stages across Australia, we have focused on improving the lives of people with a severe mental illness through influencing national mental health reform policy at the highest levels. By working together with our MIFA Member organisations and with other key stakeholders in government and the non-government sector, our goal is to ensure that the needs of people with severe mental illness and psychosocial disability can be met now and in the future.

To ensure our success, we have focused our activities to achieve four strategic goals, as identified in the MIFA Operational Plan for 2017–2019.

- **Advocacy.** The needs and experiences of those with a lived experience of mental health issues and their carers are reflected in national mental health policy, commissioning of services, and broader social structures and attitudes.
- **Collaboration.** MIFA members work collaboratively and rely on solid structures that support sharing.
- **Sustainability of MIFA Members.** MIFA member organisations are sustainable, viable, and provide highest quality service to people with mental health issues and their carers.
- **Viability of MIFA.** MIFA remains viable and visible.

With these goals in mind, MIFA continues to work collaboratively with our Member organisations, partners, sponsors, supporters and our volunteers to strengthen our collective impact. We thank you all for your support and we look forward to continuing our work of building a national network that delivers local solutions based on our common strengths.



MICK REID

President



TONY STEVENSON

National Chief Executive Officer

A YEAR IN REVIEW

After undergoing some major changes last financial year, we continued to work across a range of areas to advocate for positive change, work collaboratively, ensure the sustainability of MIFA Member organisations, and promote the viability and visibility of MIFA.

Throughout the year, we continued to promote MIFA's collective advocacy priorities by meeting with Ministers and their advisors, Parliamentarians, departmental representatives, major partners and stakeholders. We continued to influence national mental health reform policy through our membership of the Mental Health Reform Stakeholders Group and Tony Stevenson was invited to sit on the Mental Health Expert Reference Panel for the Fifth National Mental Health and Suicide Prevention Plan. Tony continued to provide input into Primary Health Network Policy and Commissioning Guidelines through his membership of the Mental Health Reform Stakeholders Group and the Primary Health Network Advisory Panel Forums.

We successfully amplified the voice of lived experience to reduce stigma and discrimination through our Mental Health Week and Schizophrenia Awareness Week Campaigns. These campaigns were designed to break apart the myths around Bipolar Disorder and Schizophrenia, emphasising that people can and do recover, and that we all have a part to play in building inclusive and supportive communities.

Throughout August to November, we continued to advocate for a more sustainable price for services in the NDIS, with a major written submission to the NDIS Transition Inquiry and ongoing attendance at key consultations for the McKinsey Independent

Review of NDIS Pricing Recommendations. We also supported and provided leadership in Mental Health Australia's research project, "Optimising Support for Individuals with Psychosocial Disabilities Participating in the NDIS".

In November, we held our MIFA Biannual Conference and Annual General Meeting, which brought together the MIFA Board and the CEOs of each MIFA Member organisation to enhance collaboration, sustainability and viability. Our AGM was a highlight, with a number of special guests including Lucy Brodgen, National Mental Health Commission Co-Chair, Cathy O'Toole MP, Member for Herbert in North Queensland, and representatives from our corporate sponsors, Lundbeck and Janssen.

In April, our MIFA Board and MIFA Member CEOs came together again for two days, sharing insights about the transition to the NDIS, planning for the future and enhancing relationships with departmental representatives. This collaboration rounded off a successful year for MIFA, cementing our commitment to working together to achieve our vision.

Lastly, as part of MIFA's commitment to supporting and promoting the Psychosis Australia Trust, we conducted a Research Symposium in May with the support of the National Mental Health Commission. This Symposium brought together over 30 delegates to work towards a nationally consistent approach to psychosis research in Australia. MIFA also progressed its work in coordinating the Australian Psychosis Conference, which was held in September 2018 in Sydney.

ADVOCATING FOR CHANGE

We know from experience that recovery of a better quality of life is possible for everyone affected by mental illness.

Throughout 2017–2018, MIFA continued to build and strengthen our collective advocacy impact. MIFA submitted seven formal submissions to federal reviews and public inquiries, and gave evidence at the NDIS Transition Public Inquiry.

MIFA also participated in 27 consultations, round tables and workshops, providing opportunities to advocate for the interests of our MIFA Member organisations and for the interests of people with a lived experience of severe mental illness.

MIFA created opportunities to meet with the National Disability Insurance Agency, Ministers, Parliamentarians and their advisors, and senior departmental staff throughout the year to strengthen relationships with key politicians, policy-makers, and community and corporate partners. These consultations covered important policy developments, including NDIS transition arrangements and in-kind support funding for our MIFA Member organisations. MIFA's advocacy influenced the Minister for Health, the Hon Greg Hunt MP, in revising transition schedules and in-kind support funding arrangements for the Personal Helpers and Mentors, Partners In Recovery and Day to Day Living programs.

MIFA also held two Parliamentary Friends of Mental Illness Dinners during August 2017 and June 2018, which allowed us to reach 30 and 38 Members of Parliament and Senators, respectively, with our important inclusion, connection and anti-stigma messages, as well as the importance of recognising the valuable role that mental health carers play.

"People with mental illness need a system of supports to help them get through. This includes health professionals who treat them with respect, listen to their needs and meet them where they're at – as well as other supports to help them get on their feet, learn from others who've had similar experiences, and find pathways to community participation, housing, and employment."
(Tony Stevenson, MIFA National CEO)



Submissions

During the 2017–2018 Financial Year, MIFA made the following public submissions to a number of federal reviews and inquiries:

July 2017

- NDIS Costs Inquiry
- Human Services Reform Inquiry

August 2017

- NDIS Transition Inquiry

September 2017

- Gave evidence at the NDIS Transition Inquiry Public Hearing

January 2018

- Federal Pre-Budget Submission

February 2018

- National Alcohol Strategy
- NDIS Market Readiness Inquiry

May 2018

- Rural and Remote Mental Health Services Inquiry

PARLIAMENTARY FRIENDS OF MENTAL ILLNESS

14 August 2017

In August 2017, MIFA had the pleasure of hosting a Parliamentary Friends of Mental Illness (PFMI) Dinner. MIFA President, Mick Reid, and MIFA members Rob Ramjan (One Door) and Angela Ingram (Mental Health Foundation ACT) attended the evening, along with representatives from SANE Australia, Mental Health Community Coalition ACT, Janssen and the University of the Sunshine Coast.

Over 50 people attended the dinner, including 30 Members of Parliament and Senators, where they heard from a panel of people on the role of carers in mental health and the importance of connection and inclusion. Mr Ramjan spoke on the importance of connecting people in with their family and community, noting that Aboriginal Australians have always known this and have traditional practices of taking people who are struggling and surrounding them with care.



18 June 2018

In June 2018, MIFA hosted another Parliamentary Friends of Mental Illness Dinner, which brought together three people with a lived experience of mental illness, one expert on stigma reduction, 38 Members of Parliament and Senators, and special guests. The dinner was hosted by co-convenors Andrew Wallace MP, Member for Fisher, and Cathy O'Toole MP, Member for Herbert, and MIFA was represented by Tony Stevenson (National CEO), Rohani Mitchell (Strategy and Policy Advisor) and Monique Williamson (CEO, Mental Illness Fellowship of Western Australia).

We heard about the role of stigma in people's lives and stories of how recovery can be achieved when people are well supported and determined to live well and contribute to their communities. The event provided an opportunity for Parliamentarians to hear from people with lived experience, learn about MIFA and SANE Australia, and leave feeling inspired to take future action to positively impact the lives of people with a lived experience of mental illness.

68

2

Parliamentary Friends

PFMI Events





RAISING AWARENESS

During 2017–2018, MIFA developed and implemented several prominent media campaigns designed to break down mental health stigma, including Mental Health Week 2017 and Schizophrenia Awareness Week 2018 campaigns. Both campaigns aimed to raise awareness of mental illness through a broad use of traditional media and MIFA's three social media platforms: Twitter, Facebook and LinkedIn.

MENTAL HEALTH WEEK

October 2017

During Mental Health Week, from 8 to 14 October 2017, MIFA engaged in a media campaign designed to break apart the myths around Bipolar Disorder. Research has shown that 66% of people with Bipolar Disorder experience regular stigma from the general public and a staggering 42% experience stigma from their health care professionals.*

The campaign focused on spreading the message that people with Bipolar Disorder can and do recover, and that early intervention is critical with properly funded support. MIFA's National CEO, Tony Stevenson, highlighted that there are so many myths that have to be broken apart, and that sensationalist depictions in film and TV that show people with Bipolar Disorder as being unpredictable or even dangerous are untrue and unhelpful. With treatment and support, recovery is possible. People in the community living with mental illness were also urged to reach out and get the support they need.

Over the course of Mental Health Week, Tony Stevenson undertook 54 interviews, including a national television interview on ABC TV. MIFA's campaign was publicised to 593 print media outlets across every state and territory, at a national, metropolitan, suburban and regional level, as well as to electronic and social media.

54

Media Interviews

593

Letters to Media

Messages from the campaign

It is now estimated up to 1 in 50 people (2% of the population) have Bipolar Disorder and most people experience their first symptoms by the age of 30.

Stigma remains a huge issue for people living with Bipolar Disorder – stigma from the public and health professionals.

We know that people with Bipolar Disorder are often stigmatised as being dangerous, unpredictable or even 'two faced'. The reality is that with treatment and support many people with this disorder live in full recovery and may experience long periods in remission.

Community understanding about mental health disorders, in particular mood and anxiety disorders, has improved in recent times.

With treatment and support, recovery is possible.

busting the myths

"In order for people with Bipolar Disorder to get the help they need, Australia needs a mental health care system that is properly integrated between primary care providers, higher level clinical supports, and community supports. We also need to work to eradicate stigma and discrimination against people with a mental illness, because how can you get help if the person you are looking to for support is looking back at you without empathy?"

(Tony Stevenson, MIFA National CEO)

*Mental Health Council of Australia 2011, *Consumer and Carer Experiences of Stigma from Mental Health and Other Health Professionals*. Canberra: MHCA.

SCHIZOPHRENIA AWARENESS WEEK

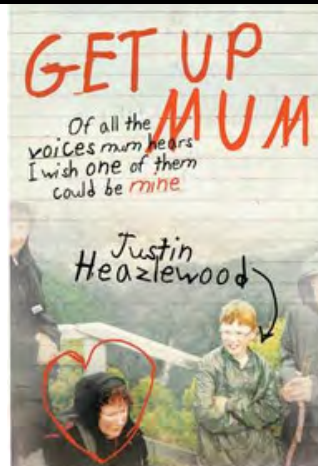
May 2018

20-27 MAY 2018

Are you still in the
dark?

During Schizophrenia Awareness Week (SAW) from 20 to 27 May 2018, MIFA promoted a media campaign called "Do What You Can Do". The campaign encouraged people to join in a SAW event, watch the Do What You Can Do video, take the myth-busting quiz online and spread awareness of the campaign on social media to break down stigma. The media campaign resulted in 60 radio interviews across Australia, live television interviews with Sky News and ABC Midday TV News, and around 600 letters to the editor.

The myth-busting quiz was shared 1,027 times. This quiz asked 10 questions that were designed to break apart myths that are commonly held about mental illness and some that are specifically held about schizophrenia. Participants were provided with a score out of 10 and were invited to share the quiz via social media. The Do What You Can Do website also provided mental health resources on schizophrenia, bipolar disorder, depression, the connection between mind and body, physical health and diabetes, and support from family and friends. The website received 14,211 visits and the Do What You Can Do video was viewed 176,006 times. In total, the campaign resulted in 507,913 social media impressions.



MIFA also applied to several politicians to have SAW officially recognised in both Houses of Parliament. On 9 May 2018, the Senate agreed to the motion of Senators Moore and O'Neill to recognise SAW and the impact of serious mental illness on those with a lived experience, noting that we all have a role to play to 'Do What We Can Do' to build inclusive communities. The Senators called on all governments in Australia to secure funding for recovery-oriented mental health services, in both hospital and community settings, as agreed to in the Fifth National Mental Health and Suicide Prevention Plan.

1,027

Quiz Completions

14,211

Website Visits

176,006

Video Views

507,913

Social Media Impressions

SOCIAL MEDIA

This year, across our three social media platforms (Facebook, Twitter and LinkedIn), MIFA had:



257 posts



55,786 engagements



87 new followers

DO WHAT YOU CAN DO

If you know someone who is in the dark about mental health **Do What You Can Do**.

You can start with sharing this quiz.



ENHANCING COLLABORATION

During the 2017–2018 Financial Year, MIFA enhanced collaboration across the MIFA network through the establishment of the Collaboration Governance Group, the Advocacy Governance Group, and the Sustainability Governance Group. These governance groups were established to bring together key people from the MIFA network to facilitate the achievement of the strategic goals under the MIFA Operational Plan 2017–2019.

As an extension, several working groups and community of practice groups were also established, including the Events, Communications and Media Working Group, the Advocacy Strategy Working Group, and Communities of Practice Groups for Service Delivery, Human Resources, Finance, and Information and Communication Technology. These groups have carried out key areas of work for the benefit of our MIFA Member organisations, including the monitoring of emerging funding opportunities and investigating cost saving initiatives.



During this time, MIFA also commenced the distribution of its Member Newsletter, "MIFA Member Memo". This enables MIFA to inform its Members of: progress in mental health reform and important developments in the sector; opportunities for funding, collaboration, and professional development; opportunities to provide submissions, submit feedback and participate in consultations; and upcoming MIFA events to facilitate collaboration and provide opportunities to work together.

As part of its commitment to enhance collaboration, MIFA established an online Office 365 CEOs Group. This will be used to facilitate information and resource sharing, enhance business development and support collaborative projects within the MIFA network.

SANE AUSTRALIA

MIFA has continued its strong partnership with SANE Australia as a SANE Forums partner. As a partner organisation, MIFA actively promotes the Lived Experience and the Carers SANE Forums. These Forums are online communities for people affected by mental illness, which are moderated by mental health professionals. The Forums are a valuable way for people to seek support, make connections and share their experiences.

During the 2017–2018 Financial Year, MIFA hosted a total of 1,976 SANE Forum sessions, involving 925 Forum users, and amassing 15,778 page views.

925

Forum Users

1,976

Forum Sessions

15,778

Page Views

OTHER PARTNERS

MIFA collaborated with these planning groups during the 2017–2018 Financial Year:

- R U OK? Day
- World Suicide Prevention Day
- Borderline Personality Disorder (BPD) Awareness Week

THANK YOU

From everyone at MIFA, thank you to our sponsors, partners and volunteers who contributed their time and resources to assist MIFA in the work that we do. Your assistance in providing funding and in-kind support is greatly appreciated.

MINETWORKS

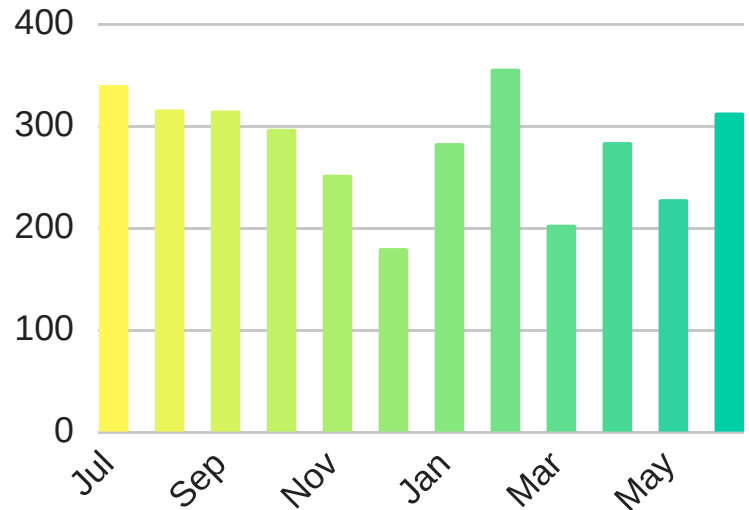
MIFA also continues to support the MIFA network's collaborative project, MINetworks, the national information, support and referral service which comprises of one single national telephone number, a website locator and information sheets. MIFA members, in partnership with MINetworks partners around Australia, provide national local coverage which includes telephone information, support and referral, and welcoming spaces where the public can approach and receive information about services available in their area.

During the 2017-2018 Financial Year, a total of 3,367 inquiries were received across the MINetworks partnership Australia-wide, which included phone calls received through the MINetworks 1800 number, email inquiries, and face-to-face inquiries.



Figure 1.

This graph shows the total number of MINetworks inquiries received each month throughout the 2017-2018 Financial Year by MIFA and the MINetworks partners.



WE NEED TO BETTER PLAN AND CO-ORDINATE MENTAL HEALTH SERVICES

Regional, place-based planning by Primary Health Networks represents an opportunity for truly integrated service planning and delivery.

WE NEED A RECOVERY-ORIENTED, MENTAL HEALTH-RESPONSIVE NDIS

We need to get the pricing right; we need planning that meets people's needs, and we need to address the systemic barriers for people with mental illness, such as the requirement that their condition be 'permanent'.

LIVED EXPERIENCE

WE NEED TO ADDRESS THE GAP

Who will support those outside the NDIS? Over 225,000 people with psychosocial disability are not eligible for the NDIS, yet governments are de-funding community-based mental health services.

WE NEED TO BREAK THE SHAME AND TACKLE STIGMA

Stigma is an ongoing barrier to full citizenship and participation. It is also a barrier to help-seeking and help-giving. We know that recovery is possible.

MIFA continues to provide secretariat support to Psychosis Australia Trust. The Trust brings together researchers and community partners to share learnings and coordinate research directions in Australia.

MISSION

The mission of the Psychosis Australia Trust is to support organisational, investment, and policy capacity to carry out priority-driven research into schizophrenia and bi-polar disorder – with the aim of helping all those affected by these mental illnesses to live better lives now.

GOALS

- Review current research programs and activities being carried out in Australia in relation to psychotic disorders, and develop an evidence-based approach to allocating priorities for further research;
- Carry out research and research-related activities in relation to psychotic disorders;
- Link the priorities of researchers with those of Australians who have the lived experience of psychosis, through our partnership with consumer and carer organisations across Australia; and
- Promote and facilitate the translation of research into practice in relation to psychotic disorders – thereby reducing the burden of disease.

SETTING RESEARCH PRIORITIES

Research Symposium May 2018

On 28 May, the Psychosis Australia Trust ran a Research Symposium that brought together over 30 consumers, carers and research academics from around Australia to workshop directions for Australian psychosis research. This workshop was facilitated by David McGrath (David McGrath Consulting) and supported by the National Mental Health Commission.

This Research Symposium was prompted by an identified need for the Psychosis Australia Trust to consolidate its research directions by identifying and adopting a nationally consistent approach to psychosis research in Australia. To achieve this, the Trustees proposed that psychosis research must focus on five key 'success factors' so that research:

- (1) increases life expectancy;
- (2) improves quality of life;
- (3) reduces loss of productivity;
- (4) improves cost effectiveness of treatment and support;
- (5) and works towards prevention and recovery.



The Research Symposium was a successful event for the Psychosis Australia Trust and for the research sector. Through the process of working together, the Trustees were able to test the validity of the five research priorities and obtain a consensus on how to refine them further. By seeking input from key stakeholders, the Trustees were able to establish some next steps for how we as the community of carers, consumers, researchers and organisations can coordinate research that will impact on people's lives.

The Trustees look forward to reporting on these developments next Financial Year and thank the National Mental Health Commission for their generous support of the Research Symposium.

Australian Psychosis Conference Preparations

The Psychosis Australia Trust and MIFA will host the next Australian Psychosis Conference (APC) in Sydney in September 2018. Planning for the event progressed throughout this Financial Year.

The APC takes over from the Australasian Schizophrenia Conference, and aims to bring together researchers, clinicians, consumers and carers, collectively working to improve outcomes for people with a psychotic illness. This conference will allow researchers to share the latest research advancements in psychosis in Australia and globally, and will enable people with lived experience to share their insights and knowledge.



Psychosis Australia Trust acknowledges our sponsors and supporters:



The Bell Family
Estate of John Russell Martin

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

For the year ended 30 June 2018

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

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Mental Illness Fellowship of Australia Inc
 ABN 73 204 129 543

Statement of Profit or Loss and Other Comprehensive Income

For the year ended 30 June 2018

	Notes	2018 \$	2017 \$
Revenue			
Revenue and other income	2	487,442	658,057
Total revenue and other income		487,442	658,057
Expenses			
Employee benefits expense		274,285	299,695
Other expenses		166,224	376,844
Finance costs		103	240
Depreciation		-	-
Total expenses	3	440,612	676,779
Profit/ (loss) before income tax		46,830	(18,722)
Income tax expense		-	-
Profit/ (loss) after income tax		46,830	(18,722)
Other comprehensive income		-	-
Total comprehensive income		46,830	(18,722)

The accompanying notes form part of these financial statements.

Mental Illness Fellowship of Australia Inc
ABN 73 204 129 543

Statement of Financial Position

as at 30 June 2018

	Notes	2018 \$	2017 \$
Assets			
Current			
Cash and cash equivalents	4	166,302	122,411
Trade and other receivables	5	31,196	33,000
Total Current Assets		197,498	155,411
Total Non-Current Assets		-	-
Total Assets		197,498	155,411
Liabilities			
Current			
Trade and other payables	6	32,386	40,176
Provisions	7	7,568	4,521
Total Current Liabilities		39,954	44,697
Non-Current			
Provisions	7	-	-
Total Non-Current Liabilities		-	-
Total Liabilities		39,954	44,697
Net Assets		157,544	110,714
Accumulated Funds			
Opening accumulated funds		110,714	129,436
Current year operating surplus / (deficit)		46,830	(18,722)
Total Equity		157,544	110,714

The accompanying notes form part of these financial statements.

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Statement of Changes in Equity

For the year ended 30 June 2018

	Accumulated Funds \$	Total \$
Balance at 1 July 2016	129,436	129,436
Total comprehensive income	(18,722)	(18,722)
Balance at 30 June 2017	<u>110,714</u>	<u>110,714</u>
Balance at 1 July 2017	110,714	110,714
Total comprehensive income	46,830	46,830
Balance at 30 June 2018	<u><u>157,544</u></u>	<u><u>157,544</u></u>

The accompanying notes form part of these financial statements.

Mental Illness Fellowship of Australia Inc
 ABN 73 204 129 543

Statement of Cash Flows

For the year ended 30 June 2018

	Notes	2018 \$	2017 \$
Cash Flow from Operating Activities			
Receipts from members contributions		516,912	656,777
Receipts from donors, sponsors and others		20,322	45,471
Payments to suppliers and employees		(493,865)	(750,512)
Interest received		522	1,297
Net cash provided by / (used in) operating activities	8	<u>43,891</u>	<u>(46,967)</u>
Net increase/(decrease) in cash held		43,891	(46,967)
Cash at beginning of year		<u>122,411</u>	<u>169,378</u>
Cash at end of year	4	<u><u>166,302</u></u>	<u><u>122,411</u></u>

The accompanying notes form part of these financial statements.

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

1. Statement of significant accounting policies

The Board of Mental Illness Fellowship of Australia Inc ("MIFA"), a registered charity, consider it a non-reporting entity as defined by AASB 1053 and the special purpose financial statements of the Fellowship have been prepared under section 60-30 of the Australian Charities and Not-for-Profits Commission Regulation 2013 (ACNC Regulation).

Accordingly, these special purpose financial statements comply with the Australian Charities and Not-for-Profits Commission Act 2012 and the ACNC Regulation. The accounting standards applied are AASB 101 Presentation of Financial Statements, AASB 107 Statement of Cash Flows, AASB 108 Accounting Policies, Changes in Accounting Estimates and Errors and AASB 1054 Australian Additional Disclosures.

The financial report is for the Mental Illness Fellowship of Australia Inc as an individual entity, an incorporated association, incorporated and domiciled in the Australian Capital Territory. The Association is a not-for-profit entity for the purposes of preparing the financial statements and all amounts are presented in Australian dollars rounded to the nearest dollar.

The financial statements were authorised for issue by the Board on the date the Directors' Declaration was signed.

The financial report has been prepared on an accruals basis and is based on historical costs and does not take into account changing values of money, or except where specifically stated, current valuations of non-current assets.

The association has adopted all amendments to Australian Accounting Standards issued by the Australian Accounting Standards Board, which are relevant and effective for the association's financial statements for the annual period beginning 1 July 2017. None of the amendments have had a significant impact on the association.

The Directors have reviewed the accounting standards issued but not yet effective at the date of this report and none of the revisions or new standards, to the extent applied, are anticipated to have a significant impact on the association. No accounting standards or amendments have been early adopted by the association.

Accounting policies

Income tax

No provision for income tax has been raised as the entity is exempt from income tax under Division 50 of the Income Tax Assessment Act 1997.

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

1. Statement of significant accounting policies (continued)

Employee benefits

Provision is made for the association's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits that are expected to be settled within one year have been measured at the amounts expected to be paid when the liability is settled, plus related on-costs.

Revenue

Revenue from membership contributions is recognised over the membership period.

Grant and sponsorship revenue is recognised in the statement of profit and loss and other comprehensive income when the entity obtains control of the funds and it is probable that the economic benefits gained from funding will flow to the entity and the amount of the funding can be measured reliably.

Revenue (continued)

If conditions are attached to the funding which must be satisfied before it is eligible to receive the contributions, the recognition of the funding as revenue will be deferred until those conditions are satisfied.

When grant or sponsorship revenue is received whereby the entity incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the revenue is recognised in the statement of financial position as a liability until the service has been delivered to the contributor, otherwise the funding is recognised as income on receipt.

Donations and bequests are recognised as revenue when received.

Interest income is recognised on an accrual basis using the effective interest method.

All revenue is stated net of the amount of goods and services tax (GST).

Goods and services tax

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of as item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST.

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

Cash flows are presented in the statement of cash flows on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at call with banks and other short-term highly liquid investments with original maturities of three months or less.

Impairment of assets

At each reporting date, MIFA reviews the carrying values of its tangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value in use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable value is expensed to the statement of profit or loss and other comprehensive income.

Provisions

Provisions are recognised when MIFA has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured.

2. Revenue and other income**Grants, Donations and Sponsorships**

	2018	2017
	\$	\$
- Janssen Cilag	15,700	4,500
- Lundbeck	8,300	16,000
- Cairns Penny	-	124
- University of the Sunshine Coast	7,350	-
- Servier Laboratories	13,000	-
	<u>44,350</u>	<u>20,624</u>

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

2. Revenue and other income (Continued)

	2018	2017
	\$	\$
Financial Contributions - Members		
Aftercare	-	120,000
Bridges Health and Community Care	33,968	20,660
ARAFMI (Tasmania) Inc	-	815
Mental Illness Fellowship of Australia (NT)	15,460	10,407
Mental Health Foundation ACT	15,392	20,293
selectability (Formerly SOLAS & Mental Illness Fellowship of North Queensland)	120,000	132,813
Mental Illness Fellowship of Queensland	-	70,426
Skylight (Formerly Mental Illness Fellowship of South Australia)	92,804	86,279
Mental Illness Fellowship of Western Australia	42,296	45,377
One Door Mental Health (Formerly Schizophrenia Fellowship of NSW Inc)	120,000	120,000
	<u>439,920</u>	<u>627,070</u>
Other Revenue		
Other income	2,650	1,247
Project contributions	-	8,010
Interest	522	1,106
	<u>3,172</u>	<u>10,363</u>
Total revenue and other income	<u>487,442</u>	<u>658,057</u>

3. Profit/loss for the year

	2018	2017
	\$	\$
The following significant expense items with other expenses are relevant in explaining financial performance		
Accounting costs	17,611	32,906
Audit fees	5,019	5,000
Bank charges	103	240
Board meeting costs	14,194	14,971
Business development	1,574	46,293
Insurance	7,871	8,126
Office costs	11,981	4,947
Project expense	55,651	176,658
Salaries and related costs	274,285	299,695
Office communication	6,736	7,492
Promotional costs	389	8,450
Recruitment costs	-	27,950
Travel and accommodation	45,198	44,051
	<u>440,612</u>	<u>676,779</u>

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

4. Cash and cash equivalents

	2018	2017
	\$	\$
Cheque account	57,779	17,405
Investment account	108,523	105,006
	<u>166,302</u>	<u>122,411</u>

5. Trade and other receivables

	2018	2017
	\$	\$
Current		
Trade receivable	31,196	33,000
	<u>31,196</u>	<u>33,000</u>

6. Trade and other payables

	2018	2017
	\$	\$
Current		
Unsecured liabilities		
Accrued expenses	5,270	13,640
Trade creditors	26,993	16,500
Sundry creditors	123	2,077
GST, PAYG and Superannuation payable	-	7,959
	<u>32,386</u>	<u>40,176</u>

7. Provisions

	2018	2017
	\$	\$
Current		
Provision for annual leave	7,568	4,521
	<u>7,568</u>	<u>4,521</u>
Non-current		
Provision for long service leave	-	-
	<u>-</u>	<u>-</u>

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

8. Cash flow information**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:

	2018	2017
	\$	\$
Reconciliation of cash flows from operations with profit after income tax:		
Profit/(loss) after income tax	46,830	(18,722)
<i>Changes in assets and liabilities</i>		
(Increase)/decrease in trade and other receivables	1,804	(20,273)
(Increase)/decrease in other current assets	-	2,276
Increase/(decrease) in trade and other payables	(7,790)	20,069
Increase/(decrease) in provisions	3,047	(30,317)
Cash flows from operating activities	43,891	(46,967)

9. Events after the reporting date

No matters have arisen since the end of the financial year that have significantly affected or may significantly affect the operations of MIFA.

10. Economic dependency

The Mental Illness Fellowship of Australia Incorporated receives the majority of its income through Members. The nature and extent of these contributions make the Mental Illness Fellowship of Australia Incorporated economically dependent upon these parties in order to continue to provide its current services.

11. Contingent liabilities

There were no contingent liabilities facing MIFA as of 30 June 2018.

12. Board remuneration

During the financial year, no members of the Board of MIFA received either directly or indirectly as a member of a firm or body corporate payments as a result of transactions with MIFA in the ordinary course of business and in accordance with normal commercial terms and conditions.

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

13. Association details

The registered office and principal place of business of the association is:

Mental Illness Fellowship of Australia Incorporated

20 Pidgeon Close

West End, Queensland 4101

The principal activities of MIFA during the financial year were:

To represent a national voice and approach to enable people with mental illness and their carers to fully share in the community with the same rights and opportunities as other citizens.

Mental Illness Fellowship of Australia Inc
ABN 73 204 129 543

Notes to the Financial Statements

For the year ended 30 June 2018

14. Trust Information

2018	2017
\$	\$

Mental Illness Fellowship of Australia Inc has acted as trustee of the Psychosis Australia Trust since its inception on the 1st December 2011. The financial information for the Trust is presented below:

Statement of Comprehensive Income

Total revenue	34,223	1,150
Total expenses	(29,944)	(7,655)
Total Profit / (Loss) from operations	4,279	(6,505)
Total comprehensive income	4,279	(6,505)

Statement of Financial Position

Assets

Current assets		
Cash and cash equivalents	37,323	56,949
Trade and other receivables	25,000	-
Other current assets	1,766	-
Total current assets	64,089	56,949
Total Assets	64,089	56,949

Liabilities

Current liabilities		
Trade and other payables	45,596	42,735
Total current liabilities	45,596	42,735
Total liabilities	45,596	42,735

Net Assets

18,493	14,214
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Equity

Accumulated funds	14,214	20,719
Net income	4,279	(6,505)
Total equity	18,493	14,214

Mortgages, Charges or Other Securities

The Trust does not have any mortgages, charges or other securities affecting the property of the Trust.

Trust liabilities and right of indemnity

In accordance with the Trust Deed the trustees of the Psychosis Australia Trust are not liable should the Trust be unable to meet any obligations.

Mental Illness Fellowship of Australia Inc

ABN 73 204 129 543

Directors' Declaration

The Directors have determined that the Mental Illness Fellowship of Australia Inc (MIFA) is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to the financial statements.

The Directors of the association declare that:

1. The financial statements and notes, as set out in pages 1 to 10, are in accordance with the Australian Charities and Not-for-profits Commission Act 2012 and the Australian Charities and Not-for-profits Commission Regulation 2013; and
 - (a) Comply with the Accounting Standards described in Note 1 to the financial statements; and
 - (b) Give a true and fair view of the association's financial position as at 30 June 2018 and of its performance for the year ended on that date; and
2. In the Directors' opinion, there are reasonable grounds to believe that MIFA will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.



Michael Reid
President



For MIFA inquiries contact the National Office:

National CEO - Tony Stevenson

Postal Address: c/o QCOSS, PO Box 3786
SOUTH BRISBANE QLD 4101
Telephone: (07) 3004 6914
Email: mifa@mifa.org.au
ABN 73 204 129 543



For PAT inquiries contact the National Office:

Chair - Stephen Gerlach

Postal Address: c/o QCOSS, PO Box 3786
SOUTH BRISBANE QLD 4101
Telephone: (07) 3004 6914
Email: pat@mifa.org.au
ABN 54 612 732 559