On Friday afternoon of Mental Health Week the Barkly Regional Arts and Girl Guides gathered out the front of the Tennant Creek Hospital to do their much awaited lantern walk. They pulled together taking turns to wear the large colourful rocket sculpture and lead the group through the hospital wing. It was their young smiling cheery faces that brought many smiles to the staff and patients leaving a glow of light and joy behind them.

From there they all gathered into the cars waiting to take them to the old timers residence where once again they teamed up taking turns in leading one another through the halls. They had many of the older residents of Tennant Creek smiling at what one would mistake as the Milky Way galaxy indoors. The day soon came to an end where everyone helped pack up and gathered for photos already telling stories of how much they loved the walk and how wonderful it was to see so many smiling faces around them.

- Kirsten (Turn to page 12 for a full account of our Mental Health Week adventures - ed.)

Both faces and lanterns were lit in Tennant Creek during Mental Health Week this year. Partnering with Barkly Arts and the Girl Guides, we brought smiles and joy to people at the Tennant Creek Hospital and Pulkapukka Kari Nursing home. Faces lit up as we tiptoed through to the sound of fairy music, the event just as helpful for our mental health as for the people we visited.
MHACA has been very busy again this year providing care and support to our participants and a range of Mental Health Promotion activities. A primary focus this year has been on our tri-annual strategic planning. A big thank you, to all of you who have participated and contributed both to the evaluation of our activities and to our future planning.

What is planning? It is all about thinking about what we do, what we don’t do and how to do things better and it is very much about being prepared for the things that come up when we least expect them. Sandy’s article will tell you more about our strategic planning.

MHACA is a living and dynamic organisation and has many characteristics that are not unlike those of many of our participants, particularly this past twelve months or so. We have scars from the loss of close ones and we have experiences that we would rather forget, but that we need to deal with and put into perspective.

What is recovery? Recovery is a healing process by which we regain control of our lives and our focus rather than merely responding to the dictates of our past experiences and the expectations of others. Christine’s article on our services highlights our focus and pathways on recovery.

It is very timely after our recent annual general meeting to acknowledge the fine work done by our committee members and acknowledge particularly the contributions of our retiring members Trish Van Dijk, Mardijah Simpson, Lee Ryall and Greg McIntosh. Great work guys. The new Committee welcomes Joyce Bowden, Liz Ollie, Janet Barrow and Padma Andrews as well as welcoming back Amanda Worrall, John Moffat, Maya Cifali, Michael Johnson, Leo Welin and Tracey Hatchard.

Many of us will be thinking about our families and communities with Christmas coming up in the not too distant future. May I take this opportunity from all us here at MHACA to wish you and your families the best of health and happiness for the coming festive season.
Appreciation of Retiring Committee Members

We reflect upon 2012 as a year tinged with sadness, turmoil and change. A year of significant challenge for the Management Committee and all associated with MHACA. Throughout these difficulties, the strength demonstrated by outgoing chairperson, Trish van Dijk, and all other Committee members has been quite remarkable. We now say a fond farewell to four of our long serving leaders, Trish van Dijk, Mardijah Simpson, Lee Ryall and Greg McIntosh, who retired at the Annual General Meeting, together with participant members Anna Morris and Will Luthi. It is fitting that we reflect upon their achievements and their unstinting support for MHACA in key Committee roles over many years, leading by example and in concert with retiring General Manager, Claudia Manu-Preston, encouraging innovation, inclusion, participation and cohesion within MHACA and promoting options for the issues affecting people with mental health conditions in Central Australia to policy makers in the Northern Territory and nationally.

The strong legacy you leave is appreciated by members, participants and staff alike. Thank you.

Welcome to the New Committee

We are grateful for the continuity and corporate knowledge that comes with the re-appointment of several previous members to the new Management Committee. We also appreciate the newcomers who have shown their support for this iconic organisation and the people it serves by volunteering their time and expertise through Committee membership.

The blend of the “old and the new” provides for both continuity and change in meeting the challenges that lie in the year ahead.

The new Committee is as follows:
Joyce Bowden (Chairperson)
Amanda Worrall (Deputy Chairperson)
Janet Barrow (Treasurer)
Liz Olle (Secretary)
Maya Cifali (Public Officer)
Padma Andrews
John Moffat
Leo Welin
Tracey Hatchard
Michael Johnson

Looking forward

The Committee looks forward to supporting General Manager, Nick Woodlock, participants and staff, ensuring that the excellent aspirations outlined in the new Strategic Plan are transformed into operational reality.

Joyce Bowden
This time of the year that many kids around Australia dread........ report card time, a reflection on how you’ve done, successes and failures and a guide for what you need to work on in the future.

The Mental Health Commission recently released a mental health report card for Australia:

A Contributing Life: the 2012 National Report Card on Mental Health and Suicide Prevention. This first ever Report Card casts an independent eye over how we as a nation support the estimated 3.2 million Australians each year who live with a mental health difficulty, their families and support people, and how we provide and coordinate the services they need.

Alan Fels, Chair of the Mental Health Commission had this to say....

“Mental health is everyone’s business. It is not about ‘us’ and ‘them’, it’s about everyone. We will all be profoundly affected at some stage in our lives by mental health – either directly, in our family or circles of friends, or at work. That is why we need to highlight and report on the things that matter to all our lives – where we live, what we do, our friendships and community and what we need to help us live a full and contributing life.”

“Even the most disadvantaged should be able to lead a contributing life. This can mean many things. It can mean a fulfilling life enriched with close connections to family and friends, good health and wellbeing to allow those connections to be enjoyed, having something to do each day that provides meaning and purpose – whether it be a job, supporting others or volunteering, and a home to live in, free from financial stress and uncertainty.”

Like all report cards this one has recommendations for where we as a nation could improve.

Recommendation 1: Nothing about us, without us – there must be a regular independent survey of people’s experiences of and access to all mental health services to drive real improvement.

Recommendation 2: Increase access to timely and appropriate mental health services and support from 6-8 per cent to 12 per cent of the Australian population.

Recommendation 3: Reduce the use of involuntary practices and work to eliminate seclusion and restraint.

Recommendation 4: All governments must set targets and work together to reduce early death and improve the physical health of people with mental illness.

Recommendation 5: Include the mental health of Aboriginal and Torres Strait Islander peoples in ‘Closing the Gap’ targets to reduce early deaths and improve wellbeing.

Recommendation 6: There must be the same national commitment to safety and quality of care for mental health services as there is for general health services.

Recommendation 7: Invest in healthy families and communities to increase resilience and reduce the longer term need for crisis services.

Recommendation 8: Increase the levels of participation of people with mental health difficulties in employment in Australia to match best international levels.

Recommendation 9: No one should be discharged from hospitals, custodial care, mental health or drug and alcohol related treatment services into homelessness. Access to stable and

Recommendation 10: Prevent and reduce suicides, and support those who attempt suicide through timely local responses and reporting.


I like to think that these recommendations are goals that we at MHACA strive for. Looking back as we do at this time of year it’s important to acknowledge that while we and many services face trials and tribulations, that we have a common goal and purpose and that is to improve the health and wellbeing of the community.

Thank you all so much for your continued support of MHACA and inBalance, we wish you all the best for Christmas and the New Year and look forward to seeing you in 2013.

Kylie

Do not fear the winds of adversity. Remember:A kite rises against the wind rather than with it.

-- Author Unknown
As usual admin have pottered along in the background, dealing with big and little issues as they arise and generally trying to keep the engine running smoothly. The main focus in this period has been getting all the end of financial year stuff done, completing the new Strategic Plan for 2012-15, and preparing for the AGM.

**Staffing:**
We welcomed a new staff member into the organisation in this period – Lyne Cronin joined the pathways team at the end of August – welcome.

**Finances:**
The end of year accounts were again audited by Deloittes – it is nice that we have developed a partnership with them over the past 4 years and we appreciate the professionalism and expertise that is applied to doing the annual audit. With teamwork all generally goes smoothly and this year was no exception, with the audited financials available for our AGM at the end of October and our funding bodies together with the annual service reports. Well done to all staff for their efforts during the financial year, we remain in a strong financial position and continue to deliver a quality service to people in Alice Springs and beyond.

**Workshops/training:**
Kirsten has finally completed her MYOB training on payroll, and we are looking forward to her taking some of the load and allowing Sue some annual leave breaks which do not have to fit between payroll runs! Sue attended the Accidental Counsellor course run through Lifeline, and we all benefited from Arana Pearson’s visit for Mental Health Week.

**New Database:**
It has become all too apparent that the current database is not providing us with the statistical and management information that we need to keep on top of our operations, and Sue has been researching alternatives over the past few months. We have basically narrowed the choice down to one, however this is on hold while we are looking at additional service programs which may come with a database so watch this space!

**Looking Ahead:**
Quite funny – when I look back at the admin article for the previous newsletter I find I don’t have to change this paragraph too much – we still haven’t achieved the “special” projects noted which include scrubbing and retiring our inventory of old computers, updating forms, policies, and procedures, and tending to other crises as they arise – but they will get done as they simply are not at the top of the list as yet – no doubt there will come a time we cannot put them off any longer! We did however accomplish the cleaning out of Sue and Kirsten’s offices and moving things to the storage container, things are looking much tidier out the front and Kirsten has bought some bright storage boxes which lighten the place up a bit as well as planting some flower boxes out on the front window sills.
The Pathways to Recovery Program offers rehabilitation and outreach services which provide recovery-focused living-skills training and support. We assist people with mental health issues to set & achieve goals aimed at independent living and integration into the community.

Activities ...

- Personal goal setting with regular 3-monthly reviews
- Basic living skills: cooking, budgeting, shopping, personal care
- Access to vocational education, training and employment activities
- Become a volunteer
- Social and recreational activities
- Regular groups & outings
- Counselling services
- Access to resources and other support services
- Information on mental health issues and a variety of topics
- A cuppa and a place to chat with others who understand

For further info call:
Christine Boocock on 8950 4607 or Lyne Cronin on 8950 4604
8.30am – 4.30pm Monday to Friday

We are nearly at the end of another year; this year has gone so fast, where did the time go?

Participant work

The Pathways team supports participants who have a range of support needs. A support plan is developed on an individual basis and can be changed as often as needed. The plan includes the participant’s skills, goals and achievements. We assist participants to build on the skills that they already have, all participants have a great range of skills that can be utilised one way or another at MHACA.

We continue to work closely with our colleagues from CAMHS and the Mental Health Unit and other service providers to ensure that our shared participants receive a comprehensive level of clinical and non-clinical supports.

We have a number of participants that require long term supported accommodation, and one of the challenges for support workers is that there isn’t anything available in Alice Springs for people with a mental illness. So we have been working endlessly to assist participants to maintain their wellness while they are in their own homes while we continue to lobby for long term supported accommodation.

Training:

Keeping ourselves up skilled is an important element of our roles at MHACA, so we are always looking into what training options are available that will assist us to better support our participants. Congratulations to Christine who has just completed Certificate IV in Mental Health non-clinical through Tafe NSW. She is very relieved to have achieved her goal in completing this course.

All Service area staff attended a day of training with Arana Pearson - “Working with Voices”. Arana Pearson is the director of Keepwell Ltd, and has provided consumer consultancy, facilitation and training for mental health since 1993. We had the opportunity to use mp3 players which had different voices and sounds recorded on them, and then we were given tasks to do while listening to the mp3 player. Wow! What a challenge that was, it is very difficult to listen to a set of instructions while you have all these other voices and sounds going on. It gave us a better understanding of what our participants that hear voices go through on a daily basis, the battles that they are constantly dealing with within themselves is enormous.

Even a happy life cannot be without a measure of darkness, and the word happy would lose its meaning if it were not balanced by sadness. It is far better take things as they come along with patience and equanimity. Carl Jung
John has been living with Bi-polar for most of his life. His parents separated when he was 3 years old, so John's life has been full of challenges. He was born in Melbourne but has been living in Alice Springs for the past 26 years. He first moved here to remove himself from the temptation of drugs and the circle of friends that he used to hang out with. He saw Alice Springs as a way of getting the rehabilitation that he needed to be able to sort his life out and get back on track, which he has done successfully.

John has been married to his beautiful wife for the past 18 years and they have two beautiful children, who John states “have been the best form of medication for me”.

John has also lost family members at a young age through suicide, which at the time it was really confusing and he couldn’t understand why his uncles would take their own lives. Over the years John has learnt so much about Mental Health and he would like to work more with the younger generation to give them the tools to be able to cope.

I have been involved with MHACA for the past 7 years. When I first started coming MHACA it was situated at the corner of Bath Street and Stuart Tce. Over the past 7 years I have been involved in a number of groups like the participant forum, peer initiative group. I have also assisted visiting presenters with delivering training to the staff at MHACA. I have attended the Mental Health First Aid Training and was given the opportunity to attend the TheMHS conference in Sydney.

John was a Participant Rep on the committee of Management for a couple of years before taking some time out. This year he was nominated as a general member on the Committee of Management, so he is looking forward to the next 12 months.

What does recovery mean to you?
Recovery means so much to me; it's about living a healthy balanced life. I have learnt to pick myself up quicker each time I have felt down. Not allowing my old issues to burden my present life, remember the past but don't live it.

How has MHACA supported you with your recovery?
They have given my many different tools that I can use in my recovery. MHACA has taught me so much about Mental Health that I didn't know which has given me a greater insight to all different forms of health problems.

What can you learn from others who are also walking the road to recovery?
I have learnt that we all have different living experiences and we deal with things so differently. We all have different coping skills that we can share with each other, what works for one person might not work for another.

What are your interests? E.g music, art
I enjoy many different sports, listening to a range of music, writing poetry and I really enjoy cooking, as a qualified chef experimenting with food is one of my fortes.

What advice would you give to others who are also recovering from mental illness?
Keep working on your recovery, it's an ongoing progress. Ask older people that have been living with a mental illness for many years how they have coped over the years, before there were services like MHACA in place. Look after yourself, do some form of exercise, eat healthy, take your medication and talk to someone, you don't have to do it on your own.

I would like to share one of my poems with you.

I Choose

To live by choice not by chance
To make changes not excuses
To be motivated not manipulated
To be useful not used
To excel not compete
I choose self-esteem not self-pity
I choose to listen to my inner voice
Not the random opinion of others

Written by John Moffat
Thanks Barry

We would like to thank Barry Laird for all his efforts and contributions in the Sub Acute Program. He has been a key asset in the Sub Acute team especially with his relationship with the Salvation Army Men's Hostel and all the male participants that have come through the program.

Barry is now focusing more closely in the Homeless and Housing program as he was working in a joint role with both the Sub Acute and Homeless and housing program.

Referrals:

We are currently experiencing a low number of referrals for the program, which positively may reflect that participants have increased their potential towards independency and self-determination in a healthy recovery within the community.

It also may mean that we need to continue looking at other avenues of promotion of the program in the wider community, which we have started by extending our referral process to all Allied Health providers. However this will not limit our services to participants from other supporting organisations as well as the clinical team.

We will also be looking at holding information sessions within organisations in the community, so if you would like an information session please do not hesitate to call us.

Your Mental Health Matters during the festive season

As we get closer to Christmas we can sometimes be overwhelmed with the amount of commitments that we have in our lives. However here are some tips that you may find handy during the festive season that may assist you to look after your Mental Health.

- Relax with a good book or movie
- Balance your work and leisure time
- Take a yoga or meditation class
- Enjoy regular exercise
- Do something creative e.g... painting, handicrafts, writing
- Listen to relaxing and soothing music
- Take one thing at a time
- Plan your next holiday
- Visit family members
- Share a laugh with friends
- Be kind to yourself & to others
- Take regular tea breaks
- Appreciate the good in life . . .
**Day to Day Living Program**

Activities to Help Improve Quality of Life

**D2DL Activities Officer:** Craig Thorogood  
**D2DL Participant Mentor Officer:** Peta Boon

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**D2DL Action**

The Day to Day Living program is focussing more on therapeutic activities/programs to assist with recovery. MHACA is networking well with other services, and the participants enjoy participating in the programs that are offered, RecLink, Mens Shed, Salvation Army, DASA, CAAAPU, Mission Australia, East Side Pilates and 8CCC are some of the other service providers that we link up with.

**More Active Than Ever…..**

With so much to do in the past few months it sometimes feels like there’s no time to catch your breath between one activity and the next. Participants are really enjoying stepping up and covering the drop-in centre when required. Read on for a whirlwind tour of what we’ve been up to these last few months.

Swimming is back and participants are enjoying escaping from the daily heat, this is usually attended after finishing Reclink cricket - it’s a great way to relax and unwind. Mandala has been reintroduced and has been a well-attended activity; participants have expressed feelings and thoughts through drawing pictures. Yoga had been requested by the participants and in November a small group enjoyed the peacefulness of this activity and there was a keenness to continue the class on a weekly basis, ten pin bowling and 8-ball have continued to be popular, bringing out participants competitiveness amongst each other. Felting has been a great success with participants learning new skills/techniques, Cathy O’Brien who is facilitating the program is an Australian renowned artist, and has a great understanding of Mental Health.

Debra Langshire came and spoke to both staff and participants separately on how to get the most out of Mental Health Services, Debra also shared her lived experience which was appreciated by both staff and participants. Arana Pearson came from New Zealand and facilitated two workshops for staff and participants; this session was the highest attended session in the history of MHACA, and Arana spoke about hearing voices and living with them.

On The Air……..

Day to Day living/MHACA is now a sponsor of 8CCC community radio station. MHACA staff and participants completed the first stage of training to be able to have station and MHACA announcements put together by staff/participants. These are currently being aired, so switch your dial and listen out for the MHACA announcements. Further training will be sorted, and currently on the monthly calendar a radio group has been formed which meets on a weekly basis to discuss and write material.

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**For further info call:**

Craig Thorogood on 8950 4612  
Peta Boon on 8950 4614  
Monday to Friday 8.30am – 4.30pm

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Below: Rudi enjoys a swim in the town pool
Who are we?

The Life Promotion Program works in collaboration with others to find solutions through community owned and developed initiatives to help reduce the incidence of suicidal behaviour in Central Australia.

What we do...

- make sure people have a chance to share what they know about how best to address suicidal behaviour in our region
- provide information & training to the community to help increase the level of public skills & knowledge about how to respond in the face of suicidal thoughts or behaviour
- increasing public awareness of what contributes to suicidal behaviour, what protects from it & what we can do when people are affected by it
- response group offering support to people affected by losses to suicides
- localised training packages combining study and community networking to tailor ‘health promotion’ materials and training packages so that they are relevant, useful and accessible to people in our region
- support & advocacy for policies & services that reduce factors that contribute to suicidal behaviour and/or increase factors that protect from suicidal behaviour

For further info call:

Laurencia Grant on 8950 4608
or Brian Kennedy on 8950 4609
Monday to Friday 8.30am – 4.30pm

Suicide Story Facilitator Training

A group of 19 Central Australians were the first to participate in the Suicide Story Facilitator Training in Alice Springs in the last week of September 2012. This new training was developed by the Mental Health Promotion Team at MHACA in collaboration with the Suicide Story Aboriginal Advisory Group and OzHelp. The new trainees will be supported to train both Aboriginal and non-Aboriginal people across communities in the Northern Territory. The program aims to build on the existing knowledge within communities and to teach new skills to community members. It assists people in remote communities to open up about suicide, to explore their beliefs and possible fears about suicide, to better understand how they might notice if someone is at risk of suicide, and how it is that the rates of suicide are so high in Aboriginal communities in Australia.

The new trainers are well resourced with a toolbox made up of films and a training manual with instruction. However, they will be provided with mentoring and support to deliver the training. We will be taking the training to communities requesting the support. The most recent training took place in Darwin in November this year. 29 people representing a wide range of organisations participated in Suicide Story training.

If you are looking for support please contact any of the following organisations: Lifeline 13 11 14, Kids Help Line 1800 55 1800, Men’s Line 1300 78 99 78 or Suicide Call Back Service - 130 659 467

If you want to know more about this program or want it in your community, call MHACA on (08) 89504600

Below: The brand new Suicide Story Trainers together with the mentor trainers

“There is a saying in Tibetan, ‘Tragedy should be utilized as a source of strength.’ No matter what sort of difficulties, how painful experience is, if we lose our hope, that’s our real disaster.” - Dalai Lama XIV
What’s been happening

The Homelessness, Housing and Support program has now been running for around 2 years, and during this time we have assisted a number of people to gain skills aimed at helping them gain or retain their tenancy and reduce their risk of a return to homelessness or inappropriate living arrangements.

The program has 2 permanent staff members who also assist across other program areas as needed, but also to provide a continuity of support to the participants who come through the program and move into other areas within MHACA.

People come into the program for a number of reasons, and are referred from a number of sources – sometimes from other agencies, sometimes they come in and ask if we have any accommodation because they are new in town etc, but many have existing tenancies through NT Housing and are at risk of eviction if they cannot learn to manage their tenancy.

MHACA provides support which is culturally appropriate to each individual, and we strive to help the participants take charge of their own lives as far as they are able. Although the HHSP itself does not directly do assessments with the participants on their life plans, assessments are carried out on their capacity to manage such things as budgeting, cleaning, antisocial behaviour of friends & family etc, and some occupational therapy assessments are also done when we are able to access the OT’s from CAMHS.

As part of the ongoing development of the participants however the HHSP staff may work on a Wellness Recovery Action Plan (WRAP) with the individual participants and their families, or refer them onto the Pathways or Day to Day Living programs for a full assessment of their needs using the Camberwell model.

Participants in HHSP can also gain certificates for completing modules of competency in the areas noted above.

We were excited to place a participant for the first time into Akangkenytye (Aboriginal) Hostel, a first for MHACA after the new MoU was signed off in July. This is a new development and expands the range of accommodation we can offer under this program. The Salvation Army has also allocated a bed specifically for the program – again expanding our range of options, however Central Australia is still in desperate need of somewhere where we can provide supported accommodation – something like cluster housing would be ideal as identified in the “There’s no place like home” report which MHACA launched in March 2010. So there has been some progress, but more is needed for the participant group who is so much at risk on a daily basis because of the shortage of safe accommodation.

The HHSP staff have attended a number of workshops over the past 3 months including Working with Complex and Difficult Clients, Recovery Mental Health, Voice Hearing Essential Skills and Lifeskills Training (with Anglicare). Lizzie and Barry also attended the NT Homelessness Summit in Darwin which covered areas which have been spoken about before – perhaps with the change of government in the Territory the words may translate into actions this time around.
Mental Health Week

The theme this year for mental health week was all about “celebrate well being, connect and grow" It was a jam packed week with much happening in Alice and the Barkly.

The planning for this started in June with discussions on how both Kylie and Larissa could coordinate our activities so that support from the staff teams would not be too stretched and that some members of MHACA could be available to support both Kylie and Larissa without clashing. There was discussion around combining activities, sharing resources, perhaps speakers being available at both towns and the types of activities that could be of interest and value.

Mental Health week kicked off with a bang, with the annual Gala dinner. Our guest speaker Arana Pearson was a hit with much laughter during his speech and a few things for us to think about too. In addition to public speaking Arana is quite well known for his guitar playing and sure enough after the speech the guitar came out and we were all invited to join Arana in a rendition of the old classic “Stand By Me”.

The following day Arana was involved in a workshop for participants and as Craig mentions in the Day to day report it had the highest attendance of any event we’ve had at MHACA! While this was going on MHACA also supported our friends at CAMHS with their Mental Health Week Expo & BBQ. Kylie and Lizzie along with Morris and Tim set up a stall with MHACA information on the Flying Doctors lawns and soon the sausages were sizzling! Thanks to CAMHS for this event and especially the delicious chocolate cake! Some people who popped by even started an impromptu game of frisbee with the new CAMHS frisbees.

Wednesday and the Chamber of Commerce hosted their regular “Women in Business” Lunch with guest speaker Ingrid Ozols. Ingrid runs “Mental Health @ Work” an international organisation aimed at improving the wellbeing and productivity of people and workplaces. The knives and forks were idle as Ingrid shared her personal journey with the group, laughter and even a few tears. Thank you to the Alice Springs Chamber of Commerce for organising this great event.

Alice events done Kylie hopped in the car and drove to Tennant Creek to support Larissa who’d been hard at work with MHACA admin assistant Kirsten preparing the events for Tennant Creek.

First on the list was the community BBQ. Armed with brochures, the BBQ, balloons we headed to Peko Park. It was really windy and unfortunately despite trying on a couple of occasions the banner could not be displayed. Larissa was great at taking the mike we’d borrowed from the high school and calling people over to join Arana in the rendition of the old classic “Stand By Me”.

The following day Arana was involved in a workshop for participants and as Craig mentions in the Day to day report it had the highest attendance of any event we’ve had at MHACA! While this was going on MHACA also supported our friends at CAMHS with their Mental Health Week Expo & BBQ. Kylie and Lizzie along with Morris and Tim set up a stall with MHACA information on the Flying Doctors lawns and soon the sausages were sizzling! Thanks to CAMHS for this event and especially the delicious chocolate cake! Some people who popped by even started an impromptu game of frisbee with the new CAMHS frisbees.

Friday was just as hot and busy – we had promised to share a pampering day with the woman’s refuge and had an invitation to attend the prize giving from the Barkly schools. Unfortunately
we could not attend the school event as there was some last minute changes but Larissa was informed by a very proud parent that night how thrilled she was that her daughter had received a prize for her efforts in the poster design competition and she loved the bright orange hat and water bottle that also formed part of the prize.

All of us were put on KP (kitchen patrol) to start with – getting the salads cut up and into bowls ready for their BBQ (BBQs were the flavour of the week). Larissa got the raw end of the deal – getting to slice several kilos of onions – it is so true that many hands make light work and working together with others was a joy – The day progressed with all of us assisting where we could – in cooking, swapping bowls of water from the foot massages, to sorting and collecting the towels as the ladies had their hair done, to applying make up and of course sitting alongside these ladies and sharing with them stories of hope, strength and sharing what keeps us all strong when times are hard.

There were a number of younger women there that responded very well to both Kylie and Kirsten and I think appreciated them and their fresh outlook. I know I appreciated their strength and smiles as the day drew to a close and we prepared to once again pack up our goodies and swap over to another set of items to take to the lantern walk. (Thanks Larissa! ed.)

The lantern walk was organised by Barkly Regional Art (BRA) and involved a number of children and adults carrying lanterns through the hospital and aged care centre and a chance for the youth and aged to interact in a peaceful and entertaining manner. The youth enjoyed showing off the lanterns they had made to a different audience and the older people were touched that they had been included in an activity that came to them and was a part of a community event. There was some nice positive feedback from both the hospital and aged care facility about the interaction with the youth and the smiles on the peoples faces. We also had a chance to leave balloons, MHACA merchandise and information with both the residents and the staff at both places.

The work car was packed, fuelled, checked and breakfast had before it was time for Kylie and Kirsten to return to Alice Springs. Everything had gone smoothly and the jobs and sorting had been shared amongst three of us so although tired there was still the energy for the drive back and for Larissa to repack the work car with information and the banner and posters for the final event of the week – the under 16 football match.

It was around 6pm down at Purkiss Reserve when the teams started to arrive and the lights went up on the field. Larissa had an opportunity to talk to the boys briefly about mental health and doing activities with others that can help you feel good. Larissa also distributed the water bottles, hats, tattoos and beyond blue and kid-safe information. Half-time came and went with more youth appearing out of the dark to join in and more drink bottles distributed along with lifeline/youth line magnets for anyone that wanted one. A final trip back to the office to put the boxes and banner away (well sort of) and home for Larissa after a busy week of preparation and events.
**A Little Bit of Magic**

When life is sad and lonely and nothing seems to fit

Look for a little bit of magic and your day will change a bit

Lately I've been feeling down and everythings a chore, I think I need to have some fun and need to laugh lots more...

So when you're feeling down and sad,
Find that magic once again and life is not that bad

- Paul Hadley

**Another Christmas**

Another year as another time when people get together and if asked who or where my longing is the answer is shown for being alone isn't for me alone for there's the telephone and family on the line as my wondering my wishes they be blessed as all I share my life with but me I got the hours to start on my goals as my special guitar and my poetry as too maybe my home to clean and then til the next Christmas wondering all I may achieve as I reach But I wonder too all the things life's stolen since the last one.

- Leo Welin

**A Smile**

Looking around I am aware I no longer but I look around and I love the way people whose lives haven't had the pure golden richness born from their smile that shines their a way made in heaven no matter how hard life has hammered for everyone has hard times and the inner speak is something they can't touch for most and I wonder how far I've fallen to the depths but one smile can rescue me even for a moment so all I can say stay young forever til there's no more room for the darkness of the world

- Leo Welin

**Lost & Found**

It's like losing a limb And growing it back As glass, fragile, see through I've got no chair for your blind pity to see

Parts that were torn, cuts too deep Some holes of emptiness will never heal

Why won't you see my scars? When you see me you don't But you've lost nothing, How come I can see through you?

- John

---

Watch your thoughts; they become words. Watch your words; they become actions.

Watch your actions; they become habits. Watch your habits; they become character.

Watch your character; it becomes your destiny.

—Lao-Tze
feel that I am ready to slowly self-manage my illness in the community which is a big achievement for me.

What does recovery mean to you?

Recovery to me is learning how to deal with what’s going on and how to cope. Recovery to me is also about you making the choice to make a change in your life, as others can only do so much but if I or you don’t make the decision to help yourself and make changes things will never work.

How has MHACA supported you with your recovery?

There has always been someone at MHACA to talk to; I have been able to learn more about myself and my illness. Participants like me are given the opportunity to be more involved with their recovery which I feel is great. I attended 2 workshops on hearing voices; which was facilitated by Arana Pearson, the first was where I participated for the staff training where I assisted with the role plays which roles were reversed and I got to be the Dr/ Support Officer for my Sub-Acute Worker at the time. I also got to listen and voice my opinion as a participant.

The second workshop was the participant workshop on hearing voices where I had the opportunity to read one of my creative writing pieces and voice my thoughts during this workshop. I feel at MHACA they listen and do not judge me, they see me for who I am as a person.

I have also been able to rebuild bridges with my family who now play a big part in my recovery, though they live Interstate, they keep daily contact with me which has really helped me talk about family matters that I have never been given the chance to.

I have 2 jobs going for me at the moment, this is “only temporary you see ha-ha” as I have plans to start my own business. MHACA has helped me to look at my short term and future goals that in turn make me feel as if I have more purpose and guidance as to what my future has for me.

What are your interests? Eg: music, art

My interests are creative writing, I like to write and write and have all my thoughts positive or negative downloaded onto a paper, this really helps.

I like swimming, I am not the greatest swimmer but I do try. I also like cooking; tonight I am making devil sausages which I am so excited about. I know to others they may feel that it is something easy to prepare however this is my first attempt so wish me luck.

What advice would you give to others who are also recovery from mental illness?

Don’t be afraid to talk to someone or ask for help. Live life to its fullest and don’t ever give up on yourself and your illness. There is always someone out there for you to talk to and who understands you. Last of all be yourself, don’t try to put up a front as you can only be you.

Sub-acute Participant in action:
Paul Hadley

Hello my name is Paul Hadley; I have been living in Alice Springs since July this year after making the big decision to move here from Sydney. I initially came here to work for the Alice Springs and Tennant Creek show.

I have been involved with MHACA since I have arrived here to Alice Springs in July. I was under the Sub-Acute Program and now I am receiving support from the Pathways team/program. The daily contact that I received from the Sub-Acute team was fantastic and I thank them for their time and effort however I
Above: Cheers! Lizzie, Pip, Sandi, Kylie & Peta raise their glasses at the Mental Health Week Dinner.

Above: On Air! Sandy & Rikki at the 8CCC radio skills course

Below: Jocelyn & Nardia our two of the New Suicide Story Trainers delivering their first training session

Above: Larissa at the Tennant Women’s Shelter delivering one of her much demanded back massages

Above: Nick lays flowers in rememberance at World Suicide Prevention Day

Below: Friends gather to remember Gwvynyth at the Telegraph Station
Above: Staff & participants gather to enjoy one of MHACA's healthy living lunches

Above: Clayton delivers a touching speech at Claudia's farewell

Below: MHACA men participating in MOvember!

Above: Kylie & Rikki work on their Melbourne Cup hats

Below: MHACA & CAMHS enjoy a BBQ together

Below: Peta & Lizzie enjoy a tasty lunch
Welcome all,

This gathering is simply the impulse felt by members of the committee, staff and participants to pay credit to a woman who led this organisation for more than 9 years.

Yes in fact Claudia applied for the job of “Coordinator” of MHACA in June 2003. It was a time soon after MHACA had a few difficulties with the then NT Health that had threatened to close it down. MHACA needed new blood to activate the delivery of a workable psycho-social rehabilitation model. It was also at that time that the Life Promotion project, which had already been functioning under a steering committee for some time, had solidly been attached to MHACA. And from Coordinator, the job became that of Manager. MHACA had regained its credentials and was able to acquire 2 units in October 2003 to accommodate participants on their way to social recovery (therefore Pathway). Housing has since then been seen by MHACA as a prerequisite for a stable rehabilitation. And the Churchill scholarship successfully undertaken by Claudia in 2011 has been the culmination of this theory.

When Claudia started at MHACA on 23 June 2003, I was then the Public Officer and we were implementing the first strategic plan under a new Constitution and two programs, Pathways and LPP or Life Promotion as a suicide prevention initiative and to provide support to the families and communities who had experienced death by the suicide of one of their members. People mentally InBalance and the emotional wellbeing of the whole community has always been the focus of Claudia’s professional approach.

In 2003, the 2 branches of MHACA activities required space and additional staff: not only office space but counselling and activities space. For many years we had shared the upper floor of the Salvation Army building. So following good negotiations, the NT Government gave us the use of the Heritage building (house and garden) at the corner of Hartley street and Stuart Tce. Garden, green lawn, little kitchen, verandah turned into office space, and Claudia was always there in the front room smiling her broad and welcoming smile even when she was under heavy pressure for deadlines or just coming back from another negotiation trip to Darwin.

That place remained a very special drop in centre which allowed a close proximity - I would say intimacy - between the Manager, staff, committee members and clients. But things were growing fast and we had to move on. Because of the diplomacy and management skills of Claudia, more funds came in, more projects more travelling for Claudia, more contact with CAMHS and with the NT Gvt and the NT MHCoaition, in Darwin, in Canberra and MHACA became the peak body in the non-clinical approach of mental health recovery.

From the 2 programs of 2003, today MHACA’s structure shows 10 projects and a staff of 20 (besides the reference group). And we moved to the present location at Panorama Guth! All we can say is Thank you Claudia, who from Coordinator, then Manager, became General Manager as the tasks were developing.

All along, Claudia remained humble and reachable; participants or staff could always go to her to express their concerns or difficulties. Her subtle arbitration and conciliation skills have always provided resolution of conflicts without escalation. The circumstances that have led to her resignation were beyond Claudia’s or MHACA’s control. MHACA has been a happy place under her leadership. Thank you Claudia. Your footprint will remain.

We wish you well in your new endeavours and I am pleased to forecast a bright future to a person who was and remains passionate about the complex issues of mental health.

We now enter a new era for MHACA, and our wishes also go to Nick in his capacity as our new General Manager.

Maya Gifali
(MHACA’s Secretary in 2012)
“Thankfully we are not all perfect or we wouldn’t need anyone else. At work, Pareto’s rule says that 20% of what we do is responsible for 80% of our results. We should strive to be excellent (not perfect) on those critical actions that contribute to the majority of our success, and let go of the micro management of the rest.”

Graeme Cowan, bestselling author of “Back from the Brink: Australians tell their story of overcoming depression” and “Back to the Brink TOO: Helping your loved one overcome depression”

What’s so bad about being perfect?

There is nothing inherently wrong with having goals and striving to achieve them. However sometimes our goals and standards are unrealistic and can contribute to stress. Perfectionism can rear its unhelpful head in a number of areas: from work and study to taking care of our personal appearance and housework.

Most of us can probably recognise the effects of perfectionism in ourselves or others. Striving for perfection can mean we take far longer than is needed in order to get a task done, avoid a task completely for fear we won’t measure up (otherwise known as procrastination!). The pursuit of perfection can even deny us enjoyment of our eventual successes and achievements because they fall short of what we were hoping for. It makes sense, that if we take regular steps to be “less than” perfect we can look forward to greater satisfaction and fulfillment when we achieve those goals. It will also mean that we might focus less on the negatives.

Being ‘less than perfect.’ Tips for dealing with perfectionism

If you feel you have unreasonably high standards for yourself in some area of your life try these tips for dealing with perfectionism:

- Try and recognise when your perfectionist tendencies are getting in the way of getting something done. Stop and acknowledge them.
- Try replacing your goal of perfection with something else. For example, instead of being driven to get the best possible mark for an essay, use the experience of writing the essay as an opportunity to learn something new.
- Check out your goals to see if they are realistic (maybe a friend or workmate could help with this). We can often set ourselves up for failure before we begin, by setting unreachable goals. Set smaller targets on the way for a big study, work or personal project so you can reward yourself for achievements you make along the way.
- Focus on the areas where you are experiencing success. If you are a parent, perhaps your kids didn’t get to bed on time, but they may have tried a new vegetable at dinner and along the way you found a new way to deal with the inevitable frustrations of being a parent.

Don't forget that changing your thinking will take time and practice; so don't be too hard on yourself if you can't break your habits overnight; and remember to focus on the more achievable goals.

Perfectionism and mental health issues

High levels of perfectionism have been associated with a range of mental health issues, including anxiety, depression and eating disorders. Some people may benefit from working through these issues with a mental health professional.

For information and referral call the Mental Health Information Service on 1300 794 991 or email info@mentalhealth.asn.au.

Useful resources
Also see: www.cci.health.wa.gov.au/resources/infopax.cfm?info_ID=52
This conference was attended by Laurencia Grant, Valda Napurrula Shannon Warndaparri from Mental Health Association of Central Australia and Anthony Ah Kit from Mental Health Top End; he is a Suicide Story Training mentor and member of the Suicide Story Aboriginal Advisory Group. The Conference was located at beautiful Coogee Beach and took place during the ten year anniversary of the Bali bombings. Coogee and nearby Randwick in Sydney lost 20 people in the bombings and while we were there a commemorative ceremony was held at the memorial site nearby.

Valda explained that “I missed my bus down to Alice on Monday night because my family were out at Ampilatwatja for the football sports weekend and we had car trouble on the return journey. I was on the bus at 3am in the morning to Alice and on the plane to Sydney around midday. By the time the plane was descending into Sydney I started to doze off to sleep. The taxi took me to Coogee Sands Motel where Laurencia was staying. After about two hours Laurencia called to see if I was alright and wanting to go down the street for dinner. At this time I somehow felt wide awake and interested, but very hungry. She took me to a great burger place and we sat and talked about the day, weekend and the conference.

The Conference was held at the Crowne Plaza Coogee Beach Sydney. This was an annual conference organised and run by Suicide Prevention Australia. At plenary sessions each day we heard from guest speakers in the morning and after lunch. These speakers came from various countries to share their experiences. I felt that these stories not only strengthen and connect us in the work we do: but also provide challenges to think differently and work creatively.

On Thursday morning we listened to the welcome address by Michael Dudley and Murray Bleach. The keynote speakers that morning were Professor Stephen Platt from Scotland and a photography presentation from New York. After the plenary session we then went into a room set aside for Indigenous presentations. We listened to other presenters share their information on their work in the communities. Laurencia, Anthony and I presented Suicide Story and received lots of positive feedback, comments and questions. Overall I felt excited and pleased in the way we are moving forward in different ways engaging with Indigenous communities.

After lunch our keynote speakers were Dr Thomas Joiner from USA and Jonathan Nicholas from Inspire Australia. These two presentations were excellent in the way they provided information. Dr. Thomas Joiner shared some insights on why people (men in particular) die by suicide and presented a theory looking at combinations of behaviour that could cause this to happen. Jonathan Nicholas gave a powerful presentation on the facts of online users worldwide.

The other keynote speakers I felt presented relevant information were Dr. Jerry Reed USA “we all hold a piece of the puzzle” everyone has something to contribute, and Prof Peter Chen of University of South Australia “Safety network project” focussing on good foundation on all aspects of training delivery”.

During the conference I had met up with many people that were interested in Suicide Story Training and the challenges we face in delivering training, planning and communicating with communities. It inspires me a lot to hear people are working creatively in the area of suicide prevention which is seen by many as a hard, sad topic. For me it is a good feeling to know that people are interested in Suicide Story training and the way we are making progress at community level. It was important to attend all Indigenous presentations to have some knowledge of what is happening in our communities. We split up and attended other presentations that were interesting and relevant to gain new information and knowledge. These are few other sessions that we attended:

“The cry from the bush” presented by Dr Peter Tyllis from South Australia Health talked about taking suicide prevention information out to communities. “Strengthening family resilience” was presented by Chris Harris of Youth Focus Western Australia - in his work the parents and youth are supported together by looking at relationship problems and solutions.

The topic of suicide self-harm and asylum seekers was presented by Dr Michael Dudley and a former asylum seeker. The story told by the African woman was very emotional and sad; she told us how life was difficult for her trying to come into Australia. She felt depressed and suicidal on many occasions. It gave us an insight to what could be happening to many people like her that are trying to come.

“Overcoming a dogma of resistance”
was presented by Karen Reval from Lifeline in Alice Springs and she told us how she was able to get into schools to work with teachers talk to children about suicide. The conference was great, I enjoyed talking to others about our work and was very privileged to hear first-hand stories from others in the work they do.

Jane Pirkis from University of Melbourne presented on the effectiveness of barriers at suicide hotspots. A 'suicide hotspot' is ‘...a specific, accessible and usually public site which is frequently used as a location for suicide and gains a reputation as such'(Beautrais et al, 2007)

Barriers have been put in place at various sites around the world as a preventive strategy for suicide. "Some of these prevention efforts have sparked controversy, with opponents reportedly objecting to them on the grounds of aesthetics and cost, and because of suspicions that they just 'shift' jumping suicides to other sites". However there is strong evidence that restricting access to 'hotspot' sites reduces suicides from those sites and there is a significant net reduction in deaths. We don't know whether this has a tangible impact on the overall suicide rate.

Susan Beaton's Churchill Fellowship explored alternatives to hospitalisation for people at risk of suicide. She argued that given that many people never seek help when they are in a suicidal crisis, we need to consider how we can;

- make services more appealing and accessible
- Reduce stigma
- Increase help seeking
- Increase ability of ‘others’ to identify people at risk and get them to help

She also suggested that what people in a suicidal crisis need is

- To be kept physically secure
- To find alternative choices to suicide
- Safety during immediate crisis period
- A safe holding place (physically, psychologically)

Murray Bleach the convenor of the Conference summarised the themes from the presentations relevant to Indigenous communities:

- to be effective, responses need to be culturally appropriate
- trauma and loss can be passed from one generation to the next
- suicide in Australian Indigenous communities is a recent problem
- the question of the role of “pay back” complicates suicide
- prevention efforts
  - one size does not fit all - each community is quite different so the necessary responses need to be different
- The responses and education need to accommodate local language
- Education may well be best via stories, pictures and drawings.
- There has been no or negligible evaluation of the programs even though the anecdotal evidence is positive.
- There was also a view that there was limited coordination of the broader suite of services provided to these communities.
- There was also a view that programs did not last for long.

A number of questions were put forward.

1. How can we ensure that the indigenous programs presented at the 2012 SPA conference can potentially benefit from mentoring and/or academic partnerships to enhance the design, evaluation and peer-reviewed publication of their interventions, and that appropriate resources can be identified and quarantined for these purposes?

2. How can evaluation experts learn from indigenous approaches to intervention and evaluation, to ensure that they are culturally specific and safe as well as effective. And that more specifically we evaluate the impacts of story, metaphor and artistic work as modes of intervention.

3. How do we identify and harness the protective factors and strengths in indigenous communities (e.g. cultural knowledge, social bonds and family ties, sport) for suicide prevention?

4. How do we network Australian indigenous programs for the purposes of mutual learning and sustainability?

5. How do we respect, identify and promote the diverse approaches that are needed in different indigenous communities?

6. How do we ensure alignment and leverage with the forthcoming national indigenous suicide prevention strategy?

Thanks to MHACA for the opportunity to attend this conference.

Presentations from the 2012 Annual National Suicide Prevention Conference can be downloaded via the Dropbox website at https://www.dropbox.com/sh/uxxm200025jwvlhf/WR1aB-jcP7w

A story of four people . . .

This is a story about four people named Everybody, Somebody, Anybody, and Nobody. There was an important job to be done and Everybody was sure that Somebody would do it. Anybody could have done it, but Nobody did it. Somebody got angry about that, because it was Everybody’s job.

Everybody thought Anybody could do it, but Nobody realized that Everybody wouldn’t do it. It ended up that Everybody blamed Somebody when Nobody did what Anybody could have. ~Author Unknown
The Mental Health And Substance Use Workforce For Older Adults: In Whose Hands?

Institute Of Medicine, Board On Health Care Services, Committee On The Mental Health Workforce For and Committee On The Mental Health Workforce For Geriatric Populations

Following its 2008 report highlighting the urgency of expanding and strengthening the geriatric health care workforce, the IOM was asked by the Department of Health and Human Services to undertake a complementary study on the geriatric mental health and substance use workforce. The Mental Health and Substance Use Workforce for Older Adults: In Whose Hands? assesses the needs of this population and the workforce that serves it. The breadth and magnitude of inadequate workforce training and personnel shortages have grown to such proportions, says the committee, that no single approach, nor a few isolated changes in disparate federal agencies or programs, can adequately address the issue. Overcoming these challenges will require focused and coordinated action by all.

ISBN: 9780309256650 | Publication Date: 2012-12-31

Mental Health In Australia: Collaborative Community Practice

Now in its third edition, Mental Health in Australia is the go-to reference on mental health for students, academics and practitioners. With a new four part structure, the book thoroughly covers the current context of mental health, clinical practice principles, and the assessment and management of mental health disorders. Taking a cross-disciplinary approach, Mental Health in Australia reflects a wide range of opinions and perspectives in the field of mental health care. This approach also allows the text to be used throughout a degree and into professional practice. Authoritative and up-to-date, Mental Health in Australia is the most comprehensive Australian book on mental health on the market. New to this edition: A new four part structure Three new editors bringing their teaching and professional expertise Four new chapters: Psychopharmacology, Psychological Therapies, Supporting Recovery & Living Well, and Eating Disorders Thoroughly updated to reflect the current context of mental health practice A greater focus on recovery and social reconnection Mental Health in Australia is also available as an e-book.

ISBN: 9780195574883

Foundations Of Mental Health Care

Michelle Morrison-Valfre

Increase your awareness and understanding of a holistic view of mental health care with this book for nurses and other health care professionals. Each chapter covers a specific psychological or psychosocial problem as well as the most current interventions and treatments. This edition features full-color illustrations, updated drug information, and a chapter on complementary and alternative therapies, in addition to more case studies to help you apply the content to real life. This solid background in mental health is just what you need to work comfortably with clients who exhibit both effective and maladaptive behaviors. Multidisciplinary care plans for sample clients show how members of the health care team work together. Client-specific case studies highlight particular mental disorders and help you apply chapter content to real-life situations.

ISBN: 9780323086202
Mental Health And Stress: Wellness Solutions Before A Crisis

Marissa Young

Enjoy reading my book, as you will see what hallucination means. Of course, not everyone has the same as mine, and some may not have them at all. Most of all, I hope you can extract ways to help yourself in difficult situations, be it your health of any kind, anger management, low self-esteem, recognizing signs and symptoms, or pacing yourself. It could be with the help of medication, stress management, and counselling therapies, both on a one-on-one basis and a group basis, where we share all our ideas to help keep one another afloat.

ISBN: 9781477274699

Simplicity: Creating Physical, Mental, And Emotional Health Awareness

Gord Lund

Gord Lund strives to live in uninterrupted harmony, peace, kindness, compassion, and love. He has been very successful in creating a positive image, vision, and goals for products and businesses; developing a reputation of taking projects from infancy to fruition; and maximizing potential in the harmony of respect.

ISBN: 9781452562278

Best Practices in Community Mental Health: A Pocket Guide

Vikki L. Vandiver, Portland State University

Best Practices in Community Mental Health: A Pocket Guide is a quick reference guide to best practices that are essential for providing comprehensive, holistic care. Intended for use across a wide range of disciplines within mental health—social work, counseling, psychiatric nursing and rehabilitation, public psychiatry—the pocket guide offers a well-rounded foundation of services that can be adapted to each practice setting. This comprehensive but compact overview lends itself well to in-service trainings and makes an ideal companion for students in mental health internships and practicums. The accessible, actionable format spares busy professionals the need to hunt through long textbooks and articles for the information they need right away.

This pocket guide is the first book of its kind to compile such a diverse set of practices, providing essential theory and background for each one, along with a review of available evidence, steps for implementation, and strategies for assessment and evaluation. Each chapter opens with a case study that provides an insider’s perspective and closes with a glossary and links to online resources.

‘Cranky Old Man’...

What do you see nurses? ... What do you see?
What are you thinking ... when you're looking at me?
A cranky old man ... not very wise,
Uncertain of habit ... with faraway eyes?

Who dribbles his food ... and makes no reply.
When you say in a loud voice ... 'I do wish you'd try!'
Who seems not to notice ... the things that you do.
And forever is losing ... A sock or shoe?

Who, resisting or not ... lets you do as you will,
With bathing and feeding ... The long day to fill?
Is that what you're thinking? ... Is that what you see?
Then open your eyes, nurse ... you're not looking at me.

I'll tell you who I am ... As I sit here so still,
As I do at your bidding ... as I eat at your will.
I'm a small child of Ten ... with a father and mother,
Brothers and sisters ... who love one another

A young boy of Sixteen ... with wings on his feet
Dreaming that soon now ... a lover he'll meet.
A groom soon at Twenty ... my heart gives a leap.
Remembering, the vows ... that I promised to keep.

At Twenty-Five, now ... I have young of my own.
Who need me to guide ... And a secure happy home.
A man of Thirty ... My young now grown fast,
Bound to each other ... With ties that should last.

At Forty, my young sons ... have grown and are gone,
But my woman is beside me ... to see I don't mourn.
At Fifty, once more ... Babies play 'round my knee.
Again, we know children ... My loved one and me.

Dark days are upon me ... My wife is now dead.
I look at the future ... I shudder with dread.
For my young are all rearing ... young of their own.
And I think of the years ... And the love that I've known.

I'm now an old man ... and nature is cruel.
It's jest to make old age ... look like a fool.
The body, it crumbles ... grace and vigor, depart.
There is now a stone ... where I once had a heart.

But inside this old carcass ... A young man still dwells,
And now and again ... my battered heart swells
I remember the joys ... I remember the pain.
And I'm loving and living ... life over again.

I think of the years ... all too few ... gone too fast.
And accept the stark fact ... that nothing can last.
So open your eyes, people ... open and see.
Not a grumpy old man. Look closer ... see ... Me.

Remember this poem when you next meet an older person
who you might brush aside without looking at the young soul
within ... we will all, one day, be there, too.

"The best and most beautiful things of this world can't be seen
or touched. They must be felt by the heart."  Helen Keller

Gentle
Lessons
from
a
'Cranky Old Man'...

When an old man died in the geriatric ward of a nursing
home in country NSW, it was believed that he had nothing left
of any value. Later, when the nurses were going through his
meagre possessions, they found this poem (see next column).
Its quality and content so impressed the staff that copies were
made and distributed to every nurse in the hospital. The old
man's sole bequest to posterity has since appeared in the
Christmas editions of magazines around the country and
appearing in magazines for mental health. A slide presentation
has also been made based on his simple but heartfelt poem.

This old man, with nothing left to give to the world, is now
the author of this 'anonymous' poem winging across the Internet.
It is a gentle reminder to not make assumptions about others –
whether based on their age, race or mental wellbeing –
but to humbly and respectfully stay open to the richness
of other people's journeys ...
What’s On... Workshops... Conferences...

12th National Rural Health Conference
Adelaide, 7-10 April 2013
Strong Commitment. Bright Future.

Show your commitment to a bright future for rural and remote communities in Australia by attending the 12th National Rural Health Conference in Adelaide next year. Every second year the National Rural Health Conference brings together consumers and a range of professionals to check progress and hear reports from across rural and remote areas. It is an opportunity for the voice of the rural and remote health sector to be heard in mainstream media outlets and the corridors of power at federal, state and territory level.

http://nrha.org.au/12nrhc/

PHAA National Social Inclusion and Complex Needs Conference

15 - 16 April, 2013 - Hotel Realm, Canberra


‘Gender Matters: Determining Women’s Health’ promises to be vibrant and energising in every respect. Along with sharing expertise from across the nation and internationally it will be held in the wonderful heart of Sydney only minutes from after-Conference diversions such as the Sydney Opera House, Royal Botanic Gardens, Harbour Bridge, Art Gallery NSW, The Rocks and Sydney’s retail precinct.

The 7th Australian Women’s Health Conference is relevant to: service providers, policy makers, managers, researchers, women’s health, mental health, community health, social and community services, Aboriginal controlled services, migrant and refugee services, reproductive services, legal services, universities, disability services, allied health care, public health, educators, academics, local councils, Local Health Districts, Medicare Locals, Government, non-government and private sectors, volunteers and students.

Headspace …

Headspace Central Australia is a one-stop-shop where young people can come and talk to professionals who are specially trained to help young people deal with all the health problems they may have … even those really private ones. We are a community health service that provides FREE and CONFIDENTIAL doctors’ clinics, counselling, alcohol & other drugs counselling and info, and sexual health clinics for all young people aged 12-25.

Headspace timetable

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Acronyms & what they stand for...

♦ ACAP – Aboriginal Cultural Awareness Program (at hospital) – (08) 8951 7728
♦ ACGB – Australian Centre for Grief and Bereavement (03) 9265 2100
♦ ADSCA – Alcohol & Other Drugs Services Central Australia (govt) – (08) 8951 7580
♦ AIMHI – Australian Integrated Mental Health Initiative - (08) 8922 8196
♦ ASIST – Applied Suicide Intervention Skills Training - via Lifeline (08) 8953 1250
♦ ASYASS - Alice Springs Youth Accommodation and Support Services – (08) 8953 4200
♦ BSS – Bush Support Services (old Bush Crisis Line) 1800 805 391
♦ CAAAAPU Central Australian Aboriginal Alcohol Program Unit – (08) 8955 4600
♦ CAAC – Central Australian Aboriginal Congress – (08) 8951 4410
♦ CAMHS – Central Australian Mental Health Service (govt) – (08) 8951 7710
♦ CASA – Central Australia Supported Accommodation – (08) 8953 4311
♦ CARHDS – Central Australia Remote Health Development Service – (08) 8953 5500
♦ CAYLUS – Central Australia Youth Link-Up Service – (08) 8951 4236
♦ CRANA – Centre for Remote Area Nurses Association – (08) 8959-1111
♦ CVP – Community Visitor Program (re mental health treatment & care) – 1800 021 919
♦ D2DL – Day to Day Living Program @ MHACA – (08) 8950 4614
♦ DAS – Disability Advocacy Service – (08) 8953 1422
♦ DASA – Drug and Alcohol Service Association – 8952 8412
♦ DEET – Dept of Employment, Education and Training (govt) – (08) 8951 77734
♦ DVA – Dept of Veteran Affairs
♦ EASA – Employee Assistance Program Association (08) 8953 4225
♦ FACS – Dept of Family Services – 8955 6001
♦ GPNNT – General Practice Network NT – (08) 8950 4800
♦ hCA – Headspace Central Australia (08) 8958 4544
♦ IAD – Institute for Aboriginal Development – (08) 8951 1311
♦ LPP – Life Promotion Program @ MHACA – (08) 8950 4608
♦ LWB – Life Without Barriers – (08) 8955 6400
♦ MHACA – Mental Health Association of Central Australia – (08) 8950 4600
♦ MHCA – Mental Health Council of Australia - National Peak Body – (02) 6285 3100
♦ MHFA – Mental Health First Aid – 2-day training via MHACA – (08) 8950 4613
♦ NTCOSS – NT Council of Social Services – (08) 8951 4200
♦ SEWB – Social & Emotional Well-Being @ CAAC – (08) 8951 4457

Alcohol & Other Drug Services
♦ ADSCA – Alcohol & Other Drugs Services Central Australia – (08) 8951 7580
♦ Alcoholics Anonymous – (08) 8953 0802
♦ ASYASS – Alice Springs Youth Accommodation & Support Services – (08) 8953 4200
♦ CAAPU – Central Australian Aboriginal Alcohol Program Unit – (08) 8955 5336
♦ DASA – Drug and Alcohol Service Association – 8952 8412
♦ Holyoake Alice Springs – (08) 8952 5899
♦ Grog Mob - Congress - (08) 8951 4432

Young People's Services
♦ ASYASS – (08) 8953 4200
♦ Bush Mob - (08) 8953 3798
♦ CAAC – Youth Team – (08) 8953 3633
♦ CAYLUS – (08) 8951 4236
♦ Child & Family Health Service – (08) 8951 6711
♦ Family & Children’s Services – (08) 8951 5170
♦ Headspace Central Australia – (08) 8958 4544
♦ Teen Challenge – (08) 8952 4496
♦ Waltja Youth & Family Services – (08) 8953 4488

Other Services
♦ Centrelink 13 10 21
♦ Catholic – (08) 8952 9730
♦ Disability Advocacy Services – (08) 8953 1422
♦ NTCOSS (NT Council of Social Services) – (08) 8951 4290
♦ TEAM Health Respite for Carers – (08) 8953 4193

Emergency Services
♦ Alice Springs Police - (08) 8951 8888 / 131 444
♦ Alice Springs Hospital – (08) 8951 7777
♦ Beyond Blue Info Line - 1300 224 636
♦ Family Drug Support 1300 368 186
♦ Kid’s Help Line - 1800 551 800
♦ Life Line – 13 11 14
♦ Mental Health On-Call Team – (08) 8951 7710
♦ St. John’s Ambulance – (08) 8951 6616
♦ SANE Helpline - 1800 187 263

Mental Health Services
♦ Central Australian Mental Health Service (govt) – (08) 8951 7710
♦ Mental Health Association of Central Australia (non-govt) – (08) 8950 4600
♦ Mental Health Carers NT – (08) 8953 1467
♦ Community Visitor Program (re mental health treatment and care) – 1800 021 919
♦ Social & Emotional Well-Being – (08) 8951 4457

Medical Centres
♦ AS Hospital - After Hours – (08) 8951 7577
♦ AS Family Medical Centre – (08) 8952 7774
♦ Bath St. Medical Centre – (08) 8952 2000
♦ Central Clinic (Colocag Place) – (08) 8952 1088
♦ CAAC Congress – (08) 8951 4400
♦ Congress Akukira – (08) 8953 2727
♦ Family Planning – Clinic 34 – (08) 8951 7549
♦ Mall Medical Centre – (08) 8952 2744

Counselling Services
♦ ADIS (Drug & Alcohol) – 1800 131 350
♦ Alice Springs Psychological & Counselling Services (08) 8952 4374
♦ Beyond Breathing Space – (08) 8952 3638
♦ CatholicCare NT – (08) 8958 2400
♦ Congress SEWB – (08) 8951 4457
♦ Counselling Australia - 0409 097 005
♦ Domestic Violence Counsellor – (08) 8952 6048
♦ Employee Assistance Service – (08) 8953 4225
♦ Family Court Counselling Service –(08) 8952 8222
♦ Focus on Relationships – 0427 825 023
♦ Gay & Lesbian Phone Counselling - 1800 182 233
♦ Holyoake Alice Springs – (08) 8952 5899
♦ PJ Walcott Psychological Services - 0407 526 441
♦ Relationships Australia – (08) 8950 4100
♦ Sexual Assault Counsellor – (08) 8955 4500 Women’s Information Servicee – (08) 8951 8951

Accommodation (Emergency)
♦ Alice Springs Women’s Shelter – (08) 8952 6075
♦ Bill Bratling Flats – (08) 8952 3755
♦ Salvation Army Men’s Hostel – (08) 8952 1434
♦ Stuart Lodge – (08) 8953 0324
♦ ASYASS Ampe Akweke Place (for Mums & Babies) - 8953 2365
MHACA Membership
(please photocopy)

(memberhip is open to all people living in Central Australia and all organisations operating in Central Australia)

To become a member of MHACA and receive a copy of our newsletter inBalance and be kept informed about what’s happening in the mental health sector please send us your details:

Membership fees (please tick):

- Individual: $15
- Concession: $5
- Organisation/Corporate: $40

Do you or your organisation represent any of the following?

- Participants
- Carers
- Indigenous
- Rural Remote

Name: ______________________________________
Organisation/Dept (if applicable): ________________________
Address: __________________________________________
____________________________________________________
____________________________________________________
Code _____________
Phone: ________________________________
Mobile (if applicable): ______________________________
Fax: __________________________________________
Email: _______________________________________
Date: _________________________________________

Please complete and send with cheque or money order to MHACA, PO Box 2326, Alice Springs NT 0871
Phone: (08) 8950 4600 Fax: (08) 8953 5577
Email: info@mhaca.org.au

MHACA ... Building a Better Community

The Mental Health Association of Central Australia (MHACA) is a non-profit, community-based organisation that provides:

- individual support to people experiencing mental illness
- a drop-in centre, group activities & peer support program
- research and support in relation to suicide prevention
- training in mental health first aid & suicide intervention
- mental health promotion to help raise community awareness
- advocacy at local, state & national levels

Pathways to Recovery Program -
offers rehabilitation & outreach services which provide recovery-focused living-skills, training & support. We assist people with mental health issues to set and achieve goals aimed at independent living and integration into the community.

Prevention & Recovery Program -
provides intensive support to participants experiencing a relapse of a mental illness so we can reduce hospitalisation. We seek to reduce the impact of an acute episode by delivering individualised care packages.

Day to Day Living Program -
aims to help improve the quality of life for people experiencing mental illness by providing a range of weekly activities and support. These include a drop-in centre and peer support program.

Life Promotion Program -
works with Central Australian communities to develop strategies to address suicide and self-harm. The LPP team run a range of projects to help agencies, individuals and groups learn more about issues related to suicide.

Training & Promotions -
MHACA offers a range of services to help raise community awareness about mental health issues. These include training in Mental Health First Aid, the newsletter, community stalls and forums, and the MHACA website.

Homelessness, Housing & Support Program

The Homelessness and Housing Support Program provides training and life skills to guide people when they may be experiencing tenancy problems and/or homelessness

Advocacy & Participation -
MHACA advocates on behalf of participants, carers and other stakeholders at local, state and national levels. We support participants' participation on advisory committees (to influence government policy making & service provision), recruitment panels and the MHACA management committee.