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Winter/Spring 2025

End of Year Barbecue
Wednesday 3 December 11am to 1pm
Salthouse Community Centre, Haig Park Braddon



Join us to see out another year, catch up with old friends and meet new ones, as well as thank the efforts of our volunteers.

Click on or scan the QR to RSVP online or by email to actmhcn@actmhcn, call 02 6230 5796 or SMS to 0424 468 620 by Monday 1 December 2025.

From the Chair

May marked a turning point in Australia's mental health advocacy landscape. I attended the final meeting of the National Mental Health Consumer & Carer Forum (NMHCCF) in Canberra—a group that, for 25 years, gave voice to people with lived experience and their carers. As its funding ends, two new organisations will take its place: the National Mental Health Consumer Alliance and Mental Health Carers Australia.

The farewell was bittersweet. There was pride in what the Forum achieved, but also uncertainty about what lies ahead. In its final act, the NMHCCF released two powerful documents: a position statement calling for bold leadership and rights-based reform, and an updated advocacy brief championing a strong, supported peer workforce.

The National Mental Health Consumer Alliance, though only eight months old, is already making strides. At a recent board meeting, I saw firsthand their commitment to improving services and influencing policy ahead of the federal election.

Another moment that stood out was my visit to the Emergency Services Behavioural Assessment Unit (BAU), as part of the Seclusion and Restrictive Practices Review Committee. The facility's thoughtful design and approach to sedation—using droperidol instead of ketamine—reflect a growing focus on care and dignity.

In June, I spoke at the Mental Health Commissioning Strategic Investment Plan event, alongside a carer representative. It felt symbolic—honouring the past while stepping into a new chapter.

August brought another milestone: the Mental Health Peer Workforce Forum at the National Museum. Joined by Eva, Luke, and Lucas from the Network, we heard from leaders like Bradley Foxlewin, who reminded us that organisations must be ready to support peer workers before hiring them. Without proper preparation, the promise of peer work can be lost.



Key values for a strong peer workforce were discussed: safety, feeling valued, accessibility, supervision, accountability, training, placements, and system-wide support. Minister Rachel Stephen-Smith acknowledged the challenges in building this workforce and the delays in launching the Safe Haven site in Woden—highlighting the tension between institutional priorities and community needs.

Bradley closed the forum with a powerful reflection on the history of mental health treatment, urging us not to repeat past mistakes. As we move forward, we must build systems that honour lived experience and support real recovery.

Even as structures shift and new initiatives begin, one thing remains constant: mental health advocacy is rooted in respect, care, and listening.

Paul Thompson Chair

Introduction to Yilan

Hi, I'm Yilan. I'm the new Policy and Participation Officer at the Network. I'm thrilled to be working with mental health consumers in the ACT on local policy matters. I hope to help ensure that consumers' rights and decisions are better recognised, and to contribute to the empowerment of the mental health community in the ACT. I also look forward to connecting with people who share similar mental health experiences, even if our journeys have been different.

I'm currently completing my PhD in Human Geography, and lately I've been reading quite a bit of Chinese philosophy — something I've found personally grounding and helpful at this point in my life.



New Consumer Advisory Group for the Alliance

The involvement of consumers into the policy work of the National Mental Health Consumer Alliance (the Alliance) is undergoing a restructure inline with changes to how the Alliance conducts policy work.

Previously the Consumer Advisory Group (CAG), made up of consumers in each State/Territory peak, operated in a responsive manner to federal requests for feedback on mental health issues, which became difficult to manage providing a response within a limited timeframe. With the restructure, the CAG can now operate more proactively and identify issues regarding mental health that apply at a national level. The Network will be using our latest report, Access Denied (see page X), as the starting base to address the identified issues that emerged throughout the research process.

A second change in consumer involvement involves the formation of a second group.

For each and state and terrority, the peak consumer organisations now have an Affinity Group. The

Affinity Groups each focus on a specific demographic of the community. Consumers that identify as being part of the target group that form the Affinity Group will then investigate and address priority issues in the mental health system that are of national importance to their respective targe group.

For the ACT, the Affinity Group will focus on the Sistergirl, Brotherboy, Lesbian, Gay, Bisexual, Transgender, Queer, Intersex and Asexual (SBLGBTQIA+) community.

We look forward to this innovative process of using consumers' lived experience at a national level.





In memorium

Following our last newsletter, we have found out or received notice of some members who have sadly passed away.

Rudi de Jong

The Network has recently become aware of another member who has sadly passed away some time back in July of 2022.

People who knew Rudi would remember him as a gentle soul and poet. We extend our condolences to Rudi's family and friends and to members who knew him.

Jane Grace

Jane passed away on Saturday 13 September 2025 after battling ill-health for some years; it is our understanding that she passed peacefully in her sleep.

Jane was not just a member but a valued part of the mental health community, and her presence and commitment to consumer causes is an enormous loss to us all.

Jane played a pivotal role in various committees such as ACT Consumer and Carer Mental Health Research Unit (ACACIA) Advisory Group, Chief Psychiatrist Advisory (Mental Health Act Oversight) Committee and ANU School of Medicine and Psychology Community Engagement Group and policy reference group demonstrating her dedication and passion to improve mental health services for consumers.

Jane's passion, wisdom and strong spirit have left a significant mark in the mental health sector. She will be deeply missed by all who had the privilege of knowing and working with her.

Let us remember Jane's extraordinary contributions and the positive impact she made on all of us. Our thoughts and condolences go out to Jane's family and friends, as they navigate through this difficult period of loss and grief.



We will advise members of details to honor Jane's memory and the significant impact she had on our community as they become available.

Please join us in keeping Jane's family in your thoughts and reflecting on the wonderful legacy she has left behind.

New Report Launched: "Access Denied" Highlights Service Barriers in the ACT

In June, the Network launched its latest report, Access Denied: A Consumer-Led Study into Barriers to Accessing Mental Health Services in the ACT. This report shares real stories from people in the ACT who have struggled to get the mental health support they need.

The launch event welcomed research participants, community members, and special guest Minister for Mental Health, Rachel Stephen-Smith MLA, who spoke about the importance of the report.

The cover art was created by Jenny Adams and is now on display at the Network office. The project was funded by the ActewAGL Community Grants program.



From left: Dr Dia Andrews, Rachel Stephen-Smith MLA, Jenny Adams and Paul Thompson

The report is based on consultations with consumers in late 2024. It highlights the challenges people face when trying to access mental health services and offers insights that can help improve the system. It's a useful resource for:

- Consumers, who will see their experiences reflected
- Community workers and service leaders
- Policy makers
- Mental health professionals and researchers

The report received strong local media coverage, including an interview on ABC Canberra Radio and articles in the Canberra Times and Region Canberra.



Following the launch, the Network has presented the findings of this report to local government officials, the Capital Health Network and the ATODA Mental Health Alliance workshop.

National Impact

The Network also submitted a response to the Productivity Commission's Interim Review of the federal Mental Health and Suicide Prevention Agreement, highlighting the findings from Access Denied.

This report has sparked important conversations and opened doors for further advocacy and collaboration. Stay tuned for more updates as the Network continues to push for better access to mental health services.

Access Denied is available from the Network in print by request, though copies are limited, or you can download via our website.

The Consumer Voice in Action

Consumer Representative John F earlier this year spoke at two staff orientation sessions for the ACT's Mental Health, Justice Health, and Alcohol & Drug Services (MHJHADS). His goal was to help staff—both new and experienced—better understand the role of consumers in the mental health system.

At the first session in March, John shared the Network's Vision, Mission, and Goals, and highlighted a powerful message:





This helped staff reflect on how mental health affects everyone. John also explained how Consumer Representatives work on committees and shared the *My Rights, My Decisions* fact sheet. The session was well received.

At the second session in May, John spoke to a smaller group of nurses and social workers. While reactions were mixed, the presentation went smoothly and handouts were again shared.

These sessions help build stronger connections between staff and consumer representatives in the ACT mental health system.

Consumer Representatives Meet with ACT Policing

It is rare that we are able to visually show consumers some of the collaboration our Consumer Representatives do with stakeholders.

On 6 May, seven Consumer Representatives attended a catch-up session featuring guest speaker Peter Whowell from ACT Policing. Peter introduced the draft Correct Agency Right Engagement (CARE) Model—a new approach that ensures the right agency responds to health-related situations, with the person's care as the top priority.

The group was highly engaged, asking thoughtful questions and showing strong interest in how the model supports better outcomes for people in crisis.



From left: Katie, Michael, Eva (standing) and Peter Whowell (seated)

New Mentors

The Consumer Representative Program welcomes our newest Mentors who completed their training in October and November.

Mentors play a key role in supporting new Consumer Representatives as they begin their journey on committees and using their lived experience to effect change in the mental health system.



Making Consumer Representation and Self-Advocacy Training Easier to Access

We're making it simpler for people to take part in important training by creating online versions of our courses.

Consumer Representation Training Goes Hybrid

In April, Petra updated the Consumer Representation Training to a flexible format. Participants could complete online modules at their own pace, then join two group workshops—either in person or online. This method saw a large response in registrations, with varying levels of completion.

From this training method, the Network skilled up five consumers who can go on to become new Consumer Representatives.



Self-Advocacy Training Series

Between March and May, a five-part Self-Advocacy training course was held with the Education Reference Group. The sessions helped test the content and figure out what could work well online.

A survey of our volunteers was also undertaken to gather real-life strategies for self-advocacy. This survey received a great response and will help shape future Self-Advocacy workshops.



What's Next? Online Learning Platform

We're planning to host both training programs on an eLearning platform so people can access them anytime, anywhere. Options are being explored to see what the best platform would be for this. A shortlist of platforms is ready, and content development to begin soon.

The online Consumer Representation training will help develop the online Self-Advocacy workshop.

Stay tuned for more updates as we move forward!

Reflections from TheMHS 2025



The Mental Health Services (TheMHS) conference brought together a wide range of voices to discuss mental health services, lived experience, and future directions. A key theme was the importance of community, connection and genuine inclusion of people with lived experience in shaping mental health systems.

Keynote Highlights:

Mary O'Hagan, a New Zealand innovator with lived experience, spoke about the need to rediscover the "why" in relation to the mental health peer workforce. She highlighted the challenges of advocacy, including tokenism and lack of power and called for honest partnerships between peer workers and clinicians.

Dr. Rebecca Hontley shared her personal journey through trauma and discussed how trauma can be passed down through generations. Her talk emphasised the importance of community and connection in healing.

Opening Remarks:

Priscilla Brice (CEO National Mental Health Consumer Alliance) urged a shift in language, suggesting "mental health challenges" instead of "mental illness" and viewing stigma as a form of discrimination. She also pointed out that choice in care is often a myth due to high out-of-pocket costs for clinical services.

Panel Discussions:

The "Age of Collaborative Influence" panel stressed the need for leadership roles for people with lived experience, especially in rural areas. They emphasised truth, hope and breaking through the "clinical ceiling" that limits peer influence.

Consumer Reflections:

Consumers discussed advocacy priorities such as housing, ageing, regional inequalities, and cost of living. They called for strategic collective action and better union representation for peer workers.

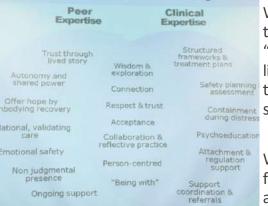
Another key message from the conference was that people with lived experience in mental

health are not all the same. While it can be helpful to come together under shared labels like "consumers" or "people with lived experience," it's important to remember that everyone's story and perspective is different.

When we act as if we all think or feel the same, especially without a clear reason or goal, it can lead to people feeling left out

or unheard. There's also some confusion about the purpose of the TheMHS consumer forum. It started in 1994 as an event created by and for consumers, but there isn't much information available about how it has changed over time. Sharing that history could help new attendees understand its role, while long-time participants might find it useful or reassuring.

In the end, listening to a range of voices and experiences is vital if we want to make real progress in mental health advocacy is essential for effective advocacy in mental health.



milical or Peer Work Align

Innovative Projects:

Several presentations showcased new tools and approaches:

- Digital apps like MOST and DRIV-R support young people and recovery but are mostly used when users feel well.
- Suicide prevention efforts in Queensland focus on community empowerment and mapping high-risk areas.
- Flinders University has a project that connects peer workers with GPs to reduce wait times for mental health support.
- Legal Aid training helps lawyers better support clients with trauma.
- Oral health initiatives address barriers like cost and stigma, especially for people on disability pensions.
- Physical health projects show how peer workers can encourage activity and reduce health risks.



Funny who you can run into at TheMHS

Systemic Issues:

- The National Human Rights Survey revealed widespread rights violations in clinical settings, including restraint and isolation, along with an unaffordable mental health system.
- There's a push to redefine peer roles and separate peer support, advocacy and workforce functions. Best practice goals suggest that at least 50% of health services should be led by people with lived expertise.
- Importance of involving individuals with lived experience in co-design processes.

Spiritual and Educational Insights:

Presentations explored the link between spirituality and mental health, and the challenges faced by lived experience educators due to stigma and lack of respect.

Closing Thoughts:

Kerry Hawkins from Community Mental Health Australia advocated for shifting away from clinical models toward community-based support.

The "Improving ED Response" initiative in NSW showed how training all Emergency Department staff, including security, in de-escalation and compassionate care can reduce violence and improve outcomes.



Overall people who attended the conference left feeling hopeful and inspired. The event showed that we need big changes in the mental health system, more genuine inclusion, and solutions led by communities. It also highlighted how important peer workers are, and why we need to listen to people with lived experience when shaping mental health care.

The fishbowl sessions were a standout. These gave everyone a chance to share their views and talk with presenters on equal terms. While this format can be tricky—especially when people have strong opinions, different ways of communicating, or limited time—it's a powerful way to support collaboration, research, and co-design. These sessions showed how inclusive approaches can lead to better understanding and stronger teamwork in improving mental health services.

This report on TheMHS 2025 was compiled by feedback from the following attendees: Eva D, Terri W, Lucas S, Jane G, Michael F and Assunta A.

My Rights, My Decisions workshop for consumers

My Rights, My Decisions is a free, hands-on workshop designed to help you plan ahead for your mental health care — in a way that feels safe, empowering, and practical.

Wednesday 26 November 10.30am to 2pm Network Office, Griffin Centre 20 Genge Street, Canberra City

Whether you've experienced mental health challenges or simply want to make sure your voice is heard during tough times, this workshop gives you the tools to:





- Understand your rights under the Mental Health Act 2015 (ACT)
- Learn how to choose a Nominated Person and create an Advance Agreement or Advance Consent Direction
- Get your own Form Kit, and learn how to complete and submit it so it's legally valid
- Start reflecting on your values and preferences with guided activities
- Leave with a folder full of useful resources including a workbook, fact sheets, a keyring and z-card

This isn't just an information session — it's a chance to take real steps toward protecting your rights and making sure your care reflects what matters most to you.

Click on or scan the QR code to register online or call Jo direct on 02 6145 0085 or email to peer.education@ actmhcn.org.au

The Ward comic series

As we like to include contributions made for our publications, the Network is pleased to make available a comic strip, written and illustrated by Shane Whyte. The first few panels are now available.











We look forward to seeing how Heath's story unfolds in future installments.

Have your Human Rights been upheld in 2025?



The National Mental Health Consumer Alliance has launched Australia's only national Human Rights Survey designed by and for people with lived experience of mental health challenges.

They want to hear how your human rights were upheld—or breached—in 2025. Whether in mental health, justice, health, or other systems, your story helps us track where Australia is meeting its international obligations under the UN Convention on the Rights of Persons with Disabilities (UNCRPD).

Your responses are completely anonymous and will be analysed by the lived-experience research group ACACIA. The results will shape national advocacy to make sure human rights are real for all mental health consumers.

Take the survey now - closes 31 December 2025.

Link: https://www.surveymonkey.com/r/AllianceHR2025



Mental wellbeing looks different for everyone. It isn't just about pilates and green smoothies (although we do love those things), and it's not reserved for those with time or money.

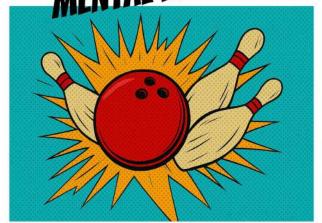
It's a human need and we all need to prioritise it.

For 2025 Mental Health Week saw a variety of activities being held including the Awards Ceremony on Friday 10 October 2025. Awards were presented across 13 categories, with winners including Shift & Co, Alan Taylor, Alix Keyes, Winnunga's Wellbeing Program, Tanya Keed, Lloyd Taylor, LewChing Yip, Peter Harris, Shauna Winram, Safe Haven Belconnen, Pippa Newman, David Greenwood and Jennifer Adams; commendations were awarded to Katrina McLean, Zeenat Burdick and Sonali Varma.

Congratulations to everyone!



STRIKE UP SOME FUN FOR MENTAL HEALTH!



For Mental Health Week, the Network revisited an event that we held for 2020 (good times!) and held a games day at Kingpin Canberra.

This saw a great turn out of people from all across the community come in have a game of bowling or played some darts (with lunch of course), which is always great to see.











Upcoming Events and other Notices

We're using Facebook more these days — and it's a great way to stay informed about upcoming events, ways to get involved in mental health related activities, or just see what the Network and associate organisations are up to.

Hit subscribe on our page and you'll be the first to know!

We'd love to connect with you, so come join the conversation:

Follow us here https://www.facebook.com/actmhcn/



RSVP online by scanning the QR Code



or by using our contact details on the back page.

2025 Annual General Meeting

The Network will hold our AGM on

Tuesday 18 November 2025 from 11am to 1pm

Room 8, Level 2, the Grffiin Centre, 20 Genge Street, Canberra City.

Formal notice and other documents for this has been sent to all members. If you require any copies of AGM documents, these can be accessed from our website: https://actmhcn.org.au/2025-annual-general-meeting/

Nominations for the Board are due 3pm Monday 17 November

Proxy forms are due by 11am Tuesday 18 November

End of Year office closure

As we crawl towards the end of the year, the Network will be closed from

Monday 22 December 2025 to Friday 2 January 2026.

Within our office, we have been looking at making some layout changes in the Members Area, to allow participants more space when attending our forums and workshops and to give us some space to properly store furniture etc.

In order to do this, we have a LOT of existing resources and other items that we have to review and decide whether to keep or dispose of. This is expected to be very time consuming. So we can get this done, the Network office will be softly closed from 1 December through to 22 December, with the exception of a few official activities.

We can still be contacted throughout this period; however, please bear in mind that there may be a delay in responding to any enquiries or messages.

Changes to ADHD Assessment Referrals at Adult Community Mental Health Services

Starting 1 October 2025, Adult Community Mental Health Services (ACMHS) will pause new referrals for adult ADHD assessments. This means they will stop adding new people to the waitlist for these assessments.

Why is this happening?

ADHD assessments have been offered by ACMHS for about 15 years, but demand has grown and wait times are now very long—some people have waited over two years. Most people on the waitlist end up seeking private assessments during this time.

To help meet demand more quickly, the ACT is shifting ADHD assessments to General Practitioners (GPs). Many GPs are already preparing to offer these services with proper training and support. This change follows a national trend toward using

primary care for ADHD support.

What does this mean for you?

- If you're already on the waitlist, you will still receive your assessment and care.
- If you submit a referral after 1 October, it will not be accepted by ACMHS.
- You can still speak to your GP about other mental health referrals.

This decision will be reviewed after six months to see how things are going and whether adjustments are needed.

Feedback or requests for additional information regarding this proposal can be directed to CHSGMMHJHADS@act.gov.au

About the Network

The ACT Mental Health Consumer Network is an organisation that is run by consumers for consumers. Our aim is to bring about a higher standard of health care in the mental health sector, through representation, lobbying and active involvement in new developments in the mental health sector.

Our organisation is extremely committed to the rights of mental health consumers.

We promote a respectful and accepting system that involves Consumers, Carers and Professionals listening and respecting one another in an active healthy relationship. We also promote the development of support structures for all these groups.

All people who identify as being a mental health consumer are welcome to join the Network. An application form can be found on the following pages or by filling out and submitting via our website.



Opening hours

Monday to Friday 9am-3pm (excluding public holidays)



Level 2 Room 11 Griffin Centre 20 Genge Street, Canberra City GPO Box 836 Canberra ACT 2601



02 6230 5796 actmhcn@actmhcn.org.au



actmhcn.org.au facebook.com/actmhcn/ youtube.com/@actmhcn

Members Area

The Members Area is a space within our office where we hold our various forums, consultations and other events for consumers.

The Members Area computer stations can also be used by our Consumer Representatives to attend online Committee meetings by arrangement.

Informal events for consumers to learn

about services and programs in the ACT, learn new skills and meet other likeminded people are usually held on Thursdays when planned.

The Members Area is available for community groups

to hold centrallybased groups and meetings.

The Members Area can accommodate up to 20 people comfortably.



There is also an interactive whiteboard, conferencing camera and kitchen facilities available.



Contact us to make a booking.



MEMBERSHIP TYPES AND CRITERIA

Primary Membership

mental illness

· Has lived experience of

APPLICATION FOR INDIVIDUAL MEMBERSHIP

NB: Individual membership is free.

Associate

May have lived experience of mental

illness but does not live and/or accesses

Lives and/or accesses services in the ACT		 services in the ACT Is a carer or support person of someone with mental illness Supports the aims of the Network (Associate memberships need to be renewed annually) 			
I AM APPLYING FO	D.				
□ Primary Membership		☐ Associate Membership	☐ Associate Membership		
CONTACT DETAILS	*Your name a	nd at least one contact address/email	is required		
Title:		☐ Ms ☐ Miss ☐ Mx ☐ Other			
Preferred Pronouns	☐ He/Him ☐ She/Her ☐ They/Them ☐ Other				
First Name:		**************************************			
Surname:					
Address:					
Postal Address:					
(if different)					
Email:					
Home Phone:					
Mobile Phone:					
Other contact:					

COMMUNICATION PREFERENCES:								
What is the BEST way	□Em	ail	☐ Home Phone	□ Post				
for us to contact you?	□ Tex	αt	☐ Mobile Phone					
Do you want to receive	☐ Ye:	s by email	☐ Yes by post					
Newsletters and other information?								
How should we send	□ Но	ne Address	□ Postal Address	□ Email				
information about	Pleas	Please note we are required by law to provide all						
General Meetings?	memb	members with notice and other documentation about						
	Gene	ral Meetings.						
DEMOGRAPHICS								
Year of birth:								
Aboriginal:	□ Yes □ No							
Torres Strait Islander:	□ Yes □ No							
Language other than								
English:	☐ No, English only							
Gender: □ Woman □ Man □ Transgender □ Non-Binary								
□ Other:								
Please contact me about (Primary Members Only)								
☐ Free training events								
☐ Discussions, forums and projects								
☐ Volunteer opportunities (with reimbursement of costs)								
☐ Helping with e	vents							

Thank you for taking the time to complete and return this information