



ANNUAL REPORT

October 2018

*Replacing stigma and discrimination with hope and optimism...
creating community to support recovery*

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Chairperson's Report

People with BPD are marginalised and discriminated against. The good news is this is beginning to change, the bad news is that we at BPD Community we know that thousands of people are not getting the treatment and recovery support they deserve. This is our motivation for our organisation.

In Victoria we have over 1 million people who struggle with the impact of BPD on their lives, one in six of us – people with BPD, their families and friends.

Full recovery from BPD is possible and treatment is essential for recovery. Anecdotally, about 4,000 people in Victoria receive treatment in a year¹: 1.1% of those with BPD. This is the most direct impact of stigma and discrimination on those living with BPD. This means that hundreds of thousands of people in Victoria are without support.

BPD Community aims to fill the gaps: we exist to create a community to support recovery and work to replace stigma and discrimination - our programs and activities are designed for that purpose.

Since we first began our work in 2015, we have made a big difference, but there is so much more to do.

At this time of the year we celebrate our work over the previous year and thank all those who have generously and kindly given of their time and expertise. If it were not for the support offered by so many, we could not continue with the work we do. In particular the continued support of the City of Port Phillip, Star Health and our lawyers, Maddocks. The financial support of Murray to Moyne, Better Health Channel Bike Team was a great boost. The many who help us and who participate in our activities are our reassurance that our work must continue.

If you, like us, wish to have an impact and make the world a better place, we invite you to join in with us to create a community to support recovery.

Cheers!

A handwritten signature in black ink that reads "Barbara Hulle". The signature is written in a cursive style with a long horizontal flourish underneath.

Chairperson

¹ An estimate made by Dr Sathya Rao, Clinical Director, Spectrum. 2017.

Treasurer's Report

Summary

BPD Community Victoria Ltd has enjoyed stable financial performance over the past twelve months. We are more than able to cover all expected financial commitments over the next twelve months, even without additional revenue in that period.

The organisation depends on volunteers to maintain day-to-day operations and governance. Although, financial revenue and consequently, expenditure, is limited, through prudent financial decision-making, the organisation remains in a strong position to continue to meet ongoing necessary expenditure.

Financial Performance

Expenditure highlights

The key areas of expenditure for the organisation over the last twelve months were:

- IT infrastructure
- Merchandise
- Fundraising consumables
- Insurance
- External consultants

Revenue highlights

The key sources of revenue for the organisation over the last twelve months were:

- Fundraising
- Local government grants
- Merchandise sales
- Donations from community members and BPD Community Victoria Ltd Directors

The organisation receives anonymous financial donations via a 'donation box' at all public events it hosts, including the monthly Family and Friends Group. These donations are generally made in cash and the average donation is typically \$10 or less.

In Kind Contributions

The organisation is grateful for the in-kind contributions it receives from the community. Particularly the labour its volunteers provide to ensure the organisation is able to deliver its programs and advance its mission.

The in-kind contributions made in the last twelve months to the organisation are estimated to be in the order of approximately \$150,000.

Of those contributions, approximately:

- 60% is attributable to the work of the organisation's Directors;
- 15% is attributable to the work of volunteers, other than the organisation's Directors;
- 10% is attributable to individual expert consultants and advisors;
- 5% is attributable to use of Star Health facilities without charge;

- 5% is attributable to the advice, guidance and assistance provided by external organisations; and
- 5% is attributable to other varied smaller scale contributions.

Future direction

The organisation is well placed to commence the next stage of its growth aspirations having spent the last twelve months seeking expert advice and formulating a strong strategic plan.

Of primary focus for the organisation will be sourcing large sources of revenue from grants, fundraising activities and donations to implement the strategic plan.

Conclusion

It has been a privilege and honour to serve as a BPD Community Victoria Ltd Director over the last two years and in the role of Treasurer over the last twelve months. My two year appointment as a Director will come to an end at the 2018 AGM and this will mark my retirement from the organisation's Board.

The organisation is now poised to begin a new chapter in its evolving history and I encourage all members of the community to continue to support the organisation in whatever capacity they can as it embarks on this exciting journey.

Martin Stirling
Treasurer

Financial Position 30 June 2018

Assets	Cash at Bank	\$11,093.92
	Lavender merchandise inventory	\$898.00
Liabilities	Accounts Payable	\$0.00
Net Assets		\$11,991.92
Revenue	Fundraising	\$3,090.89
	Lavender Sales	\$997.00
	Donations from directors	\$827.75
	Donations from individuals	\$591.85
	Donations from corporations	\$4,186.36
	Government grants	\$5,000.00
Total Revenue		\$14,693.85
Expenses	Insurance	\$860.20
	Fundraising expenses	\$658.44
	Lavender merchandise	\$947.50
	Electronic services	\$851.80
	Catering	\$104.99
	Information technology hardware and software	\$885.00
	Consultants	\$4,650.00
	Marketing	\$155.10
	ASIC fees	\$78.00
Total Expenses		\$9,191.03
Cash Balance Statement		
Opening Balance 1/07/2017		\$5,591.10
Revenue		\$14,693.85
Expenses		\$9,191.03
Closing Balance 30/06/2018		\$11,093.92

Information Nights

Our Info Nights are a way for us to get together, to learn and consolidate our relationships and commitment to the work of BPD Community. Since our first Info Night in January 2015, a total of 319 people have attended these events. This is quite an achievement for an organisation with no resourcing or infrastructure and is credit to the commitment of those who volunteer, it is however unsustainable.

Providing accurate and up to date information is one of the key strategies to combating stigma and discrimination and the Info Nights have been an ideal way to address this. Over time our events have become better managed but maintaining the momentum has been challenged.

The Annual Celebration Night 5 Oct 2018, in BPD Awareness Week, presenter was Lisa Webb. Lisa spoke movingly of her life with BPD and passed on words of wisdom based on her experience, to the audience who listened spellbound. Listening to Lisa gives us hope that with the right supports a person can find their way to a fulfilling life. Lisa was inspirational. The audience of 36 was later entertained by local and international performer Zeke Ox who played guitar and sang songs of the important things in life, relationships and those we love. This annual event is our occasion to present to a wider audience the work of the organisation over the year. A special thanks to Lisa's family who did the catering and to the Muscats who were front of house organisers and to all 18 volunteers on the night.

The February Info Night was on the NDIS and was directed at an audience of carers. Sonya Savannah from Carer's Vic delivered the presentation. This was a difficult topic given that very few people with BPD get accepted into the NDIS. In fact most people with BPD don't get a diagnosis or treatment. Even so 21 people listened intently grappling with the challenges occurring in the mental system in Victoria.

The July Info Night was on Suicide Prevention and Alison Asche from the Suicide Prevention project of Greater Dandenong and Danial Rylatt of the Hope project at the Austin Hospital spoke to an audience of 21. The relationship between suicide ideation and suicide was helpful to learn. The shocking state of the emergency system in hospitals for people with BPD was again raised. In spite of the high prevalence of people with BPD who suicide and who attempt suicide, it was disappointing to note that it is not given a special focus in the current trials.

It was another year of successful Info Nights, 81% of participants at the Celebration Night described it as exceeding their expectations. The challenge is to be able to continue our Info Nights without the support of paid staff.

Family & Friend's Group

"I understand I am the only person I can control; we as a group support each other well; my relationship fluctuates." F&F Group attendee 2018

The Family and Friend's Program continues to grow and develop. This year saw the regular support from professional staff from Star Health Community Health Service at Sth Melb, the development of a co-mentoring program funded by the City of Port Phillip and the beginning of a Dandenong Group with ermha. It is with the support of these organisations we have been able to continue to have a significant and positive impact on the lives of so many.

By the end of the year, staffing cutbacks in the community mental health sector meant that support from these organisations was limited. Furthermore, funding for the program is still elusive, by the end of the year, all efforts to extend the program were withheld with the focus given to the Sth Melb group only.

The year saw a total of 98 attendances. Our thanks goes to Krishna and Kelsey from Star Health and Di and Julie from ermha. The introduction of the Co-mentoring Program stretched the limited resources of the organisation. The funding received was insufficient to attract suitable staff, subsequently drawing on the volunteer staff. As a part of the rationalisation of our resources, it was decided to trial not operating the F&F Group on the months of the Info Nights. The lack of continuity for the F & F Group consequently effected the group.

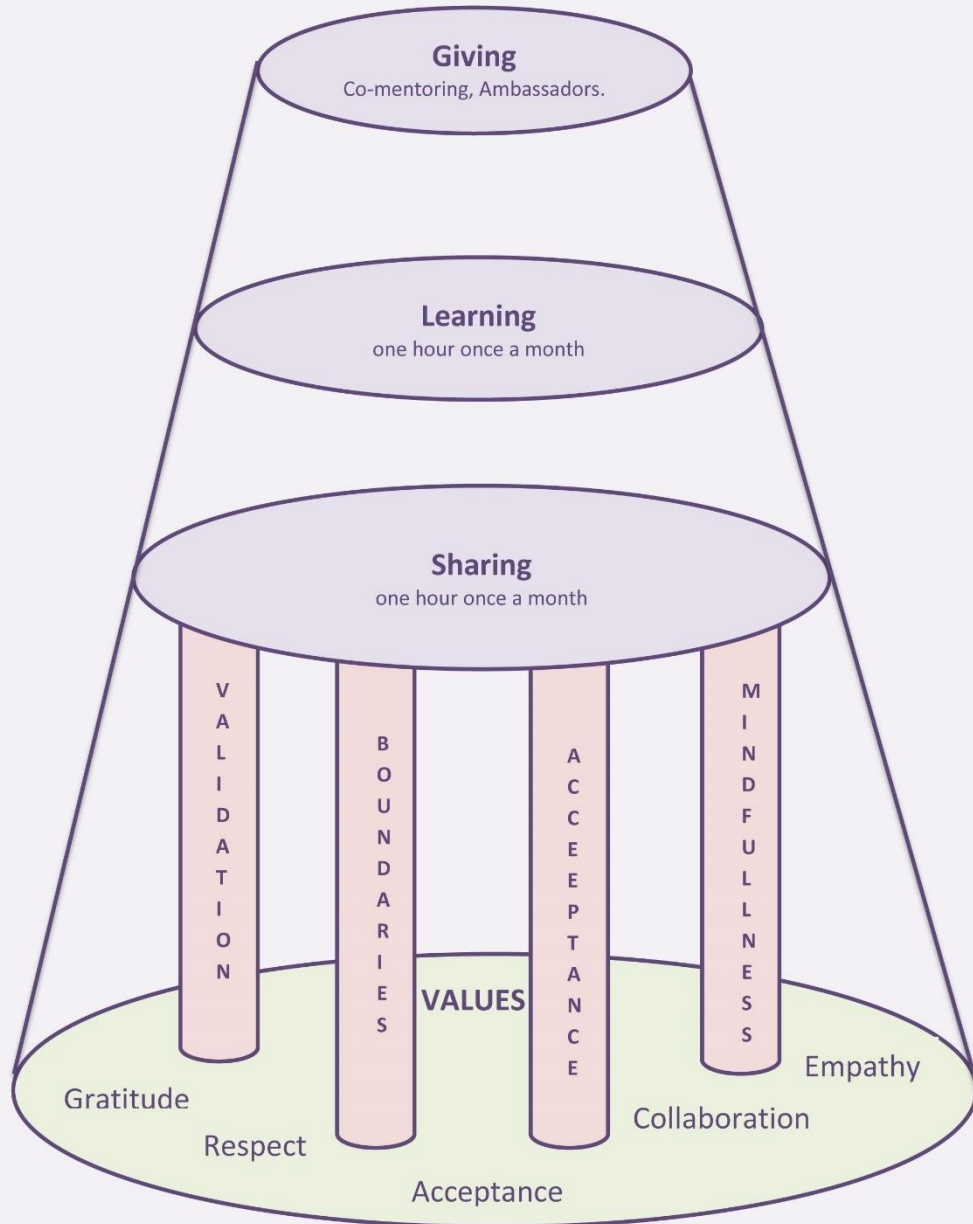
Since 2015 when we began this group we have reached out to support 65 individuals. The Sth Melb group had an average of 9.6 attendees each month. Data for the Dandenong group is not reliable since it has only operated twice. The need for the F&F Group is evident, some feedback was:

"definitely more confident, informative, relevant helpful; sharing of stories is definitely a supportive experience; it will help me improve my relationship"

"It was a great help; there was great information that helped me; relationship has definitely improved"

The F&F Group now has a fully developed Manual to support its operations and a sound model to describe its elements (see page 10). A future Co-mentoring Program also has a Manual to support the introduction of such a program. For the future, efforts are going to the development of an annual training program to accompany the support component of the group. In the meantime, continued funding will be sought to maintain operation of the group. The Ambassador Program and Co-mentoring Program are on hold subject to funding.

BPD COMMUNITY FAMILY & FRIEND'S GROUP



People with lived experience:

BPD Community aims to fill the gaps in the system. To work directly with people with lived experience requires the appropriate resourcing. For a few months a Recovering Club was trialled but lack of resourcing led to its cessation. So, BPD Community has put its efforts into researching what it means to have BPD in Victoria and what is important to support recovery.

The figures are shocking. If we accept the USA govt figure of a prevalence of about 6%, this equates to 350,000 people in Victoria with BPD. Of these we understand about 4,000 receive treatment (anecdotal estimate by Dr Rao). This means about 1% of people with BPD receive treatment.

We know that treatment is not the same as recovery. Treatment is a cessation of symptoms of a sufficient level so a person does not meet the criteria. It does not mean recovery – a completely different concept.

BPD Community wants to support recovery. And there are so many gaps in the system here, that anything that is attempted would be an improvement. Initial planning for a Community Hub which would incorporate working directly with people with lived experience to help them define and meet their personal recovery goals, a BPD friendly service, was undertaken.

The perspective that BPD Community offers as a grassroots organisation is different to what service organisations currently in the field do. Our organisational approach is centred on building relationships amongst each other, our overall goal is equality. This means our approach to this work is fundamentally different. Our challenge is to maintain this philosophy and gain funding for such a program.

Stigma and Discrimination

Our work to address stigma and discrimination can be described as multi-faceted.

We offer up to date and reliable information on BPD through our website which is user friendly and has accessible information. We have over seventy annotated research papers and articles categorised in subject areas, available to all through our website. We have our quarterly newsletter and monthly email updates. We aim to be accessible and available to all callers.

We develop training programs for those who work with people with BPD. This year we developed and delivered a short introduction to BPD for Port Phillip Housing Association. Plans are afoot to develop work this further.

We aim to work collaboratively with other organisations in the field. This behind the scenes work is constantly occurring and BPD Community is a strong advocate for its community with other mental health or allied organisations.

The discrimination that affects our community is what motivates us to continue.

Organisational Development

Working in the mental health field is fraught: the needs are so great and the resources so limited. BPD Community relies on its volunteers and this is unsustainable. The responsibility for the programs and activities and their management and implementation is completely dependent on these volunteers. BPD Community also relies on the pro bono support of individuals and organisations, without whom our work could not proceed. We value their work and support and are grateful.

The cuts to the Mental Health Community Sector this year in Victoria has added to our burden. Our support from within this sector was compromised when the mental health staffing was so savagely cut, people who would have helped us in our work, were no longer employed in the sector. This is unlikely to change in the short term.

In spite of these challenges, BPD Community this year built on its achievements and continues to doggedly work towards achieving its goals.

A considerable effort was put to developing our relationships with other organisations in the field. BPD Community began discussions with MIND (Aust) with a view to calling together all BPD organisations in Victoria together, to develop a collaborative approach.

The Development Committee is a new initiative which provides a pathway for those with lesser experience into the role of a Board member. This initiative should add strength to the Board composition, as the Development Committee finds its feet.

Developing the Strategic Plan was the main focus for the Board this year. A solid framework for the programs of the organisation, outcomes and KPIs were refined. Work was undertaken to align our language of planning with the Information, Linkages and Capacity Building (ILC) response of the NDIA given the theory underlying the development of BPD Community accords with the ILC focus. The mid-year review highlighted the concerns with spreading our efforts too thinly given the lack of resources and finances.

The Strategic Plan provides a framework for our activities and programs and our organisational development. It communicates the logic of our strategy to achieve our desired outcomes in simply and clearly. We are proud of the strength of our attention to governance, a priority of any Board. In the latter half of the year Wendy Brooks and Partners were engaged to undertake a Strategic Impact Review. This was presented in September and served to provide a focus for the new Board. A key element of the review was to hone the narrative for change with a Theory of Change (page 7).

BPD COMMUNITY THEORY OF CHANGE



BPD Community exists as a voice for all members of the BPD Community in Victoria. The organisation aims to foster an equitable society where people with Borderline Personality Disorder are empowered to make their full, amazing contribution.

To enable the formulation of this society, the unique journeys of those living with Borderline Personality Disorder must be recognised and supported. Given that this support is most often found in the care of family and friends, carers too must be supported and given opportunities to share experiences and develop interrelationships within the community.

With the knowledge that education is key to conquering stigma, BPD Community help to reduce stigma and discrimination within community through advocacy and building the capacity of the health care system, educating health care professionals working with people living with BPD.

Future Plans

On reflection, since 2015, we have grown rapidly and with enthusiasm in spite of the many obstacles placed in our path. We worked at being flexible and responsive, open and transparent and dedicated to our mission. In 2018, we discovered we could not continue to grow so rapidly without a cost to our volunteers, so by the end of the year we had begun to limit our range and extent.

What had happened? The NDIS was introduced and funding from the state government for other mental health services began to dry up, especially in the community sector. Our natural allies in our work were losing funding and we had no substantial funding to be able to support our existing programs.

BPD Community has a proven track record, sound governance but BPD in particular and mental health in general suffers from discrimination. So funding for our organisation and its programs is our challenge.

We are focussed on developing our capacity as an organisation; strengthening the programs we can offer, through a process of continual improvement and development; considering our priorities when determining where our efforts are best spent. BPD Community is preparing for the next stage in our development, readying ourselves for the next leap forward.



The Board:



Barbara Mullen

Chairperson

BA (Soc Sci), Grad Dip Ed,
MA Ed.;
Carer



Kevin Walsh RFD

Deputy Chairperson

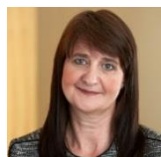
B Bus (Acctg), Masters
Risk Management; CPA;
Carer



Martin Stirling

Treasurer

Grad Dip Legal Practice,
LL.B., B. Bus
Solicitor.



Milva Bello
(resigned Jan)

Director

Dip Social Networking
Media (UK)
MBA (Melb), MMktg
(Melb).
Mgr Social Media



Kate Porter

Director

B. Textiles, AICD
International
Recruitment consultant.



Helen Robinett

Director

Leadership Style
Consultant,
Carer.



Steve Ballard

Consultant: Strategic
Partnerships

B A (Hons) Sociology, Dip
Soc Work, Cert Family
Therapy.



Bernadette O'Connor

Consultant: Governance

B App Sc, Grad Dip Ed, M
Public Policy;
Management &
Governance Consultant;
Carer.