

# Annual Report 2016/17

Formerly known as the Perinatal Mental Health New Zealand Trust





## **Behind the brand**

The basis of the PADA logo and brand styling is that of comfort and collective support in challenging times. There are many times during the perinatel period that parties experience many emotions and states of mind. PADA is an organisation looking to bring light and normalising of these moments.

The colours are representative of education (purple) and trust (green) with the sense of movement and connection. Staying away from dark colours is important to allow people to grieve and move forward. The shapes promote the coming together of parties and knowledge.

With the typography it is important to have a style that is both approachable and non-institutional when sharing knowledge and planning a path forward. The multiple colours provide an insight that these challenges do no discriminate.

**Grant Difford, Waking Giants** 



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## Bice Awan - Secertary, Wellington

As Skylight CE for 16.5 years, I developed a national not for profit organisation that operates as a social enterprise specialising in trauma, loss and grief. For four years while in the position I was also a Mental Health Commissioner. Both these positions led me to be touched by the need for services to support those where being pregnant and facing parenthood can be very difficult. Perinatal mental health was of particular interest to me as it appeared that there was no consistency of services around the country. I feel that PADA has, as a national

body, the ability to work with leaders in this area to make a difference to the quality of lives for infants, parents, family/whanau and all those connected with them. I bring this expertise, together with my executive leadership experience and governance experience to PADA to work with the passionate and capable team.

Together with the partnerships we forge, we will bring about the changes needed in this critical area. I am comfortable communicating with multifaceted stakeholders such as those representing corporate, government, community and professional sectors locally, nationally and internationally. This is important in the context of continuing to add value to the reputation and profile of PADA. I am a Scottish, Canadian, Kiwi with a BA (Com) from Strathclyde University, Scotland, BA(Hons) Health Studies York University, Canada and an MBA (Health Option) from Massey.



#### Carrie Cornsweet Barber, Ph.D., Waikato

I was working as a child clinical psychologist when, after two miscarriages, I was 26 weeks into my third pregnancy and finally feeling comfortable, like this one might be ok...then I started having contractions, and ended up in the hospital, and then on bedrest at home (out in the country, alone) for two months. It all turned out ok - my son decided to stay in there as long as possible, and eventually had to be extracted by cesarean, but it was the first step on my path toward an interest in helping other women coping with stress and distress during pregnancy

and in early parenting. I now train aspiring psychologists and work on developing tools to help new parents cope with the changes and challenges they face.



## Leigh Bredenkamp - Communications & Media, Wellington

I welcome the opportunity to further promote the mental health of women and men during the pivotal time when a family welcomes a new baby into their lives. Through PADA, I will continue to work to strengthen the awareness of mental health issues which can affect families when they are expecting a new baby or when they have young children. I believe the health and wellbeing of whanau of all cultures, ethnicities, religions and compositions is crucial for society to thrive. And for families to thrive, communities need to be educated, sup-

portive and well resourced. I would like to see mental illness de-stigmatised so that everyone can feel free to ask for - and receive - help in a timely and non-judgmental way.

I have worked in the field of communications for over thirty years, initially as a journalist, then editor and then as a communications advisor providing strategic communications advice and support to clients predominantly in the government and not for profit sector. Through my work I have developed an extensive network of contacts within the maternity and early childhood sector, I believe that if families can get the wrap around support and care they need at this time, they will be far better resourced to cope with the challenges of child rearing further down the track. Currently I am editor of Kiwiparent magazine and am the Communications Advisor to the Midwifery Council.



## Rona Carroll, Wellington

As a mother of three children and a health professional who supports families in the perinatal period, I have been privileged to hear many mothers (and fathers) share stories of their distress and struggles during this unique period in their life. I am a general practitioner (GP) with a special interest in perinatal mental health. I work at Evolve Youth Service where I support younger parents, and currently also work at the specialist maternal mental health service in Wellington. A more recent area of interest for me is acceptance and commitment therapy (ACT) and I am enjoying learning about ways to use this in my work with

parents and adolescents. I have an interest in breastfeeding support, and am a qualified lactation consultant (IBCLC) and a La Leche League leader. I am also a member of the maternal morbidity panel and am completing a postgraduate certificate in perinatal mental health through Otago University.



#### Brendon Smith, Regional Board Member, Auckland

As a new father, I sank into depression while trying to cope with the needs of my partner and two babies. I noticed the changes 10 years ago when my children were 6 months and 18 months, while watching their mother go through similar symptoms.

Even though I'd heard the term postnatal depression, I didn't really understand it. I didn't like going to work and I didn't want to see my mates. The symptoms continued for about a year after I left my role in IT sales to become a stay-at-home dad then aged 37. I have become a support worker for Father and Child, a Trust set up by fathers for fathers, based in Onehunga, Auckland.



## Nimisha Waller, Auckland

Nimisha is a Senior Lecturer in the Department of Midwifery, Faculty of Health and Environmental Science at AUT University. She has practised midwifery in tertiary units and as an Lead Maternity Carer. She has been a supervisor and a member of the competency review panel for the Midwifery Council of New Zealand, reviewer for New Zealand College of Midwives Midwifery Standards Review, and an NZCOM educator for the Midwifery First Year Practice (MYFP). She is an expert advisor and an Academic member/Deputy Chair on the Ministry

of Health Compliance panel that monitors the Code in New Zealand (Breastfeeding).

Nimisha has a particular interest in maternal wellbeing, diabetes and obesity, newborn, postnatal distress, traumatic birth and PTSD. Her doctoral study is on post-birth conversation between midwives and women, and the impact it has on them.

## **Ambassadors and Advisors**

Jude Dobson – TV Broadcaster / Producer

Liz Macdonald – Psychiatrist Mothers & Babies Service – Christchurch

Susan Goldstiver - Reg. Psychotherapist PND Specialist - Auckland

Emma Green - Registered Psychotherapist - Auckland

Dr. Sara Weeks - Psychiatrist - Auckland



## **Treena Cooper - Operations Manager**

I am the Administrator for PMHNZ working 10 - 15 hours per week for the last 18 months, thanks to National Lotteries funding. I worked for 12 years as a corporate travel consultant, so bring to the Trust valuable organisational and people skills. I helped to organize the 2013 National PND Symposium in Auckland and have implemented the very successful seminar series in 2014. I have two boys aged 10 and 11 and so spend lots of time being involved in school, sport and scouting activities and I also enjoy decorating cakes.



## Mel Byrne - Coordinator Social Media/Website/Finance and Membership

A mum to two girls aged 7 and 10, I feel fortunate to be in a role that allows me to give back to others experiencing perinatal distress. I'm thrilled to combine previous roles at Plunket, Geneva Healthcare, and Mediaworks, to work in a team motivated to make a difference. Perinatal distress affects the whole whanau and wider community, and PADA is embracing the power of social media to connect, and equip Health care providers, to improve outcomes for those affected throughout New Zealand.



## Maka Bagoni – Financial Coordinator

My role as the Financial Co-ordinator is a part-time role of 5 hours per week. I am responsible for the full finance function and I also support the team by providing financial advice. I am a Chartered Accountant with over 15 years post qualifying experience in accounting and auditing in a diverse range of industries. I love working for PADA because it gives me the opportunity to lend a hand to a great cause.



#### Gillian Ransom, Fundraising Manager

As a mum of two young boys I recognise that becoming a parent is the biggest life changing event a person can ever go through. I'm privileged to work in a job that allows me the ability to make a positive difference to families and whanau affected by mental illness related to pregnancy, childbirth and early parenthood. I've worked in a number of fundraising roles over the course of my career and I love the excitement and satisfaction that comes with fundraising for a good cause. With 25% of New Zealand women experiencing depression either during or after pregnancy, the work of PADA cannot be underestimated. For me, fundraising on behalf of families suffering some form of perinatal distress, feels like I'm contributing back to society



## **Board's Report**

This has been a busy and dynamic time at PADA as the organisation has undergone some significant change and has met a number of key developmental milestones over the past 18 months.

In 2016, long standing Chair and PADA founder, Rosie Smith, resigned. The board would like to acknowledge the considerable amount of time and effort that Rosie put into establishing PADA (know as the Perinatal Mental Health NZ Trust at that time). Her vision and drive set a solid foundation for the organisation to develop to meet the changing needs of care providers as they work with parents who are navigating the perinatal period. We remain deeply grateful to Rosie for all she has achieved. Thank you Rosie for all you have done for PADA.

Kiri Hannifin took over from Rosie as Acting Chairperson, but towards the end of 2016 she found her existing workload was too great and we reluctantly accepted her resignation. Treasurer May Zhang also resigned in February 2017 when she moved to a new position with greater responsibilities. During her period on the Board, May helped to add rigour and transparency to our financial processes and she made a significant contribution during her time with PADA. We were delighted to welcome three new board members at the end of 2016 – Dr Rona Carroll, GP in Wellington; Nimisha Waller, Midwife and lecturer in Auckland; and Carrie Barber, Researcher and psychology lecturer in Hamilton. The skills and connections of our new board members mean that we now have an impressive depth of clinical experience upon which to draw. Bice Awan, Leigh Bredenkamp and Brendon Smith continue as PADA Board members.

At it's planning day in February, the Board decided to adopt a flat structure and dispense with the need for a chairperson - rather focus on working collegially with each board member having an area of expertise for which they were willing to take responsibility and act proactively in cooperation with other board members and the professional staff. This approach works well with this board, with members being engaged and active.

It was heartening to see a number of plans that we had been working on finally come to fruition during this period. We launched the new PADA website in September, which incorporates valuable information from the Mothers Matters website. This new website is easy to navigate, has a professional look, and is easy for the PADA website coordinator to update content and keep fresh. We will continue to develop the website, with plans for an online booking system to be developed and for online payment facililites to be made available.



It was great to see the staff numbers grow with the welcome addition of a Fundraising Manager. Funding and sustainability remain a focus for this board as we look to develop income streams that will make PADA less dependent on grants and donations. There are many demands on the charity dollar and we know that we cannot rely on this form of income indefinitely.

At the recommendation of our Financial Controller, we have changed the publication date of our Annual Report to match our finacial year, not a calendar year - hence this report covers an eighteen month period.

We have continued to actively build our relationships with other individuals and organisations working in the perinatal mental health sector.

In early 2016 we were given the opportunity to work with Ingnite Consultants whom we asked to undertake an environmental scan of the perinatal mental health sector, including PADA's current place in it. We also asked them to provide suggestions as to how PADA's services could be delivered more effectively. Ignite found that multiple organisations already provide perinatal mental health support for mothers and their families, but identified three primary areas where services are lacking:

- Education of medical professionals
- Accessibility of treatment, including timeliness and referrals
- Alternate treatment options, primarily strong community groups

Ignite found that the services PADA provides are tailored towards training and connecting care providers, which contributes to filling this gap with our training seminars being particularly successful. They emphasised that PADA should focus on supporting care providers, as this is where there is a gap in the sector and where PADA has expertise and successful existing services.

Other recommendations included reworking the website, improving communication with members and interested parties, and looking at other ways of delivering information to care providers - like developing our range of topic specific resources, looking at the viability of online seminars and webinars, etc. Some of these recommendations we have been able to put into practice already, and are working on other initiatives as well.

The Board is indebted to the office team led by Operations Manager Treena Cooper. We know it is a highly effective and dedicated team who punch well above their weight in every area. We owe so much to them for the passion and commitment they show to PADA, as well as the support they give to the Board.



## Thank you for your contribution

Over the past year we have farewelled several board members who have moved on to new challenges. We would like acknowledge their hard work and commitment as they made a huge impact to PADA.



**Rosie Smith - founding Chair** February 2010 - July 2016



**Denise Garcia**November 2015



**Justine Pack England**December 2014 - December 2015



**May Zhang**February 2016 - February 2017



**Kiri Hannifin**October 2015 - October 2016



## **Operations Manager's Report**

PADA celebrated turning six years old in February 2017. The funding from Lottery Grants Board has enabled us to achieve some of our big goals over the past year and establish PADA as the go-to place for information on perinatal anxiety and depression. Symptoms of post-natal depression or antenatal anxiety range from thoughts of harming the baby and not being able to cope, through to child abuse and suicide.

Mid 2016, the PADA team grew to four with Maka Bgoni taking on the role of Financial Controller, working five hours per week after Lesley Withell resigned. We were also excited to welcome Fundraising Manager, Gill Ransom who was employed for 10 hours per week. Melanie Byrne, our Membership & Social Media Coordinator reached her two year anniversary in October working 15 hours per week and I was promoted to Operations Manager after working for three years at PADA.

In October 2016 we celebrated being in our office in Johnsonville for one year. Having the office enables the staff to work together as a cohesive and effective team, with increased communication and support. Grant funding has covered office related overheads such as insurance, electricity, telephone/internet and a portion of the rent. We have also been able to have onsite meetings with funders and other stakeholders like Plunket, Postnatal Depression (PND) Wellington, Neonatal Trust as well as meetings with our Wellington based board members. In September, we hosted our biannual PND Networking day with eight PND support groups from around NZ.

#### **National seminar series**

Over the past 18 months PADA organised and facilitated seven national seminars which were held in Greymouth, Tauranga, Lower Hutt, Auckland, Palmerston North, Dunedin and lastly Nelson on 31 March 2017. We also held a pop up seminar in Wellington featuring a world renowned psychiatrist, Adrienne Einarson, talking about antidepressant use in pregnancy and breastfeeding and her experiences setting up Motherisk (www.motherisk.org).

Over 500 care providers who are supporting multiple families affected by perinatal mental illness attended the seminars held by PADA around New Zealand. When participants leave each seminar they are better informed and have strengthened their knowledge and skills to improve perinatal outcomes for their clients. As a result of attending our seminars the care providers have more confidence in using screening tools (e.g. the Edinburgh Postnatal Depression Scale), leading to earlier referrals, a quicker recovery time for sufferers and better outcomes and less harm overall. Evaluation forms from the seminars are predominantly positive and show the necessity of the seminars.

Some of our seminars this year focused on minority groups covering Asian perinatal health, lesbian depression, pregnancy after abortion, and mental health issues associated with infertility. One of our aims with the seminars is to breakdown the stigma attached to people in these situations, so that people experience less judgement and are more likely to reveal what they are really going through and seek appropriate help.

PADA was represented at the North and South Island GP Conference & Medical Exhibition, World Maternity Mental Health Forum, Hutt Valley Maternity Expo, NZ College of Midwives Conference, Greenstone Doors seminar and the World Marce Conference in Melbourne.

Perinatal Awareness Week was held 29 October – 6 November 2016 with many successful events held around New Zealand to raise awareness of perinatal mental illnesses. PADA supported many events throughout New Zealand in association with regional Postnatal Depression (PND) groups and other support service providers.



PADA held three key Awareness Week events in Wellington: Bridget Jones Movie Night with supper, Brainwave Trust talk 'The Early Years Last Forever' and the High Tea and Depressed Cake auction. These events attracted both care providers and members of the public and it was great to see both groups mix in an environment that promotes the sharing of up-to-date knowledge and information. The community have a better understanding of perinatal distress as a result of attending these events.

The High Tea and Depressed Cake auction featuring bloggers/authors Emily Writes, Maria Foy and Leah McFall being interviewed by Jude Dobson. This was highly successful and was attended by 80 people who came together to listen to these brave ladies share their journey with antenatal and postnatal depression. We received such great feedback that we are running it again in 2017 in both Wellington and Auckland.

Maka spent time updating our accounts to fit with the new Charities Reporting Standards and has used more of the MYOB functionality for smooth processing of our invoicing and payments. She has helped create a budget and a new grant accountability tracking procedure.

After a review of PADA's technology, it was confirmed we needed a new website and CRM database.

The new website, www.pada.nz went live in September and is very modern and interactive and can be easily updated by Mel. It has up-to-date information with helpful resources and information relevant to both professionals and members of the public. This website will become the leading place for information relating to perinatal distress.

Our social media sites are frequently updated to broadcast our services with Facebook hitting over 1000 followers. A newsletter is now sent out quarterly using Mailchimp to over 3,000 contacts nationwide. Using grant funding we implemented Fundraiser Plus, a CRM system that will run alongside and enhance the website. The CRM will enable us to manage our contacts and membership data as well as allowing people to renew their memberships online and book and pay for PADA seminars through our website.

PADA will continue to be the 'go to' place for training and information about perinatal anxiety and depression. We have grown to a point where we are ready to start conducting research into families' experiences of pregnancy, childbirth and early parenthood and factors that may lead to mental illness. Gaining valuable statistics about perinatal mental health will help us understand the impact of our work and inform the best way forward for our organisation in the future.

The Ministry of Health reports that the mental health of young families is improving. Our role is to continue to contribute to this trend by responding to what research tells us and by listening to our clients and those who are experiencing perinatal mental health issues. We will continue to offer support to care providers who work with vulnerable families and provide support for mental wellbeing for all families and whanau in New Zealand.

Treena Cooper, Operations Manager

## Did you know?

New Zealand has around 60,000 births a year

40% of those experiencing postnatal distress will have experienced antenatal distress

That's 7000 mums, 3000 dads and 12,000 children affected in some way

"Presenting and attending the PADA seminar was a great way to network with others who work in the field of looking after mothers mental health. The wide range of topics presented gave new insights into areas I hadn't previously thought much about. Thank you for the well organised day"

Rona Carroll —



## **Lower Hutt**



"It was a wonderful opportunity, to be able to discuss the relationship between breastfedeing difficulties and societal pressure to breastfeed, and PND. Thank you!"

Liora Noy, Lactation

Consultant –

Lower Hutt







**Seminar speakers - Lower Hutt** 

- Winnie Duggan Fertility Associates Impact of Infertility
- Wendy Hill Greenstone Doors After Abortion A Forbidden

  Grief

  Grief
- Antoinette Benn and Emma Heaney-Yeatts PND Wellington -Support Available for PND
- Rona Carroll and Liora Noy Wellington Family Support Hub A
  Holistic Approach to Breastfeeding Issues and Maternal Well
  Being
- Kim Myhill and Andi Chapman The Lesbian Lens

#### Seminar speakers - Tauranga

- Penny Stevens & Sandra Patton Bay of Plenty DHB Perinatal Mental Health an Overview of Tauranga DHB Service
- **Eve Hemming** Te Korowai Collaborative Care for Perinatal clients from a Te Whare Tapa Wha perspective
- Debbie Graham Waikato DHB Medication and Breastfeeding
- Jan Klausen Waikato DHB Managing Secondary Tokophobia A Midwifery Intervention
- Clare Barnett Midwife/Nurse/Counsellor Perinatal Mental Health Assessment and Referral, and Self Care Practices
- Denise Coy Sands Bay of Plenty When your Baby Dies

"I thoroughly enjoyed sharing, presenting and hearing the other presentations. The primary message I took away with me was that there is always something new to learn and that we have a collective passion about supporting our clients who experience perinatal stress, anxiety, depression and a raft of social challenges. I established the enormous necessity for robust networking across the various disciplines, so as to ensure that we pool our resources and continue to enable one another.

Eve Hemming, Te Korowai - Tauranga

## **Palmerston North**



#### Seminar speakers - Palmerston North

- Karen Whiterod MidCentral DHB - Application and Critique of the Edinburgh Post Natal Screening Instrument
- Melissa Viviers Experienced Psychologist - Practical Coping Strategies for Mums Experiencing PND
- Robyn Girling-Butcher –
   MidCentral DHB Attachment relationships and working with Attachment Difficulties
- Toni Nicholson NZ Defence Force - Supportive Environments for NZDF Families
- Wendy Hill Greenstone Doors

   After Abortion A Forbidden
- Brendon Smith Father & Child Trust - Engaging with Dads





## **Nelson**

- Lois McTaggart Nelson Marlborough Health Maternity Quality & Safety Programme
- Debra Hardcastle Midwife/Lactation Advisor NBPH -Breastfeeding and Postnatal Depression
- Carol Marshall Ma's Place Addressing Isolation- the role of supportive community for maternal depression and anxiety
- Postnatal Support Nelson Working with mums suffering from PND
- Tatiana Ceban Postnatal Depression Marlborough Charitable Trust
- Willow Duffy Safeguarding Children Initiative -Attachment, child development, the mother-child interaction and my own experience of working with women experiencing PND.



"I have never gone away from a seminar & made a list of so many things to follow up" - Rosella O'Neil - Nelson

"The value of attending and presenting at PADA seminars is enormous for me.

Firstly, there is the ability to receive quality professional development that covers diversity and holistic practice within the perinatal field of anxiety, depression and mental-emotional wellbeing. Then there is the opportunity to network and form collaborative alliances that not only enhance practice, but also feed the inter-personal needs we have in the helping professions to be with like-minded people, people who understand our passions, and who care about quality care. Finally, its the ability to bring ourselves as consumers with our own narratives and ways of how perinatal wellbeing support and practice can be. It is a priority each year for me to ensure that a PADA seminar is on my agenda, and I compliment the organisation for the consistent way they deliver the goods on so many levels."

Clare Barnett, Casual Midwife Lecturer, Nurse/Midwife, Counsellor, Mentor, Supervisor and Mother. RCompN, RM, MCouns, BA, CTT, PGCert.Prof.Supervision



## Greymouth





#### Seminar speakers - Greymouth

- Chris Davey West Coast DHB Maternal Mental Health Pathway
- Erin Turley West Coast PHO Breastfeeding and Maternal Wellbeing
- Desma Reedy and Jose Timmerman West Coast DHB Integrated WCDHB, Maternal and Mental Health, Social Work Practice
- Maud Martin PND Canterbury PND101
- Sue Duff West Coast DHB Perinatal Mental Health: What to look for and how





## **Auckland**

"The Asian Health Services PADA workshop held in Auckland was the first of its kind. Asian peoples now 23% of the regions population and a quarter of births are to Asian women. The workshop offered insights into the presentation of PND in Asian women, risk factors, culturally appropriate interventions and information on services to refer to. Participants gained an improved understanding of presenting signs and symptoms for PND in the context of Chinese, Indian, Korean and Filipino cultures. More of these sessions would be greatly appreciated by maternal health services in the Auckland region."

## Seminar speakers - Auckland

- Dr Aram Kim Waitemata DHB -
- Post-Natal Depression Asian Women: Unique Challenges and Unique Strengths
- Eva Chen Wellbeing Trust
- Sue Lim and Annette Mortensen The eCALD® Cultural Competence and Perinatal Maternal Mental Health Resource
- Nimisha Waller School of Midwifery, AUT A Women's Perspective
- Chie Yumoto Counties Manukau DHB Caring for Hearts: Perinatal Mental Health Care for Japanese Mothers in NZ
- Brendon Smith Father and Child Trust Engaging with Dads





## **Dunedin**

#### Seminar speakers - Dunedin

- Justine Dahlenburg Southern DHB Antenatal Support
- Joy Pringle Plunket Maternal Wellbeing Service Maternal Wellbeing
- Cherie McKinnon Asking for Help reaching out
- Carolina Gnad Post Abortion Trauma Healing Service -Pregnancy, Birth and Post Partum Experience with Previous Termination
- Alison Wallace Queen Mary Maternity Unit Breastfeeding While Keeping Mental Health in Mind





## **Fundraising and Awareness Report**

You are invited to a fundraising event FEATURING A SCREENING OF



Penthouse Cinema 205 Ohiro Rd, Brooklyn, Wellington Friday 23 September at 8.30 pm

Light Supper from 8 pm
Tickets \$20
Raffle tickets available \$2 for 1, 3 for \$5
(can still be purchased if you can't make the movie – just email us)

Fundraising for Perinatal Anxiety & Depression Aotearoa To book tickets email <u>events@pada.nz</u> or 04 4616318



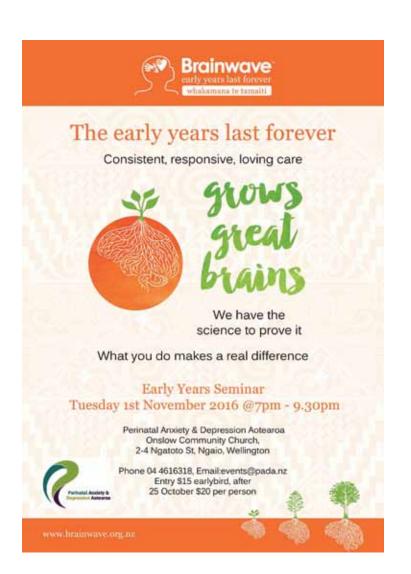


Fundraising took the form of applying for mulitple grants and donations and looking to form strategic relationships and partnerships with organisations active in the perinatal sector.

## Other initiatives included:

- Movie fundraising night
- 'Brainwave Trust information evening
- High Tea and depressed cake auction

Gill Ransom, Fundraising Manager









# **Fundraising and Awareness Report**



Our annual High Tea and Depressed Cake auction featured bloggers/authors Emily Writes, Maria Foy and Leah McFall being interviewed by media personality Jude Dobson.

This was highly successful and was attended by 80 people who came together to listen to these brave ladies share their journey with antenatal and postnatal depression.











Jude Dobson with Emily Writes, Leah McFall and Maria Foy.











"Thanks to all of you for your honesty – it's such a great thing to be able to tell your stories and today's event was inspiring. Let's work together to help destingmatise perinatal depression & anxiety and reach out when we see someone struggling."

Amy Arden – attendee at the High Tea





## Made by Marie

Having suffered from depression since my early teens I feel it can be a bit of an elephant in the room, it's there but people don't want to talk about it. You also learn to develop a strong hide. This is pretty much what inspired my elephant.



#### Baked by Beth

My thoughts behind this design were that the love and support of friends and family are very important for those dealing with anxiety and depression. Knowing that on your dark days, someone will be there for you, that you are not alone. That support can come from many 'branches'. The original design was done by Shawna McGreevy who gave me permission to use it as inspiration.



#### **Stiletto Studio**

My cake was inspired by a quote from one of my favourite Disney characters, Eeyore - "It never hurts to keep looking for sunshine". Eeyore is always open and honest about his feelings, and he's always supported by his friends - that seemed like a positive (and cute!) way to raise awareness for depression and anxiety.



## **Sugar Sisters**

The colour of the cake is muted to acknowledge the struggle of seeing colour in life and the beauty around us when life feels difficult or grey. The bursts of colour reflect that while these feelings may occur, beauty and growth are all around us. Our experiences, both positive and negative, define who we are and allow us to grow and learn as women and mothers.



## Little Miss B Designs

My cake is inspired from personal experience, that feeling of being surrounded by others but feeling so alone. You can have such great friends and yet feel that sense of solitude. I kept the cake simple, using imagery and a single figure to send a powerful message. Inside is a splash of colour based around the figure on the cake.



## Sweet Bakery & Cakery

While this amazing event is for a serious cause, which is close to our hearts, we also wanted to bring a smile and a bit of fun. Our design reflects our belief that when times are tough we're all about celebrating the little things and finding brightness - whether that's getting a message from a friend with a cute emoji or devouring a slice of delicious chocolate cake!



#### Ibicci

As my daughter's birthday falls inside Perinatal Awareness Week I was drawn to support this having suffered from depression most of my life. When I was pregnant, I used to worry like crazy whether I would be unselfish enough, good enough to be a Mum, about coping with having children when I didn't feel I could cope with looking after myself! This anxiety has carried through the years, and has caused much grief along the way. Why am I telling you all this? Depression stats are pretty high and raising awareness of both antenatal and postnatal depression is important. When depression touches families early in their parenting journey, it is vital that there is support. So - I decided to make a cake cookie, to be auctioned like the big ones!

## **Perinatal Support Networking Day**





In September, we hosted our biannual Perinatal Support Networking Day at our office in Wellington.

It is the second time we have been able to hold a day like this and was well attended by a range of PND support services from around New Zealand. It was an opportunity to make connections, talk about processes, group structure and sharing of resources.

The key findings were a lack of consistency of information available to parents as well as the ongoing problem of under resourcing of support groups. The group spent a lot of time discussing ways to improve services across New Zealand as, at present, there is a great disparity of maternal mental health services from one District Health Board to the other.

Back row: Emma Heaney-Yeatts (PND Wellington); Anna Hammond (PND Nelson); Wendy Hill (Greenstone Doors), ShelleyTempleton (Plunket Post Natal Adjustment Programme); Sonya Watson (PND Canterbury); Leigh Brendekamp (PADA board); Kiri Hannifin (PADA board).

Front row: Tatiana Ceban (PND Marlborough); Kym Maynard (Well Women Franklin); Justine Dahlenburg (Southern DHB); Jacquie Taleni (Plunket Post Natal Adjustment Programme); Antoinette Benn (PND Wellington).

## Raising the profile

#### Conferences and events attended on behalf of PADA:

Rosie Smith attended the International Marce Conference, Melbourne in September 2016

Treena Cooper and and Mel Byrne attended the World Maternal Mental Health Day in Wellington May 2017

Carrie Barber attended the 9-12 GPCME in Rotorua in June

Treena Cooper and and Mel Byrne attended the Hutt Valley Maternity Expo in July

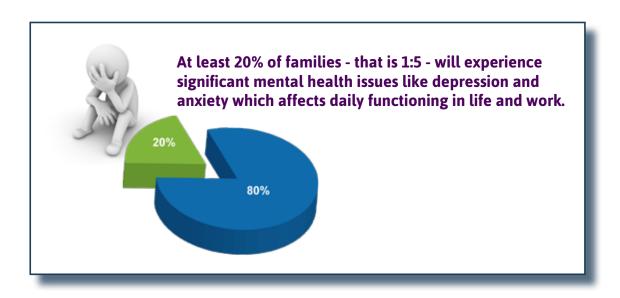
Liz MacDonald attended the GPCME in Christchurch in August

Treena Cooper and Brendon Smith attended the NZ College of Midwives Conference Auckland in August



PADA held a pop up seminar in Wellington in September 2016 featuring a world renowned psychiatrist, Adrienne Einarson, talking about antidepressant use in pregnancy and breastfeeding. She also shared her experiences setting up Motherisk

(www.motherisk.org)



## Trading as



# Financial and Service Statements\*

## For the Year Ended 31 March 2017

## Comprising

Statement of Receipts and Payments (Cash Flow)
Statement of Resources and Commitments (Assets and Liabilities)
Statement of Service Activity
Entity Information
Notes

\*The Financial and Service Statements comprise the 'Performance Report' for Charity reporting purposes.



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Statement of Receipts and Payments (Cash Flows)

| Statement of necespes and rayments (Casir riows)                        |         |         |
|---|---------|---------|
| For the period 1 April 2016 to 31 March 2017                            | 2047    |         |
| Operating Cosh Resolved   | 2017    | 2016    |
| Operating Cash Received   | \$NZ    | \$N2    |
| Donations, Fundraising and other similar receipts Grants                | 120.010 | 64.470  |
| Donations   | 120,819 | 64,473  |
|   | 766     | 19,190  |
| Fundraising income  | 7,355   | 1,234   |
| Total Donations, Fundraising and other similar receipts                 | 128,939 | 84,897  |
| Fees, subscriptions & other receipts (including donations) from members |         |         |
| Membership fees   | 556     | 6,180   |
| Total Fees, subscriptions & other receipts                              | 556     | 6,180   |
| Receipts from providing goods or services                               |         |         |
| Seminars  | 11,670  | 23,640  |
| Books and Resources   | 784     | 2,320   |
| Total Receipts from providing goods or services                         | 12,454  | 25,960  |
| Other Receipts  |         |         |
| Interest received   | 774     | 675     |
| Total Other Receipts  | 774     | 675     |
| -   |         |         |
| Total Operating Cash Received   | 142,723 | 117,711 |
| Operating Cash Paid   |         |         |
| Volunteer and employee related payments                                 |         |         |
| Board travel and training   | 4,922   | 11,660  |
| Wages, Salaries, ACC  | 61,511  | 27,896  |
| Employee expenses   | 1,435   | 1,654   |
| Total Volunteer and employee related payments                           | 67,868  | 41,210  |
| Expenses related to providing goods or services                         |         |         |
| Marketing   | 2,128   | 1,260   |
| Seminars and events   | 11,686  | 13,453  |
| Books and resources (for re-sale)                                       | 791     | 1,543   |
| Total Expenses related to providing goods or services                   | 14,606  | 16,256  |
| Grants and donations made   |         |         |
| Donations   |         | 400     |
| Total Grants and donations made   |         | 400     |
| -   |         |         |



# Statement of Receipts and Payments (Cash Flows) (Continued)

## For the period 1 April 2016 to 31 March 2017

| •   | 2017     | 2016    |
|---|----------|---------|
| Other payments                                      | \$NZ     | \$NZ    |
| Operational Expenses                                | 6,087    | 7,235   |
| Professional fees                                   | 589      | 4,559   |
| Rent  | 11,300   | 5,500   |
| Contractor expenses                                 | -        | 2,343   |
| Public Liability Insurance                          | 790      | 795     |
| Total Other payments                                | 18,766   | 20,432  |
| Total Operating Cash Paid                           | 101,240  | 78,298  |
| Operating Cash Flow                                 | 41,483   | 39,413  |
| Capital Cash Received /(Paid) (Investing/Financing) |          |         |
| Purchase of assets                                  | (18,224) | (783)   |
| Total Capital Cash Applied                          | (18,224) | (783)   |
| GST Movement  | \$4,649  | \$462   |
| Net Cash Flow                                       | 27,908   | 39,091  |
| Add Opening Cash Balance                            | 108,575  | 69,484  |
| Closing Cash Balance                                | 136,483  | 108,575 |
| Represented by:                                     |          |         |
| Bank Accounts                                       | 136,403  | 108,495 |
| Cash on Hand  | 80       | 80      |
|   | 136,483  | 108,575 |





# Statement of Resources and Commitments (Assets and Liabilities)

| As At 31 March 2017                        |         |         |
|--|---------|---------|
|  | 2017    | 2016    |
| Schedule of Resources (Assets)             | \$NZ    | \$NZ    |
| Bank Accounts and Cash                     |         |         |
| Cash at Bank                               | 136,403 | 108,495 |
| Cash on Hand                               | 80      | 80      |
| Other Resources                            |         |         |
| Books for Sale (Stock)                     | 514     | 534     |
| Significant Fixed Assets at Cost (Note 4a) | 21,524  | 3,300   |
| Schedule of Commitments (Liabilities)      |         |         |
| Seminar Prepayments                        |         | 2,465   |
| Unexpended Grants (Note 5)                 | 57,035  | 18,609  |
| GST payable                                | 5,111   | 462     |



# Statement of Service Activity

Mandatory disclosures according to s.4 of PBE SFR-C (NFP)

#### Outputs

The organisation held 5 seminars (2016: 7 seminars) during the financial year with a total of 121 participants (2016: 200 participants).





## **Entity Information**

## Mandatory disclosures according to s.3 of PBE SFR-C (NFP)

#### Type of Organisation

Perinatal Mental Health New Zealand is a Charitable Trust incorporated under the Charitable Trusts Act 1957.

## **Purpose of Organisation**

To improve outcomes for families and whanau affected by mental illness related to pregnancy, childbirth and early parenthood.

#### **Organisation Structure**

The organisation is governed by a Board of Trustees, supported by paid staff to manage the day-to-day operations of the organisation.

#### Main Sources of Funds

The Main Sources of funds for the organisation are grants from philanthropic and government funders, donations from the general public, income from service charges.

## Main Methods of Fundraising

The organisation regularly applies to philanthropic or government funders for grants and donations.

The organisation raises service fees.

The organisation holds fundraising events for members and the general public.

## Volunteers and in-kind Donations

The organisation receives occasional donations of goods or services but is not reliant on those for its day-to-day operations.



## Notes to the Financial Statements

## 1 Basis of Preparation

Perinatal Mental Health New Zealand is permitted by law to apply standard SFR-C(NFP) and has elected to do so.

Transactions are reported on the basis of cash received and spent in the Statement of Cash Flow. Significant amounts owed or owing are accrued in the Statement of Assets and Liabilities.

#### 2 Taxation

As a Registered Charity the organisation is exempt from Income Tax.

The organisation is registered for GST, and all figures are shown exclusive of GST with the exception of Accounts Payable or Receivable in the Statement of Assets and Liabilities.

## 3 Changes in Accounting Policies

There were no changes in accounting policies.

#### 4 Schedule of Fixed Assets

Items of Property, Plant and Equipment are shown at Cost. Applying depreciation is not permitted under this Reporting Standard.

## a. Significant Purchased Assets

|                        | 2017   | 2016  |
|------------------------|--------|-------|
| Asset                  | Cost   | Cost  |
|                        | \$NZ   | \$NZ  |
| Computers              | 2,345  | 1,665 |
| Banners (Promotional)  | 909    | 909   |
| Other Office Equipment | 833    | 726   |
| Website                | 17,437 | -     |
| Total                  | 21,524 | 3,300 |

#### b. Donated or Valued Assets

|                  | 2017           |
|------------------|----------------|
| Asset            | Value (if      |
|                  | <br>available) |
| Office Furniture | \$<br>-        |





## Notes to the Financial Statements

## 5 Grants

The following table shows grants that were received during the year, and any money not yet spent:

| 2017                                       |  | Received | Unexpended |
|--|--|----------|------------|
| Grantmaker                                 | Purpose  | \$NZ     | \$NZ       |
| Lottery Grants Board (2016)                | General operations   | 55,000   |            |
| Infinity Foundation                        | Seminar expenses for Gisborne,<br>Palmerston North and Dunedin Seminars  | 2,000    | 841        |
| Lion Foundation                            | Flights, Accommodation, 75% conference registration, and leaflets for NZCOM Conference                           | 2,000    | -          |
| Pelorus Trust                              | Rent   | 3,000    | -          |
| Pub Charity                                | CRM Software   | 10,232   | -          |
| Hutt Mana Charitable<br>Trust              | Porirua Seminar, Rent, Financial<br>Coordinator's salary   | 5,000    | 4,549      |
| Margaret Bear<br>Charitable Trust          | Porirua seminar  | 1,666    | 1,666      |
| John Ilot Trust                            | Salaries and wages   | 2,000    | 2,000      |
| ANZ NZ Staff<br>Foundation                 | Gisborne, Nelson & New Plymouth<br>Seminars  | 4,398    | 4,398      |
| Lottery Grants Board<br>(2017)             | General expenses and admin salaries  | 36,812   | 36,766     |
| Duncalfe family<br>bequest                 | The money is to be spent on resources<br>that highlight Ante Natal Anxiety and<br>Depression (Received Feb 2016) | -        | 6,815      |
| Lotteries Minister's<br>Discretionary Fund | Unspent grant paid back  | (815)    | -          |
| Lion Foundation                            | Unspent grant paid back  | (474)    | -          |
| Total                                      |  | 120,819  | 57,035     |

| 2016                                       |   |          |            |
|--|---|----------|------------|
| Grantmaker                                 | Purpose   | Received | Unexpended |
|  |   | \$NZ     | \$NZ       |
| Lottery Grants Board (2015)                | General operations                                | 60,000   | 17,754     |
| Lotteries Ministers'<br>Discretionary Fund | Cost associated with Adelaide Marce<br>Conference | 4,473    | 855        |
| Total                                      |   | 64,473   | 18,609     |





## Notes to the Financial Statements

#### 6 Related Parties

The following significant financial transactions have occurred with related parties during the reporting year:

## 2017

Relationship with Related Party

Transaction amount and type

Four Board Members

Donated facilitation hours to present at seminars and

conferences

2016

Relationship with Related Party

Transaction amount and type

**Board Member** 

Contracted for 130 hours of client relationship management

work for a total of \$628

Two Board Members

Donated faciliation hours to present at seminars and

conferences







80/82 Fitzgerald Ave PO Box 13 625 Christchurch Ph (03) 669 0542 @commaccounting.co.nz

# AUDITOR'S REPORT

#### Opinion

I have audited the Financial and Service Statements of Perinatal Mental Health New Zealand, a Charitable Trust and Registered Charity, for the year ended 31 March 2017. These statements include the Statement of Receipts and Payments, Statement of Resources and Commitments, Statement of Service Activity and the Notes.

In my opinion, the Financial and Service Statements provide a true and fair view of the cash flows of Perinatal Mental Health New Zealand for the year ended 31 March 2017 and their assets and liabilities at that date in accordance with the financial reporting framework for Registered Charities. The activities disclosed in the Statement of Service Performance provide a fair representation of those activities.

The audit was completed on 7 July 2017 and the opinion is expressed as at that date.

#### **Basis for Opinion**

I have been guided by New Zealand auditing standards ISA (NZ) in performing this audit in as much as they are applicable to small not-for-profit entities. The auditor's responsibilities with respect to such audits can be accessed here:

https://xrb.govt.nz/Site/Auditing Assurance Standards/Current Standards/Page8.aspx

An audit involves collecting and examining evidence that the information presented in the Financial and Service Statement correctly represents the actual financial activities and position of the organisation to a high degree of certainty and accuracy. This also means that the information given in the Statements must be complete with no significant omissions that may mislead the reader of the Statements.

Note that the requirement of completeness does not extend to the Statement of Service Activity, and the assurance in respect of this Statement is limited to the fair representation of information given there and does not contain an acknowledgment that this information represents all significant activities of the organisation.

I selected audit procedures relevant to the not-for-profit nature, size and type of organisation and considered the information needs of the likely users of the Statements predominantly in financial respects in doing so. These procedures involved, but were not restricted to:

- Gathering evidence that both cash receipts and cash payments are accurately represented
  and include all money received and paid by the organisation. Such evidence may include the
  organisation's internal processes and analysis of the organisation's transaction patterns.
- Gathering evidence that the presentation of the organisation's assets and liabilities is complete and, where dollar-values are available, that these are disclosed as required.
- Verifying compliance with accounting standard PBE SFR-C (NFP).
- Gathering evidence supporting the assertions made in the Statement of Service Activities.





80/82 Fitzgerald Ave PO Box 13 625 Christchurch Ph (03) 669 0542 info@commaccounting.co.nz

I have received sufficient and appropriate evidence to form an audit opinion. Other than in my capacity as auditor I have no relationship with or financial interest in the Trust, according to the Professional and Ethics Standard 1 issued by the NZ Auditing and Assurance Standards Board.

## Responsibilities of Those Charged with Governance for the Financial Statements

It is the responsibility of the organisation's Board of Trustees to ensure that f Financial and Service Statements are prepared, that give a true and fair view in accordance with PBE SFR-C (NFP), and to ensure that appropriate processes and procedures are in place to prevent misstatements from occurring through error or fraud.

Christchurch Community Accounting

Dennis Zhang

dennis.z@commaccounting.co.nz

Christchurch Community Accounting

