Mental Health Reform’s Vision

An Ireland where people experiencing mental health difficulties can recover their well-being and live a full life in their community.

Mission statement

To be the unifying voice that drives progressive reform of mental health supports in Ireland.

Mental Health Reform team

Shari McDaid
Director

Lara Kelly
Communications and Campaigns Officer

Kate Mitchell
Policy and Research Officer

Lisa McCormack
Administration Executive
## Contents

- Foreword 2
- Chairman's message 3
- Representing the sector 4
- Identifying unmet needs 5
- Developing unifying positions 6
- Mobilisation 7
- Developing and disseminating good practice guidance 9
- Holding Government and its agencies to account 10
- Governance 11
- Accounts 12
- Our members – 2014 16
- 2014 in numbers 17
2014 – sustaining our voice

I am pleased to welcome you to Mental Health Reform’s annual report for 2014. It has been another busy year for our growing, unified voice for better mental health supports.

The coalition continued to increase in 2014. We welcomed nine new members, giving a total membership of forty-nine organisations by the end of the year. The breadth of our membership lets us bring together knowledge from across the mental health sector and beyond, while the lived experiences of the many people served by our members inspire and inform our work for better mental health services.

Many individuals also joined Mental Health Reform’s network of support; our social media presence increased by 50%, reaching almost 6,000 followers by the end of the year, while supporters receiving our newsletter increased to almost 10,000.

A number of Mental Health Reform’s recommendations were acted on by Government and the HSE in 2014, including additional funding in Budget 2015 for community-based mental health services and suicide prevention and commitments to hire more staff for mental health services for homeless people and to ensure out-of-hours support for people in crisis.

Our success in securing these commitments is due in large part to the strong public support for MHR’s work. Last year more than 22,000 people signed our petition asking the Government to invest in mental health in Budget 2015. Mental health is an issue that touches communities and homes everywhere. Our aim is to make visible the support that exists for better mental health services and to highlight solutions available in order to drive reform of mental health services and supports. There are still huge gaps in the services and so we must all continue to work together for change.

My thanks go to our Board of Directors for their continued commitment and guidance, and to all of our member organisations and Grassroots Forum members for their contributions to MHR’s work. I’d also like to thank all of our volunteers and supporters who attend our public meetings, share their stories, sign petitions, tweet about mental health, connect with us on Facebook, and collect signatures. You have made a huge impact!

Shari McDaid, Director, Mental Health Reform
Chairman’s message

In recent years the taboo surrounding mental health difficulties has been waning. As this cloak of silence is lifted the sheer scale of the issue is laid bare.

In April 2015, the Economist newspaper reported that 20% of working age people in rich (OECD) countries experience a mental health condition each year, with one quarter of these having severe or enduring conditions like schizophrenia or bipolar disorder. In Ireland, suicide figures remain high. A study by the Construction Industry Federation and Pieta House revealed that between 2008 and 2012 over 1,000 men in the Construction industry took their own lives.

The Economist summarises: “Put together, mental illnesses account for more suffering and premature death in rich countries than heart disease and strokes or cancer and are more disabling than angina, asthma or arthritis in terms of reduced mobility and pain”.

The economic cost of mental health problems in Ireland was estimated at 2% of GDP in 2008. Over the years, pervasive stigma has relegated mental health services to Cinderella status within the wider health services. As an example, it took six years after there was a National Director for cancer services sitting at the top table to appoint a National Director for mental health services. The annual budget for mental health services in Ireland was 6% of the total health budget in 2014, compared to the UK where it is at 13%. Despite the prevalence of mental health difficulties, there is still not parity of esteem between physical and mental health care. Parity of esteem has become official policy in the UK.

2016 will be the 10th anniversary of the launch of A Vision for Change (AVFC) and the promise of this enlightened policy has not been fulfilled. This failure was not due entirely to the shortage of funds during the recession. AVFC is now due to be reviewed and updated, and Mental Health Reform will be actively involved in capturing the views of our members for submissions to this review.

During 2014, Noeleen Hartigan and John Saunders stepped down from the Board and I would like to thank them for their enormous contribution to MHR. We welcomed Karl Richardson and Stephen Treacy to the Board in 2014, and look forward to gaining from their expertise.

I want to commend the performance of our small team led by Dr Shari McDaid. As you will see from this report, their output is truly prodigious – engaging with members, representing members in numerous important forums, making submissions on legislation and policy, producing authoritative papers on vital topics like ethnic minorities, responding expertly to media queries.

The Board continues to strive for good governance and takes seriously our accountability to our members and funders. In the last year, MHR has continued to comply with the Code of Practice for Good Governance of Community, Voluntary and Charitable Organisations in Ireland and signed up to the Statement of Guiding Principles for Fundraising.

Edmond Molloy, Chairman, Mental Health Reform
Representing the sector

Mental Health Reform continued to grow in 2014, with nine new organisations joining the coalition:

1. **Aware**
2. **Bloomfield Health Services**
3. **De Paul Ireland**
4. **Exchange House**
5. **Gay and Lesbian Equality Network**
6. **Huntington’s Disease Association of Ireland**
7. **The Irish National Council of ADHD Support Groups**
8. **The Irish Society of Chartered Physiotherapists**
9. **Merchants Quay Ireland**

Mental Health Reform made submissions to Government on:

- The Assisted Decision-Making (Capacity) Bill 2013
- The comprehensive expenditure review
- Mental health guidelines for primary schools
- The national suicide prevention framework
- Universal Health Insurance
- Medical card eligibility
- Budget 2015
- The Statements of Strategy of six Government Departments
- The Well-being in Primary Schools guidelines on mental health (through the Children’s Mental Health Coalition)

As the coordinating representative body for the mental health sector, MHR was invited to the Oireachtas Committees on Finance and Health & Children ahead of Budget 2015.

Towards the end of the year, MHR attended the Homeless Summit organised by Minister of Environment, Community & Local Government, Alan Kelly TD. MHR sought to add the mental health perspective to the debate. After the summit the Government committed to improving access to mental health services for homeless people through in-reach into emergency accommodation.
Identifying unmet needs

Ethnic minorities and mental health

In 2013, Mental Health Reform began a process of consultation and research on ethnic minorities and mental health, convening an advisory group that included representatives from Cairde, Exchange House, the Immigrant Council of Ireland, iVosta, the Irish Refugee Council, Migrant Rights Centre Ireland (MRCI), New Communities Partnership, Pavee Point, SPIRASI and the Traveller Counselling Service.

In 2014, we published the briefing paper, Ethnic Minorities and Mental Health: a position paper. The paper identified unmet needs for mental health supports among black and ethnic minority groups in Ireland, including members of the Traveller community. MHR pointed out that people from ethnic minority groups have a higher risk of developing severe mental health difficulties such as post-traumatic stress disorder and called for improved access to mental health services for people from ethnic minority backgrounds, including Travellers.

The Ethnic Minorities and Mental Health position paper was launched by Nessa Childers MEP on World Mental Health Day, 10th October 2014. The launch was followed by a roundtable discussion on ethnic minorities and mental health, chaired by Minister Kathleen Lynch, TD and co-hosted by the Mental Health Commission.

Other marginalised groups

In April, MHR hosted a meeting between our Homeless Sector Advisory Group and the Dublin mental health services Access Team. The aim of the meeting was to ensure that the Access Team was aware of barriers to getting mental health supports for homeless people in the Dublin area. Participating organisations (Merchants Quay Ireland, Peter McVerry Trust, Simon Communities of Ireland and Depaul Ireland) described how difficult it is for homeless people to have to go to A&E Departments to access treatment and the barriers to their getting support when they have both mental health and addiction issues. The meeting helped to build a shared understanding of the available services and how to improve access.

During our public meetings in 2014, we also heard from members of the deaf community who shared their perspectives on the difficulties they face in trying to access mental health services and supports. These include a lack of Irish Sign Language interpreters and a lack of privacy when having to rely on a family member for interpretation.
Mental Health Reform’s distinctive mission is to provide a coordinating, authoritative, consensus voice to drive national reform of mental health support in Ireland. Part of this activity involves developing unifying positions with stakeholders, including with our member organisations and advisory groups, as well as with people using mental health services and their family members. MHR member organisations are consulted regularly on new policy positions.

Mental Health Reform’s Grassroots Forum continued its work in 2014. The Grassroots Forum is made up of people with experience of using mental health services and their family supporters who are nominated by member organisations. The Grassroots Forum held three meetings in 2014. The September meeting included a consultation between the Grassroots Forum and the Mental Health Commission. Concerns raised included the difficulty of accessing mental health services in a crisis and the lack of continuity of care.

Throughout 2014, Mental Health Reform continued to coordinate the Children’s Mental Health Coalition, bringing together more than 70 members, including representatives of 53 organisations and a number of individual legal experts, practitioners, academics and researchers. MHR hosted two meetings of the CMHC and its sub-groups in November. MHR coordinated input from the CMHC to the Children Rights Alliance’s annual ‘report card’ and to the Department of Education’s consultation on primary school guidelines.

As part of Mental Health Reform’s work to support the Oireachtas Cross Party Group on Mental Health, we facilitated this unique group of TDs and Senators from across the political spectrum in producing an all-party pre-budget submission on mental health, published before Budget Day in October.

“My son lives out on his own now. We never thought that would have been possible. I find now that the staff have really started to listen, he couldn’t have gotten out there on his own without the staff.”

Feedback from our public meetings in 2014
Mobilisation

Mental Health Reform continued to **generate public awareness** of the need for improved mental health services, participating in the annual First Fortnight arts and mental health festival in January. Hosted by broadcaster Marian Finucane, MHR’s discussion evening was called No Room at the Inn, and looked at the difficulties that arise when people in a crisis seek support outside of office hours. The meeting was attended by 120 people, with support on the night from Samaritans volunteers.

Throughout the year, we raised mental health in the media, particularly at key campaigning times. MHR **appeared in the media on 70 occasions**, across national and local newspapers, radio and television. Our social media presence increased by 50%, reaching almost 6,000 followers by the end of the year, while our supporters receiving our newsletter increased to almost 10,000.

In April, Mental Health Reform joined with the Union of Students in Ireland to call on local election candidates to make mental health a priority during their campaigns. 750 local election candidates were asked, if elected, to demand improved community services in their area and to work to prevent homelessness among people with mental health difficulties by ensuring better coordination between Local Authorities and Community Mental Health Teams. Public pledges of support were received from 40 candidates.

Throughout 2014, Mental Health Reform continued to work in partnership on two national mental health campaigns – the See Change Green Ribbon anti-stigma campaign and the National Office for Suicide Prevention’s #littlethings campaign.

“**When I was using services, I told nobody where I was going. If I had an appointment I would never say what it was for. I understand now that I was part of the problem of keeping the stigma going. I’m not ashamed of it anymore.”**

**Feedback from our public meetings in 2014**

In 2014, our annual series of **public consultation meetings** saw us visit Cork city, Dublin city, Letterkenny and Athlone to hear from people about their or their family member’s experiences of accessing mental health services. At the meetings, we shared Mental Health Reform’s assessment of progress so far in reforming the services, outlined what people should expect from recovery orientated services and led discussions on what people locally have found to be helpful and unhelpful about local supports. You can read some of the quotes from these meetings throughout this report.
Key issues raised by people attending the meetings included:

• the gaps between addiction and mental health services

• lack of communication with family members/carers

• unevenness in the way that mental health services are delivered across the country

“For some people mental health is only seen and associated with difficulties - I see it as a strength. I draw my strength from the shared experience and shared feeling and that is very powerful.”

Feedback from our public meetings in 2014

In August, Mental Health Reform launched a pre-budget campaign called “Mental health services can be a lifesaver”, asking the Government to invest in mental health in Budget 2015. As part of the campaign, 32 petition days were organised in town centres and colleges around Ireland and dozens of volunteers gave their time to support the campaign.

MHR’s social media campaign, #MentalHealthLifesaver, had 393 posts with people sharing photos of their own ways of looking after their mental health, reaching a potential audience of 389,615 Twitter users.

More than 22,000 people signed the petition to Government, which was presented to Minister for Primary and Social Care Kathleen Lynch TD days ahead of Budget Day in October 2014. Mental Health Reform’s members got behind the campaign, sharing the petition with their staff, volunteers and the people using their services.

“Passion and pride of individual nurses shines through the bad infrastructure and the lack of resources.”

Feedback from our survey 2014

Mobilisation
Developing and disseminating good practice guidance

Children’s mental health

In 2014, the Children’s Mental Health Coalition focussed on developing an evidence-based position on child and adolescent mental health supports to feed into the review of *A Vision for Change*. MHR commissioned a literature review on international and national good practice in mental health services and carried out a small-scale survey of professionals to develop the evidence base for CMHC recommendations. The paper, *Meeting the Mental Health Support Needs of Children and Adolescents*, was published in early 2015.

Integrating Employment and Mental Health Supports pilot project

In 2014, Mental Health Reform secured funding from Genio for a pilot project in conjunction with the Health Service Executive and the Department of Social Protection, to commence in mid-2015. The project – Integrating Employment and Mental Health Supports – follows the IPS (Individual Placement and Support) model of supported employment and will involve Employability companies working together with community mental health teams to facilitate better coordination between supported employment and mental health services.

MENTALHELP.IE in 2014

7,000 visits by 5,500 unique users.

Launching MentalHelp.ie

In June 2014, Mental Health Reform launched the new website MentalHelp.ie, an online directory of the services and supports offered by Mental Health Reform’s member organisations. The website was launched by Minister Kathleen Lynch TD.

MentalHelp.ie brings together information on support groups and helplines, training, supported housing and advocacy. It aims to offer information to people regardless of the stage they are at in their mental health journey, from information on accessing crisis supports to details of supports for people with longer term experience of a mental health difficulty.

Recovery leaflets

Throughout the year, we continued to disseminate our leaflets and reports on Recovery, sharing Mental Health Reform’s view on what a good quality mental health service should offer people in terms of hope, choice, listening, partnership and social inclusion.

“*If people are not able to afford to go to … training courses, it will cost the state more. It will isolate me. I want to get back into the workforce, to normality and live a happy life.”*

Feedback from our public meetings in 2014
In 2014 Mental Health Reform continued to hold the Government, the HSE and other agencies to account and to monitor their actions against previous commitments.

A number of actions previously proposed by Mental Health Reform were carried out by the Government in 2014. The Government allocated an additional €35 million in the budget for 2015 for the continued development of community-based mental health services and suicide prevention. While MHR welcomed this allocation, we expressed disappointment that the Government had not taken the opportunity to make up the shortfall of €15 million from the previous year’s Budget.

Minister Brendan Howlin, in his Budget Day speech, signalled the Government’s intention to increase access to counselling in primary care in 2015, which Mental Health Reform had recommended in its pre-budget submission.

On foot of Mental Health Reform highlighting the gaps in mental health services for homeless people, the HSE committed to recruiting additional staff for homeless outreach teams.

In early 2014, when the HSE Mental Health Division Operational Plan 2014 was published, MHR provided feedback to the HSE, following consultation with members. Following the publication of Budget 2015, we completed a Snapshot Analysis for members and supporters of the mental health elements of Budget 2015 commitments.

We also continued to seek up to date information on progress by submitting Parliamentary Questions via TDs and Senators supportive of Mental Health Reform’s work.

In July 2014, Mental Health Reform provided information for a Dáil debate on mental health services, part of a Private Members Motion on behalf of Deputy Caoimhghín Ó Caoláin, which called for continued investment in the development of community-based mental health services. The two-day debate culminated in cross party support for the motion.

“Mental Health Reform disappointed in funding shortfall for mental health”

Mental Health Reform press release, October 2014
During 2014, the Board reviewed MHR’s Strategic Plan and reflected on MHR’s role within the mental health sector in order to build a sound strategic framework for medium-term organisational development. This process will be finalised in 2015.

The Board continued to review the organisation’s compliance with the Governance Code. In 2014 the Board updated its risk assessment and financial procedures manual and approved new policies on social media, complaints, apportionment of expenditure and a donor charter. The Board also made a commitment to sign up to the Fundraising Principles and took steps to fulfil this commitment.

MHR’s second AGM was held on 18th June 2014 with 32 representatives and Board members attending.

MHR was successful in achieving funding through the Statutory Scheme for National Organisations and was awarded a grant from Genio to undertake a pilot project on supported employment.

Thank you to our funders in 2014!

Barnardos

The Citizens Information Board

The Community Foundation for Ireland

The Department of the Environment, Community and Local Government, Scheme to Support National Organisations 2014-2016

Focus Ireland

The Hospital Saturday Fund

The Irish National Teachers’ Organisation

Thank you also to our other anonymous individual donors throughout the year for making our work possible.
INCOME AND EXPENDITURE ACCOUNT YEAR
ENDED 31ST DECEMBER 2014

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative expenses</td>
<td>(239,834)</td>
<td>(309,148)</td>
</tr>
<tr>
<td><strong>OPERATING DEFICIT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest receivable</td>
<td>1,870</td>
<td>7,859</td>
</tr>
<tr>
<td><strong>SURPLUS ON ORDINARY ACTIVITIES BEFORE TAXATION</strong></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Tax on surplus on ordinary activities</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>SURPLUS FOR THE FINANCIAL YEAR</strong></td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

**SURPLUS FOR THE FINANCIAL YEAR**
All of the activities of the company are classed as continuing. The company has no recognised gains or losses other than the results for the year as set out above. These financial statements were approved by the directors on the 23rd March 2015 and are signed on their behalf by: Edmond Molloy and Carol Moore, Directors.

**Basis of accounting**
The financial statements are prepared in accordance with generally accepted accounting principles under the historical cost convention and comply with financial reporting standards of the Financial Reporting Council, as promulgated by the Institute of Chartered Accountants in Ireland, and Irish statute comprising the Companies Acts, 1963 to 2013.

**Income**
The income shown in the income and expenditure account represents grants from funders, donations, payment for research services, deposit interest, training and membership income invoiced during the period.
Income not applied or expended in the period is deferred to future accounting periods.
### Accounts

**BALANCE SHEET 31ST DECEMBER 2014**

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CURRENT ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>21,920</td>
<td>26,087</td>
</tr>
<tr>
<td>Cash at bank</td>
<td>259,294</td>
<td>328,876</td>
</tr>
<tr>
<td></td>
<td>281,214</td>
<td>354,963</td>
</tr>
<tr>
<td><strong>CREDITORS: Amounts falling due within one year</strong></td>
<td>(281,214)</td>
<td>(354,963)</td>
</tr>
<tr>
<td><strong>NET CURRENT ASSETS</strong></td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS LESS CURRENT LIABILITIES</strong></td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>RESERVES</strong></td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>MEMBERS’ FUNDS</strong></td>
<td>–</td>
<td>–</td>
</tr>
</tbody>
</table>

These financial statements were approved by the directors and authorised for issue on the 23rd March 2015 and are signed on their behalf by: Edmond Molloy and Carol Moore, Directors.

### CASH FLOW STATEMENT YEAR ENDED 31ST DECEMBER 2014

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NET CASH (OUTFLOW)/INFLOW FROM OPERATION ACTIVITIES</strong></td>
<td>(71,452)</td>
<td>111,966</td>
</tr>
<tr>
<td><strong>RETURNS ON INVESTMENTS AND SERVICING OF FINANCE</strong></td>
<td>1,870</td>
<td>7,859</td>
</tr>
<tr>
<td><strong>(DECREASE)/INCREASE IN CASH</strong></td>
<td>(69,582)</td>
<td>119,825</td>
</tr>
</tbody>
</table>
We have audited the financial statements of Mental Health Reform for the year ended 31st December 2014 which comprise the Income and Expenditure Account, Balance Sheet, Cash Flow Statement, Accounting Policies and the related notes. The financial reporting framework that has been applied in their preparation is Irish law and accounting standards issued by the Financial Reporting Council and promulgated by the Institute of Chartered Accountants in Ireland (Generally Accepted Accounting Practice in Ireland).

This report is made solely to the company's members, as a body, in accordance with Section 193 of the Companies Act 1990. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an Auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

RESPECTIVE RESPONSIBILITIES OF DIRECTORS AND AUDITOR
As explained more fully in the Directors’ responsibilities statement (in the full accounts), the directors are responsible for the preparation of the financial statements giving a true and fair view. Our responsibility is to audit and express an opinion on the financial statements in accordance with Irish law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board’s Ethical Standards for Auditors.

SCOPE OF THE AUDIT OF THE FINANCIAL STATEMENTS
An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the directors; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the Directors’ report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

OPINION ON FINANCIAL STATEMENTS
In our opinion the financial statements: give a true and fair view in accordance with Generally Accepted Accounting Practice in Ireland of the state of the company’s affairs as at 31st December 2014 and of its result for the year then ended; and have been properly prepared in accordance with the requirements of the Companies Acts 1963 to 2013.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY THE COMPANIES ACTS 1963 TO 2013
We have obtained all the information and explanations which we consider necessary for the purposes of our audit. In our opinion proper books of account have been kept by the company. The financial statements are in agreement with the books of account. In our opinion the information given in the directors’ report (in the full accounts) is consistent with the financial statements.
MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

We have nothing to report in respect of the provisions in the Companies Acts 1963 to 2013 which require us to report to you if, in our opinion the disclosures of directors’ remuneration and transactions specified by law are not made.

TURLOUGH MULLEN FCA
For and on behalf of

GRANT THORNTON
Chartered Accountants & Registered Auditor
24 - 26 City Quay, Dublin 2, Ireland

Board of Directors
Edmond Molloy
Colette Nolan
Sam McGuinness
Paul Flynn
Jacinta Hastings
Caroline McGrath
Carol Moore
Paul Kelly
Noleen Hartigan
John Saunders
Karl Richardson
Stephen Treacy
(Resigned 24 March 2014)
(Resigned 24 March 2014)
(Appointed 18 June 2014)
(Appointed 18 June 2014)

Company secretary
Caroline McGrath

Registered office
Coleraine House
Coleraine Street
Dublin 7

Auditor
Grant Thornton
Chartered Accountants & Registered Auditor
24 - 26 City Quay
Dublin 2

Bankers
Bank of Ireland
34 College Green
Dublin 2

KBC Bank Ireland Plc
Sandwith Street
Dublin 2

Ulster Bank
P.O. Box 145
33 College Green
Dublin 2

Solicitors
Millett & Matthews
Main Street
Baltinglass
Co. Wicklow

An extract from the audited financial statements of Mental Health Reform for the year ended 31st December 2014. Fully audited accounts available on request from Mental Health Reform or online at www.mentalhealthreform.ie/transparency
Our Members – 2014

Amnesty International Ireland
Association of Occupational Therapists of Ireland
AWARE
Bloomfield Health Services
Bodywhys
Cairde
Children’s Rights Alliance
College of Psychiatrists of Ireland
Console
Cork Mental Health Foundation
Depaul Ireland
DeafHear.ie
Disability Federation of Ireland
Dual Diagnosis Ireland
Exchange House
Focus Ireland
Gateway Mental Health Project
Gay and Lesbian Equality Network
GROW
Hail – Housing Association for Integrated Living
Headstrong – National Centre for Youth Mental Health
Huntington’s Disease Association of Ireland
Inclusion Ireland
Irish Advocacy Network
Irish Association for Counselling & Psychotherapy
Irish Association of Social Workers
Irish Council for Psychotherapy
Irish National Council of ADHD Support Groups
Irish Penal Reform Trust
Irish Refugee Council
Irish Society of Chartered Physiotherapists
Mental Health Ireland
Merchants Quay Ireland
MyMind – Centre for Mental Wellbeing
National Association for Pastoral Counselling and Psychotherapy
Peter McVerry Trust
Rehab Group
Respond! Housing Association
Samaritans
Shine
Simon Communities of Ireland
Slí Eile Housing Association
SpunOut
St John of God Hospital
St Patrick’s University Hospital
STEER
Suicide or Survive
The Alzheimer Society of Ireland
Threshold Training Tallaght
2014 in numbers

50% increase in MHR’s social media followers

32 petition days held across the country

70 media appearances

4 public consultation meetings

MHR MEMBERS:

49 NEW MEMBERS

22,000 petition signatories
Mental Health Reform is the national coalition advocating for improved mental health services and the social inclusion of people with mental health difficulties.

Mental Health Reform works to

- inform our members and the public about good quality mental health services and related income and social supports;

- unite our members and service users and family members in building a movement to promote improved mental health services and related supports;

- advocate to the Government and the HSE for improved services.