

AWARD WINNING

panorama

People share their stories of mental health recovery in work and life

Monthly Issue September #102C

Redman: Poetry in
Public and in Print

How Are People
Reacting to NDIS
Changes?

Building Confidence
Through Small,
Consistent Changes

betrained

YOUR PATHWAY TO SUCCESS

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AUSTRALIA

Where mental wellbeing thrives

NDIS PROVIDER
— SINCE 2013 —



Where mental wellbeing thrives

About us

Flourish Australia is committed to walking beside people with a lived experience of mental health issues as they progress along their recovery journeys. We passionately believe in mental health recovery, and are committed to providing the best possible support and encouragement to people so they can achieve their recovery goals. We offer this help across all 60+ of our services in New South Wales, Queensland, South Australia and the Australian Capital Territory.

Contact Flourish Australia!

1300 779 270 or
flourishaustralia.org.au

Chair: Judi Higgin
Chief Executive Officer: Mark Orr AM
Chief Development Officer: Peter Neilson

About Panorama

Founded in 1996 in one of Flourish Australia's predecessor organisations (PRA), Panorama has grown to become a lifestyle magazine dedicated to informing and encouraging the recovery journey of readers. Panorama is written, designed and produced almost entirely by people with a lived experience of mental health issues.

Publications People



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Tricia is a member of the Community Advisory Council

Contributions are welcome!

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COVER: David, supported employee at Buck House, being presented with his Certificate III by Mark Orr AM.

PHOTO BY GRANT

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WE PROVIDE PRACTICAL

Care for Carers

Flourish Australia is committed to working closely with families and carers in their important role of supporting people close to them with a lived experience of a mental health issue.

Using a family inclusive approach, we work directly and in partnership with specialist organisations to provide support and education services for families and carers.

A list of helpful resources and Carer organisations for family and carers can be found on our website:
flourishaustralia.org.au/family-and-carers

SCAN QR TO
FIND OUT MORE



In Panorama September 2026

After a long period of nervous anticipation, the Federal Budget has brought many changes to the NDIS. In our previous issue we looked at some of the immediate reactions. In September Panorama we look at reactions more from the perspective of NDIS users and their advocates.

One crucial and controversial point of contention is the idea that participants "exhaust" available treatments prior to NDIS approval. "More Government Control; Less Choice?" reports on a forum of disability advocates hosted by the "Dr George" podcast. Marion Norton, who has multiple disabilities, describes an experience of "service" that really made her wonder. Finally, Panorama takes part in a webinar hosted by the World Association for Psychosocial Rehabilitation with Dr Gerry Naughtin (left).

Redman shares his decades-long passion for poetry, having performed his verse in front of large crowds more than once, and shares his road back to wellness while navigating both physical health issues and mental health issues.

Corrine raised her daughter all alone as a single mother for twenty years. After decades of struggling with alcoholism, Corrine has now created a new, fulfilling, rewarding life to replace her need to drink.

Maddie experienced the depths of depression and suicidality as she advanced through the difficult process of understanding her mental health issues. She shares some of the most powerful tools she's learned during this period of recovery and self-discovery.

The best time to create a Will is definitely BEFORE you die, yet so many of us haven't left any instructions. For the sake of our loved ones, our **Make A Date For A Will** article provides pointers that can streamline the process, as well as suggestions on who can help.

And more!

Spread

hope.
inspire others.

**Don't worry if
you're not a writer -
that's where
we jump in!**

**Did you know that sharing your own mental health
recovery story can spread hope and inspiration?**

At Panorama, every story is valued.

We're constantly on the lookout for stories from those living with mental health issues,
but family members and caregivers, your stories matter too!

Not sure where to begin? Send us a message, we would love to hear from you.

Email: panorama@flourishaustralia.org.au or Call: 1300 779 270

Poetry in Public and in Print

By Grant J Everett



I've been attending Flourish Australia's Liverpool service, Flowerdale Cottage, to work on the mental health issues that resulted from a career-ending chronic illness. The support of the Flowerdale staff has really opened up a window, and I feel good about where I'm at. Thanks in particular to Tam for helping me to deal with my demons, even if it's just by a chat over the phone.

I'm looking forward to life now, but this wasn't always the case. Flourish Australia has made my life better by helping me get on the Disability Support Pension for my deep vein thrombosis, and referred me to Guidelight Psychology to see a new therapist. As I require a walking frame to get around, getting to and from Flowerdale can be a challenge, but I've gotten lifts with Tam to and from the station in the past.

Poetry

My love of poetry fell upon me at the age of 34 when my sister had my niece, Isabelle. I immediately knew I HAD to write a few stanzas about her. Everyone liked Isabelle's poem, and their encouragement has helped me to grow in my craft. Now, for every birthday and Christmas, my family know to gift me notebooks and pens!

People call me a Bush Poet, but I consider myself a Yarn Spinner. I write in "iambic pentameter," a rhythmic pattern that poets like Banjo Patterson and William Shakespeare both used. I write about my life to pour out my pain and to share my happiness, and it feels therapeutic to offload baggage

onto the page. I've also performed poetry in front of large crowds (one of 80, and one of 100). They gave a huge round of applause at the end.

Writing from the heart requires emotion and empathy. For instance, I'm passionate about ANZAC Day, with my focus being on saying "thank you" to the Diggers who gave everything to protect us and our freedom. We should all say thanks to a Digger!

I had a phone check-in with Elena from Bankstown Community Health, and she was interested in hearing my poetry. I sat and thought about this for a while before the pen jumped at me, and I wrote some stanzas about her. I showed the poem to Tam first, and she liked it so much she recommended I talk to Panorama magazine. I'm glad I did! You can read that poem at the end of my story.

I'm happy with the quality of my poetry nowadays, and constructive criticism is always the best way to help me grow and improve. The truth may hurt, but I'd prefer that over false praise any day. In my family, we are brutally honest.

Some of my best poetry was composed in memory of loved ones who have passed away, such as my mother. But even in my saddest poems, there's always a happy line, and even in my happier poems, there's also a sad line. As I have a morbid sense of humour, I could stand up at a funeral and make people laugh!

My sisters got my collected works printed up in a book for my 50th birthday. I was so touched by this, as it's my dream to get my poetry picked up by a publisher.

Working

I worked a fulfilling job as a storeman/forklift driver for many years. You meet a lot of truckies, and as they lead a very solitary lifestyle, all they want to do is have a chat, so I got lots of job satisfaction from that.

During the pandemic, I was in an "essential" industry, but I suddenly developed chronic deep vein thrombosis in my legs, leading to painful blood clots. As my job was very physically demanding, this ended my career. I now rely on a walking frame all the time.

My physical health brought my mental health issues to the forefront, as being out of work for the first time in decades sent me into a deep sadness. I saw a psychologist, and he was a lovely bloke who called me "mate," which I loved! Like writing poetry, talking with a counsellor was a great source of relief.

Unsurprisingly, he diagnosed me with severe depression and anxiety. Funnily enough, I enjoy things that would make most people anxious, such as performing in front of large crowds, and playing first grade cricket against some of Australia's best fast bowlers, despite being a TERRIBLE batsman. Now THAT was anxiety!

Support

I have four different professionals supporting me through NDIS,

allowing me to offload my issues. Mate, we all need to unload now and again! I also have funding for practical assistance in my home, so workers will visit throughout the week to help me get ready for my day. It's important for others that we always smell nice and fresh!

My family is always there for me as well. My two sisters and their grown-up kids are all very compassionate, with many of them employed as nurses or social workers. One sister rides her pushbike to the beach every morning, and she'll send me photos of the sunrise just to make my day better. We text each other frequently.

My family celebrates my birthdays with me, and demands my presence at their birthdays, too! And while they aren't geographically close, we're "heart" close.

Recovery

My mental health is getting better and better, and I've been going for two or three strolls a day on my walking frame for the sake of my physical health. I had to send photographic evidence to my sisters and my psychologist so they'd believe this outlandish claim! They're all very proud of me.

When it comes to how I approach life, the bullying I experienced in school taught me to stand up for myself. My dad taught me to never back down from bullies, so in life I always, always keep getting up from whatever hits me. That includes dealing with my mental health and my physical health. The future looks bright!

OPPOSTIE: Adobe stock,
RIGHT: Richardfoulon from Pixabay

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"WELL ELENA YA DO"

GOT A MESSAGE FROM ME COUNSELLOR,
ELENA DELVES INSIDE MY HEAD,
AS A COURTESY, SHE LET ME KNOW,
I'LL BE CALLIN' IN FIVE MINUTES, RED,

SHE ASKS DEEPLY PERSONAL QUESTIONS,
BUT THAT'S WHAT SHE'S HERE TO DO,
ALWAYS GIVES ME THAT GENTLE REMINDER,
JUST DON'T ANSWER, IF THIS UPSETS YOU.

BUT I'M IN FOR A PENNY,
IN FOR A POUND,
NOW I'M REACHING SKY HIGH,
DRAGGED MYSELF OFF THE GROUND.

NOW ELENA KNOWS WHAT MOTIVATES ME,
WHAT'S DELAYING MY TICKET TO HELL,
IT'S THOSE FOUR SPECIAL GIRLS THAT I LOVE SO MUCH,
BERNIE, IZZY, JAYON, AND SHEL.

SHE KNOWS HOW MUCH I LOVE ME MATE MISCHA,
HOW I LOVED BOWLING CRICKET BALLS,
HOW HARD I WORK TO BE HUMBLE,
BECAUSE PRIDE COMES BEFORE A FALL.

IT'S HER JOB TO EVOKE MY EMOTIONS,
TO VERBALISE PERSONAL PAIN,
WELL ELENA, YA DO, AND I'D LOVE TO SHARE,
THIS TALE, WHEN WE MEET NEXT TALK AGAIN.

BY REDMAN



Building Confidence Through Small, Consistent Changes

By Corrine

I am a single mother in my fifties, and for approximately 20 years I consumed two bottles of wine every day. Drinking had become a daily ritual. Beyond my drinking, I manage generalised anxiety disorder, AuADHD, and OCD. But with Flourish Australia's support, I've been building a new life full of fulfilling and satisfying things to replace my drinking, including employment, exercise, and programs that treat addiction.

I raised my child completely alone. It certainly wasn't easy, and it was particularly hard making all the decisions on my own. We were supposed to live in Thailand, as her father is Thai. But he became very violent after her birth, and I feared for my life. I came back to Australia with nothing, as I had been living and working in Asia for a long time. I was assisted by the Salvation Army, friends, and family, with clothes and household items.

My mother also struggled with alcohol dependence, and I believe this may have influenced my own relationship with alcohol. She was diagnosed with Korsakoff Syndrome (alcohol-related dementia) from

years of heavy drinking when my daughter was one year old. I became my mother's guardian and power of attorney when she was only 64, so not only was my Mum not supporting me, I was supporting her. My father told me he couldn't help out, either, and I've never received any financial support from my daughter's father.

Time For Change

Despite maintaining employment and managing my daily responsibilities for many years, I noticed my alcohol use was negatively affecting my relationships, behaviour, self-esteem, and overall wellbeing. When I joined Flourish Australia's Connect and Thrive (C&T) Program at Maroubra, I shared that I was experiencing low self-confidence and a distorted perception of my abilities and personal strengths.

Throughout my participation in the C&T program, I demonstrated a strong willingness to make small but meaningful changes. Together with the staff, we explored practical strategies I could use to gradually replace my drinking habits with healthier activities during the hours I would normally consume alcohol. This included setting achievable

goals like cleaning and organising my home, visiting the neighbours, going for walks, reducing the quantity of alcohol I consume, and using smaller glasses.

I have been to AA a few times, and I've also done the Clean Slate Program, which worked well for me. I was lucky enough to have Chris Davis as a GP at the time, as he founded Clean Slate with the guy who created Hello Sunday Morning. Chris now works at St Vincent's Drug and Alcohol Centre.

Through ongoing discussions and self-reflection, I've developed a greater understanding of alcohol dependence as a health condition, while also recognising that long-standing habits can be changed through consistent effort and the development of new routines.

My involvement with the Connect and Thrive Program has had other positive impacts on my life. Regular sessions focusing on my achievements, no matter how small, have helped strengthen my motivation, confidence, and sense of capability. I also began attending yoga and Pilates classes through the C&T Program, and recently I enrolled at a local gym to do additional Pilates classes.

Over time, my confidence continues to grow.

More From Life

I've successfully secured employment supporting people with brain cancer, and I really enjoy it. I do three shifts per week, and the clients and their families are very thankful for my help. This is very different to my last job, which was toxic, and created a lot of unnecessary stress for me. The employer was never thankful for the hard work I put in, and I felt underappreciated.

I also spend part of my evenings completing online training related

to my work, and I dedicate my remaining time to self-care activities and spending quality time with my daughter. I have also been a hairdresser and worked in tourism.

My journey highlights the value of gradual, sustainable change, and demonstrates how small steps taken consistently can lead to significant improvements in wellbeing and quality of life. Some of my current goals are to one day find a companion, to start my own business, and I would like to lose some weight.

I'm happy to share my story in Panorama magazine, with the hope

that my experience may inspire others who are working towards positive change in their own lives.

PHOTO FROM PIXABAY

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Caboolture, QLD Suite 2, Ground Floor, 12 King Street 1300 779 270	Wollongong, NSW 3 Station Street 1300 779 270	Penrith, NSW Shop 1/ 99-109 Henry Street 1300 779 270	Hornsby, NSW Call our Connection Team 1300 779 270
Maitland, NSW 36 Ken Tubman Drive 1300 779 270	Bega, NSW Kemp Building 1/176 Carp Street 1300 779 270	Tamworth, NSW 129 Marius Street 1300 779 270	Seven Hills, NSW 9/197 Prospect Hwy 1300 779 270
Ulladulla, NSW Shop 35, Ulladulla Plaza 107-109 Princes Highway 1300 779 270			

Want to learn more? Give us a call today! 1300 779 270

Make a Date for a Will

But do it BEFORE you die!

By Warren Heggarty



The best time to do a Will is before you die. Having a Will means that your dearly beloved will have a clear idea of your wishes as to the distribution of your money and property after your death. Leaving a clear and complete Will does everyone a favour and can defuse squabbles at a difficult time.

In this story I am not giving expert advice. I am just a person of mature years who has a history of mental health issues like many readers of Panorama and all I want to do is get you to start to think about and discuss your Will, and other matters relating to your legacy.

You may have heard of "The Barefoot Investor" (Scott Pape) who recommends you start out on the road to investment by having a "budget date night." Well, I adopted his method and had a "Will Night." A friend of mine and I had both never done a Will, and it was high time we did it. So we went off to a restaurant and discussed the nitty-gritty over pasta and Blue Lagoons. My friend commented that it felt very strange to be talking about our own and each other's deaths! But from this evening we both came up with our plans.

Points to think over

Mind you, if you do meet to discuss a Will with a friend, make sure they

are trustworthy, and be careful to recognise that some things must be kept in confidence.

What we considered were these questions:

- How much money do we have?
- How much Super do we have, and where? Who have we nominated for it?
- What property do we own?
- What major valuables do we own?
- Who do we want to inherit?
- Who do we want to appoint as EXECUTOR (the person who administers your Will, although a lawyer can be hired to do the actual work) and should they be paid?
- Who do I want as an enduring guardian if I become incapacitated (before death, of course)?
- Who do I want to appoint as Power of Attorney in the above case?
- Who do I specifically NOT want to inherit, and for what reason?

I recommend you get professional expert advice from a lawyer, especially if there is anything unusual in your Will. If you can't afford a lawyer (they can be expensive) then you can purchase a Legal Will Kit and research the topic online. My parents wrote their Wills out on sheets of notepaper in pen before witnesses, and according to my lawyer those Wills were perfect. However....we'll get to the catch later on.

Anyone over the age of 18 can make

a Will. Apparently, most people wait until their 30s, by which time they may be married or have children and own some property. I have personally experienced what happens when a person dies "intestate" (without a written Will), so that is why I recommend you do it now - you can always change it later, if you wish... and if you're still alive!

If you have no Will, different states have various laws about how to divide up your property. The general rule is that your spouse or your de facto spouse comes first. But here is a hypothetical story that shows what can go wrong: Supposing you have two adult children by a spouse who died 20 years ago, and let's say you begin living with a new partner and you are not sure about how permanent this arrangement will be. At that stage, you may prefer that your children inherit your property rather than your new partner, and you could state that in a Will. Your new partner can contest this, but your wishes are on record to settle this more easily. If there is no Will, however, the law may prioritise your new partner, the one you are not so sure about. This could leave your children in a legal quandary. In this case, THEY may have to contest things in court.

In the case of several children, you may wish to provide different proportions. To be sure, I've met people who have felt cheated by getting less of an inheritance than

they expected in just this way, but your legal Will counts for something.

If your Will is to leave things to people OTHER than your spouse or children, or even to EXCLUDE them, you can make a statutory declaration as to your reasons for doing so, just to quieten any post-mortem controversy.

Just In Case It Becomes Complicated

You don't need a "complex" family situation to get a "complex" legal problem. In my case, my parents both had legal Wills that left their worldly possessions to A) each other and then B) their children. My Mother's property became my Father's property upon her death. When my Father died, his property became mine and my sister's. No dramas, you might think. But it turned out that the title to our family home was in my Grandfather's name, and he had died 56 years previously without leaving a Will! It was clear who had PAID for it in instalments over those 56 years (my Father kept the receipts for each and every payment), but that did not automatically determine the case. My lawyer and I took four years to sort this out in the Supreme Court.

So you may be doing your loved ones a huge favour by being clear

about what you want either with a legal Will Kit or with help from by talking with a legal person who specialises in this field. Personally, I chose a suburban lawyer who I knew. This was the same lawyer who sorted out my Grandfather's and Fathers' estate, advised me to sell the family home and disburse its proceeds, advised me in purchasing a new home, and helped me settle a dispute. This same lawyer also worked on my friend's home purchase, her step-father's estate, and her grandmother's estate. I have a marked preference for people I know and trust!

Apart from the friend I already mentioned who had come with me to sign documents concerning guardianship and power of attorney, there were two other key people who I wanted involved in my Will, and so while I prepared it I met both of them to "sound things out." I didn't reveal every detail, just enough to prevent any rude shocks. I specifically wanted one friend to inherit certain pieces of my property that she would appreciate, but which others may see as junk! I know it will be in good hands when I'm gone!

The NSW Trustee and Guardian website provides practical guidance on making or updating a Will, appointing an executor, and preparing Power of Attorney and

Enduring Guardian documents, helping ensure your wishes are clearly documented and legally valid. Scan these QR Codes according to your state to learn more.

OPPOSITE: Yes, it is a bit strange to discuss making Wills over dinner - even at Maccas, but we will all eventually have to face the prospect. PHOTO FROM ADOBE STOCK..

BELOW: Witness that signature! PHOTO BY MAXIMILIANOVICH FROM PIXABAY

NSW



QLD



SA



ACT



MIND, BODY AND BELIEF BEING SEEN AS A PERSON, NOT A CASE

By Maddie

Feeling broken did not break me. As a peer worker, I am often described as resilient. For much of my life, my mental health has been the most visible part of my story. But when my body became a place of concern, my “history” began to overshadow it. If I came across as too emotional, I would risk being dismissed; too calm, and I would risk being misunderstood.

The Mind’s story

I have always been anxious, but there came a point when the adrenaline no longer ebbed. My nervous system felt permanently locked in fight or flight. Nightmares intensified into trauma dreams and flashbacks of domestic violence. Depression deepened until it felt suffocating. I was surviving rather than living.

Antidepressants brought mounting side effects: nights soaked in sweat, my heart racing. I presented to an Emergency Department believing

I was experiencing something catastrophic. Transferred between hospitals, I was eventually discharged with medication that quietened me, but explained nothing.

Depression worsened. Suicidal thoughts crept in. Emotional regulation felt impossible. I had self-harmed as a teenager when I did not know what to do with overwhelming emotion. I had stopped for years. Out of desperation I slipped back into coping strategies I thought I had outgrown.

Connection was what changed my trajectory. I began seeing a psychologist weekly, someone I could trust. The sessions were confronting and validating at the same time. A psychiatrist joined my care. We ruled out neurological causes. We trialled various medications.

When outpatient care was not enough, I was admitted to a private hospital. Parts of that experience were helpful. Other parts reminded me how vulnerable dignity can be

within systems. I left early after an interaction that had made me feel exposed and unseen.

Eventually, I underwent a course of Electroconvulsive Therapy (ECT). It reduced the severity of my depression in ways nothing else had and gave me breathing space.

The most transformative work, however, came through Dialectical Behaviour Therapy. I committed to it for eighteen months. I learned emotional regulation. Boundaries. Self-respect. I learned that loving myself was not indulgent but necessary. For the first time, I felt stable in a way that was not fragile.

As can be seen, by the time my physical health began to demand attention, I was not someone trying to avoid mental health care. I was doing the work! And yet my physical symptoms were attributed to my mental health.

The Body’s Story

As my physical health began to unravel, I noticed how quickly

some clinicians reduced complexity to a single explanation. Pain was framed as anxiety. Exhaustion was attributed to burnout. Symptoms that moved across systems and refused to stay neatly contained were softened into stress, trauma, or "just one of those things."

I did not reject these explanations outright. In fact, I considered them carefully. When you have spent years working on mental health recovery, you learn to reflect on things, to look inward, to question yourself.

There were many times I wanted to give up on my responsibilities and surrender to the bone deep fatigue that no amount of rest could restore.

I now understand how easily a mental health narrative can become a blindfold, because it is so often treated as the endpoint rather than one part of a much larger picture.

When you are seen through a single lens, everything else is filtered through it. New symptoms are interpreted to fit the existing frame. Physical deterioration becomes psychological distress. And when you are a woman who continues to function by going to work, to lead, and to show up, that single story hardens. Capability becomes evidence against physical illness. Resilience becomes a reason not to look closer.

Too Complex for Neat Boxes

There came a point where the complexity of my health made people uncomfortable.

So, I became a storyteller. I told my story again and again, reshaping it slightly each time, searching for the version that might finally make sense to someone else. I learned which details to emphasise and which to soften. I learned how to make myself legible. Still, I moved between services without ever fully arriving. Too physical for one. Too psychological for another. Never quite fitting the criteria that would allow me to rest inside certainty.

There is a particular loneliness that comes with being medically complex. Not the loud loneliness of crisis, but a quieter one. The loneliness of being partially seen, repeatedly. Of being believed just enough to continue. I kept going

because when care is fragmented, the burden of integration falls to the person who is unwell.

After a long time I began to find names for my physical experiences. Experiences like feeling severe strain on standing. The heaviness in my limbs. Widespread pain that moved around, joints that felt unreliable.

These names did not explain everything, but the fact that names existed for these conditions explained enough. But for others to be convinced it required listening, pattern recognition, and belief. And because they coexisted with a history of mental illness, belief was often the first thing to fracture.

Living with chronic illness has taught me that health is not about appearances. It should not be about constantly having to prove that something is wrong.

Functioning is a language the world understands. It is measured in attendance, productivity, and contribution. It is praised as resilience and commitment. I became fluent in that language. I showed up and functioned, but at great cost. Functioning kept me visible. It did not keep me well.

What It Means to Be Believed

Belonging is not something earned through productivity. It begins when a person is believed. Being believed

is not the same as being agreed with. It does not require certainty. It requires listening. Belief is relational. When someone is believed, they don't have to translate their pain into something more acceptable. They are recognised as whole.

This is where social citizenship matters. Belonging is not only about participation. It is about recognition. About being seen as a whole person, not a case.

To be believed is to be allowed to remain part of the world. Hope, for me, is no longer about cure or certainty. It means being listened to without needing to prove my pain, being included without having to collapse, being connected even when my body is struggling.

There is no neat ending to this story. There is only continuation. I am still learning. Still growing. Still choosing to live by the values that helped me find my way back to myself. The work did not make me perfect. It made me present. And that is enough.

Belonging begins when we are recognised not for how well we function, but for who we are, and given space to remain.

OPPOSITE: First the pigeon-holing then the diagnostic overshadowing. IMAGE BY ROBAS CASTRO FROM PIXABAY. **BELOW:** Too complex for neat boxes. IMAGE BY KBROSIG FROM PIXABAY





More Government Control, Less Choice?

NDIS changes a "broken promise," according to activists

Reported by Warren Heggarty

Dr Stevie Lang Howson, Organiser of Disabled People against Cuts Australia, described the recent NDIS changes as a "broken promise." He was speaking on a panel podcast hosted by fellow disability advocate, Dr George, in May. The podcast also featured Skye Kakoschke-Moore from CYDA (Children and Young people with Disability Australia) and Megan Spindler-Smith from PWD (People with Disability) Australia.

"There are a number of different paths the government could have gone down to achieve cost cutting as an outcome," said Stevie. "Why has the government chosen THIS particular path, which aims to remove 160,000 participants? Instead of looking at functional capacity in the CONTEXT of a person's specific life circumstances, the new bill looks at the functional

capacity in the abstract. As if that person doesn't HAVE those specific life circumstances."

His conclusion is that we've moved from a system that focuses on people's reasonable needs to one that reflects the government's "appetite to spend."

The speakers found it difficult to muster a good word for the new NDIS bill, which at the time of writing and until the 16th of June is at the review and public submission stage. The consensus seemed to be that in its attempt to rein in costs, the new bill could take us back to some of the problems that NDIS was supposed to fix - like the block funding of some services opposed to direct participant choice.

Stevie said it is clear that the new bill is meant to "guide" people back towards "congregate living" because it is cheaper (a ratio of one carer to several participants) than one-to-one service delivery. However, he pointed out that this will also drive the burden and strain back upon

hospitals, families and other systems, all of which still must be paid for. This is known as a "false economy." Panorama readers will know that it is much cheaper if a person can avoid hospital by receiving appropriate community care.

Isolation?

Yet the government has halved the money for social and community activities. Megan said that isolation will surely increase. "These are not luxury needs," she said of Social and Community activities. Skye agreed that "the mental health impacts of this will be felt for decades to come." She was referring to the mental health of ALL people with disability, not just psychosocial.

Dr George said, "We don't want to end up in the hospital or aged care centre." Preventing that is what NDIS is supposed to be about.

The move towards greater options for government control, according to Megan, "is going to stop many members of the disability

community just having the standard lives that we all deserve." She was concerned that people with fluctuating support needs "might have to go downhill before getting what they need."

Dr George said, "I remember walking into Jenny Macklin's office, who was the minister at the time [NDIS came in] and saying, 'Jenny, thank you. Now that you've done this work, I feel like for the rest of my life I will be entitled to what I need that's 'reasonable and necessary.' And last night when I saw the bill, I said, 'I don't think that's going to be the case if this bill goes through.'"

The move towards more block funding is of concern because it means the power is in the hands of the companies, not the individuals. SIL (Supported Independent Living) seems to be going this way.

At present, 90 per cent of matters before the review tribunal for the NDIA/S were found in favour of the participants! This alone suggests that

we need to take a careful look at how the NDIA functions. But according to Stevie, the power dynamic is going to be shifted back to the government and its bureaucracy.

George put it bluntly: "Maybe keeping someone with high-level needs like me is not financially viable!" This was meant ironically, because of course the lives of people with disability cannot be measured in terms of money. But as Stevie said, the government does not seem to "understand disability."

Let's stick together

Skye said, in a conciliatory tone, "There is a huge community right now that is willing and ready to work with [the ministers] on how to make the NDIS sustainable. Give us some time. Let us understand this [100 page] bill. We will all have a better outcome if we can slow the process down and give these reforms some more careful thought."

Megan added, "No one should lose

support before equivalent supports [outside the NDIS] are available. Especially not in regional and remote areas."

Skye reminded us that we need to keep people's stories at the forefront in our approach to pushing back against this hasty process. People's stories are remembered long after the numbers are gone. But the impacts will not be felt the same by everyone. Some people will not notice much change at all. Yet others may lose NDIS supports before there is any viable alternative. This is why people with disabilities need to stick together.

Stevie said 'Let's stick together as a community. Check in on one another. Our community is strong. We constantly overcome massive obstacles. We can put up a hell of a fight.' If you are anxious, ask for help. One cannot fight this alone.

OPPOSITE, CLOCKWISE: Dr George Teleporos (LinkedIn), Megan Spindler-Smith (PWD), Skye Kakoschke-Moore (David Foote, AUSPIC Public Domain)

Marion's NDIS Runaround

Could honesty and efficiency cut costs?

Marion Norton* suggested that NDIS costs could be reined in in a big way, not by cutting services, but by attacking "slippery practices." Marion is a professional who works with children who have disabilities, in a government department. Aside from two university degrees, she is qualified by her lived experience of both psychosocial and mobility disabilities. She needs NDIS support to travel to medical and other appointments after work. Here is one of the stories she told Panorama.

"I engaged a lady who works for a very well-known disability service (not Flourish Australia!) to drive me to a specialist appointment

after work. She was very dolled up and asked me to do her a "special favour," as she was going to a "social engagement." I was miffed by this, but when the bill came I was shocked: she had claimed 150km travel, whereas the trip was only 30km at the most. Not only that, but she had her FRIEND riding along in the back seat! Even more unprofessionally, she hadn't assisted me to and from the car, which she had stopped in the middle of the street, with cars both coming and going. I wasn't going to let her claim 150km, but she was very pushy. I complained to the service she worked for, but they would not back me up. They said it was between me and the driver! Fortunately, I was able to assert myself - on behalf of the taxpayer- and denied approval. But I thought, 'What would happen to someone who was NOT so assertive? Like the old me? And how



many vulnerable people has this driver done this to? It could be quite lucrative, when you think about it!"

Because Marion is a working professional, she counts as "high functioning," and she is very worried about the NDIS changes, even though her genetic mobility disability can never improve. She needs supports to be able to work. And remember, her work is supporting children with disability, steering them away from becoming dependent on the NDIS where possible.

*Name changed to protect privacy and employment. **PHOTO** by Masashi WAKUI From PIXABAY

EXHAUSTION, PARADOX & OPPORTUNITY

World Assoc. PsySoc Rehab on NDIS changes

Reported by Warren Heggarty



Panorama attended a forum hosted by World Association for Psychosocial Rehabilitation (WAPR) Australia that considered the NDIS Changes announced in April and May.

The main speaker at "New Changes to the NDIS - Implications For Mental Health Support" was Dr Gerry Naughtin, formerly of Mind Australia and recently a strategic advisor to the NDIA. Gerry is an expert on the policy and practice of psychosocial rehabilitation.

Panorama gauged that the mood of the forum contained a lot of frustration. This stemmed from the belief that the government does not properly appreciate the value of non-clinical approaches in psychosocial rehabilitation.

For example, Gerry told us that in future it is proposed that before NDIS can be approved, people will be expected to have "exhausted" all treatment options available. Many pointed out that this was unrealistic in real life.

Catherine from Wellways questioned how it was even possible to measure the "exhaustion" of possible treatment options. Many

people cannot even access some of the available options. For example, it is very difficult for people to get an appointment with a psychiatrist outside of hospital. And even if one can do this, there is the bill (\$720 last time your correspondent went) which is beyond many people.

Gerry responded that there had been a court decision where a person who was unable to AFFORD a treatment had been deemed by the court to have "exhausted" that option.

Lou of Mind pointed out that treatment itself can paradoxically "impact and compound functional impairment," and functional impairment is the chief focus of NDIS. So a treatment may remove symptoms (stop you hearing voices, for example), but it may also cause sedation that could reduce your function. Sometimes, clinical treatment can affect memory and cognition and even cause new mental health issues. And this is even before we get to a reduction of physical function.

Another point of contention is the plan to cut the budget for "Social and Community" access funding in half. Dorothy from WAPR said that S&C was known to be "capacity-building," in that it increases

people's ability to function in social settings. Is this not the outcome we are all looking for? "It is not just going out for cups of coffee."

Gerry spoke about some anecdotes mentioned by Minister Mark Butler, where support workers on such coffee shop visits were said to be busying themselves with their university assignments or scrolling online. This gossip raises the question in the public's mind about whether S&C is always a "reasonable and necessary" support.

Dorothy warned, "We'll see how many more people start accessing emergency departments as a result of these cuts."

This all points to the fact that the government and the NDIS still looks at psychosocial rehabilitation through a clinical lens. We see that for many people, NON-Clinical services make a very big difference to a person's recovery journey. Gerry conceded that there seems to have been a decline in the value placed upon non-clinical psychosocial rehabilitation. And those who know of its true worth now have an "opportunity," as he put it, to put this case forward strongly.

ABOVE: Dr Gerry Naughtin was formerly an advisor to the NDIA

COMMUNITY ADVISORY COUNCIL COLUMN

With Tricia from the Council



The big news from May and the Federal Budget was about changes to the NDIS. Naturally we focused on this in our meeting, which was joined by James Herbertson, General Manager, Services.

Among the changes, which will begin rolling out in October, are new criteria for assessing eligibility for NDIS. Especially concerning people with autism and psychosocial diagnoses. New annual assessment forms are being introduced. There will also be a reduction in government spending on social and community access activities. There will be no more rolling over of plans.

Panorama has stories on this in the current (September) issue as well as August. James spoke reassuringly, however the mood among members in the council was somewhat anxious. We face a degree of uncertainty about the future as the changes are implemented between now and 2028.

Peter Neilson, Chief Development Officer spoke to us about the flow of information. With 60 sites, it sometimes happens that people may not receive news in a timely fashion. An example was last years' Art Show in Buckingham House Sydney, news of which did not reach some people in time.

Rachel and Doris of Marketing and Communications are working on improving things.

Peter also consulted us for ideas about a more attractive name for the 'Participant Portal.' This is the way people who access Flourish Australia's services can access their accounts on-line. Some of the ideas we came up with include 'Pipeline,' 'Winning', 'Grapevine,' 'People's Connection,' and 'Bridging'.

We reviewed Flourish Australia's Alcohol and Other Drugs misuse policy along with Mohammed Alkhub, General Manager of Business Excellence and made some suggestions about more appropriate wording.

Our tenth birthday plans are underway, with a timetable for celebrations including the singing of a 10th Anniversary song! We will be rehearsing soon! Our birthday celebration will be in November and Past Council members will be invited along too!

Also discussed were Council payment and Taxation issues, the length of council terms, including a six-month membership 'grace period' for new members, and the desirability of gaining experience on interview panels. Council members taking part on panels will provide great experience for future employment.

We also welcomed a new Council member, Brett W!

Our next meeting will be on 10 June 2026 (which will be reported in October Panorama).

ABOVE: Tricia, member of Flourish Australia's Community Advisory Council.
PHOTO BY NEIL FENELON



IDAHOBIT

International Day Against Homophobia, Biphobia, Interphobia and Transphobia

By Lisa Natrass



IDAHOBIT Day on the 17th of May raises awareness about the discrimination, stigma, and violence experienced by LGBTQIA+ people, while also promoting inclusion, equality, respect, and acceptance within communities, workplaces, schools, and services. This year, a group of youth from Flourish Australia's Young People's Program (YPP) at Penrith took part in these celebrations.

The young people didn't have far to travel to reach the IDAHOBIT Day 2026 celebration at Regatta Park, Emu Plains. A wide range of community organisations and support services attended this event, providing information, resources, and opportunities for young people to learn more about mental health, wellbeing, identity, support networks, and community engagement. There was also live music and a dramatic performance to enjoy.

Of our group on the day, six of the young people identify as being a part of the LGBTQ+ community, so this was an opportunity for them to socialise in a safe and inclusive environment while increasing their knowledge and understanding of diversity and acceptance.

Attendees were able to ask all kinds of questions, collect educational resources, and participate in activities throughout the day. The atmosphere was welcoming and positive, and everyone appeared engaged and interested.

One organisation that the young people learned about on the day was called Open Door Community of Christ. Located in our local area, this organisation offers social gatherings and support groups for people who identify as LGBTQ+, and their representatives at the event were very welcoming. They encouraged the young people to attend one of their monthly activities in a safe and supportive setting.

"This was my first weekend outing with the YPP," said Brandy. "I greatly enjoyed the experience of attending this IDAHOBIT Day event. I appreciated the information on offer, and really liked the range of activities available on the day. In particular, I loved the drama performances, and I'm interested in attending the Open Door Community of Christ in the future."

Overall, this outing was a valuable experience for all of us. By encouraging community connection, education, inclusion and awareness, this event aimed to allow people who are a part of the

LGBTQ+ community to feel like they really belong.

"As outlined in Flourish Australia's 'Working With People In The LGBTQ+ Community' guidelines, we are committed to supporting people's full participation within a diverse and inclusive community," said Peter Farrugia, Founding member of the Flourish Australia Rainbow Network. "We meet people where they are in life, respect their uniqueness, value their relationships, and support them to identify and achieve their recovery goals."

PHOTOS: Young people from the Penrith YPP enjoying their time at the IDAHOBIT Day 2026 event at Emu Plains. PHOTOS BY LISA NATRASS

**Flourish Australia
Penrith**

Darug Country

IEA, Westclub, CPS,
NDIS Outreach, YPP

Shop 1/99-109 Henry Street
Penrith NSW 2750

1300 779 270

Could Child Care Harm Mental Health?

Or Accelerate Development?

By Warren Heggarty



Robin Barker, a nurse and mother who authored "Baby Love," has contradicted Women's Minister Katy Gallagher. Ms Gallagher said the earlier children are put into child care, the better prepared they will be for school. Barker denies this. Except in special circumstances, she declares "childcare in the first few years is a second-rate option." She said that "parents should be encouraged to think of ways to avoid it or minimise it as much as possible." (Barker, 2026)

We know that many later mental health issues are linked to childhood experiences. Research links group care to a range of negative possibilities, including ADHD, anxiety, and other behavioural problems. (Barker, 2026) Regardless of what 'the evidence' says, group care for the under-threes is at odds with the normal development of this age group." Children up to three years of age are not really ready for the socialisation in the wider community that comes with preschool. (Barker, 2026)

Dr Nick Kowalenko, Infant child and adolescent psychiatrist, says that "so much of what constitutes emotional health and social wellbeing" in

later life has its foundation in early childhood. Children "are moving from the world of their very intimate social relationships with their families to a much wider world." (Kids Matter Australia, 2015)

Dr Sophie Havighurst, child psychiatrist, says, "Anything we do in the early years...is going to have life-long implications." So too, if things are going down a path towards mental health difficulties, at this age, it is still possible to make a positive difference with a "bit of tweaking." (Kids Matter Australia, 2015)

Robin Barker says, "The first three years is a time of rapid development that brings many idiosyncratic erratic behaviours that only a mother could love. Their inner world is chaotic so their outer world needs to be predictable and certain." (Barker, 2026)

This is why it is unrealistic to expect "parent like" commitment from educators caring for multiple youngsters. "...[b]abies and toddlers from ordinary good homes don't need to be surrounded by 'educators' and offered nutritionally sound lunches." A banana sandwich and a committed adult like a mother, father or grandparent is what they need. (Barker, 2026). Robin Barker acknowledges that there are some exceptions to this,

where severe hardship, neglect, or abuse are present. Or when the child needs some special service not found in the home. (Barker, 2026)

Not everyone agrees with Barker's idea that toddlers don't need "educators."

Professor John Frischetti of Newcastle University turns this all on its head in a podcast done for Newcastle University Radio on the 28th of March 2018. Beginning with some banter about the value of Early Childhood Workers, he derides the common "business development" model in which "Mums need early childhood workers so they can help the economy grow." Prof Frischetti is clear that Early Childhood Workers are teachers. (2NURFM, 2018)

He says that the first three years of life are "the most valuable and vulnerable." The creation of pathways in the brain "don't happen naturally, they have to be developed." He argues that early childhood education is necessary "particularly for students that might be coming from environments that might not have the multisensory and educational exposure of other families." (2NURFM, 2018). This view sees Early Childhood Education as a kind of social justice mechanism to even up the level of stimulation that children get. But who determines what stimuli and how much?

And what about free play? Free play is where children decide to make rocket ships out of cardboard boxes and make cordon bleu mud pies. This is not just mucking around: unstructured play is essential for child development and neither mud nor cardboard are the preserve of the rich. What's more, when they are a bit bigger, according to researchers like Jean Twenge, children will need to engage in play that is not only unstructured, but unsupervised!

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The Things We Put Off And Why We Probably Shouldn't

Pensive with Penelope



There's a particular kind of appointment I am very good at postponing.

Not the easy ones, I can book a haircut or a dentist check-up without much thought. It's the other ones. The more personal ones. The slightly uncomfortable ones. The ones that come with questions I'm not entirely sure I want answers to.

They tend to sit on a quiet mental list that goes:

I should book that.

I will book that.

I'll do it... just not this week.

And somehow, "not this week" becomes months or even years. I don't think I'm alone in that.

For many women, our health sits alongside everything else we're juggling, work, family, caring for others, keeping life moving. And if something can be delayed without anything immediately falling apart, it often is.

Especially when it comes to things like breast screening, cervical screening, skin checks... all the important things we keep meaning to get to.

Part of it is time. But if I'm honest, that's not the whole story.

Sometimes it's discomfort. Sometimes embarrassment. Sometimes that quiet thought: What if they find something?

So we leave it, not because we don't care, but because putting it off feels easier.

The thing is, our bodies don't run on a "when things calm down" timeline and neither does our mental health.

That background thought I really should get that checked niggles, it doesn't disappear. It lingers, adding a quiet weight to everything else.

And interestingly, the appointment itself is usually much simpler than we imagine.

A breast screen is quick — you check in, have the scan (a few minutes each side), it can feel a little uncomfortable, and then it's over.

A cervical screening test is also brief — just a few minutes with a GP or nurse in a private room. And for many people now, there's the option to collect the sample yourself using a simple swab, in privacy, at your own pace.

In Australia, this is usually covered through Medicare when done through your GP or a health service, and if your result is normal, you won't need another one for five years.

Which, when you really think about it, feels quite manageable.

We're lucky these services exist — GP clinics, BreastScreen Australia, national screening programs.

One thing Panorama has talked about before is the idea of not doing things like this alone. Having an accountability partner or having someone in your corner.

Lately, I've been thinking of it more as a health buddy, or a health check-in friend. Someone you can text and say, "I've been putting this off, have you booked yours?"

No pressure. Just a quiet agreement to look after yourselves together, alongside everything else you're managing.

Because things tend to happen more easily when you don't keep them to yourself. So maybe it doesn't need to be a big, organised moment.



Maybe it's simply this:

You think of the appointment — and instead of parking it, you act on it.

You book it. You put it in your calendar. You show up.

Not because something is wrong. Just because you're paying attention. The way you would for anyone else you care about. Because we are very good at showing up for other people. We just don't always offer ourselves the same consistency.

So consider this a gentle nudge — for both of us.

If something's been sitting in the background:

Book the appointment.

Go to the check.

Ask the question.

Not because it's convenient.

But because your health deserves not to be the thing that waits.

— Until next time,

Penelope



BreastScreen
NSW

A quiet reminder If something's been on your list...

Start here

- Book a GP appointment, or
- Self-book via:
 - BreastScreen Australia (free for eligible ages)
 - Cervical screening through your GP or clinic

What to expect

- Breast screen: quick scan, a little uncomfortable, over in minutes
- Cervical screening: short appointment, or self-collection option (simple, private swab)
- Usually covered by Medicare when done through a GP

Try a "health nudge person"

- Text a friend and book at the same time
- Check in with each other once it's done
- Keep it light — just enough to follow through

If it feels hard

- Book it online while you're thinking about it
- Add it to your calendar straight away

You don't need to do everything.

Just start with one thing.

Scan for more information:



*Cervical
screening*



*Breast
screening*

NDIS

Support for you, your family,
and your carers.

We will walk alongside you
on your recovery journey, as
well as help you live in the
community, learn new skills,
and do the things that are
important to you

AT FLOURISH AUSTRALIA we can assist you to:

Our NDIS services

Flourish Australia is a registered NDIS provider. We support people who have a complex mental health issue to live the life they want to live. We have been in business since 1955 and have assisted many people to:

- Find a job
- Undertake training or study
- Make friends
- Connect with their communities
- Sort out day-to-day issues
- Find a place to live
- Stay healthy
- And much more

The most important things to us at Flourish Australia are your health, wellbeing, and recovery journey.

We are here to help

We know that applying for the NDIS or seeking support can be a confusing and intimidating process. Contact us and we will help you during all stages of the process.

📞 1300 779 270 ✉️ hello@flourishaustralia.org.au

🌐 www.flourishaustralia.org.au

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Find out if you can
access the NDIS



Think about your current
needs, goals, and supports



Meet with your NDIS
planner and get a plan



Decide which service providers
you want support from



Put your plan into action



flourish
AUSTRALIA

Where mental wellbeing thrives

NDIS