2011
The Black Dog Institute
Annual Report

We're going places

BLACK DOG INSTITUTE
With the Black Dog Institute celebrating its 10 year anniversary in 2011, it is worth noting that it has been a shared journey achieved with the support of many individuals, organisations and Governments.

We wish to sincerely acknowledge this support that has been vital to our continued success and growth.

It is our belief that the journey has only just started.

From our modest beginnings we now have an ambitious national agenda with the aim of ensuring Black Dog Institute services and programs are available to all Australians who fight the battle with mood disorders such as depression and bipolar disorder.

Knowing we can help others is a strong motivation, and if we question ourselves, is probably the core reason why we all give so unreservedly toward this cause.

Together, we can make a difference.
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Chairman’s Report
Mr Peter Joseph AM

On February 12, 2012, we celebrate our 10th anniversary as the Black Dog Institute.

From humble beginnings in a run-down building in Randwick, the Institute is now a modern mental health facility that by its mere presence demonstrates what is possible for this once undervalued area of medicine.

During this time the Institute has managed to build its reputation as a leading authority in the high prevalence (and very high cost) mood disorders of depression, anxiety and bipolar disorder.

Much of that success can be attributed to the leadership of the inaugural Executive Director, Professor Gordon Parker, driving very high standards of excellence across four related areas namely: research, clinical services, professional education and training, and community programs.

Professor Parker stepped down at the end of 2011 as Executive Director but I am pleased to advise he will be continuing his research and clinical activities within the Black Dog Institute.

The new Executive Director is Professor Helen Christensen. She has an outstanding record as a psychologist, researcher, author and mentor. She is also an expert in the use of eHealth and how individuals can benefit most effectively from modern technology. Helen is an alumnus of UNSW and has spent the last 20 years at the ANU in Canberra where she directed and developed the Centre for Mental Health Research.
The Board of the Institute sees Professor Christensen as the right person at the right time to pursue an ambitious national agenda. As well as being a distinguished academic, our new Executive Director cares passionately about the practical applications of research into the causes and treatment of depression.

Our shared vision and programs align with two fundamental changes taking place in Australia; the benefits of a digital economy and the National Broadband Network’s capacity to deliver eHealth, and especially eMental Health initiatives; and increased investment in the wellbeing of Australia’s rural and regional communities.

Senior Victorian Liberal politician and BDI ambassador, Andrew Robb, in his book Black Dog Daze. Public Life. Private Demons, has declared: “Black Dog programs would go well in other States”. This is a challenge that the Black Dog Institute is keen to take up, to ensure that all Australians benefit from the Institute’s innovative programs.

Our growth has been supported from many quarters. The skills of a hard working and dedicated Board have helped forge and strengthen relationships with both the private and public sector. The challenge will be to deliver on our ambitious national agenda.

We have a remarkable team of people working at the Institute, dedicated to helping those with mood disorders. They give without stint in order to destigmatise mood disorders, encourage people to come forward for diagnosis and treatment, and match those battling mental illness with the best possible clinical research-based remedies.

We are also thankful for the ongoing support from governments, NSW Ministry of Health, the Mental Health and Drug and Alcohol Office (MHDAO), the Commonwealth Department of Health and Ageing (DoHA), the National Health and Medical Research Council (NHMRC), and for donations from individuals and corporations. The close association we have with the Prince of Wales Hospital, UNSW, and the Prince of Wales Medical Research Institute, enhances our mutual reputations.

There is also our fruitful partnership with The Health-Science Alliance, Australia’s first Academic Health Science Centre, based on the UNSW/Randwick public hospital campuses. Comprising nine of the country’s top medical research institutes and health care providers, the Alliance is working toward harnessing and integrating the research, education, training and clinical expertise of each partner to maximise optimal health outcomes for patients and the community.

We have built these strong foundations and it is time now to build scale and capacity as we seek to make a real difference across the entire Australian community.

Peter Joseph AM
Chairman
We're going places

10 years at Black Dog Institute
The Legacy
Professor Gordon Parker AO

Following 10 years as the inaugural Executive Director, Professor Gordon Parker stepped down from the position at the end of 2011.

During that time and in the years prior at the Institute’s predecessor, the Mood Disorders Unit, Professor Parker would think a lot about hope.

That hope was passed on to others – whether it be patients who suffered the most severe mood disorders, their loved ones, their peers and others around them who all desired to bring the black dog to ‘heal’.

In a new book, A Piece of My Mind: A Psychiatrist on the Couch, Professor Parker describes himself as a zealous, stubborn and tenacious researcher (to clarify issues), who set about establishing new structures to ensure that new approaches to diagnosis and management could be put into place – and then evaluated both by professionals and community.

Professor Parker quotes Lin Yutang (the influential Chinese writer): “Hope is like a road in the country: there was never a road but when many people walk on it, the road comes into existence”.

“The establishment of the Institute and my decade as Executive Director was the realisation of my hopes. I believe that our models and approaches to diagnosing and managing mood disorders have brought hope to many, and I hope that if they are truly superior they will be taken up more broadly. That outcome could be advanced by either the profession or by the community – and ideally both.”

In stepping down, Professor Parker expressed his pleasure in being succeeded by Professor Helen Christensen.

“His own action-orientated style, and time spent considering surgery as a career, instilled in him a sense of urgency and an attitude of ‘never give up’ on people. He talks of the resilience he observes in everyday practice and the honour of being ‘a privileged guest’ in people’s lives.”

Stephanie Webster, Consumer Educator (from her review of Professor Parker’s book, ‘A Piece of My Mind. A Psychiatrist on the Couch’ – see full review in this report.)
The Vision

For the past 10 years the Black Dog Institute – even longer if you take into account its predecessor, the Mood Disorders Unit – has built solid foundations under the stewardship of its founding Executive Director, Professor Gordon Parker, as a leading authority in the field of mood disorders.

It has also benefited from the guidance of other outstanding research psychiatrists since 1985, including Professors Henry Brodaty, Philip Mitchell, Kay Wilhelm, Philip Boyce, Marie-Paule Austin, Senior Hospital Scientist, Dusan Hadzi-Pavlovic and Ian Hickie, to name but a few. The Institute is in excellent shape, with a brilliant brand and outstanding programs. Indeed, the Institute has established a remarkable platform from which we can springboard into the future.

Into the next decade, we need to be a dynamic organisation able to adapt to change in a world so strongly influenced by new technologies that have the potential to provide important advancements for mental health as a whole.

In the last 10 years technology has changed the way we do research, and also what is possible in research. It will now change the way we offer services and the types of services that are offered.

Looking to the future, I can see the Black Dog Institute offering new ‘virtual’ services nationally and internationally. Depression is estimated to become the second leading cause of disability in 2030, second only to HIV/AIDS. The new virtual treatment and prevention services will allow the Black Dog Institute to take its place as an international player in lowering depression risk and prevalence globally.

I also see the Institute focusing on prevention as a second weapon along with treatment in the battle against depression. I would like to see depression prevention programs in every school and workplace in Australia. We will also design programs and promulgate them to lower suicide risk.

So I see the goals of the Black Dog Institute as those that reduce the burden of depression globally, expand opportunities for prevention through community programs, build our research capacity to underpin these programs, and thus make the Black Dog Institute nationally and internationally recognised as a mental health centre of excellence.

To achieve these goals, we need to embrace new technologies and to participate in Australia’s national health reform agenda. Critically, we also need to recognise that our supporters, who want a better world for those with mental illness, are key to pressuring for new reforms and funding, and have much to offer us as active members of our organisation through their expertise, enthusiasm and fundraising.

Professor Helen Christensen
BA (Hons) (Syd), MPsych, PhD (UNSW), FASSA

Helen Christensen
Executive Director, Black Dog Institute
About the Institute

The name Black Dog has been widely adopted in our community as a description for depression. It has become very much part of the media lexicon when matters on mood disorders are raised.

The Black Dog Institute was launched in 2002 and is today recognised in Australia and internationally as a leading authority in the field of mood disorders. The Institute’s logo – the ‘V’ for victory gesture and the shadow of the black dog’s head – provides a beacon for people seeking help.

The name ‘Black Dog’ is a term that Sir Winston Churchill, the former wartime British Prime Minister – noted for his courage and endurance – used to describe his own depression.

John Bevins, (formerly John Bevins Advertising Pty Ltd) developed the concept and design that captured the famous Churchill symbol for the Institute’s logo.

The Black Dog Institute is affiliated with the Prince of Wales Hospital and with UNSW at Randwick, in NSW. The Institute’s predecessor was the Mood Disorders Unit (the MDU) which was established in 1985 at Prince Henry Hospital, Little Bay, NSW.

Our patron is Her Excellency, the Governor of New South Wales, Professor Marie Bashir AC CVO.
The Institute’s Business Model

The Institute’s core business model is represented by four interactive streams:

- Research
- Clinical Services
- Professional Services
- Community Programs

These streams are interdependent with each other – clinical observation shapes research hypotheses, while research findings are filtered back into clinical management, which in turn shapes the content of professional education and training programs as well as being disseminated to the community.

In addition, eMental Health activities sit cross-functionally across all streams, as we see a growing trend to use electronic technologies as a key enabler, particularly with the Institute stepping up its efforts to ensure its services are made more widely available across Australia.

The environment in which the Institute operates is rapidly changing. The Institute recognises that the development of internal capabilities and operational efficiencies are necessary for future success. To this end, the foundation stream of Internal Capabilities now underpins the four strategic pillars to focus on operational efficiencies, culture, technology, marketing and fund-raising as enablers of growth.

The Institute is an independent non-profit company with a distinguished Board with members drawn from many walks of life. It has close links to numerous other organisations, in particular UNSW, and Prince of Wales Hospital, as part of the South Eastern and Illawarra Health Service. The Head of the UNSW School of Psychiatry, Professor Philip Mitchell, has his principal office at the Institute, while many of the School’s teaching sessions are held at the Institute.

Funding of the wider Institute activities comes from a number of sources. These include research grants from the National Health and Medical Research Council (NHMRC) via UNSW, general funding from the State Government through the NSW Ministry of Health and the Mental Health and Drug and Alcohol Office, and from the Commonwealth Government via the Department of Health and Ageing, as well as private donations and some generous sponsorships.

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Operating Plan

“The Institute is going through a period of change which brings conflicting emotions of nostalgia for its origins and excitement for its future. At this junction I acknowledge and praise the work of those who have built this formidable institute under the leadership of Professor Gordon Parker and my predecessor, Barry Graham. Their vision and tireless work has created a significant impetus upon which the next generation of custodians of the Black Dog Institute will continue to build.”

Will Bonney, General Manager

Operations

The mission of the Institute remains constant – to advance the understanding, diagnosis and management of the differing mood disorders nationwide through raising clinical standards, research, education, training and the development of cutting-edge tools for professionals and the public. In simple terms, our goal is to help all Australians find peace of mind.

Our online projects endeavour to leverage the expertise of the Institute by sharing our knowledge and the effective tools we develop with the broader community. The innate challenge of translating psychiatric knowledge into user-friendly and effective online tools has required the Institute to develop or acquire capabilities outside of its core competencies and draw on the support of technical experts for guidance and project management assistance. The resultant pool of capabilities now embedded in its competencies will hold the Institute in good stead as it broadens its reach through online tools and programs in future years.

This report outlines the advances made in each work stream and the impact the Institute has been able to deliver in the past year.

...our goal is to help all Australians find peace of mind...
Services & Operations Architecture

How does the Institute deliver to its different 'markets'? Services are carefully designed to meet the specific needs of various market segments, delivered via complementary online, face-to-face and print channels.
The Income Statement and Balance Sheet from the Institute's Annual Financial Report for the year ended 30 June 2011 is set out below.

**Black Dog Institute 30 June 2011**

**Income Statement**

<table>
<thead>
<tr>
<th>Income Statement</th>
<th>30-June-2011 (12 months)</th>
<th>30-June-2010 (12 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recurring grant from NSW Ministry of Health</td>
<td>1,425,600</td>
<td>1,394,700</td>
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<tr>
<td>Non-recurring grant from NSW Ministry of Health</td>
<td>664,160</td>
<td>120,060</td>
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<tr>
<td>Non-recurring grant from Commonwealth – Mobile Tracking System</td>
<td>576,403</td>
<td>340,400</td>
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<td>Non-recurring grant from Commonwealth – Strategic Mental Health</td>
<td>500,000</td>
<td>1,500,000</td>
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<tr>
<td>AusAid Developing Countries Grant</td>
<td>(1,756)</td>
<td>92,554</td>
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<tr>
<td>Donations</td>
<td>1,454,876</td>
<td>1,322,901</td>
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<tr>
<td>Facility fees</td>
<td>384,725</td>
<td>303,534</td>
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<tr>
<td>Education and training fees</td>
<td>343,033</td>
<td>146,752</td>
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<tr>
<td>Revenue from fundraising event</td>
<td>73,435</td>
<td>221,584</td>
</tr>
<tr>
<td>Other revenue</td>
<td>125,878</td>
<td>208,390</td>
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<tr>
<td><strong>Revenue</strong></td>
<td>5,546,354</td>
<td>5,650,875</td>
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<tr>
<td>Employee benefits expenses</td>
<td>(2,258,892)</td>
<td>(2,041,434)</td>
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<tr>
<td>Depreciation and amortisation expenses</td>
<td>(253,508)</td>
<td>(238,967)</td>
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<tr>
<td>Education and training</td>
<td>(454,462)</td>
<td>(288,544)</td>
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<tr>
<td>Professional fees</td>
<td>(2,962,742)</td>
<td>(2,946,988)</td>
</tr>
<tr>
<td>Expenses related to fundraising event</td>
<td>(43,560)</td>
<td>(77,507)</td>
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<tr>
<td>Other expenses</td>
<td>(1,230,780)</td>
<td>(1,124,772)</td>
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<tr>
<td>(Deficit)/Surplus before income tax</td>
<td>(1,657,590)</td>
<td>(1,067,337)</td>
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<tr>
<td>Income tax expense</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>(Deficit)/surplus for the period</td>
<td>(1,657,590)</td>
<td>(1,067,337)</td>
</tr>
<tr>
<td>Other comprehensive income</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total comprehensive income for the year</strong></td>
<td>(1,657,590)</td>
<td>(1,067,337)</td>
</tr>
</tbody>
</table>

**Statement of Financial Position**

<table>
<thead>
<tr>
<th>Statement of Financial Position</th>
<th>30-June-2011 (12 months)</th>
<th>30-June-2010 (12 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>1,598,779</td>
<td>3,007,030</td>
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<tr>
<td>Trade and other receivables</td>
<td>749,873</td>
<td>749,383</td>
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<tr>
<td><strong>Total Current Assets</strong></td>
<td>2,348,652</td>
<td>3,765,094</td>
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<tr>
<td>Non-current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>3,814,481</td>
<td>3,917,241</td>
</tr>
<tr>
<td>Total Non-current Assets</td>
<td>3,814,481</td>
<td>3,917,241</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>6,163,133</td>
<td>7,682,335</td>
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<tr>
<td><strong>LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade and other payables</td>
<td>504,182</td>
<td>365,794</td>
</tr>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td>504,182</td>
<td>365,794</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>504,182</td>
<td>365,794</td>
</tr>
<tr>
<td><strong>NET ASSETS</strong></td>
<td>5,658,951</td>
<td>7,316,541</td>
</tr>
<tr>
<td><strong>EQUITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retained earnings</td>
<td>5,658,951</td>
<td>7,316,541</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td>5,658,951</td>
<td>7,316,541</td>
</tr>
</tbody>
</table>

A copy of the complete Annual Financial Report is available on application. Requests for further information should be directed to the Institute's General Manager. The full financial report is posted on the Institute's website: www.blackdoginstitute.org.au

The information shown relates to the Institute's company accounts and does not include additional funds made available for research through collaborative arrangements with other organisations, including UNSW. Such details are provided under 'Research Funding'.
New tools break down borders to help people with mood disorders

eMental Health is an umbrella term that describes web-based interactive self-help programs, online therapy, online assessments, support groups, expert systems and virtual reality programs.

The technology driven programs have the advantage of giving access to more and more Australians to online programs and services. Previously, for example, in remote communities, such resources had been beyond their reach.

For some time now, the Black Dog Institute has been at the forefront in offering creative and leading edge solutions using electronic technologies such as computers and mobile phones to help people with mood disorders like depression and bipolar disorder.

The Institute welcomed the Federal Government announcement, as part of the National Mental Health Reforms, that it was introducing a number of eMental Health strategies and measures, including a mental health online portal which will provide Australians with access to a suite of online programs and services.

Both the Executive Director, Professor Helen Christensen, and the Director of eMental Health, Associate Professor Judy Proudfoot, sit on the eMental Health Advisory Committee, which assists the Department of Health and Ageing in the delivery of new initiatives as part of this agenda.
The wide variety of Institute online services

During 2011, our suite of online services targeted the full mental health spectrum – from prevention and diagnosis, through to management. This requires tremendous expertise, creativity and technical and clinical oversight to ensure the resulting products are relevant and effective.

Our staff and our vendors are fuelled by passion for the cause, delighted that our expertise, often built in other industries, can be directed to such an important cause.

Through all of this, we are also developing a stronger internal capability to support, maintain and enhance the digital tools and online services that have been delivered over the last few years. Privacy, usability, relevance and security are fundamental to the continued success of these systems. We are working closely with industry experts and external service providers to ensure that these elements can be secured long-term.

Some highlights of 2011

- The myCompass program, available on mobile phones and computers, assists people with mild to moderate depression, anxiety and stress. The program enables users to track their moods, behaviours and events by providing SMS or email reminders and the ability to monitor information whenever and wherever they are. Feedback is provided in graphical form and there are also interactive self-help modules, fact sheets, tips and a diary. Trials are continuing.

- The Bipolar Education Program (see www.blackdoginstitute.org.au for access) provides information and education for people with bipolar disorder and their families and carers. Topics include, diagnosis, medications, causes of bipolar disorder, psychological treatments and wellbeing plans. There are interviews with experts as well as personal testimonies and advice from well-known people with the disorder.

- The Depression Education Program is an audiovisual guide to understanding and managing depression. It explains the different types of depression, how to get help and how to stay well. A self-test and personal stories are also available.

- Expansion of the BITE BACK youth website was undertaken to include interactive positive psychology modules. These modules encourage young people to improve their wellbeing and thus flourish in life. The existing emphasis on sharing real personal stories and providing peer support continues to be a core part of the site.

- Redesign of the Institute’s main website has advanced the usability and navigation of our ever growing content and online tool sets.
A multimedia learning program for health professionals has been created. It simulates several patient consultation sessions. This approach provides a safe and controlled environment for professionals to develop skills in patient interviewing, observation of clinical features and accurate diagnosis.

The wider distribution of the online Mood Assessment Program (MAP) broadened its reach to health professionals and their patients across Australia.

The online Bipolar self-test (Mood Swings Questionnaire – MSQ) aims to enable individuals to assess whether their mood swings are significant enough to require expert diagnosis and management.

Continued development of our online research resources (search on ‘resources’ on www.blackdoginstitute.org.au) improves information for both our research participants and our researchers.
Black Dog Institute Website

Makeover for website

During 2011, the Black Dog Institute revamped its website www.blackdoginstitute.org.au to give it a fresh new look and design.

The popular website was first launched in 2004 and had remained virtually unchanged in recent years, apart from some small cosmetic alterations.

However, with the expanding demand for online information and services by the public and health professionals, the Institute decided it was time to create a contemporary and easier to use website.

The website is the entry point to the Institute for many people across Australia, as well as internationally. With this in mind, the changes needed to specifically ensure the new website is both welcoming and that information is easy to find.

The website was always meant to be a ‘living and breathing’ website that would be refined and developed constantly. In those few short years since it started, the website was ranked first in the world for quality and information on bipolar disorder, scoring higher than major International bodies such as the U.S. National Institute of Mental Health (NIMH).

Visually, the new website has a sleek, modern and fresh looking design and presentation.

From a user-experience perspective, members of the public and health professionals have commented that they now find it quicker to reach and to locate information with the creation of drop-down menus and the repositioning of certain sections of the site, including direct access to the online tools and self-tests.

The Institute had approached its long-term web design partner Webqem to help develop this new contemporary and easy to use interface for the website. The Institute is particularly grateful to Webqem who provided $20,000 worth of pro bono work to implement the changes.
Overview of work streams

BLACK DOG INSTITUTE STREAMS

• RESEARCH
• CLINICAL SERVICES
• PROFESSIONAL SERVICES
• COMMUNITY PROGRAMS
“The Institute’s model of clinical observation shaping many research hypothesis and research findings, then these helping to ‘shape’ clinical management and inform professionals and the community via publications and our website, is a powerful and productive approach. This rich paradigm is likely to be further enhanced in the future by new Executive Director Helen Christensen’s keen interest in eHealth technologies and their application to eMental Health via therapeutic programs.”

Gordon Parker, Research Director [Resigned 31 December 2011]

As detailed from the listed publications in this Report, research output has been high, the breadth of research activity is extraordinarily broad and we can observe an increasing pattern of research studies evaluating Institute activities.

It is also apparent that Institute researchers are increasingly taking part in collaborative studies with researchers in Australia and, in particular, from overseas. This latter move partly reflects the nature of much psychiatric research these days. For example, the paper by the psychiatric GWAS (Genome-Wide Association Study) Consortium Bipolar Disorder Working Group (which included Professor Philip Mitchell from the Institute, and nearly 200 other co-authors) reflects the large number of collaborators and data bases required internationally to pursue genetic contributions to psychiatric conditions such as the bipolar disorders.

The Institute has actively encouraged international collaborations. One manifestation of the collaborative approach in 2011 was the distinctly larger number of psychiatrists who have visited the Institute from overseas centres to spend weeks or months at the Institute and who will continue to contribute to joint research studies.
Important research studies evaluating Institute activities include publications on the usefulness of the Black Dog Institute Depression Clinic in providing a new diagnosis or paradigm and then demonstrating the subsequent benefits at a three-month follow-up review; the impact of the Developing Countries Program to international recipients; the Institute’s online bipolar self-test; and the impact on an individual receiving a potential diagnosis of a bipolar disorder from that self-test in terms of the subsequent management changes and improvement in therapeutic outcome.

While all our granting bodies are acknowledged later in this Report, it should be emphasised here that substantive funding from an NHMRC Program Grant, from the Commonwealth Department of Health and Ageing and from the NSW Ministry of Health have allowed such a broad range of research activities to be pursued and ensured high research output.
Research Highlights

(Institute staff and affiliates are in bold.)

The Antenatal Risk Questionnaire (ANRQ): Acceptability and use for psychosocial risk assessment in the maternity setting

**Austin, Colton, Priest, Reilly, Hadzi-Pavlovic**

This study aimed to assess the value of the Antenatal Risk Questionnaire (ANRQ) as a predictor of postnatal depression; to evaluate the questionnaire’s acceptability among pregnant women and midwives; and to consider its use as part of a model for integrated psychosocial risk assessment in the antenatal setting. Results indicated that the most clinically useful cut off on the ANRQ was a score of 23 or greater and that the acceptability of the ANRQ was high among both women and midwives. This allows the conclusion that the ANRQ is a highly acceptable self-report psychosocial assessment tool which aids in the prediction of women who go on to develop postnatal depression, and may form a key component in screening intervention aimed at the early identification of mental health risk and morbidity across the perinatal period.

A systematic review of treatments for refractory depression in older people

**Cooper, Brodaty, deMendonca Lima, Livingstone, Lyketsos, Rabins, Blazer, Katona**

We reviewed the management of Treatment Refractory Depression in older people (aged 55+). It was found that lithium-only augmentation was assessed in more than two trials, and it had a response rate of 42 per cent. Only two of the studies included comparison groups receiving no additional treatment. None of the participants in these groups responded. In general, findings indicated that half the participants responded to pharmacological treatments, indicating the importance of managing treatment refractory depression actively in older people. The only treatment for which there was consistent evidence of effectiveness was lithium augmentation. In conclusion, more double blind randomised controlled trials for management of treatment refractory depression in older people are needed, encompassing pharmacological and non-pharmacological therapies and populations that reflect the physical and cognitive impairment commonly present in older people with depression.
Objective assessment of depression using video and brain imaging

Breakspear, Goecke, McIntyre, Karim, Yuen, Powell, Boonstra, Parker

There currently exist no laboratory-based measures of illness expression, course and recovery, and no such markers of end-points in both clinical and research settings. We are undertaking a large multimodal research program, combining audio-video analysis with brain imaging technology, to underpin a new generation of objective laboratory-style markers of illness expression. This study involves depressed patients and matched healthy controls. Audio-video recordings of a subject’s facial expressions whilst viewing emotionally salient film clips are analysed by computer-based algorithms to characterise facial affect, and compared with clinician-census and subject-rated symptom severity scales, placing emphasis on diagnosis, treatment response, outcome at three months and social disability. Functional and structural imaging data are also acquired from the same subjects. Innovative analyses of these images help characterise cortical network activity. Analysis of the brain activity in these subjects can predict the presence or absence of a major mood disorder. This project is now also adding new techniques (e.g., putting into perspective), may be associated with vulnerability for mood disorders generally, with the latter likely active within the general population, regardless of biological vulnerability to disorder.

Cognitive regulation of emotion in bipolar I disorder and unaffected biological relatives

Green, Lino, Hwang, Sparks, James, Mitchell

This study examined the use of particular cognitive strategies to regulate emotion in people with bipolar I disorder and their unaffected biological relatives. These processes are relevant to mood dysregulation and may relate to cognitive deficits experienced by patients and their relatives. Findings indicated that people with bipolar disorder reported more frequent use of rumination, catastrophising and self-blame, and less frequent use of putting into perspective, in response to negative life events, compared to both healthy controls and biological relatives. Furthermore, frequent use of rumination was associated with increased mood symptoms (depression, anxiety and stress) and hypomanic personality traits in bipolar probands. By contrast, unaffected relatives of bipolar patients were more likely to engage in catastrophising and self-blame in the face of negative experiences, with greater use of these strategies associated with increased mood symptoms and propensity for hypomania. In all participants (including healthy controls), less frequent use of ‘putting into perspective’ was associated with increased stress, anxiety, and depression symptoms. The results suggest that excessive use of maladaptive strategies, as well as reduced employment of adaptive cognitive reframing techniques (e.g., putting into perspective), may be associated with vulnerability for mood disorders generally, with the latter likely active within the general population, regardless of biological vulnerability to disorder.

Marine omega-3 fatty acids and mood disorders - linking the sea and the soul

Hegarty, Parker

This review – in a series titled Food for Thought – considered the contribution of omega-3 fatty acids to mood disorders. In comparison to a review published in 2006 (American Journal of Psychiatry, Black Dog Institute researchers), the evidence supporting fish oil as a strategy for assisting people with mood disorders is appearing less convincing, despite many studies showing that low levels of omega-3 fatty acids are associated with a greater chance of depressive and bipolar disorders commencing. The review indicated that benefits of omega-3 fatty acids may be very variable depending on the preponderance of EPA or DHA constituents, while any benefits appear greater for depression than for ‘high’ mood states in those with a bipolar disorder.

A three-week, randomised, sham-controlled trial of transcranial direct current stimulation in depression

Loo, Mitchell, Sachdev, Alonzo, Martin, Galvez

This study investigated a potential new treatment for depression – transcranial Direct Current Stimulation (tDCS) – in the largest ever trial of its kind conducted in the world. tDCS involves stimulating frontal areas of the brain with very small, barely perceptible electrical currents, while patients remain awake and alert. The procedure has no known serious side effects. Participants in the trial received a 20-minute treatment session every weekday for three weeks. Results showed significantly greater improvement for participants who received active treatment compared to a placebo. In addition, further improvement was found over a three-week extension period. Recruitment is ongoing for further studies of tDCS specifically investigating ways to optimise its therapeutic effects.
Mindfulness-based cognitive therapy vs cognitive behaviour therapy as a treatment for non-melancholic depression

Manicavasagar, Parker and Perich

Mindfulness-Based Cognitive Therapy (MBCT) and Cognitive Behaviour Therapy (CBT) were compared as treatments for non-melancholic depression. MBCT was found to be as effective as CBT in the treatment of current depression. However, CBT participants with four or more previous episodes of depression derived greater benefits at eight weeks post-treatment than those with less than four episodes. MBCT participants benefited equally, irrespective of the number of prior episodes reported.

Comparison of depressive episodes in bipolar disorder and in major depressive disorder within bipolar disorder pedigrees

Mitchell, Frankland, Hadzi-Pavlovic, Roberts, Corry, Wright, Loo, Breakspear

This study compared clinical features of depressive episodes across participants with major depressive disorder and bipolar disorder from within bipolar disorder pedigrees, and assessed the use of a recently proposed probabilistic approach to distinguishing bipolar from unipolar depression. A secondary aim was to identify subgroups within relatives with major depression that were potentially indicative of ‘genetic’ and ‘sporadic’ subgroups. It was found that bipolar depression was characterised by significantly higher rates of psychomotor retardation, difficulty in thinking, early morning awakening, morning worsening of mood and psychotic features. Two clusters within the major depressive disorder sample were found, one of which demonstrated features characteristic of bipolar depression, suggesting a possible ‘genetic’ subgroup. Thus, a number of previously identified clinical differences between unipolar and bipolar depression were confirmed among participants from within bipolar disorder pedigrees. The major depressive disorder clusters potentially reflect genetic and sporadic subgroups which, if replicated independently, might enable an improved phenotypic definition of underlying bipolarity in genetic analyses.

A high-risk study of bipolar disorder: childhood clinical phenotypes as precursors of major mood disorders

Nurnberger, McInnis, Reich, Kastelic, Wilcox, Glowinski, Mitchell, Fisher, Erpe, Gershon, Berrettini, Laite, Schweitzer, Rhoadarmer, Coleman, Cai, Azzouz, Liu, Kamali, Brucksch, Monahan

As the childhood precursors of adult bipolar disorder (BP) are still a matter of controversy, this study aimed to report the lifetime prevalence and early clinical predictors of psychiatric disorders in offspring from families of probands with DSM-IV BP compared with offspring of control subjects. Offspring aged 12 to 21 years in families with a proband with BP and similarly aged offspring of control parents were tested. It was found that at a mean age of 17 years, cases showed a 23.4 per cent lifetime prevalence of major affective disorders compared with 4.4 per cent in controls. The prevalence of BP in cases was 8.5 per cent vs 0 per cent in controls. No significant difference was seen in the prevalence of other affective, anxiety, disruptive behaviour, or substance use disorders. Among ‘case’ subjects manifesting major affective disorders...
there was an increased risk of anxiety and externalising disorders compared with cases without mood disorder. In cases but not controls, a childhood diagnosis of an anxiety disorder or an externalising disorder was predictive of later onset of major affective disorders. It is concluded that childhood anxiety and externalising diagnoses predict major affective illness in adolescent offspring in families with probands with BP.

Large-scale genome-wide association analysis of bipolar disorder identifies a new susceptibility locus near ODZ4

Psychiatric GWAS Consortium Bipolar Disorder Working Group (including Mitchell)

The consortium conducted a combined genome-wide association study (GWAS) of 7,481 individuals with bipolar disorder (cases) and 9,250 controls. There was also a replication study. An analysis of all 11,974 bipolar disorder cases and 51,792 controls confirmed genome-wide significant evidence of association for gene region CACNA1C and identified a new intronic variant in ODZ4. We identified a pathway comprised of subunits of calcium channels enriched in bipolar disorder association intervals. Finally, a combined GWAS analysis of schizophrenia and bipolar disorder yielded strong association evidence for SNPs (Single Nucleotide Polymorphisms) in CACNA1C and in the region of NEK4-ITIH1-ITIH3-ITIH4. Our replication results imply that increasing sample sizes in bipolar disorder will confirm many additional loci.

Evaluating the utility of a bipolar self-test screening measure

Parker, Blanch, Fletcher, Greenfield

We investigated the utility of a bipolar self-test screening measure – the Mood Swings Questionnaire (MSQ) – located on the Black Dog Institute website. During the initial six-month study period, 125,000 people accessed the study web page, with over 17,000 agreeing to participate. Participants were asked a series of questions about mood/treatment history, strategies used to cope with mood problems and previous help-seeking. Most (66.8 per cent) had previously sought help from a health professional, with 66.7 per cent having received a diagnosis of depression and 20.7 per cent a diagnosis of bipolar disorder. In terms of strategies used to help with mood problems, many (64.1 per cent) had taken medication; 63.6 per cent had sought further information; and 61.7 per cent had engaged in exercise. Over half received an MSQ-diagnosis of bipolar disorder. In three months we will follow-up participants to determine the impact of this ‘diagnosis’, including whether further professional help was sought and changes in coping strategies over time. If we can demonstrate that alerting participants to the possibility of a bipolar disorder via online screening measures such as the MSQ then leads to more appropriate treatment and an improved condition, the utility of the screening procedure will be supported.

Evaluating the first 1000 patients referred to a specialist depression clinic: A case for tertiary referral facilities

Parker, Fletcher, Barrett, Breakspear, Rees

This study evaluated the first 1,000 patients attending the Institute’s Depression Clinic and also reviewed progress of a significant percentage of these patients three months later. Some 40 per cent of those with a primary mood disorder were diagnosed with a bipolar disorder, with three-quarters of them receiving this diagnosis for the first time. The assessing clinicians re-diagnosed the mood disorder for two-thirds of the patients and changed the management significantly for nearly 90 per cent. At review, those with a bipolar disorder tended to have the greater improvement rate. Findings therefore support the importance of identifying bipolar disorder and distinguishing depressive subtypes to shape more targeted treatments.

Specificity of depression following an acute coronary syndrome to an adverse outcome extends over five years

Parker, Hyett, Walsh, Owen, Brotchie, Hadzi-Pavlovic

Many studies have demonstrated that depression is associated with a worse cardiovascular outcome and increased risk of death in those experiencing an acute coronary syndrome (ACS). This study reports a five-year follow up of nearly 500 patients who were hospitalised for ACS and who had been reviewed on three separate occasions. We found no support for either lifetime depression or depression preceding the coronary event providing any risk. Those, however, who developed depression following the ACS had a distinctly poorer outcome, with such ‘timing’ allowing a refined hypothesis that depression commencing around the time of a heart attack may disrupt autonomic functioning via influencing heart rate variability and advancing inflammatory processes.
Mindfulness, response styles and dysfunctional attitudes in bipolar disorder
Perich, Manicavasagar, Mitchell, Ball

Of the 192 participants in this study, 90 had bipolar disorder, 36 had a history of depression and 66 subjects were without a current or past history of a mood disorder. ‘Mindfulness’, the general tendency to be aware of experiences such as thoughts and feelings, was similar between the groups. However, those with bipolar disorder scored differently on a measure of thinking styles associated with depression. In particular, when compared to the other two groups, they returned higher scores on subscales measuring perceived personal achievement and reliance on others.

Portrayal of psychiatric genetics in Australian print news media, 1996–2009
Wilde, Bonfiglioli, Meiser, Mitchell, Schofield

This study investigated how Australian print news media portray psychiatric genetics. Items attributing the causation of psychiatric disorders to gene-environment interactions (51 per cent) outnumbered items attributing only genetic (30 per cent) or only environmental factors (20 per cent). Of items that referred to heritability of mental illness, frames of genetic determinism (78 per cent) occurred more frequently than probabilistic frames (22 per cent). Of frames related to genetic prophesy, genetic optimism frames (78 per cent) were used more frequently than genetic pessimism (22 per cent). Psychological and ethical implications of psychiatric genetics received comparatively relatively little coverage (23 per cent). The analysis identified 22 predictions about psychiatric genetic discoveries and the availability of molecular-based interventions in psychiatry, most of which failed to manifest by the predicted year. Findings may indicate that excessive optimism about the power of genetic technology in psychiatric health care, perceived clinical benefits, and largely unfulfilled predictions about availability of these benefits could encourage unrealistic expectations about future molecular-based treatment options for mental health.

Community interest in predictive genetic testing for susceptibility to major depressive disorder in a large national sample
Wilde, Meiser, Mitchell, Hadzi-Pavlovic, Schofield

The study investigated interest in predictive genetic testing for a reported susceptibility to depression. It found strong interest in predictive genetic testing for possible susceptibility. There was significantly greater interest in seeking such a test through a doctor (63 per cent) compared to direct-to-consumer (40 per cent). Personal history of mental illness, self-estimation of being at higher than average risk for depression, belief that a genetic component would increase rather than decrease stigma, and endorsement of benefits of genetic testing significantly predicted interest in having such a test. Despite finding attitudes that genetic links to mental illness would increase rather than decrease stigma, the study found strong community acceptance of depression risk genotyping, even though a predisposition to depression may only manifest upon exposure to stressful life events. The results suggest that there will be a strong interest in genetic susceptibility testing.

Community attitudes to genetic susceptibility-based mental health interventions for healthy people in a large national sample
Wilde, Meiser, Mitchell, Schofield

This study investigated anticipated health behaviours in response to genetic risk information about major depressive disorder. Intention to start therapies or courses to learn to develop better strategies to cope with stress (80 per cent) was significantly and positively associated with self-estimation of risk for major depressive disorder as higher than average; endorsement of family environment as a causal attribution; and endorsement of gene–environment interaction as a causal mechanism of mental illness. Intention to modify potential life stressors (84 per cent) was significantly and positively associated with self-estimation of risk for depression as higher than average; endorsement of ‘abuse’ as a causal attribution and endorsement of ‘gene–environment interaction’ as a causal mechanism. Perceptions that modifiable environmental factors strongly contribute to overall risk of major depressive disorder appeared to drive willingness to engage in risk-modifying interventions in the hypothetical scenario of a genetic predisposition. The results suggest that screening for genetic risk in consort with environmental risk factor assessment has potential...
community acceptability and clinical value as an early intervention and preventive tool for high risk groups.

Comparing cognitive function in people with remitted depression

Wilhelm, Gillis, Batchelor

This study used 33 years of longitudinal data from the Sydney Teachers Study to compare cognitive function of individuals with and without a history of depression, upon resolution of the depressive episode. The current study comprised 40 participants recruited from the larger cohort of postgraduate teacher trainees recruited in 1978, matched for age and gender. Participants with a history of two or more depressive episodes had lower scores on measures of processing speed and semantic verbal fluency, compared to those without a history of depression. However, contrary to existing research, there were no differences between groups in verbal or visual memory, or other measures of executive function, including attention, working memory, letter fluency and cognitive flexibility. Findings suggest the possibility of enduring subtle cognitive changes linked to white matter changes in people with a depression history.

A longitudinal study examining the independence of apathy and depression after stroke: The Sydney Stroke Study

Withall, Brodaty, Altendorf, Sachdev

There is growing recognition that apathy is not only a symptom of depression but may be an independent syndrome. This is the first study to investigate the relationship of apathy and depression longitudinally following stroke and to examine the association with dementia. Subjects received extensive medical, psychiatric and neuropsychological assessments at three to six months (index assessment) and 15 months (follow-up assessment) after their stroke. A subset of participants received magnetic resonance imaging (MRI) scans at index assessment. While there was no significant overlap between apathy and depression at index assessment, the overlap was significant a year later. Dementia at index assessment was a common risk factor for both apathy and depression at follow-up. Apathy and depression after stroke have a common predictor and overlap longitudinally. The overlap might be due to cumulative vascular pathology and because of the relationship of each of these syndromes to dementia, which was an important, possibly causal, predictor for both.

Volunteering for Research Studies

The online Volunteer Research Register (VRR) is on the Black Dog Institute website. The VRR allows people to register their interest in participating in mental health research studies. It has been designed to securely store details such as a person’s name, contact details and some basic information including date of birth, whether a person has ever been diagnosed with a mental health problem, and if they have previously participated in a Black Dog Institute research study. When a research study starts, we will search the register for people who might be suitable and email them information about it as well as an invitation to take part should they be interested.

You can visit the register at [https://www.blackdogvolunteers.org.au/](https://www.blackdogvolunteers.org.au/) or via a link from the Black Dog Institute homepage.

The Institute & Pharmaceutical Companies

The Institute’s policy concerning pharmaceutical guidelines is outlined on our website (www.blackdoginstitute.org.au)

The Black Dog Institute Board continues to endorse the Institute operating within ethical guidelines formulated by Australian professional and regulatory organisations, as well as the requirements associated when its specialists or other staff work with pharmaceutical companies.

The Institute lists below the national and international appointments and positions held by its medical staff on pharmaceutical company Advisory Boards, and seeks to maximise the diversity of these appointments. A list of the Institute’s sponsorships is also available on the website.

The Black Dog Institute keeps its policy on relations with pharmaceutical companies under constant review and welcomes comment.

Pharmaceutical company advisory board appointments

| Professor Henry Brodaty | Consultant: Pfizer, Novartis, Lundbeck, Janssen, Merck, Baxter  
Sponsored travel: Pfizer, Janssen  
Investigator on drug trial for Alzheimer’s disease: Sanofi, Lilly |
| Professor Gordon Parker | Member of National Advisory Boards for Lundbeck, Advisor to Servier Pharmaceuticals  
Speaker for meetings sponsored by Eli Lilly, AstraZeneca, Lundbeck, GlaxoSmithKline, Pfizer and Servier |
Two-thirds of patients had their mood disorder rediagnosed after attending the Depression Clinic, while 90 per cent of patients had their management plan significantly changed.  
Black Dog Institute Research study

"The Institute’s Clinical services are highly regarded by patients, their families and friends.  
Clinical Services provide high quality comprehensive assessments of patients. The patient and their family/friends receive a thorough explanation of their condition. The referring doctor receives a detailed medical report and management plan. The service is available to any person referred by a medical practitioner.”  
Paul Friend, Clinical Director

Depression Clinic

The Depression Clinic is the flagship of the Institute and has an outstanding team of psychiatrists and clinical psychologists, headed by Dr Paul Friend.

Patients complete questionnaires assessing symptoms and past history, and the computerised Mood Assessment Program (MAP) either online or at the Black Dog Institute, prior to being assessed by one of the Institute’s psychiatrists.

The psychiatrist discusses the diagnosis and recommended treatment with the patient and their family at the conclusion of the assessment. A detailed report is sent to the referring medical practitioner – including a comprehensive management plan.

There is a follow-up appointment at about three months, for selected patients. Individual and group treatments are provided for clients, usually to a maximum of 12 sessions.

All psychiatrists have regular consensus meetings with a senior colleague to provide a more comprehensive assessment of more difficult clinical cases, and to assist calibration within the team.
The clinical psychologists offer psychological treatment for suitable patients with a primary diagnosis of a mood disorder. They are also directly involved in clinical research conducted at the Black Dog Institute. The Director of Psychological Services provides peer support to the clinical psychologists.

The Depression Clinic team meets as a group every two to three months to discuss the issues and progress of the clinical service and for a peer review session where a nominated psychiatrist and a psychologist each present one or more de-identified challenging cases for review and discussion.

Our psychologist runs ‘stay well’ groups for patients with a diagnosis of bipolar disorder. These groups provide instruction in psychological techniques, address issues of self-esteem and give support with the goal of developing competence in managing the condition.

The Depression Clinic has established a similar clinical service in Tamworth with the Clinical Director providing an onsite or telepsychiatry clinic each month.

The Clinic also offers interested general practitioners, psychiatrists, psychiatric trainees and medical students the opportunity to sit in on assessment sessions with the Clinical Director to improve their understanding and knowledge of the diagnosis and management of mood disorders. During 2011, for example, a medical student from Australia, a psychiatric trainee from Spain and a psychiatrist from Singapore have used this service.
Bipolar Clinic

The Bipolar Clinic is the second stream of clinical activity provided by the Institute. This clinic is conducted by Professor Philip Mitchell, Head of the School of Psychiatry at UNSW, and Professor Colleen Loo.

The Bipolar Clinic assesses patients with an established diagnosis of Bipolar Disorder. The team undertakes a comprehensive assessment and writes a report including management strategies to the referring doctor and other clinicians involved in the care of the patient.

Future Activities

The Depression Clinic is now exploring the use of videoconferencing to provide similar clinical services to more regional centres across Australia.

The Depression Clinic is also considering the feasibility of expanding its range of services to include assessment of adolescents from 12 years of age.

“Everyone, from your receptionist through to the Doctor and research staff, was just amazing... and so kind, helpful and friendly. It made my visit so much easier.”

Letter of thanks
Professional Services (Education & Training)

“The Professional Services team has continued to expand and improve our scope and range of programs throughout New South Wales and nationally in 2011.

The Institute’s unique operational model, which integrates research findings, clinical activities, and consumer and carer perspectives, means our educational programs are innovative, relevant, and skills based. General practitioners (GPs) and psychologists who participated in these programs have provided encouraging feedback to say that their management of patients with mood disorders is now vastly improved.

We also value the relationships we have developed over the years with health professionals, organisations, and workplace clients as we work together to reduce stigma and improve the lives of those affected by mood disorders.

Our challenges for 2012 include the national roll-out of educational programs, addressing the needs of rural and remote communities, expansion of eMental Health initiatives and developing increased capacity for delivery of services nationwide.”

Katherine Dabich, Manager, Professional Services

“Regular formal mindfulness practice has improved my peace of mind - as awareness of my obsessive worrying nature and fears of the future have become more accepted and less of a problem. I have used the four-step mindfulness-based approach in the management of difficult patients.”

GP feedback, Mindfulness Workshop attendee - 15 October, Randwick

...our educational programs are innovative, relevant, and skills based
The Professional Services team is responsible for the provision of accredited mental health education for:

- General Practitioners and GP registrars
- Psychologists
- School Counsellors
- Nurses
- Allied health professionals
- Clinicians working with young people
- Workplace staff, managers, and HR professionals.

Programs are developed by Black Dog Institute clinicians, and are based on over 20 years of research and clinical findings. Generally, programs are delivered as face-to-face workshops by experienced clinicians including psychiatrists, GPs, and psychologists throughout NSW and in some other Australian capital cities. Funded by the NSW Ministry of Health, our programs are independent of input from pharmaceutical companies.

**Current activities**

The Institute's Professional Services team has been very productive in 2011, delivering more than 200 interactive workshops and presentations. Since 2006 the team has trained in excess of 26,000 health professionals and workplace staff, including 5,800 this year.

This year the team also developed its first interactive online education program, which was added to the suite of Black Dog Institute eMental Health initiatives. Available to GPs, psychologists and other health professionals throughout Australia, this innovative program will facilitate improved remote access to Black Dog Institute education, and will also complement the popular face-to-face training already offered.

New areas are being targeted in our effort to connect with more rural and remote health practitioners and to extend our reach nationally. In 2011, the team travelled extensively, including visits to Darwin, Hobart, Bourke, Bega, Moree and Launceston to deliver training programs to GPs and psychologists. There has been substantial interest from health professionals in these regions, highlighting the demand for skills-based mental health training.

**Wellbeing of health professionals**

The Institute is also looking after the mental health and wellbeing of health professionals treating the community. Research shows that the incidence of stress-related disorders is far higher amongst health care professionals than the general population, affecting the quality of their relationships, their health and ultimately the level of care they provide. Our newly developed six-hour program, An Interactive Mindfulness Program for GPs, aims to teach GPs to let go of stressful thoughts and cope better with the pressures of general practice. The program was delivered to 210 GPs this year and 93 per cent of participants rate the program as relevant to their individual practice.
Workplace training

The Professional Services team also developed and delivered workplace training programs for human resource managers and staff to address the growing need for understanding the impact of mood disorders in the workplace. This stream has experienced significant growth, with 96 programs delivered in 2011, more than double the number of the previous year.

Customised programs were delivered to organisations that included state and commonwealth government departments, NSW Police, Defence Forces, legal firms and major banks.

Professional Services: Looking ahead

The team has come a long way since its launch in late 2002 and will continue to build upon an established reputation as a provider of high quality accredited mental health programs.

Rural and remote communities continue to remain a focus, and the Institute is addressing the needs of these communities through a range of programs and eMental Health initiatives.

Our aim is to provide health professionals with the confidence, knowledge and skills to enable the most effective treatment of patients suffering from mood disorders, expand our workplace education stream and explore other tools to assist in improving mental health outcomes for the Australian community.

Thank you!

We are most grateful for the input and support from our expert program development and project team and our team of 29 program facilitators who have made the Professional Education programs such a success. We would also like to particularly extend our appreciation to Dr Penny Browne who retired as consultant for GP Programs this year. Special thanks should also be extended to the NSW Divisions of General Practice; the Royal Australian College of General Practitioners QI&CPD staff; the General Practice Mental Health Skills Collaboration; the Australian College of Rural and Remote Medicine; the General Practice Conference and Exhibition; and the Australian Psychological Society.

“I engaged the Black Dog Institute to raise awareness of depression amongst my team in relation to clients, self and fellow colleagues. My expectations were exceeded when I saw the level of engagement from the audience. Well worth it. I would recommend it to any manager wanting to do that little bit extra for their team.”

Warwick Murray, General Manager, Regional & Agribusiness Banking, Northern NSW, Commonwealth Bank of Australia
Our focus has been on getting the message out about the availability and utility of the MAP. We have incorporated news of its existence into all the Institute’s professional training programs, given papers at many conferences in NSW, Queensland, the Northern Territory, Victoria and Tasmania (including an invited plenary at a conference for rural and remote GPs) and had articles accepted for publication in a number of professional journals. We have reached out to the community via the Institute’s Community Team who have distributed postcards which encouraged consumers to ask their practitioners about the MAP.

Education about the MAP always involves information about the sub-typing model as well, and feedback from participants has been universally positive.

We have also invited our MAP referrers to complete an online survey. We wanted them to tell us what was good and bad about the MAP and about how their practices benefited from its use. A total of 188 referrers responded, and there was a resounding vote of approval. The results of that survey will be published in Australasian Psychiatry early in 2012 and will help encourage other potential referrers to adopt its use.

At present there are more than 2,500 registered referrers – including a newly approved group of accredited mental health social workers – and the rate of registration of new referrers has been steadily increasing. We are now processing between 10 and 30 MAP reports a day and around 500 per calendar month, which has lifted the total number of MAPs completed to more than 10,000.
Psychological Services

Associate Professor Vijaya Manicavasagar continues to oversee the expansion and implementation of psychological services within the various project streams of the Institute. A key development has been in the increased use of online tools both for training health professionals and in our suite of workplace education programs. Other developments include a range of new professional education programs which use a variety of educational media including video and webinars. In addition, this year has seen the transition of our programs to fulfil the requirements for the new national accreditation standards for registration of all health care professionals.

Funding from the Department of Health and Ageing has enabled the development of an online positive psychology website for young people on our youth website, BITE BACK, which is currently under evaluation. This website, the first of its kind, introduces young people between the ages of 12 to 17 years to concepts in positive psychology through the use of quizzes, activities, community blogs and competitions.

Clinical psychology research has focused on the development and implementation of wellbeing groups for adults and young people recently diagnosed with bipolar disorder. These groups, groundbreaking in their clinical management of bipolar disorder, aim to help people with this disorder better manage their condition and take control of their lives.

During 2011, psychology services at the Institute have continued to deliver innovative and relevant programs to consumers and health professionals to improve the lives of people living with mood disorders. Over the next few years our psychological services will continue to meet the challenges of educating health professionals, consumers and carers in better managing and preventing mood disorders by utilising technology to complement clinical expertise. Our vision is that psychological services will continue to provide the vital link that integrates the expert work streams within the Black Dog Institute.

“Once again psychological services at the Institute have expanded to include a range of eMental Health initiatives and online tools to aid consumers and mental health professionals to better recognise and manage mood disorders. Furthermore, our psychological services have ventured into the domains of prevention, resilience and positive psychology, especially for young people with and without a history of mood disorders.”

Vijaya Manicavasagar, Director, Psychological Services
Community Programs

"With fewer than 50 per cent of people with a mood disorder seeking professional help, the Community Programs team is focused on raising awareness of mood disorders in the community, reducing stigma and encouraging help-seeking. By educating the community about the warning signs of mood disorders, and sharing personal stories, we reduce stigma and lower the barriers to seeking help."

Michael Sluis, Manager, Community Programs

In 2011 we delivered 162 seminars, presentations and workshops that reached over 10,000 individual participants. To maximise our impact and extend our reach, we have also worked with a number of partner organisations across a range of activities.

Volunteering

Our volunteers are a key part of the Black Dog Institute family, and are active in a range of activities from supporting fundraising events through to delivering educational programs enriched by sharing their own personal experience with mood disorders.

In 2011 we trained over 100 volunteers across our range of programs, and our volunteers delivered educational presentations to more than 2000 secondary school students and 1800 members of the public.

Our volunteers supported many events, including Mardi Gras, our Gala Dinner, the Sydney Harbour Swim Classic, the Mosman Beat the Blues Concert and the Blackmores Running Festival.

...raising awareness of mood disorders in the community...
Rural programs

The Black Dog Institute continues to support rural communities, and our focus on partnering with local service providers to deliver seminars and workshops means that we are strengthening local connections with health services.

- This year we extended our rural seminar program to include our new hands-on practical workshop Building Personal Resilience. This workshop was very popular and feedback from participants has been overwhelmingly positive, with over 90 per cent of participants reporting they planned to apply the strategies in their personal life.

- We delivered rural seminars in Wollongong, Mudgee, Wagga Wagga, Grafton, Albury, Parkes, Bathurst and Cowra.

- Our Building Personal Resilience workshops were conducted in Mudgee, Wagga Wagga, Grafton, Albury, Parkes, Bathurst and Taree.

- We also provided an information stand at key rural field day events, including AgQuip Gunnedah, Primex Casino, Murrumbateman Field Days, and Australian National Field Days in Orange.

- Our seminars and partnership model were featured in the NSW Government’s 2011 Showcase of Innovation in Suicide Prevention.

- During the Black Dog Ride to the Red Centre, we worked with Lions Clubs across Australia to have volunteers deliver seminars in regional communities.

- The Black Dog Institute also partnered with Hunter Institute of Mental Health to deliver the Rockin’ the Black Dog band competition in the Hunter region, raising awareness of depression among young people.
Youth initiatives

Youth initiatives are an especially vulnerable time in their lives, with the majority of adult mental health issues first appearing during adolescence. Through innovative and fun education programs we reduce stigma and enable earlier detection and help-seeking to lessen the impact of mood disorders.

Our HeadStrong program is tailored to the NSW teaching curriculum and has been tremendously successful in 2011. We have trained many teachers and the feedback has been extremely positive, with an evaluation completed by the Inspire Foundation.

The HeadStrong evaluation results showed that:

- **HeadStrong** is relevant and engaging for Students (96 per cent of teachers agree)
- **HeadStrong** is easy to implement for Teachers (98 per cent of teachers agree)
- Teachers planned to implement the program in their classes (92 per cent of teachers agree)

The program has been so successful that the Institute has received $500,000 from the nib Foundation to fund the national rollout of the program over the next three years.

Our INSIGHT program also remains extremely popular with secondary schools. INSIGHT presentations are delivered to a classroom of students by a Black Dog Institute volunteer with personal experience of a mood disorder. During the presentation the presenter shares their story. Research has shown that this is a powerful way to reduce stigma, and also makes the educational component much more memorable.

Our youth programs are promoted online as well as through events such as Mosman Council’s Beat the Blues concert, Hectic Youth Health Forum, Newtown Festival and the Filthy Arts Festival.

**BITE BACK**

Our youth website, **BITE BACK** has received a big upgrade this year with the addition of engaging new activities for young people, based on the latest positive psychology research. New sections include ‘Thank Tank’ which focuses on gratitude, ‘Snap That’ which deals with mindfulness through photography, ‘Power Up’ which deals with relaxation and renewal, and ‘In the Zone’ which deals with inspiration, focus and flow.

For access to **BITE BACK** visit www.biteback.org.au
Support programs

The R.E.A.C.H. (Responsibility, Education, Acceptance, Connection and Hope) program is a free nine-week psycho-educational support group that takes participants who have depression or bipolar disorder on an educational journey to a greater understanding of their mood disorder and themselves, and helps with the creation of a ‘wellness plan’. Topics include identifying strengths, recognising early warning signs, dealing with loss, fostering wellbeing strategies and nurturing supportive relationships.

In 2011, we ran R.E.A.C.H. workshops in metropolitan Sydney and regional locations, including Grafton, Rushcutters Bay, Sydney CBD, Merimbula, Taree, Bega, North Sydney, Milton, Gordon and Rozelle. This year the program was supported by MLC Foundation and the Qantas Foundation, with Qantas Foundation support extending into 2012.

Getting the word out through social media

Our presence online continues to grow through our active presence on Twitter and Facebook.

Clockwise: Our magnificent Mardi Gras parade volunteers; Some of our recently trained youth presenters (left to right) Philippa, Allison, Jamayaha, Julia and Michael; BDI Project Manager for Rural Initiatives, Christopher Rule, responding to inquiries at a country show
Our successful Developing Countries Program is now in its fourth year. This program is designed to share the expertise of the Black Dog Institute with senior clinicians from developing countries across the Asia-Pacific region. Most of these countries have a limited specialist mental health workforce and limited mental health training for primary care providers so mood disorders remain largely undiagnosed and untreated. The focus of our program is on building capacity amongst local personnel by providing education about evidence-based, high-quality treatments for mood disorders and by training them to train other health professionals.

To date, 36 clinicians (psychiatrists, psychiatric nurses and medical practitioners with a demonstrated interest in mental health) from 10 countries have come to Sydney for intensive training.

The Institute was recently awarded funding from AusAID under Round 10 of the Australian Leadership Awards (ALA) Fellowships to run another training course in early 2012. Once again, we partnered with the Ministries of Health in Pacific Island countries and the World Health Organization Pacific Islands Mental Health Network (WHO PIMHnet) in our application.

Other highlights of 2011 include:

- Participation in and presentation to the third meeting of WHO PIMHnet, held in Sydney from 15–17 June 2011
- Presentation of a paper that described the implementation and evaluation of ongoing collaborative activities with Sri Lankan trainees and partner organisations at the Third World Congress of Asian Psychiatry held in Melbourne from 31 July–4 August
- Organisation of a symposium Building Expertise and Leadership in Mood Disorders in Pacific Island Countries at the 15th World Congress of Psychiatry held in Buenos Aires, Argentina, 18–22 September 2011, with presentations from the Black Dog Institute, Fiji, Solomon Islands, Samoa and Vanuatu representatives.

Infrastructure support for the Developing Countries Program is provided by the Professional Services stream of the Institute. Previous programs have been part-funded by the Christopher Molnar Bequest and by the Australian Government through AusAID’s ALA Fellowships.

In September 2011, the Black Dog Institute teamed with Inspired Adventures to raise funds for the Developing Countries Program by holding a charity event, the Great Wall of China Walk. The 11 participants included two members of staff from the Institute. The funds raised will be used in 2012 to help support the Developing Countries Program, as well as other programs to improve the recognition and management of mood disorders in developing countries.

...Program .. in its fourth year...
“I continue to be inspired by the many hundreds of supporters we attract each year who have been touched by the sadness of a mood disorder. Whether directly or indirectly, these individuals become a passionate band of ambassadors for the Institute, raising awareness and fundraising to help us continue with our research and education programs.

It is the personal stories that our supporters share that enable us to raise awareness, destigmatise, and in turn, develop new relationships and partnerships with caring individuals and corporate partners.

As awareness about mood disorders increases in our communities more and more individuals begin to gain confidence in seeking help. This also increases the need for us to continue expanding our research and professional education capabilities. So the more we talk, the more we need to invest in our future. The future looks bright and we thank all of our valued donors and supporters who have helped us achieve our goals throughout 2011.”

Vicki Miller, Manager, Corporate Relations and Development

What we do

Corporate Relations and Development covers a broad range of activities at the Institute, including fundraising and marketing initiatives. So whether you are a marathon runner wanting to participate in The Blackmores Sydney Running Festival and raise money for the Black Dog Institute, or a major corporation or foundation wanting to be associated with our endeavours, you should knock on our door. The ‘welcome mat’ is always out.

More and more businesses are supporting the charity sector by encouraging their employees to participate in community fundraising events. This year we welcomed our corporate partners from the Qantas Foundation team who ran for us in the Sydney Running Festival and then helped out at our hospitality marquee.
Current activities

**Exercise Your Mood** has become an important part of our branding and is covered across so many of our community fundraising events. We introduced a pedometer challenge this year which saw people from all backgrounds trying to reach their daily goal of 10,000 steps. We are truly humbled by the efforts that many individuals make to achieve their personal challenge and in turn raise funds for the Institute.

**The Black Dog Ride to the Red Centre**
There were 220 motor cycle enthusiasts from all over Australia who took part in this year’s ride which departed from each mainland capital city in late August for the five-day trip to the Red Centre (see story and photographs on page 46).

**Zoo2zoo Bike Ride**
Exerting a bit more energy than the motor bike riders were the growing group of cyclists who participated in the annual Zoo2zoo Bike Ride. Riders departed from Taronga Zoo in October and headed for Dubbo Zoo on a strenuous three day ride over Mt Victoria to raise funds and awareness for the Black Dog Institute. Black Dog Ambassador David Spindler and 110 riders took part in this year’s ride which raised $140,000. Andrew McKay, together with his very capable team of organisers, is another wonderful supporter of the Institute and is passionate about exercise and spreading the word. A very big thank you to Andrew, his team, and all the riders who took part this year.

Swimming is another sport that continues to assist us in raising awareness about the importance of regular exercise for a happy mood. We started the year with the **Great Australian Swim Series** event on Australia Day. Ambassadors Ky Hurst and Brendan Capell initiated this event which saw hundreds of swimmers plunge into Sydney Harbour at the Opera House for a 2.2 km swim.

This was followed by several other major swimming events including the **Ord Minett Classic** also in Sydney Harbour. The Institute is most appreciative of our Ambassadors Geoff Huegill, Libby Trickett, Ky Hurst, Peter Thiel, Brendan Capell, David Spindler, Andrew Johns, John Konrads, Bridie O’Donnell, Richard Harry, Stephanie Gilmore, Preston Campbell and Lara Tamsett, for their ongoing support.

There have also been thousands of individuals who have run for the Black Dog Institute in various events including the **Blackmores Sydney Running Festival**, the **Sun Herald City2Surf** and dozens of other half marathon and marathon events across Australia. These community supporters raise very substantial amounts of money for the Institute each year and we are extremely grateful for their support.

Rugby Union and Rugby League are very popular sports within the Australian culture and we had support from both codes this year. Our
ongoing partnership with the Silver Foxes saw us back in Mudgee again as part of the annual Mudgee Grassroots Rugby Festival, hosted by the Mudgee Rugby Union Club. This is a weekend of rugby, friendship and lots of fun and has helped us to raise significant awareness in the region as well as funds for our community education programs.

We also partnered with the NRL this year and received great exposure during their State of Origin series and again during Exercise Your Mood Week.

Always looking for new opportunities to fundraise, we decided to invite supporters to embark on a charity challenge to China, the Great Wall of China Walk, to help us raise money to support our Developing Countries Project. This was a fantastic personal experience for the 11 participants and again helped us to promote the importance of physical exercise to maintain good mental health. More treks are planned for 2012.

Thank you!

While the Institute receives some government funding, we are very reliant on, and grateful for the significant support of the community and businesses to enable us to expand our research and education programs. There are many businesses and individuals who have contributed to our success this year and it would fill 10 of these reports to list them all. However, we would like to acknowledge the Qantas Foundation for their support of our R.E.A.C.H. Support Program; The Ross Trust for their support of our Wellbeing Group Program for Young People with Bipolar Disorder; the Lansdowne Foundation for their support of our Kids and Sibs Bipolar Study; Juniper Network Foundation for their support of our School Curriculum Project; the nib foundation for their support of our HeadStrong school education program; The Berg Family Foundation for their ongoing support of our rural community education programs; and the Hunter Hall Charitable Trust, the Neilson Foundation and Hunt Specialised Transport for their generous support of all of our programs.

The Black Dog Institute is passionate about two things – mental health and the high value we place on all of our supporters and donors. We refer to you all as members of the Black Dog family. So on behalf of the Black Dog Institute, thank you to everyone who has supported us in 2011. We truly value your support!
The Black Dog Ride to the Red Centre

During August, the rumble of hundreds of motorbikes was heard all around Australia as Black Dog Riders took part in the Ride to the Red Centre to raise awareness of depression.

This was the second year the ride had been conducted, and it has become a truly national event, with riders assembling at different starting points in Adelaide, Brisbane, Darwin, Melbourne, Perth and Sydney.

The epic ride to raise community awareness of depression this year also raised $161,665 to assist the work of the Black Dog Institute. On the way, the riders took part in over 40 community events – most of which were hosted by Lions Clubs who contributed $11,339 to the funds raised.

Included in the total was a further $8,000 from the W.A. Herefords Inc. who auctioned two of their prized steers to support the work of the Institute.

Founder of the event is Perth-based Steve Andrews. He believes a lot of people don’t talk about their illness because they don’t wish to be perceived to be weak. His hope was that the Ride would “encourage people to take the first big step of reaching out for help by talking to someone about their problem”.

Scores of stories about the riders appeared in newspapers, on television and radio while the Lions Clubs won the hearts of the riders for conducting community seminars as well as the occasional meal or cup of tea along the way. In addition, Ministers, Mayors, Councillors and even rock legend Angry Anderson were on hand to support the riders.

In Perth, the West Australian Minister for Mental Health, Helen Morton, wore bike leathers and jumped on as a pillion passenger with one of the Black Dog Riders for the start of the ride. ABC Radio presenter Glynn Greensmith was MC for the Perth launch event.

In Sydney riders were flagged away by Angry Anderson, and Councillor Robyn Preston from the Hills Shire Council. Radio 2UE announcer Pete Graham acted as MC at the breakfast send-off.

It was a similar scene in other States and Territories. The Mayor of Coober Pedy, Councillor Steve Baines, met the riders in Port Augusta and rode all the way to Alice Springs. The Mayor of Alice Springs, Councillor Damien Ryan, welcomed riders to Alice Springs. In Queensland, the Mayor of Townsville Councillor, Les Tyrell, met the Brisbane group for lunch.

Joan McKay, a 60-year-old from Lake Cathie on the New South Wales North Coast, was amongst the participants on her GSXR 1000 Sports, and raised $2,280 by participating in the event. “It made me realise just how many people suffer from mental illness, strengthening my own awareness and pushing me to spread the knowledge of mental health to others”, was how Joan talked about the experience.

The Black Dog Institute would like to sincerely thank all the riders for undertaking the journey safely and for their wonderful support and we look forward to their participation in the 2012 Black Dog Ride.

“I have just returned to work from the ride and would like to congratulate you, the other organisers and the Lions Clubs on a job well done. This was a joy to participate in and a life changing experience.

I have been a long-term sufferer of depression, with times of such lows that I have been referred to help to prevent suicide. Between the illness and alcohol I have made my family’s life hell, with little insight into the problems.

To mix and speak with people on the ride made me realise that I was not alone and it has forced me to look at my situation and get some long-term treatment.

I hope there will be another ride next year.”

Regards
Black Dog Rider
The Black Dog Institute’s Gala Dinner

On the third of November around 600 people gathered together to celebrate the 10th anniversary of the Black Dog Institute (BDI) at a Gala dinner held at Doltone House, Darling Island Wharf, in Sydney.

It was also an opportunity to farewell inaugural Executive Director, Professor Gordon Parker, who stepped down from the position at the end of 2011.

At the same time, guests warmly welcomed Professor Helen Christensen, formerly Director of the Centre for Mental Health Research at the Australian National University, as the new Executive Director.

A distinguished group of friends and supporters, including Her Excellency, the Governor of New South Wales and Black Dog Institute Patron, Marie Bashir, as well as former and current politicians, past and present Black Dog Institute Board members, corporate leaders, university and health professionals, BDI staff, sporting identities and many patients attended the Gala Dinner.

While the event marked the 10th anniversary of the Institute, New South Wales Health Minister, Jillian Skinner, captured the spirit of the occasion with these words:

“In 1995, when I became shadow Minister for Health, I was passionate about mental health. At the time, I was discouraged. Nobody wanted to know and the media were not interested.

“And now... what a difference to have such distinguished guests talk about mental health.

“The Minister for Mental Health (Kevin Humphries) and I both work on improving the life of people who live with mental illness. Patients are at the heart of our solutions.”

The large gathering also heard messages of thanks to Professor Parker from Thérèse Rein; Mark Butler, the Federal Minister for Mental Health; Andrew Johns (Rugby League); Ky Hurst (Olympic swimmer and ironman); and Geoff Huegill (Olympic swimmer).

A highlight was the unveiling of a portrait of Professor Parker by artist Peter Smeeth. This excellent portrait was made possible by the donation from long-time supporters of the Institute, Albert Hunt and his family.

Other guests showed their enthusiastic backing for the Institute by participating in fundraising activities to help Black Dog Institute plans to deliver its services and programs to more and more people across Australia.
Public Relations and Media

“The public relations and media activity was stepped up during 2011 to support by far the busiest period on record since the Black Dog Institute was started. Our footprint is now very much Australia-wide while we have built an international reputation for being a leader in the field of mood disorders. The public relations and media activity underpins what is happening at the Institute.”

Ian Dose, Communications Manager

The diversity of the many activities, whether it be campaigns such as Exercise Your Mood Week, the Black Dog Ride to the Red Centre, ground-breaking research, our work in the community and with health professionals, or the exceptional service provided by our clinical team, ensures widespread media interest.

It is not about ‘blowing our trumpet’ but media and public relations activity is central to letting the public know what is happening in this field to fulfil our commitment to ensuring all Australians can access our programs and embrace the Institute’s many initiatives.

Our messages are carried far and wide by an ‘army’ of supporters. This is not overstated when you think about an event such as the Black Dog Ride to the Red Centre.

In August this year, hundreds of motorbike riders embarked on an epic journey to the Red Centre from the different capital cities. They rode through scores of towns along the way and, many of the participants, with personal stories of depression, were able to raise awareness of depression in the local media.

Hundreds of stories were printed in newspapers, talked about on radio or television and raised on social media (e.g. Facebook, Twitter).
This year was the first time we saw the full amazing extent of the coverage of the Black Dog Ride to the Red Centre and other media events. This was made possible with the engagement of Meltwater News to provide us with online monitoring of media activities (including social media) during the year.

Spreading the message

Throughout 2011, different platforms were provided for the Institute to spread its message internationally. Initially, our focus had been on the traditional ‘vehicles’ such as our website, journals and the many presentations to prestigious groups of leaders in our field who gather at international conferences and seminars.

Our writing competition, now in its eighth year, also attracted entries from different parts of the globe, although our emphasis has been principally on the Australasian region.

Interestingly, the sport of swimming is providing another platform for the Institute to increase its international brand awareness.

This year, an Australian Open Water swimming team representing the Black Dog Institute was in Hawaii to participate in the Maui Channel Swim and the Waikiki Roughwater Swim.

The team of Trent Grimsey, Codie Grimsey, Rhys Mainstone, George O’Brien, Alex Studzinski, captained by Black Dog Institute Ambassador Peter Thiel, won the Maui event despite rough conditions, and defeated a top USA team.

The team followed up the win with an impressive showing at the Waikiki Roughwater Swim, taking out the first five placings in the race. Black Dog Institute Chairman, Peter Joseph and sporting ambassador, Brendan Capell, were also in attendance.

Helping hands

One of our big events in 2011 was the Exercise Your Mood Campaign. To lift the profile of the campaign, we needed a commercial for television. Based on research that regular exercise could be as effective as an antidepressant medication for treating mild to moderate depression, the production company, Jungle Boys, kindly produced the commercial free of charge to demonstrate their support for the Institute.

Outstanding journalism

In the early years of the Institute, the interest of the media in mental health issues was minimal. That has changed and is reflected in the way in which journalists today report on these matters.

It is important to acknowledge the story by Daily Telegraph reporter Paul Crawley, who wrote about the crippling highs and lows of bipolar disorder and the impact on a tough NRL footballer, Matt Cross.

The journalist’s handling of the story was skilful and sensitive and avoided causing collateral damage in the case of a proud man baring his soul to try and help others overcome the stigma of suffering from depression.

The team

Responding to the needs of a fast-growing body such as the Black Dog Institute will always throw up challenges. To this end, Ian Dose our Communications Manager, and Kerrie Eyers, who volunteers her time as the Publications Consultant, ensure the Institute’s public profile is in good hands.
We celebrated our 10th anniversary in 2011 and each year has been marked by significant growth as we reach out to more and more people who are touched in some way by a mood disorder.

In my role at the Institute, I particularly get pleasure from the public speaking opportunities. It allows me to see most aspects of life, whether it’s the boardrooms of big corporations, a wool shed in the middle of nowhere, a lecture theatre full of sporting heroes, or a school hall full of teens.

We are all different, with different stories, from different backgrounds, but in the end we all require and seek the same things – be it love, understanding, meaning, purpose and, most importantly, peace of mind. I meet people from all walks of life who have incredibly diverse stories of overcoming adversity and who live with hope.

There have been many highlights this year. For me, one of the greatest was creating a 3½ metre high Black Dog for the Sydney Mardi Gras parade – and with the help of more than 40 outstanding dancers/volunteers – win best float in show.

On the other side of the spectrum, I’ve been doing a tour of the NRL with our wonderful clinical facilitators, which has been truly interesting and inspiring.

I feared talking to these lads after reading adverse stories in the newspapers but we’ve been genuinely really well received and the Parramatta Eels took us on as their charity of choice. It really goes to show how far we’ve come in talking about mental health issues right across our communities.

“I feel like the Black Dog Institute is a rocket ticking down for lift off; 2012 is going to be stellar.”

Matthew Johnstone, Creative Director, and author
Writing Competitions

2011 Black Dog Institute Writing Competition

Storm Clouds, Lost and Found, Vacuuming with the Black Dog, The Memory of Scars, Breaking Down the Wall of Shame and A First-Time Mother: The Rural Perspective.

This is the world of postnatal depression so bravely and vividly described by expectant mothers, new mothers and men who have experienced months of despair in what should be one of the happiest times in their lives.

Indeed, the ripple effect of a mother experiencing postnatal depression can affect partners, the children, parents and parents-in-law, friends, neighbours – all the people that rally around to help the struggling family.

Their personal stories were revealed in the 2011 Black Dog Institute Writing Competition.

An estimated nine per cent of expectant women and 16 per cent of new mothers suffer postnatal depression, as well as one in 10 men. Despite clinicians’ best efforts, the majority of women suffering from postnatal depression still do not come forward for treatment.

The Institute has been looking to provide more answers to deal with the problem of mood disorders during a vulnerable two-year perinatal span that takes in the period of pregnancy, childbirth and the baby’s first year.

The 202 entries in this year’s writing competition, the seventh conducted by the Institute, were mainly from women – including a grandmother, and six men, and came from all corners of Australia and New Zealand.

The stories contained a ‘treasure trove’ of advice and experience as well as a vivid account of the serious impact of postnatal depression on people’s lives.

Just how serious is underlined by the winning entry, Storm Clouds, written by Danielle Burns from Rye in Victoria, who used the line: “This could be the story of a victim of the recent floods.”

“As we chatted with the staff and guests, we were very impressed with their tireless work in developing the incredible programs that have been established to treat mental illness, as well as their amazing empathy towards the sufferers. These guys are the true winners at the Black Dog Institute.”

Danielle Burns, winner of the 2011 Writing Competition

Judges in our 2011 writing competition (left to right) Julie Corkin, Dr Natalie Towers and Shirley Sneddon
but this was my experience of postnatal depression.”

In the past, so much about mood disorders, including perinatal depression, has been written from the outside looking in. Drawing together perceptions and personal accounts from those who have experienced such mood disorders allows us to reverse this approach. ‘Inside out’ views offer rich information that assists in breaking down their mysteries and their management.

Winning entrant, Danielle Burns, received a $2000 first prize and a trophy for her essay.

An independent judging panel comprising Julie Corkin, Clinical Nurse Specialist at the Tresillian Family Care Centre; Dr Natalie Towers, General Practitioner; and Shirley Sneddon, mental health trainer and INSIGHT presenter selected the first three place getters and six Highly Commended essays.

In their report, the Judges acknowledged that depression for an individual was difficult enough but when experienced with a newborn baby to care for, especially for a first time mother, could be totally overwhelming. (The Judges’ full report is available on the Institute’s website.)

Another Victorian entrant from Middle Park who asked to remain anonymous was awarded second prize of $1000 and a trophy. Her essay was titled Lost and Found.

In her essay this mother of three children paints a dark picture of postnatal depression but concludes with a strong message of hope.

“You’ve lost the careless oblivion of motherhood, you’ve found an insidious doubt that corrodes your belief in your parenting. The black dog dips its paintbrush and daubs your life in blues and blacks and muted greys. You know you are pathetic and it’s paralysing. It’s like something has come loose from its moorings.” This is how she describes postnatal depression. About her recovery she says, “What is lost is hopelessness. Despair. Desolation. Alienation. And what is found is hope. And me, too. Yes. Yes, I find myself all over again.”

Our third place getter, from Windsor Gardens in South Australia, also requested anonymity. She won $500 and a trophy for her essay, titled Vacuuming with the Black Dog. Our entrant tells the story of how her offer to vacuum the house of a neighbour who had postnatal depression had helped “dance a look of delight across her face.”

A fact sheet on depression during pregnancy and the postnatal period is available on our website...

“She likes to tell me that the vacuuming, the walks, the talks all helped her through those dark moments of despair and that one day she will repay the kindness. But she doesn’t need to. She already has by being the wonderful person that she is and including me in her life,” our writer explains.

Six Highly Commended certificates were awarded for outstanding essays. These were to Carlie Daley (Tecoma, Victoria), Lynette Drummond (Kingswood, South Australia), Bernadette Walker (Quilpie, Queensland), Shannon Weiley (Wyoming, NSW), Jessica Migotto (Northcote, Victoria), and Susan Wilkes (St Marys, South Australia).

As in the past, the Institute will be looking to incorporate the rich material gathered during the latest writing competition in a new book to help improve understanding of the impact perinatal depression has on both men and women and what can be done to help.

The Institute itself has already put in place a number of measures dealing with perinatal depression and recently started running accredited education and training for GPs and psychologists to assist them in screening, diagnosis, assessment and risk management plans for expectant women and mothers.

A fact sheet on depression during pregnancy and the postnatal period is available on our website (www.blackdoginstitute.org.au) and identifies certain risk factors and ‘triggers’.

The internet is also very valuable: many new mothers found that mothers’ groups and online forums were powerful resources, as was cognitive behavioural therapy (CBT) and help from sources such as MoodGYM.
The 2011/2012 Writing Competition Launched

Caring for someone with depression or bipolar disorder

The impact of depression is like the tremors of an earthquake. While one in five Australians will personally experience clinical depression or a bipolar disorder over their lifetime, there are the families, partners, friends and work colleagues who are also drawn into the crisis.

Often, it is these people on the perimeter that selflessly reach out to assist those who are battling a mood disorder, offering their time, their acceptance, support and hope.

In searching for strategies to deal with mood disorders, the latest Black Dog Institute Writing Competition throws the spotlight on the powerful stories that come from Carers, with a particular focus on the questions of what worked best, what didn’t work and what did you learn?

While depression can be very isolating, individuals fighting this private battle are often surrounded by those who love them, with friends, family and colleagues all looking for practical and sensitive ways to show their support.

The theme of the 2011/12 writing competition is Walking the Tightrope – Caring for Someone with Depression or Bipolar Disorder. This will resonate with Carers who are often the unsung heroes in helping people with mood disorders while at the same time exposing themselves to an increased risk of facing a similar fate. There are more details on our website, www.blackdoginstitute.org.au

...Carers are often the unsung heroes in helping people with mood disorders...
Book Launches and Reviews

A Piece of My Mind: A Psychiatrist on the Couch
Professor Gordon Parker

A Piece of My Mind is recommended reading that tells the inspiring story of a man driven by the desire to advance better diagnosis and management of mood disorders. It is an aspirational and worthy aim, and consonant with the aims of all who work in the profession.

It is best described in the following review by Stephanie Webster, Consumer Educator.

Gordon Parker gives hope to late bloomers everywhere. Born on April Fool’s day, he led a self-contained childhood, before day-dreaming through adolescence, and repeatedly surprised himself at the annual medical school ‘cull’. He tackled a range of creative endeavours, prior to focusing his attention on psychiatry.

He notes that as psychiatry changes, so too do the people attracted to it, and few psychiatrists have described the day to day satisfactions or their reasons for their profession’s appeal. Gordon conveys the pleasure of his intellectual challenges, noting that “psychiatric research is so rich with potential” and that defeat only stimulates him to “forage further”.

A Piece of My Mind: A Psychiatrist on the Couch is divided into three parts; a personal memoir, a passionate exploration of the war zone of depression classification systems, and a reflection on the pluralism needed in a clinical psychiatrist, and in the mental health profession in general.

He aims not to record his (many) substantive achievements or defend a personal style that, in his own words, has been described as “zealous”, “stubborn”, “tenacious”, “bloody minded”, “territorial”, or “testy”. His book really is a call to arms to those considering, or in the process of progressing in the profession, and to the community at large.

Gordon outlines his clinical and research focus that underpins the work of the Black Dog Institute; how best to classify clinical depression, the risk of ‘pathologising’ normal reactions to abnormal situations, identifying a disconnect between trial data and real-world clinical results, and concerns about treatments being fitted to practitioners’ treatment modality. His work across 30 years has challenged formal classification systems, called for the reinstatement of melancholia, and resulted in the Black Dog Institute sub-typing model.

Gordon believes that collegiality is too highly valued, and pays his respects to his noisiest opponents. However, he poignantly describes the intense personal suffering that can be brought about by misdiagnosis or a ‘meandering’ therapeutic approach, the tragic consequences of which really pushes his buttons.

His own action-oriented style, and time spent considering surgery as a career, instilled in him a sense of urgency and an attitude of ‘never giving up’ on people. He talks of the resilience he observes in everyday practice and the honour of being ‘a privileged guest’ in people’s lives.

This book is not about setting the record straight, but about encouraging and entrusting others with these life altering, and life preserving, responsibilities.

Managing Depression Growing Older. A Guide for Professionals and Carers

Kerrie Eyers, Gordon Parker & Henry Brodaty

The Institute’s next book, co-edited by Kerrie Eyers, Gordon Parker and Henry Brodaty, will be released in March 2012. Titled Managing Depression Growing Older. A Guide for Professionals and Carers, this book is, to quote Professor Lewis Wolpert CBE, “A most important book on a very serious and common condi-
tion – depression. The accounts are moving, and there are excellent explanations and suggested treatments.” Professor Patrick McGorry AO says, “This timely book authored by an array of experts in the field highlights the special risk factors and responses that operate later in life. It is a welcome contribution to building a 21st Century approach to mental health care.”

While older people face the same kinds of mental health issues as younger people, they can find it more difficult to deal with them owing to the stressors which accumulate with age. There is also a high incidence of undiagnosed depression in older age, presenting extra challenges for carers. Managing Depression Growing Older offers a systematic guide to identifying depression in older people, supporting them at home or in an aged care setting, and the importance of diet, exercise and attitude in recovery.

The Institute is pleased to announce that Routledge, a global publisher, is taking Managing Depression Growing Older into the United Kingdom, European and North American markets. This is the third title from the Institute that Routledge has selected for international publication.

QUIET the MIND
Matthew Johnstone

Meditation takes a certain degree of discipline and it can take a while to quiet the monkey mind; this is why it’s called a practice. QUIET the MIND by Matthew Johnstone (Pan MacMillan) comes out in March 2012.

As Matthew says: “I personally don’t know which chakras are what, I don’t really know what a Meridian is, I’ve never been to an Ashram, I can’t sit on the floor cross legged, I don’t know the meaning of life, but I do know that life is so much better when I meditate. The whole point of this book is a simple to use guide on how to quiet the mind based around breathing and most importantly how not to beat yourself up if you have thoughts. As Jon Kabat-Zinn said ‘you can’t stop the waves but you can learn to surf.’

Black Dog Daze: Public Life, Private Demons
The Hon Andrew Robb AO, MP

It was a full house on the evening of 31 August 2011 as the Hon Andrew Robb, surrounded by friends, family and well wishers, launched his book detailing his battle with the black dog, depression. NSW Premier Barry O’Farrell, a personal friend and State Director when Andrew Robb was Federal Director, gave a warm introduction. The message that Barry O’Farrell took away from Andrew Robb’s book was: “This is treatable”.

Andrew Robb advises “Deal with depression early. It’s estimated that 75 per cent of depression begins in the teen years.” He says that once depression is confronted there are lots of answers, though there is surprisingly little known about the illness. “Solutions are different for everyone,” he believes.

Black Dog is featured prominently in the book in the section ‘Where to find help’, and Professor Gordon Parker is named with gratitude in the Acknowledgements section.

Kinds of Blue: An Anthology of Comics about Depression
Karen Beilharz, editor

Professor Gordon Parker wrote the following introduction to this book: “What does depression look like? What does depression feel like? When you’re stuck in the middle of it, is there anything that actually helps?”
In this collection of short, original comics, 14 young Australians chronicle their close encounters and experiences with depression, capturing snapshots of what depression is like in order to illuminate what is often unexpressed and help fellow sufferers know they are not alone.

To a clinician, signs of significant clinical depression are just as important as symptoms... This book provides vivid images that capture the gravity of the black dog of depression, which saps the vitals of those who experience its bite. I commend the team for their efforts.”

**BE YOUR BEST**

*Geoff Huegill*

This book is the inside story of the greatest comeback in Australian sport... by Olympic swimmer and Black Dog Institute Ambassador, Geoff Huegill. It provides a vivid account of his battle with a weight problem and depression in a period he describes as “Hero to Zero”.

The book includes a guide to Geoff’s BE YOUR BEST principles and since being published it has, according to Geoff’s business partner, Keith Staggers, been a real inspiration to people.

**Tackling Depression at Work. A Practical Guide for Employees and Managers**

This book was launched in 2010 and has been a catalyst for discussion on the subject. Following is a book review by Associate Professor John Dearin, published in April 2011 in Medicine Today.

**BOOK REVIEW**

Tackling Depression at Work: A Practical Guide for Employees and Managers, Black Dog Institute, published by Allen & Unwin, Sydney 2010. Tackling Depression at Work, written by Ms Kerrie Eyers and Professor Gordon Parker from the Black Dog Institute, is an eminently practical guide. It should be on the reading list of every MBA course because of its high level of relevance to corporate staff management.

The authors have collected together the accounts of numerous patients suffering from depression and bipolar disorder, in which they distil the wisdom of their survival in the workplace.

The book provides an insight into the inner workings of minds in distress as the result of psychological traits over which they have limited control, providing very sound and practical advice on how to give the best environment to enable sufferers to flourish and maintain jobs despite their mental distress.

I recommend this book not only to sufferers, but also to employers, who struggle to understand psychiatric illness in their staff and thus to help them through difficult events in their lives.

The authors are to be commended for producing this book, which is jargon-free and very accessible to the general reader. It should assist the integration of patients with depression and bipolar disorder into the wider community through greater acceptance and understanding.

The Modern Woman’s Anthology

The Modern Woman’s Anthology was launched in 2010, and featured the personal stories of 20 remarkable women on what it means to be a woman in today’s world. Leah Greengarten, the editor who was the inspiration and energy behind the book, pledged to donate all proceeds from sales to the Black Dog Institute. In February 2011, Leah presented a cheque for $7,500 to Professor Gordon Parker at the Institute.
New approaches to monitoring – such as automatic digital collection – are the way of the future to help patients with bipolar disorder, according to Professor Guy Goodwin, who delivered the 2011 Black Dog International Lecture, titled: Changing the focus in managing bipolar disorder from episodes to mood instability.

Regarded as one of the world's leaders in his field, Professor Goodwin is Head of Psychiatry at Oxford University in the United Kingdom.

Speaking to a full house of health professionals and other attendees in Sydney on 4 April, Professor Goodwin said digital technology, such as text messaging, was accessible to everyone, and meant patients’ records were being constantly updated.

It also meant reliable measurement of outcomes and avoided costly and unnecessary follow-up appointments. "It tells doctors what really is going on," he said.

As part of this new approach, mood graphs were sent to patients and, if they wished, to their carer. These graphs can help to teach the patient how to understand and manage their mood better.

Professor Goodwin gave the following examples of what some patients who were using digital technology as part of their treatment program were saying:

"It's brilliant... it is difficult to remember when I’m at the clinic how I felt weeks ago, whereas SMS captures it... it's nice to feel that even when I'm not seeing the doctor it's being charted, he has it and I can be called in if necessary. It's a safety net... It quantifies how I'm feeling. Helps make clinical decisions."

And

"...I should like you to know how very useful I find this system of monitoring - it has made things a whole heap easier and better for me..."

The importance of this innovative technology approach cannot be overstated, with Professor Goodwin describing bipolar disorder as a "recurrent, severe and complex mental disorder, which takes a toll on young people’s relationships with family and friends."

"It has the grisly qualification of being the most important cause of disability worldwide in the 15-44 years age group."

Patients were largely autonomous between episodes which, in the United Kingdom, led to de-emphasis on services.
Its expanding footprint and reputation as an international authority on the diagnosis and management of mood disorders is demonstrated in 2011, as the Black Dog Institute hosts visitors from different corners of the globe. They come to participate in programs, as well as to complete their own studies. The Institute is involved with augmenting other studies, which fits with its history of research informing clinical practice which in turn further refines research. This year the Institute has hosted visitors from Germany, United Kingdom, Thailand, the Netherlands, Spain and America.

In turn, the Institute had representatives undertake numerous overseas visits to augment their own studies as well as to provide the latest information to international seminars. This included the visit to Argentina of the Developing Countries team. In previous years the Institute has hosted Pacific Rim countries to raise awareness amongst clinicians in developing countries about the impact of undiagnosed mood disorders on quality of life, work, family and community, as well as on health services. By improving their understanding of mood disorders it is helping to provide better diagnosis and management of these conditions.

April 2011

Professor Guy Goodwin, FMedSci, University of Oxford, Oxford, United Kingdom

Guy Goodwin delivered the 2011 Black Dog Institute International Lecture (see previous page).

He is currently W. A. Handley Professor of Psychiatry and Head of the Department of Psychiatry at the University of Oxford. He completed his medical degree and DPhil in physiology at that University and, following his training in psychiatry, became a Clinical Scientist and Consultant Psychiatrist at the MRC Brain Metabolism Unit at the Royal Edinburgh Hospital, Edinburgh, UK.

Professor Goodwin’s research interests are in the treatment of bipolar disorder and the application of neuroscience in understanding the neurobiology of mood disorders, with a focus on developing new treatments. He has been a lead investigator in clinical trials for bipolar affective disorder, including the BALANCE and CEQUEL studies. He works with industry in developing pre-clinical models of psychotropic drug action in man.

“I stayed from October 2010 until May 2011, my sabbatical, at the Black Dog Institute, funded by a research fellowship of the German Research Foundation. The fellowship focused primarily on subtypes of depression and there might be no better place to study this topic than at the BDI. The eight months allowed me to study depression and its peaks and pitfalls in depth, which was a pleasant experience after struggling with the daily diverse commitments of working at the university. And it was quite productive with three papers already published (Baumeister & Parker, Psychotherapy and Psychosomatics, 2010; Baumeister & Parker, Journal of Affective Disorders, in press; Baumeister, Journal of Affective Disorders, in press). However, the most exciting experience at the BDI was rather to learn how smoothly research, clinical work and community work can go hand in hand: something like the Black Dog presence at the Mardi Gras parade with an oversized black dog float would definitely get a great deal of attention where I work and live!

Thanks to all the great people at the BDI and special thanks to Gordon Parker!”

Harald Baumeister
"Being a visitor at the Black Dog Institute was a wonderful and inspiring experience. The passion, commitment, and kindness of everyone I met was truly impressive. As a wellbeing researcher, I have some knowledge of the importance of wellbeing in the workplace, and it was a joy to be part of a working environment where morale and wellbeing were so high. No wonder the BDI has such fine record of productivity and wide-ranging impact.

Long may the BDI flourish!"

Felicia Huppert

April 2011
Three visitors from Thailand:
Dr Terdsak DetKONG – Department of Mental Health, Ministry of Public Health, THAILAND
Dr Patanon KWANSANIT – Department of Mental Health, Ministry of Public Health, THAILAND, Somdetchaopraya Psychiatric Institute
Mr Wakluck WONG-APAI – Department of Mental Health, Ministry of Public Health, THAILAND, Srithanya Hospital.

August 2011
The distinguished Cambridge Academic, Professor Felicia Huppert, joined us at the Institute while on her sabbatical. She has written extensively and with great rigour about wellbeing and resilience issues.

August 2011
Dr Veronica Galvez is a psychiatrist from Barcelona, Spain. Dr Galvez was here previously and has returned again for a short while. Her main areas of work at the Psychiatry Department of Bellvitge University Hospital are affective disorders and Electroconvulsive Therapy (ECT). Veronica came to the Institute to expand her knowledge on the field of brain stimulation in depression, in particular on transcranial Direct Current Stimulation (tDCS). From her visit she expected to gain experience in researching on the field and certainly her time at the Institute enabled her to be enrolled in several research projects regarding tDCS. She worked with Professor Colleen Loo’s teams involved in ECT (Electroconvulsive Therapy) and DCS (Direct Current Stimulation), and conducted her own experiment under their supervision.

She classes her experience as highly positive and would recommend the Institute to other professionals interested in the field of brain stimulation.

October 2010 to May 2011
Dr Harald Baumeister, senior psychologist and academic from the Institute of Psychology, University of Freiburg in Germany.

October 2011 – March 2012
Visiting academic, Dr Didi Rhebergen from the Netherlands, is at the Institute from October 2011 until March 2012.

Involvement with Government
It has been encouraging to see greater interest from our politicians, both state and federal. In the mental health field, following visits to the Institute, many have pledged to lobby for a greater share of Australia’s resources to be allocated to help improve people’s wellbeing.

Meetings
Representatives of the Black Dog Institute met with a number of State and Commonwealth parliamentarians during the year.
Our People

BLACK DOG INSTITUTE
BOARD OF DIRECTORS

Mr Peter Joseph AM, BComm, MBA
Chairman of the Black Dog Institute, St James Ethics Centre and Health-Sciences Alliance. Director, Advisory Council, Emergency Architects Australia. Former Chairman of Dominion Mining Limited, the GPT Group, and St Vincents and Mater Health, Sydney.

Scientia Professor Gordon Parker AO, MB BS, MD, PhD, DSc, FRANZCP, FASSA
Executive Director of the Black Dog Institute; Scientia Professor of Psychiatry at UNSW and Consultant Psychiatrist at the Prince of Wales Hospital. (Resigned 31 December 2011)

Mrs Carol Berg BMus, MM
Chair of The Marmalade Foundation Inc; Member, Music Council of Australia; Vice President (immediate past President), National Choral Association (NSW/ACT Branch). Former Director; Board of Bundanoon Trust.

Mr James Blomfield MA, MBA
Strategy Principal at the National Australia Bank, and management consultant.

Mr Nicholas Cowdery AM, QC, BA, LLB, LLB (Hon)
Former Director of Public Prosecutions for New South Wales. Currently a visiting Professor of Law, and a consultant.

Ms Melanie Kneale BBus Sc (Hons)
Chief Operating and Technology Officer at nib Health Funds; Member of the Australian Institute of Company Directors; non-executive director of the Hunter United Credit Union. Previously, Board member for in2life (MBF); Board member Hybrid Strategies; and NSW Council Member of Save the Children, NSW.

The Hon Craig Knowles FAPI, CPV
Mr Knowles holds a number of advisory roles, statutory appointments, and commercial and not-for-profit directorships: President of the Asthma Foundation NSW; President of the Children’s Medical Research Institute (CMRI); Trustee of the Hoa Mai Foundation; Fellow of the Australian Property Institute and Chair; Murray-Darling Basin Authority. Previous decade, senior Minister in the New South Wales Government whose portfolios included Health, Infrastructure and Planning, Housing, Natural Resources, Forests, and Lands.

Scientia Professor Philip Mitchell AM, MB BS, MD, FRANZCP, FRCPsych
Head, of the School of Psychiatry, and Scientia Professor at UNSW; Convenor of Brain Sciences UNSW; Chair of the NSW Mental Health Priority Taskforce; Consultant Psychiatrist, Prince of Wales Hospital, Sydney; Director, Bipolar Disorders Clinic, Black Dog Institute; Board member of the Anika Foundation; Guest Professor, Shanghai Jiaotong University, China; Member of the NHMRC Academy. (Appointed to Institute Board 14/2/11)

Associate Professor Meg Smith OAM, BA (Hons); M Psychol, PhD, FAPS
Adjunct community psychologist in the School of Social Sciences at the University of Western Sydney. President of the Mental Health Association, NSW. Community member of the Mental Health Review Tribunal and the Guardianship Tribunal.

Dr Timothy Smyth, MB BS, LLB, MBA
Former Deputy Director-General, Health Systems Quality, Performance and Innovation, NSW Health; Former Director of the Australian Commission on Safety and Quality in Health Care. Over 20 years experience across the NSW health system. Previously, Partner with DLA Phillips Fox, lawyers, working in the areas of commercial and corporate law. Former Chairman of IPG Holdings Ltd and International Parking Group Pty Ltd.

Mr Douglas Snedden BEc
Former Managing Director of Accenture Australia. Director of, Transfield Services Limited, Accenture Foundation, and St James Ethics Centre.

Professor Helen Christensen BA(Hons) (Syd), MPsych, PhD (NSW), FASSA
Executive Director of the Black Dog Institute. Previously Director of the Centre for Mental Health Research, Australian National University. (From January 2012)

Public Officer & Company Secretary & General Manager
Will Bonney
Barry Graham (resigned 31 June 2011)

SENIOR MANAGEMENT & ADMINISTRATIVE STAFF

Executive Director, 2012
Professor Helen Christensen BA(Hons) (Syd), MPsych, PhD (UNSW), FASSA
(Appointed August 2011, to take up position in January 2012)

Scientia Professor Gordon Parker AO, MB BS, MD, PhD, DSc, FRANZCP, FASSA
(Resigned 31 December 2011)

Secretary, Professor Gordon Parker
Karlyn Greenshields

Finance Controller
Steven Franks

Finance Officer
Maria Kinantra

Communications Manager
Ian Dose
Corporate Relations and Development Manager
Vicki Miller

Creative Consultant
Matthew Johnstone

Publications Consultant
Kerrie Eyers

Facilities Manager
Christine Boyd

Receptionist
Pauline Trantalis

Domestic Services
Teresa Silva

PROJECT AREAS

RESEARCH TEAM

Director, Research
Scientia Professor Gordon Parker AO, MB BS, MD, PhD, DSc, FRANZCP, FASSA
(Resigned 31 December 2011)

Professor Helen Christensen BA(Hons) (Syd), MPsych, PhD (UNSW), FASSA
(Appointed August 2011, to take up position in January 2012)

Principal Research Investigators
Associate Professor Marie-Paule Austin
Associate Professor Michael Breakspear
Professor Colleen Loo
Scientia Professor Phillip Mitchell AM
Professor Kay Wilhelm AM

Senior Lecturer, School of Psychiatry, ARC Future Fellow
Dr Melissa Green

Conjoint Senior Lecturer, School of Psychiatry, Hospital Scientist & Principal Research Investigator
Dusan Hadzi-Pavlovic

Associate Research Investigators
Scientia Professor Henry Brodaty AO
Associate Professor Brian Draper
Scientia Professor Perminder Sachdev AM

Data Entry Clerk
Penny Sawdy

COMMUNITY PROGRAMS

Manager, Community Programs
Michael Sluis

Resource Officer
Sharnelle Cowan

Volunteer Coordinator
Sarah Connor

Project Manager, Community Education
Kate Hille

Project Manager, Youth Initiatives
Liza Culleney
Mei Li Quah

Project Manager, Rural Initiatives
Christopher Rule

Project Manager, Events
Fleur Mortimer

CLINICAL SERVICES

Clinical Director
Dr Paul Friend

Consultant Psychiatrists
Scientia Professor Gordon Parker AO
Scientia Professor Philip Mitchell AM
Professor Colleen Loo
Dr Caryl Barnes
Dr Melissa Barrett
Dr Shulamit Futerman
Dr Michael Hong
Dr Anne-Marie Rees
Dr Howe Synnott

Clinical Administration

Administration Research Secretaries
Louise Dyer
Anne Naylor
Isabella Wanat

Clinical Psychologists
David Gifililan
Liz Sheppard

PROFESSIONAL SERVICES (EDUCATION AND TRAINING)

Director, Psychological Services, Senior Research Fellow, Project Leader, Psychologist Education, Youth and Allied Health
Associate Professor Vijaya Manicavasagar

Manager, Professional Education and Training Programs
Katherine Dabich

Mood Assessment Program (MAP)
Dr Jan Orman

Mood Assessment Program Administrator
Louise Dyer

Education Project Officers
Nicole Cox
Katie Denton
Amiee Gayed
Jenny Gieng (resigned)

Administrative Officer
Chilin Gieng

Clinical Advisory Group
Dr Caryl Barnes (Workplace Programs)
Dr Penny Browne (GP Program Consultant) (resigned)
Dr Vered Gordon (General Practitioners)
Dr Jan Orman (MAP)
Program Facilitators
Julie Allan
Dr Caryl Barnes
Dr Anne Camac
Joanna Crawford
Dr Sarah Edelman
David Gilfillan
Dr Guy Gordon
Dr Vered Gordon
Dr Margaret Gottlieb
Dr Tanya Hanstock
Matthew Johnstone
Dr Kristine Kafer
Dr Carol Kefford
Associate Professor Vijaya Manicavasagar
Anthony Merritt
Dr Antony Milch
Dr Patrick Morris
Claire Nabke-Hatton
Dr Jan Orman
Jenny Ostick
Dr Joseph Reyn
Dr Jaya Reddy
Elizabeth Sheppard
Dr Julian Short
Matthew Stanton
Vicki Stanton
Dr Howe Synnott
Dr Barbara Tooth
Chris Tzar
Angela Vrankic
Dr Sarah Weaver
Sharon Williams

ONLINE SERVICES

Systems and Technology Manager
Jacqui Wallace

Senior Advisor
Peter Callaway

Technical Architect
Bruce Haefele

Web and Communications Officer
Sako Hampartzoumian
Leah Greenfield (on leave)

Consultants and eHealth Assistants (BITE BACK website)
Cesar Anonuevo
Rowan Burckhardt
Kate Fagan
Deserai Horwood
Romi Kaufman
Nic Newling
Daniel Pearce
Marty Smilie
Joshua Thomason

Tania Perich
Michael Player
Tamara Powell
Susan Priest
Dr Gloria Roberts
Poppy Rouke
Pulkit Singh
Alexis Whitton
Dr Alex Wilde
Adam Wright
Tamara Yuen

Postdoctoral fellows (Neurosciences)
Dr Tjeerd Boonstra

PhD Students
Liliane Benti
Norman Fern
Kathryn Fletcher
Stewart Heitmann
Matthew Hyett
Muhsin Karim
Angela Langdon

Research Students
Megan Boyd
Joshua Garfield
Mark Schira
Amy Sparks
Mona Taouk
Pang Ping Wee

Volunteers
Michelle Adams
Abigail Baker
Nerida Bell
Carine Bento
Thomas Brinsmead
Kate Bush
Sam Bush
Will Cadden
John Canning
Lee Catlin
Letitica Colautti
Sophie Covert
Emma Cunnigham
Sarah Davis
Ingrid De Leedes-Smith
Paul Donald
Louise Drum
Megan Dunn
Nicole Dunn
Matthew Eakin
Melanie Faithfull
Tom Farrar
Lewis Ford
Dianne Gaddin
Nada Gergich
Aniela Gokiert
Roy Hazelwood

DEVELOPING COUNTRIES PROJECT

Project Director
Associate Professor Vijaya Manicavasagar

Project Manager
Dr Ilse Blignault

Participant Liaison Officers
Marguerite Pepper
Kate Cashel

eMENTAL HEALTH

Director, Senior Research Fellow
Associate Professor Judy Proudfoot

Dr Angelo Alonzo
Kevin Aquino
Dr Harald Baumeister
Mary-Rose Birch
Blanca Blanch
Dr Heather Brotchie
Dr Janine Clarke
Andrew Frankland
Kathryn Fletcher
Inika Gillis
Dr Rebecca Graham
Virginia Harrison
Dr Bronwyn Hegarty
Julie Ho
Matthew Hyett
Nicole Kochan
Dr Karen Kool
Clare McCormack
Stacey McCraw
Dr Donel Martin
Amelia Paterson
Saeid Mehrkanoon

Karen Heagney
Tim Heffernan
Hamish Hill
Jitarth Jadega
Stephen Janney
Trudy Jenkins
Warren Jones
Jin Jan Kim
Julia Kiss
Cathie Knox
Greg Lamphee
Paul Lamphee
Natalie Lantry
Sarah L’Hullier
Karina Lindsay
Megan Macpherson
Liezl Maritz
Alison McLeod
Katrina Morrow
Judith Myers
Janet Namey
Lucinda Napper
Tina Papilos
John Polgar
Judy Polgar
Suzanna Rahman
Gilad Ravitz
Natalie Reilly
Anne Riches
Laura Ritchie
Rosemary Rogge
Margherita Roser
Bjorn Rostron
Charmaine Roth
Suzie Rust
Suki Scade
Anne Schwartz
Kerrie Scott
Heather Simington
Richard Simpson
Lisa Smith
Shirley Sneddon
Carly Sperring
David Spindler
Georgina Stow
Alice Swan
Melanie Taylor
Richard Thorpe
Mark Tindall
Dominic Tran
Jann Trosser
Isabelle Truong
May Tse
Lucy Vaczi
Amy Watts
Stephanie Webster
Jayne Wehbe
Wayne Wigham
Eri Wilkes
Joe Xu
Jessica Young
UNSW School of Psychiatry

We are fortunate to have the Head of the UNSW School of Psychiatry, Professor Philip Mitchell, on site. Many of the School’s teaching sessions are located at the Institute, along with Professor Mitchell’s research teams.

Special Acknowledgements

Barry Graham

Barry Graham stepped down as General Manager at the end of June 2011 after presiding over a decade of growth at the Black Dog Institute.

He has been described as the person who “effectively built the building, ensured we had quality programs and showed superb management skills as well as great wisdom.”

Barry was acknowledged as a consummate professional – a description echoed by Board members.

His wide skill set enabled him to consult with key stakeholders such as Government and University officials as well as contractors and he had the great wisdom to know what was best for the future of the Institute.

Barry wasn’t one for pretension. He was the first to pick up the BBQ tools and help cook lunch for the staff at Christmas on the barbecue which he had helped assemble in the courtyard.

Undoubtedly, he has left the Institute in excellent shape for his successor, Will Bonney.

Dr Penny Browne

We would like to extend our appreciation to Dr Penny Browne, General Practitioner Consultant in the Professional Services team.

Penny was instrumental in the development of the 2005-2008 Strategic Plan for General Practice (GP) education and charted the direction of GP programs for over five years. She retired as consultant for GP Programs in August 2011.

We will miss her guidance and wisdom.
MAJOR AWARDS 2011

Over the years, the Black Dog Institute and its people has been the recipient of many major awards.

They range from scholarships and fellowships to the highest awards Governments can bestow on extraordinary Australians in a diverse range of fields and endeavours.

This year new ground was broken as the presence of the Black Dog Institute started to be interpreted in different ways and as awareness about mood disorders became more visible across the wider community.

Take for example, the story of Dean Herald, whose garden design, called Reflections, won the coveted Award of Excellence for Best in Show at the Melbourne International Flower and Garden Show.

Inspired by the battle many people face with depression and anxiety, Dean and his team from Rolling Stones Landscapes, created a beautiful calming space composed of lush plantings and other features.

The garden (pictured) has a stepping stone path, reflecting the first steps taken to recovery. These paving stones seem large at first but become smaller as one advances along the pathway. At the end of these stepping stones, the individual is turned toward a calming place – analogous to the journey to recovery.

The Institute is also proud of another major award – Best Float, featuring a three-metre high paper machete black dog surrounded by flowers and rainbows at this year’s Sydney Mardi Gras. The float’s slogan read “Turn your dark clouds into rainbows” and “Don’t Be Sad, Be Gay” with the aim of helping to raise awareness about depression amongst the GLBTQ community.

The Institute’s winning entry was chosen from a field of 135 and was a just reward for the 40 staff and volunteers who danced behind the float as it made its way through Sydney streets in April this year.

Another notable instance was the 2011 Life Award from Suicide Prevention Australia. The award was presented to Woollahra Council to recognise a long campaign to introduce anti-suicide safety measures at Gap Park, Watson’s Bay in Sydney. This project had been a joint partnership between the Council, the community, government, NSW Police, the Black Dog Institute and Lifeline.
OTHER DISTINGUISHED AWARDS

The Australian Honours system this year recognised the achievements of two outstanding people associated with the Black Dog Institute:

- **Scientia Professor Perminder Sachdev** was made a Member of the Order of Australia for services to medical research in the field of neuropsychiatry, as a clinician and academic, and to professional associations at a national and international level.

- **Doctor Michael Dudley** was made a Member of the Order of Australia for services to medicine as a clinician in the child and adolescent mental health area, to medical education, and to a range of professional associations.

**Scientia Professor Philip Mitchell** was elected as councillor of CINP (Collegium Internationale Neuro-Psychopharmacologicum); and also appointed Visiting Professor, Harbin Medical University, Harbin, China.

**Scientia Professor Henry Brodaty** was awarded the UNSW Faculty of Medicine Dean’s Award for Community Engagement 2011 (UNSW).

**Professor Kay Wilhelm**, as part of the UNSW Prison Research Team, was given the Mental Health Award for Excellence in Research for 2011.

**Professor Michael Breakspear** was given the Clinical Researcher Award, Australian Society for Medical Research (ASMR, QLD).

**Dr Alex Wilde** was awarded a PhD for her dissertation on psychosocial and clinical implications of genetic risk information about psychiatric disorders.

**Dr Caryl Barnes** was awarded an MD for her dissertation on the internet and its application in the management of bipolar affective disorder.

**Professor Colleen Loo** was promoted from associate to full professor at UNSW.

**Scientia Professor Perminder Sachdev** was awarded Australasian Society for Psychiatric Research (ASPR) Founders’ Medal 2011.

**Dr Lee-Fay Low** was awarded the UNSW Faculty of Medicine Dean’s Rising Star Award (Post-doctoral).

**Dr Jinnuo Han** was awarded the Gordon Parker Award for best PhD research paper published in 2010 (awarded 2011), School of Psychiatry, UNSW.

**Dr Nicole Kochan** was awarded the UNSW Faculty of Medicine Dean’s List Award 2011.

**Dr Lee-Fay Low** was awarded the UNSW Faculty of Medicine Dean’s Rising Star Award (Post-doctoral).

**Dr Jinnuo Han** was awarded the Gordon Parker Award for best PhD research paper published in 2010 (awarded 2011), School of Psychiatry, UNSW.

**Dr Nicole Kochan** was awarded the UNSW Faculty of Medicine Dean’s List Award 2011.
**Research Funding**

The Institute is most appreciative of the generous support from a wide variety of sources.

A highlight this year was the latest NHMRC (National Health and Medical Research Council) grant of $7.1 million for 2013 to 2017 which will result in significant research being undertaken at the Black Dog Institute.

Professor Philip Mitchell, head of the UNSW School of Psychiatry and the BDI Bipolar Clinic, was the Chief Investigator in presenting the case for the grant and was supported by Professor Peter Schofield (Neurosciences Research Australia (NeuRA)), Professor Gordon Parker (Black Dog Institute) and Michael Breakspear (Black Dog Institute and Queensland Institute of Medical Research).

“A very exciting time for research into depression and bipolar disorder,” is how Professor Mitchell described the latest NHMRC grant. The NHMRC has been supporting the work of the Institute and its predecessor since 1995 and this is the fifth occasion.

According to Professor Mitchell, recent rapid advances in brain imaging and genetic technologies places us on the brink of truly understanding the biological causes of these common and debilitating illnesses. “Understanding these causes will enable the development of more targeted and effective treatments,” he stated.

This year also saw support from the New South Wales and Federal Governments; NSW Ministry of Health; the Mental Health and Drug and Alcohol Office (MHAO); the NSW office of Science and Medical Research (OSMR); the Commonwealth Department of Health and Ageing (DOHA); and donations from individuals and corporations.

Through collaboration with other organisations, the Institute undertakes a wide variety of research activities, as outlined below. (Institute staff and affiliates are in **bold**.)

<table>
<thead>
<tr>
<th>Grant Holders</th>
<th>Breakspear plus other Chief Investigators listed</th>
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<tbody>
<tr>
<td>Granting Body</td>
<td>James F McDonnell Collaborative Gift</td>
</tr>
</tbody>
</table>

| Chief Investigators | McIntosh (Canada), Breakspear (Australia), Friston (UK), Ghilardi (USA), Jirsa (USA), Kött (Germany), Lobbagh (Canada), McAndrews (Canada), Price (UK), Schiff (USA), Small (USA), Solodkin (USA), Sporns (USA), Strother (Canada), Stuss (Canada), Tononi (USA), Zemel (Canada) |
| Granting Body | Thinking Systems (Joint Australian Research Council and NHMRC special initiative) |
| Study | Optimising autonomous system control with brain-like hierarchical control systems |
| Duration | 2006–2011 ($3.300,00) |

| Grant Holders | Breakspear, Morley, Harris, Sammut, Goodhill, Paxinos, Lovell, Knock, Logopoulos, Mahli, Macefield |
| Granting Body | National Health and Medical Research Council |
| Study | Orientation-specific modulation in the human visual cortex |
| Duration | 2009–2011 ($279,250) |

| Grant Holders | McIntosh, Sporns, Jirsa et al. |
| Granting Body | National Health and Medical Research Council |
| Study | Brain Network Recovery Group |
| Duration | 2006–2011 ($287,000) |

| Grant Holders | Brodaty, Low, Chenoweth, Fleming, Spitzer Associates: Haas, Cohen-Mansfield, Norman, King, Bell |
| Granting Body | NHMRC Project grant, application ID 568787 |
| Study | Sydney multi-site intervention of LaughterBosse and ElderClowns (SMILE): A random controlled trial of humour therapy in residential care |
| Duration | 2009–2011 ($819,938) |

| Grant Holders | Green |
| Granting Body | ARC Future Fellowship |
| Study | Imaging genetics in schizophrenia and bipolar disorder: Adjudicating neurocognitive endophenotypes |
| Duration | 2009–2013 ($700,000) |

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**Research Funding**

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Through collaboration with other organisations, the Institute undertakes a wide variety of research activities, as outlined below. (Institute staff and affiliates are in **bold**.)

| Grant Holders | Austin, Reilly, Loxton, Chojenta, Milgrom |
| Granting Body | Bupa Foundation Health Award |
| Study | Psychosocial assessment in the perinatal period: Does it improve maternal health outcomes? |
| Duration | 2010-2012 ($246,075) |

| Grant Holders | Austin (St John of God Health Care & UNSW) |
| Granting Body | NHMRC Linkage grant with beyondblue |
| Project | The Australian perinatal mental health reforms: Using population data to evaluate their impact on service utilisation and related cost-effectiveness |
| Duration | 2012-2014 ($1,009,140) |

| Grant Holders | Gallibally, Lewis, Buist, Austin |
| Granting Body | Beyondblue National Priority Driven Research |
| Project | Maternal and infant outcomes following antidepressants exposure in pregnancy |
| Duration | 2012-2014 ($216,000) |

| Grant Holders | King, Kildea, Austin |
| Granting Body | Canadian Institutes of Health Research |
| Project | QF2011: The effects of the Queensland Flood on pregnant women, their pregnancies, and their children's early development |
| Duration | October 2011-2015 (1,790,000) |

| Grant Holders | McMahon, Austin, Jones, Raper, Donald, Grant |
| Granting Body | NHMRC Project Grant |
| Study | Maternal anxiety in pregnancy and infant bio-behavioural regulation: Testing the foetal programming hypothesis |
| Duration | 2010-2012 ($556,650) |

<p>| Grant Holders | Parker, Mitchell, Malhi (Austin Al) |
| Granting Body | NHMRC Program Grant |
| Study | Perinatal mental health node: Identifying determinants of both the origins and the progression of the depressive and bipolar (mood) disorders |
| Duration | 2008-2012 ($158.335 for Perinatal mental health node) |</p>
<table>
<thead>
<tr>
<th>Study</th>
<th>Grant Holders</th>
<th>Granting Body</th>
<th>Duration</th>
<th>Granting Body</th>
<th>Grant Holders</th>
<th>Study</th>
<th>Duration</th>
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</thead>
<tbody>
<tr>
<td>Identify childhood indicators of risk for mental illness</td>
<td>Maloney, Laurens, Green</td>
<td>Rotary Mental Health Research Grant</td>
<td>2011-2012 ($68,377)</td>
<td>Rotary Mental Health Research Grant</td>
<td>Parker, Mitchell, Wilhelm, Austin, Hadzi-Pavlovic</td>
<td>Depressive and Bipolar Disorders: Evaluating determinants of onset, recovery and treatment resistance</td>
<td>2008–2012 ($175,000)</td>
</tr>
<tr>
<td>Identifying determinants of both the origins and the progression of the depressive and bipolar (mood) disorders</td>
<td>Parker, Mitchell, Malhi and Associate Investigators</td>
<td>NHMRC Program Grant</td>
<td>2009-2011 ($66,000)</td>
<td>NHMRC Program Grant</td>
<td>Sachdev, Brodaty, Andrews</td>
<td>The prevention, early detection, and effective management of neurocognitive disorders in the elderly</td>
<td>2010-2014 ($6,090,000)</td>
</tr>
<tr>
<td>A comparative study of two forms of ECT: Standard and ultrabrief pulsewidth</td>
<td>Loo</td>
<td>UNSW Gold Star Award</td>
<td>2011 ($40,000)</td>
<td>NHMRC Program Grant</td>
<td>Sachdev, Mather, Dusing</td>
<td>A cognitive and neuroimaging study of exceptionally old age: Sydney Centenarian Study</td>
<td>2010-2012 ($826,500)</td>
</tr>
<tr>
<td>Investigating a visual test for bipolar disorder</td>
<td>Miller, Martin, Mitchell, Berk</td>
<td>Defence Health Foundation Establishment Grant</td>
<td>2011 ($49,986)</td>
<td>NHMRC Program Grant</td>
<td>Sachdev, Martin, Ames, Schofield, Broe, Brodaty, Troller, Wright, Menant, Halliday, Lee</td>
<td>Role of neurogenesis in clinical recovery from depression during ECT: Application of a novel in vivo magnetic resonance spectroscopy technology</td>
<td>2011-2013 ($505,312)</td>
</tr>
<tr>
<td>Epigenetic study of young people at high-risk of bipolar disorder</td>
<td>Mitchell</td>
<td>Lansdowne Foundation</td>
<td>2011 ($66,000)</td>
<td>beyondblue National Priority Driven Research Projects</td>
<td>Wilde, Mitchell, Meiser, Schofield</td>
<td>Development of an interactive depression risk assessment and tailored preventive intervention for healthy young people at high genetic risk of depression and bipolar disorder</td>
<td>2011-2013 ($200,000)</td>
</tr>
<tr>
<td>A comparative clinical efficacy trial of treatments for melancholia</td>
<td>Parker, Hadzi-Pavlovic, Manicavasagar</td>
<td>NHMRC Project Grant</td>
<td>2010–2012 ($374,250)</td>
<td>beyondblue National Priority Driven Research Projects</td>
<td>Butler, Schofield, Greenberg, Weatherburn, Wilhelm, Carr, D Este, Mitchell</td>
<td>Reducing impulsive behaviour in repeat violent offenders using a selective serotonin reuptake inhibitor (Zoloft)</td>
<td>2010-2014 ($1,033,120)</td>
</tr>
<tr>
<td>Identifying targets and timing for early intervention: A NSW population record-linkage study to detect childhood indicators of risk for mental illness</td>
<td>Weickert, Mitchell, Schofield</td>
<td>NHMRC Project Grant</td>
<td>2009 ($40,000)</td>
<td>beyondblue National Priority Driven Research Projects</td>
<td>Butler, Schofield, Greenberg, Weatherburn, Wilhelm, Carr, D Este, Mitchell</td>
<td>Development of an interactive depression risk assessment and tailored preventive intervention for healthy young people at high genetic risk of depression and bipolar disorder</td>
<td>2011-2013 ($200,000)</td>
</tr>
<tr>
<td>Imaging genetics in schizophrenia and bipolar disorder: Adjudicating neurocognitive endophenotypes</td>
<td>Parker, Hadzi-Pavlovic, Manicavasagar</td>
<td>NHMRC Project Grant</td>
<td>2010–2012 ($374,250)</td>
<td>beyondblue National Priority Driven Research Projects</td>
<td>Butler, Levy, Kaldor, Al-Yaman, Wilhelm, Dodson, Gray, Allsop</td>
<td>From Broome to Berrima: Building Australia-wide research capacity in Indigenous offender health and health care delivery</td>
<td>2009-2014 ($2,740,728)</td>
</tr>
</tbody>
</table>
Research Publications

The Institute prides itself on the quality and quantity of its research. Its research findings are widely distributed to peer-reviewed professional and scientific publications, as well as to the general public via the media and fact sheets on our website. The Institute’s impressive research output during 2011 is listed below.

2011 Publications


The NHMRC grants were announced in late December. Pictured (left to right) Professor Warwick Anderson (NHMRC), Professor Peter Schofield, Professor Philip Mitchell, Federal Health Minister, Tanya Plibersek and Professor Gordon Parker


<table>
<thead>
<tr>
<th>Month</th>
<th>Event Name</th>
<th>Presentation</th>
<th>Location</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>December</td>
<td>37th Annual Convention of the Philippine Psychiatric association, Inc</td>
<td>The Elephant on the Couch: The Hazards of Psychotherapy</td>
<td>Cebu, Philippines</td>
<td>Parker</td>
</tr>
<tr>
<td>January</td>
<td>37th Annual Convention of the Philippine Psychiatric association, Inc</td>
<td>My Compass Program for Monitoring and Managing Mild to Moderate Depression, Anxiety and Stress: The Black Dog Institute Experience</td>
<td>Cebu, Philippines</td>
<td>Parker</td>
</tr>
<tr>
<td>June</td>
<td>Brain connectivity workshop</td>
<td>Recovery from hypoxia</td>
<td>Montreal, Canada</td>
<td>Breakspear</td>
</tr>
<tr>
<td>June</td>
<td>Human Brain Mapping Annual Meeting</td>
<td>Scale free cortical dynamics</td>
<td>Quebec, Canada</td>
<td>Breakspear</td>
</tr>
<tr>
<td>July</td>
<td>16th Malaysian Conference of Psychological Medicine</td>
<td>Six-hour Black Dog Institute Program for GPs</td>
<td>Kuala Lumpur, Malaysia</td>
<td>Parker</td>
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<tr>
<td>July</td>
<td>16th Malaysian Conference of Psychological Medicine</td>
<td>Keynote Speaker: The Mood Disorders and Their Management – A Model</td>
<td>Kuala Lumpur, Malaysia</td>
<td>Parker</td>
</tr>
<tr>
<td>August</td>
<td>Shanghai Mental Health Centre</td>
<td>Genetic testing for depression</td>
<td>Shanghai, China</td>
<td>Mitchell</td>
</tr>
<tr>
<td>August</td>
<td>Harbin Medical University Hospital</td>
<td>Can we predict who will develop bipolar disorder?</td>
<td>Harbin, China</td>
<td>Mitchell</td>
</tr>
<tr>
<td>August</td>
<td>Daqing Mental Health Hospital (affiliated with Harbin Medical University)</td>
<td>Update on the treatment of bipolar disorder?</td>
<td>Daqing, China</td>
<td>Mitchell</td>
</tr>
<tr>
<td>August</td>
<td>Harbin Medical University</td>
<td>Genetic testing for depression</td>
<td>Harbin, China</td>
<td>Mitchell</td>
</tr>
<tr>
<td>August</td>
<td>Tianjin Medical University</td>
<td>Genetic testing for depression</td>
<td>Tianjin, China</td>
<td>Mitchell</td>
</tr>
<tr>
<td>August</td>
<td>Institute of Mental Health, Peking University</td>
<td>Can we predict who will develop bipolar disorder?</td>
<td>Beijing, China</td>
<td>Mitchell</td>
</tr>
<tr>
<td>September</td>
<td>World Congress of Psychiatric Genetics</td>
<td>Reduced inferior frontal gyrus activation with emotional inhibition in young people at increased risk to bipolar disorder</td>
<td>Washington DC, USA</td>
<td>Mitchell</td>
</tr>
<tr>
<td>October</td>
<td>International Conference of Affective Disorders</td>
<td>Diagnostic entities in depression</td>
<td>Tokyo, Japan</td>
<td>Parker</td>
</tr>
<tr>
<td>December</td>
<td>Arthur M Sackler Colloquia of the National Academy of Science</td>
<td>The Impact of Prenatal Experience and the Postnatal Caregiving Environment on Infant Development (Poster)</td>
<td>Irvine, USA</td>
<td>Austin, Grant, McMahon, Reilly, Leader</td>
</tr>
<tr>
<td>December</td>
<td>Australasian Society for Psychiatric Research Annual Conference</td>
<td>Plenary Lecture: Can we predict who will develop bipolar disorder?</td>
<td>Dunedin, New Zealand</td>
<td>Mitchell</td>
</tr>
<tr>
<td>December</td>
<td>Australasian Society for Psychiatric Research Annual Conference</td>
<td>Safety Monitoring Guidelines for the Treatments of Major Depressive Disorder</td>
<td>Dunedin, New Zealand</td>
<td>Mitchell, Parker</td>
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<tr>
<td>December</td>
<td>Australasian Society for Psychiatric Research Annual Conference</td>
<td>Reduced Frontal Brain Activation During Emotion Inhibition in Young People at Genetic Risk of Developing Bipolar Disorder</td>
<td>Dunedin, New Zealand</td>
<td>Breakspear, Hadzi-Pavlovic, Mitchell</td>
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<tr>
<td>December</td>
<td>Australasian Society for Psychiatric Research Annual Conference</td>
<td>Depression in Carers of People with Mild Cognitive Impairment – A Systematic Literature Review</td>
<td>Dunedin, New Zealand</td>
<td>Brodaty</td>
</tr>
<tr>
<td>National</td>
<td>Australian Doctor Education Seminar</td>
<td>Greying of the Black Dog: Managing Depression and Ageing</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>March</td>
<td>Part 0 – An Induction to Anaesthesia Conference</td>
<td>Mental Health</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>March</td>
<td>Part 0 – An Induction to Anaesthesia Conference</td>
<td>Happiness</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>March</td>
<td>UNSW Alumni Brainfood Series 2011</td>
<td>Navigating the Maze: Understanding Mood Disorders in Adolescents and Young People</td>
<td>Sydney</td>
<td>Parker (Facilitator)</td>
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<tr>
<td>March</td>
<td>UNSW Brain Sciences Symposium 'Brain Stimulation'</td>
<td>Brain stimulation – a tool for treating psychiatric disorders</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>March</td>
<td>Year 1 PCP Students (NSW Institute of Psychiatry)</td>
<td>Modelling and Managing Mood Disorders – The Importance of Classification</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>April</td>
<td>15th Annual Conference of the Perinatal Society of Australia and New Zealand</td>
<td>Perinatal mental health policy and service development in Australia: National Clinical Practice Guidelines for Depression and Related Disorders (Anxiety, Bipolar and Puerperal Psychosis) in the Perinatal Period</td>
<td>Hobart</td>
<td>Austin</td>
</tr>
<tr>
<td>April</td>
<td>15th Annual Conference of the Perinatal Society of Australia and New Zealand</td>
<td>New mothers and depressive disorders</td>
<td>Hobart</td>
<td>Austin, Reilly</td>
</tr>
<tr>
<td>April</td>
<td>First National Symposium on Translational Psychiatry</td>
<td>A high-risk longitudinal study of bipolar disorder</td>
<td>Canberra</td>
<td>Mitchell</td>
</tr>
<tr>
<td>Month</td>
<td>Event Name</td>
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<tr>
<td>April</td>
<td>NSW Bipolar Disorder Support Group</td>
<td>Can we predict who will develop bipolar disorder?</td>
<td>Sydney</td>
<td>Mitchell</td>
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<tr>
<td>April</td>
<td>NSW Schizophrenia Fellowship Annual Conference</td>
<td>Update on bipolar disorder: treatment and causes</td>
<td>Sydney</td>
<td>Mitchell</td>
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<tr>
<td>April</td>
<td>Prince of Wales Hospital Psychiatry In-Service Presentation</td>
<td>Can we predict who will develop bipolar disorder?</td>
<td>Sydney</td>
<td>Mitchell</td>
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<tr>
<td>April</td>
<td>Moderator – 2011 AstraZeneca Neuroscience Symposium</td>
<td>Differentiating Bipolar Disorder from Personality Disorders with Emotional Dysregulation</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>April</td>
<td>School of Psychiatry Academic Forum</td>
<td>Can we predict who will develop bipolar disorder?</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>April</td>
<td>AstraZeneca GP Dinner Meeting</td>
<td>In search of melancholia – and in search of melancholics</td>
<td>Sydney</td>
<td>Parker</td>
</tr>
<tr>
<td>April</td>
<td>Sydney GPCE Conference</td>
<td>The signs of happiness and wellbeing</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>June</td>
<td>CSIRO workshop on complex systems</td>
<td>Brain Networks</td>
<td>Canberra</td>
<td>Breakspear</td>
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<td>June</td>
<td>Astra Zeneca Continuing Education Meeting</td>
<td>Lithium: an oldie but a goodie</td>
<td>Sydney</td>
<td>Mitchell</td>
</tr>
<tr>
<td>June</td>
<td>Pharmacy Expo</td>
<td>Depression through the ages</td>
<td>Sydney</td>
<td>Mitchell</td>
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<tr>
<td>June</td>
<td>AstraZeneca GP Dinner Meeting</td>
<td>The Importance of Identifying Melancholic Depression</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>June</td>
<td>Psychiatry Clinical Controversies</td>
<td>Lessons learned from the British Prime Minister’s disease</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>June</td>
<td>RANZCP Congress</td>
<td>Putting the MAP on the Clinical Psychiatrist's Diagnostic Map</td>
<td>Darwin</td>
<td>Parker</td>
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<tr>
<td>June</td>
<td>CeBIT Conference</td>
<td>mHealth: Innovation in Mental Health</td>
<td>Darling Harbour,</td>
<td>Proudfoot</td>
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<tr>
<td>June</td>
<td>Orygen Youth Health Research Colloquium</td>
<td>Mobile Phone Interventions for Mental Health: Overview of the Emerging Field and Preliminary Trial of a New Program</td>
<td>Melbourne</td>
<td>Proudfoot</td>
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<tr>
<td>July</td>
<td>Westmead Hospital Psychiatry Grand Rounds</td>
<td>Recent advances in Treatments for Depression</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>July</td>
<td>Northern Rivers Psychiatry Network</td>
<td>Perinatal Psychiatry: Who, when, where?</td>
<td>Surry Hills, Sydney</td>
<td>Austin</td>
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<tr>
<td>July</td>
<td>Early Childhood Clinic Nurses Educational Meeting</td>
<td>Perinatal Mental Health</td>
<td>Sydney</td>
<td>Austin</td>
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<tr>
<td>July</td>
<td>Australian Society for Psychosocial Obstetrics and Gynaecology Conference</td>
<td>Clinical Practice Guidelines for Depression and Related Disorders - Anxiety, Bipolar Disorder and Puerperal Psychosis - in the Perinatal Period</td>
<td>Adelaide</td>
<td>Austin</td>
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<tr>
<td>July</td>
<td>Complex Case Review, POW Hospital</td>
<td>Mood Swings – When Personality Dysregulation and When Bipolar Disorder?</td>
<td>Randwick</td>
<td>Parker</td>
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<tr>
<td>July</td>
<td>UNSW School of Psychiatry Academic Meeting</td>
<td>Can we predict who is at risk for bipolar disorder?</td>
<td>Sydney</td>
<td>Mitchell</td>
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<tr>
<td>July</td>
<td>Australian Neurolaw Workshop hosted by Macquarie University Departments of Philosophy and Law</td>
<td>SSRI antidepressants and other physical treatments for criminal behaviour</td>
<td>Sydney</td>
<td>Mitchell</td>
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<tr>
<td>July</td>
<td>Queensland RANZCP CME conference</td>
<td>Update on the treatment of bipolar disorder.</td>
<td>Kingscliff, NSW</td>
<td>Mitchell</td>
</tr>
<tr>
<td>August</td>
<td>St George Hospital Grand Rounds</td>
<td>New Treatments in Depression – Ketamine</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>August</td>
<td>The Sutherland Hospital, Grand Rounds</td>
<td>New Treatments in Depression</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>August</td>
<td>Pfizer GP Dinner Meeting</td>
<td>Feedback from American Psychiatric Association Conference 2011</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>August</td>
<td>Lundbeck Institute Alumni Meeting</td>
<td>The role of anti-depressants in the management of Bipolar Mood Disorder II</td>
<td>Melbourne</td>
<td>Parker</td>
</tr>
<tr>
<td>September</td>
<td>St John of God Burwood, Grand Rounds</td>
<td>Update on Electroconvulsive Therapy</td>
<td>Sydney</td>
<td>Loo</td>
</tr>
<tr>
<td>Month</td>
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<td>Presenter</td>
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<tr>
<td>September</td>
<td>Australasian Medical Writers Association 28th Annual Conference</td>
<td>DSM-V: Are the sequels getting worse?</td>
<td>North Sydney</td>
<td>Parker</td>
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<tr>
<td>September</td>
<td>Australian Society of Anaesthetists National Scientific Congress</td>
<td>Invited symposium speaker: Strategies for Optimising ECT</td>
<td>Sydney</td>
<td>Loo</td>
</tr>
<tr>
<td>September</td>
<td>TMF Risk Management Conference &amp; Awards</td>
<td>Managing mental health at work – addressing the mental health needs across the generations</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>September</td>
<td>Australian Society of Anaesthetists National Scientific Congress</td>
<td>Strategies for Optimising ECT</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>October</td>
<td>Queensland Mental Health Symposium: An update on ECT</td>
<td>New Brain Stimulation Treatment and ECT</td>
<td>Brisbane</td>
<td>Loo</td>
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<tr>
<td>October</td>
<td>Australasian Society for Bipolar Disorders Conference</td>
<td>Optimising ECT: The importance of stimulus parameters</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>October</td>
<td>Australasian Society for Bipolar Disorders Conference</td>
<td>Novel Brain stimulation – what is the therapeutic potential?</td>
<td>Sydney</td>
<td>Loo</td>
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<tr>
<td>October</td>
<td>Rotary Club of Lane Cove – Dinner</td>
<td>An overview of mood disorders</td>
<td>Lane Cove</td>
<td>Parker</td>
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<tr>
<td>October</td>
<td>ESDGP &amp; Sydney Hospital Clinical Meeting</td>
<td>Early detection of bipolar disorder</td>
<td>Sydney</td>
<td>Parker</td>
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<tr>
<td>October</td>
<td>Woollahra Council Luncheon</td>
<td>Depression in the Workplace: Strategies for Managers</td>
<td>Woollahra</td>
<td>Parker</td>
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<tr>
<td>October</td>
<td>ASBD Conference</td>
<td>e-Mental Health Internationally and in Australia: Where is the Field Currently and What Lies Ahead?</td>
<td>Sydney</td>
<td>Proudfoot</td>
</tr>
<tr>
<td>October</td>
<td>Marce</td>
<td>NHMRC Guidelines</td>
<td>Fremantle</td>
<td>Austin</td>
</tr>
<tr>
<td>October</td>
<td>Perinatal Mental Health Update</td>
<td>An Evening with Professor Marie-Paule Austin</td>
<td>St George Leagues Club</td>
<td>Austin, Kennedy</td>
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<tr>
<td>October</td>
<td>GP NSW Conference</td>
<td>The Central Sydney GP Network and St John of God Health Care Perinatal ATAPS Initiative - Two Approaches</td>
<td>Sydney</td>
<td>Austin, Frost</td>
</tr>
<tr>
<td>October</td>
<td>Marce</td>
<td>Validation of the Postnatal Risk Questionnaire: A pilot study</td>
<td>Fremantle</td>
<td>Austin, Smith, Reilly, Chavasse</td>
</tr>
<tr>
<td>October</td>
<td>Marce</td>
<td>Perinatal Pathways: Psychosocial risk, help seeking behavior and Service utilisation</td>
<td>Fremantle (WA)</td>
<td>Austin, Schmied, Johnson, Mills, Matthey, Kemp, Covic</td>
</tr>
<tr>
<td>October</td>
<td>Australasian Society for Bipolar and Depressive Disorders Conference</td>
<td>Keynote address: Can we predict who will develop bipolar disorder?</td>
<td>Sydney</td>
<td>Mitchell</td>
</tr>
<tr>
<td>October</td>
<td>Australasian Association for Behavioural and Cognitive Therapies Conference</td>
<td>Invited symposium presentation: Can we predict who will develop bipolar disorder?</td>
<td>Sydney</td>
<td>Mitchell</td>
</tr>
<tr>
<td>November</td>
<td>NSW Mental Health Advocacy Service Training Day</td>
<td>Electroconvulsive Therapy and NSW Health Guidelines</td>
<td>Sydney</td>
<td>Loo</td>
</tr>
<tr>
<td>November</td>
<td>Complex Case Review, POW Hospital</td>
<td>My day in Court was Supreme indeed</td>
<td>Randwick</td>
<td>Parker</td>
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<tr>
<td>November</td>
<td>Perinatal Mental Health Conference</td>
<td>The epidemiology of severe perinatal mood disorders: a data linkage study</td>
<td>Rydges Parramatta</td>
<td>Austin</td>
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<tr>
<td>November</td>
<td>St George GP Network Teaching</td>
<td>Psychiatry teaching classes</td>
<td>Sydney</td>
<td>Austin</td>
</tr>
<tr>
<td>November</td>
<td>NHMRC 75th Anniversary Symposium</td>
<td>Invited presentation: Can we predict who will develop bipolar disorder?</td>
<td>Canberra</td>
<td>Mitchell</td>
</tr>
<tr>
<td>November</td>
<td>Clinical School, Nepean Hospital</td>
<td>Can we predict who will develop bipolar disorder?</td>
<td>Nepean Hospital</td>
<td>Mitchell</td>
</tr>
<tr>
<td>December</td>
<td>Royal Australia and New Zealand College of Psychiatry NSW Branch Teaching</td>
<td>Mother infant attachment</td>
<td>Sydney</td>
<td>Austin</td>
</tr>
</tbody>
</table>
It is estimated that there are some 600,000 community sector organisations – sometimes also labelled as the ‘not-for-profit’ sector – in Australia.

The Black Dog Institute is one such organisation in this category and for the past 10 years we have built a reputation as one of the leading bodies helping people with mood disorders, such as depression and bipolar disorder.

Our ambitious goal is to make our services and programs available to all Australians. Building scale and capacity across this big country requires support from many quarters such as governments, statutory bodies, sponsors and donors, the corporate community, philanthropic individuals and other organisations.

The Institute is most appreciative of this generosity and in the case of donors and sponsors will continue to recognise donations of $100 or more in its Annual Report. It will also continue to use the Donor Board in our reception area to acknowledge particularly significant donations, sponsorships and bequests from individuals and organisations.

**Black Dog Institute Donations & Bequests**

*For calendar year 2011*

**$50,000 & above**

- Berg Family Foundation Pty Ltd
- The Qantas Foundation
- The Lansdowne Foundation Pty Ltd

**$10,000–$49,999**

- Hunt Specialised Transport
- Hunter Hall International Limited
- Peter Joseph
- Keith & Maureen Kerridge
- Macquarie Group Foundation
- Programmed Integrated Workforce
- QBE Foundation
- Roth Charitable Foundation
- The Bluesand Foundation

**$100–$9,999**

- Ausgrid
- Australasian Association of Clinical Biochemists
- Australian & New Zealand College of Anaesthetists
- Australian Society of Anaesthetists Limited
- Australian Writers Guild
- Black Dog Racing Foundation Ltd
- Nicholas Blain
- Philippa Blamires
- Blanch Towers Lawyers
- James Blomfield
- Colin Bloomfield
- William Bonney
- David Bottomley
- Mrs Andrea Bowden & Family
- David Bowles
- Bowra Hotel
- Bowral Rugby Club Inc

- Peter Joseph
- Keith & Maureen Kerridge
- Macquarie Group Foundation
- Programmed Integrated Workforce
- QBE Foundation
- Roth Charitable Foundation
- The Bluesand Foundation

- A
- Mary Abbey
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- Accord Pty Ltd
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- Neville Adcock
- Adcombe Pty Ltd T/A Cornetts P/L
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- ALM Training
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- Philippa Blamires
- Blanch Towers Lawyers
- James Blomfield
- Colin Bloomfield
- William Bonney
- David Bottomley
- Mrs Andrea Bowden & Family
- David Bowles
- Bowra Hotel
- Bowral Rugby Club Inc
Cheryl & Alfredo Bustos
Brett Burridge
Budget Forklifts
Lyn Buchanan
John Brown
Graham Brock
Josh Brock
Graham Brock
John Brown
Lyn Buchanan
Budget Forklifts
Brett Burridge
Cheryl & Alfredo Bustos

C
C C's Hotel
Lisa Calder
Caltex Bribie Island
Emily Calvert
Mr Peter Campbell
Campbell Hotels P/L
Liam Caulfield
Chargrill Charlie’s Wahroonga
Charities Aid Foundation
Cherrybrook Technology High School Coffee Shop
Cherrybrook Technology High School SRC
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Greg Davies
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Glenda Dean
Peter Deering
Janet Dempsey
Phillip Dernee
D & D Dixon
Elliot Doughty
Dowel Investments
Christine Dowling
Mr Pat Downes
Dunlop Foams

E
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Luke Easby
Employers Mutual Limited
Entertainment Publications of Australia Pty Ltd
Evans Petersen Healthcare

F
Grahame Feletti
Jenn Feray
Files Stubbe Lawyers
Aimee Fitch
Bruce Fitch
Fleet Network Pty Ltd
Flexi-Foam Pty Ltd
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Simon Frenkel

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Rita Galea
Wes & Judith Galletly
Geoff Gallop
Galston Garden Club
Gavagna & Aguglia Families
George George
Blake Giarola
Bert Gibson
Girvan Waugh
Glen Helen Resort
Glennane Retail Pty Ltd
Gloucester Probus
Goldman Sachs
Steven Goodwin
GP Information Services
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Graham Grayson
Mrs T Green
Leah Greengarten
Dr James Griffiths
Ann Groat

H
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David Halligan & Family
Vera Handelsmann
Robyn Hansen-Smith
Ian Hardiman
K & J Hardwick
Matthew Hare
Adam & Kate Harley
Bianca Harris
Catherine Harris
Jim Harris
Hartmann & Associates
Hash House Harriers Mackay
Barrie & Joan Hastings
David Hastings
Matt Hayward
Graham Heathcote
Vince Hebbard
Herefords WA Inc
Tony Hill
Hilmer Family Foundation
Rex Hoeben
Matt Holt
Home Owner Mortgage Enhanced Securities Ltd
Honeybees Choir
Mr Graham Horton
Hotham Cruisers
Caroline Hu
Daniel Hughes
Gerry & Jenny Hughes
Lachlan & Sylvaine Hughson
Humble Beginnings Money Box
Greg Hunt
Murray Hunt
David Hutton
Hynam Pty Ltd

I
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IBM Australia Limited
IMAC Injury Management
Paul Irving

J
J2 Recruitment Pty Ltd
Greg Jacobs
Ruth James
James N Kirby Foundation
Jameson & Associates
Brian & Diane Jeffrey
Johnson & Johnson Medical Pty Ltd
Matthew Johnstone
Michael Jones
Dr Robert Jones & Family
Jasmine Jordan
Caroline Jordan
P G Kaleski
Jeffrey Kamins

K
Kate Adams & Bart Penson
Joshua Kelly
Kelvin Grove Wind Orchestra
Melissa Kennedy
Miranda Kerr
Jasper Kim
James Kissell
Ms Alison Knox
Troye Kyte

L
Ladies at Northbridge Golf Club
Mr Peter Laird
Aaron & Robyn Lamont
Paul & Alexis Lamont
Paul Lamphee
Allan Lane
Lauders Real Estate
RB & CV Leece
Gerry Lenihan
Graham Lennon
Leppington Pastoral Company Pty Ltd
Jeff Leyonhjelm
Caryl & Paddy Lightfoot
Bee Hua Lim
Lions Club Castle Hill
Lions Club of Alice River
Lions Club of Bairnsdale
Lions Club of Bathurst Inc
Lions Club of Boddington
Lions Club of Boyne Island
Lions Club of Carnamah
Lions Club of Castle Hills
Lions Club of Charters Towers Inc
Lions Club of Clare
Lions Club of Claremont
Lions Club of Cloncurry
Lions Club of Coober Pedy
Lions Club of Coogee
Lions Club of Cowaramup
Lions Club of Cowra Inc
Lions Club of Darwin Nightcliff
Lions Club of Dubbo Macquarie Inc
Lions Club of Kalamunda
Lions Club of Kellyville
Lions Club of Kalgoorlie
Lions Club of Lithgow Inc
Lions Club of Mannum
Lions Club of Maryborough
Lions Club of Morgan
Lions Club of Merredin Inc
Lions Club of Norseman
Lions Club of Parndana Western
Kangaroo Island
Lions Club of Penrith

BLACK DOG INSTITUTE ANNUAL REPORT 2011
<table>
<thead>
<tr>
<th>Lions Club of Tennant Creek</th>
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<td>Lions Club of Townsville Northern Suburbs</td>
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<td>Christine Lisney</td>
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<td>Living Health Chiropractic Centre Lodge of Euclid Lodge of Euclid – United Grand Lodge of Victoria Richard Longes Louder I A Loveridge Grant Lovett Andrew Lowe Sue Lupton</td>
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Donations & Bequests Form

The Institute is a Deductible Gift Recipient. Gifts of $2 and over are tax deductible and an official receipt will be issued. Donations can be made online by credit card or EFT at www.blackdoginstitute.org.au

Bequests

A bequest to the Black Dog Institute is a lasting way to assist the Institute to continue its research and other programs, and in turn, help improve the quality of life of people living with depression. If you would like more information on how to make a bequest, please contact the Institute: www.blackdoginstitute.org.au, or phone (02) 9382 9263.

Bequest Form

I (name)……………………………………………………………………………………………………………………………………………………………………

of (address)……………………………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………………………………………

give, devise or bequeath to the Black Dog Institute or its successors, the sum of $…………………… for the benefit of the Black Dog Institute.

An official receipt from or on behalf of the Black Dog Institute shall be sufficient discharge to my executors who shall not be bound to see the application thereof.

Postal address for donations:

Black Dog Institute
Hospital Road
Prince of Wales Hospital
Randwick NSW 2031

Please make all cheques payable to Black Dog Institute.

Everyday Hero

Did you know that you can set up your own Everyday Hero fundraising page from the Black Dog Institute website?

Many people today choose to donate to their favourite charity to celebrate a special occasion like a significant birthday, wedding or anniversary event. You may also like to undertake your own special challenge and invite your friends and family to sponsor you online.

The MAP was first developed in 2007. It is a major breakthrough set to revolutionise the way people suffering from depression can obtain treatment.

“We need to unlock this greatest mystery of the human mind...
Unlock the door to that great dark house
And at last let LIGHT in.” Bob Carr, then-Premier of NSW, 2002

The internet is now a most accessible means of providing health materials, such as information on the clinical characteristics and treatment of bipolar disorder.

In 2009, the Black Dog Institute website (www.blackdog.institute.org.au) was ranked first in the world for quality and accurate information on bipolar disorder. The website even scored higher in the rankings than major international bodies such as the U.S. National Institute of Mental Health (NIMH) bipolar site.

The Institute has developed a youth-specific website, BITE BACK, where young people can express and share their experiences, with the ultimate aim of dispelling the stigma associated with mental illness.

The Mobile Tracker will involve simple screening questions, a menu of self-monitoring tools, monitoring prompts, reports and self-management suggestions.

Since 2006, the Professional Services team has trained in excess of 26,000 health professionals and workplace staff.

In July 2005, Professor Norman Sartorius MD, PhD (Switzerland), one of the world’s most eminent figures in the field of international mental health, delivered the first Black Dog Institute International Lecture.

HeadStrong, innovative school-based Youth Program, uses illustrations and humour to build a bridge to communicate with young people on the issue of mood disorders.

The Black Dog Institute’s inaugural writing competition:
THE HISTORY OF ‘BLACK DOG’ AS A TERM USED TO DESCRIBE DEPRESSION

The essay competition was held to help uncover the history of the term ‘black dog’ as a description for depression. 2004

The internet is now a most accessible means of providing health materials, such as information on the clinical characteristics and treatment of bipolar disorder.

The Minister for Science and Medical Research, Frank Sartor, today opened the new Black Dog Institute building at Prince of Wales Hospital.

“It is important that, when people seek help (for mood disorders), they receive sophisticated assessment and management,” Professor Gordon Parker, 2003
The Black Dog Institute's

10 YEAR

Anniversary