

MINUTES 2nd ANNUAL GENERAL MEETING 8th September 2014

at Turning Point 54-62 Gertrude Street, Fitzroy Vic 3065 at 3pm.

Present: Sharon Lawn via video link, Dr Samiya Nusrat, Dr MD Shahnur Rahmak, Dr. Peter McKenzie, Seren Rose, Barbara Mullen, Dr Gabriela B Midewski, Catherine Bennett, Sue Taffe, John Taffe, Dr Sathya Rao, Dr Jo Beatson, Estelle Malseed, Rita Brown, Julien Mc Donald.

Apologies: Kelly Vincent, Janne Mc Mahon, Sally Gibson, Keith Warren.

Introduction, Welcome and Acknowledgement of Country: Julien Mc Donald (Chair)

Julien spoke of the Foundation now being at a very exciting stage of development with the ground work well under way for the governance and structure and support given to the NSW Annual Conference. In 2013. Julien also spoke briefly about the upcoming 4th Annual National BPD Conference to be held on 2nd October at the Darebin Arts and Entertainment Centre.

She thanked the small but dedicated group of volunteers who have worked extremely hard to keep this moving.

Branches in other state are now forming. South Australia is established and in Western Australia an enthusiastic and passionate group are meeting.

Congratulations to Sonia Neale on receiving the Inaugural SANE Hocking fellowship to enable her to travel overseas and study BPD services in USA, Canada and UK.

Presentation of Annual Reports:

Motion to accept the Annual Chairperson's Report made by Dr Sathya Rao, seconded by Rita Brown and passed unanimously.

Presentation of Annual Financial Report and Auditors Report:

Motion to accept the report made by Sathya Rao, seconded by Rita Brown and passed unanimously.

Vote of thanks made to Rita Brown for her large and consistent contribution over the past 12 months.

Secretary to write letter of appreciation to Price Gibson Chartered Accountants for their pro bono contribution in preparing this report and audit.

Price Gibson Chartered Accountants was reappointed as pro bono auditor for the Australian BPD Foundation Ltd for the 2014-15 financial year.

Elections:

The positions of Consumer and Carer Representatives were declared vacant. Only one nomination had been received for Carer Representative for Rita Brown and she was duly declared elected.

No nominations have been received for the position of Consumer Representative so that position was declared vacant.

Julien Mc Donald thanked Catherine Bennett (retiring director) for her contribution to the development and establishment of the Foundation over the past 4 years.

Guest Speaker: Dr. Josephine Beatson "Impact of BPD on the Community".

Dr Beatson commenced her talk by describing the effects of BPD on the economy, on the health system, on the judicial system, on couple / family / carer relationships. The economic costs are large. However these fade into insignificance when the personal costs are considered.

The stigma associated with BPD often affects how clinicians react to the actions, emotions, and attitudes of people with BPD. This can lead to distancing, rejecting, or critical attitudes in clinicians that in turn increase the patient's distress, often leading to actions that increase the clinician's negative attitude. 'The result is a self-fulfilling prophesy and a cycle of stigmatization to which both patient and clinician contribute'

Sadly, cash strapped public health systems are required to treat the sickest patients

While knowledge re effective treatment of BPD is now available, public psychiatric systems have not invested sufficiently in such programs. Individual psychotherapy, the principal treatment for BPD is not usually available. This leads to frustration (and much more) for clinicians, families, carers and patients.

People with BPD can function as scapegoats for other problems in services

She also presented a recent review which showed that the carers of someone with BPD experience elevated levels of objective and subjective burden, grief, impaired empowerment and mental illness themselves compared to other serious mental illnesses.

What's needed to change this situation?

1. Increasing financial resources so that needed clinical resources are available
2. Including families, partners and carers in treatment planning, decisions
3. Education, support for the above
4. Early intervention to assist mothers with BPD
5. Assistance with parenting for people with BPD
5. Rehabilitative approach to jobs, psychosocial skills
6. Let's consider what else can be done

Meeting closed and was followed by refreshments 5.30pm.

*Support Promote Advocate
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