Annual Report 2025

Mental Health Reform

Members

Governing Members


Associate Members

Affiliate Members

Contents

2025 AT A GLANCE

Mental Health Reform

Policy Impact

€1.6 billion
investment in mental health services

21 policy submissions

17 Oireachtas meetings

25+ advisory groups

Our Coalition

81 member organisations

3 new members

76% member engagement

Lived Experience Participation

41 Experts by Experience

15 people participated in the CoLab project

Reform of the Mental Health Bill

UNCRPD advocacy

Sharing the Vision Co-Creation Video

Research

- 5 year CO-PRIME partnership
- Children and Young People Project
- Suicide reporting research

Governance

- New CEO and Board
- Strong financial oversight
- Full governance compliance

Communications

51k+ social media followers

38 national media appearances

11 episodes of new podcast series

200+ Mental Health Bill webinar attendees

INTRODUCTION

Reference and Administrative Information

Directors

Chair	Dr Judith Malone
Company Secretary	Jennifer Owens
Charity Number	CHY19958
Charities Regulatory Authority Number	20078737
Company Registration Number	506850
Registered Office and Principal Address	Carmichael House, 4 Brunswick Street, Dublin 7
Auditors	Whelan Dowling & Associates Chartered Accountants and Statutory Auditors Block 1, Unit 1 & 4 Northwood Court Santry Dublin 9
Principal Bankers	Bank of Ireland 2 College Green Dublin 2 Ireland
Solicitors	Dillon Eustace Solicitors 33 Sir John Rogerson's Quay Grand Canal Dock Dublin 2

Dr Judith Malone
Chair

Dr Sheila Gilheany
Deputy Chair

Fiona Tuomey

Ken Kilbride

Ciara Glynn

Stephanie Manahan

Jennifer Owens

Suzanne O'Toole

Kevin O'Higgins

Chair's Report

Financial year ended 31 December 2025

Dear Members and Supporters,

It is my honour to present the 2025 Annual Report of Mental Health Reform (MHR) as Chair of the Board.

This year has been one of significant development at both a system and organisational level. Ireland's mental health reform agenda has continued to progress, most notably through the advancement of the Mental Health Bill 2024. This legislation represents a landmark step towards a modern, rights-based framework for mental health services, and reflects many years of sustained advocacy by MHR and our members. As the Bill approaches enactment, it is essential that this progress is matched by effective implementation and adequate resourcing.

We have also seen continued momentum in the implementation of Sharing the Vision and in the reform of the wider health system through the introduction of Regional Health Areas. These developments create new opportunities for integration and improved service delivery. However, they also require careful oversight to ensure that reforms translate into meaningful improvements for those who access services.

The Board remains acutely aware that, despite increased investment, significant challenges persist. Workforce shortages, waiting times, and gaps in community-based supports continue to affect access to care. The voluntary and community sector remains under pressure, particularly in the absence of multi-annual funding. MHR will continue to advocate strongly for sustainable investment and for mental health to be prioritised as a whole-of-government issue.

MHR has continued to deliver significant impact.

At an organisational level, 2025 was a year of transition. The Board oversaw significant leadership changes, including the appointment of our new CEO, Helen Gillespie Brown and Chair, alongside changes in Board composition. These transitions were managed through robust governance processes, including open recruitment and the support of external expertise. I would like to thank my predecessor Michele Kerrigan, as well as departing Board members, for their dedication and contribution to the organisation.

The Board's focus during the year has been on maintaining strong governance and supporting organisational stability. We strengthened financial oversight, enhanced risk management processes and ensured compliance with all regulatory requirements. We also continued to invest in the development of the Board and its committees to ensure that we are well equipped to guide the organisation in achieving its strategic objectives.

Despite the challenges of the year, MHR has continued to deliver significant impact. This includes strengthening member engagement, expanding policy influence, advancing research partnerships, and amplifying the voices of people with lived experience. These achievements reflect the commitment and professionalism of the staff team, and the strength of the coalition.

Looking ahead, the Board is focused on supporting the organisation through a period of consolidation and growth. This includes reviewing the Strategic Plan to ensure it remains fit for purpose, strengthening financial sustainability, and continuing to enhance governance structures.

On behalf of the Board, I would like to extend sincere thanks to our members, partners, funders, and stakeholders. I would also like to acknowledge the individuals with lived experience who continue to inform and shape our work. Your voices remain central to everything we do.

Dr Judith Malone
Chair
Mental Health Reform

CEO Report

Financial year ended 31 December 2025

It is a privilege to present my first CEO Statement for Mental Health Reform (MHR), following my appointment in December 2025. I do so at a time of both significant progress and ongoing challenges for Ireland's mental health system and during a period of transition and renewal for the organisation.

Mental Health Bill

Across 2025, the advancement of the Mental Health Bill 2024 marked a pivotal moment in Ireland's mental health journey. The Bill represents the most significant overhaul of mental health legislation in decades, bringing Ireland in closer alignment with international human rights standards and the UN Convention on the Rights of Persons with Disabilities (UNCRPD). MHR has played a sustained role in supporting this reform, ensuring that the voices of people with lived experience, alongside our member organisations, are reflected in policy debate and legislative scrutiny.

As the Bill now moves toward enactment in 2026, the focus needs to shift decisively to implementation, resourcing and accountability.

National reform

The continued rollout of Sharing the Vision, alongside the publication of a new Implementation Plan for 2025 - 2027, has provided renewed direction for our national mental health policy and the development of mental health services and supports in Ireland. We have actively contributed to this process by working with the voluntary and community sector, to ensure the sector's expertise remains central to delivery. At the same time, wider health system reform, including the transition to Regional Health Areas, presents both opportunity and uncertainty. MHR commits to supporting our members to navigate these changes and to ensure that integration leads to improved outcomes for people with mental health difficulties.

We will continue to advocate for a mental health system that is accessible, equitable and grounded in dignity and respect for all.

Investment in Mental Health

In Budget 2026, the allocation of just under €1.6 billion to mental health services represents sustained progress and reflects the impact of collective advocacy. However, the proportion of overall health expenditure allocated to mental health remains significantly below the Sláintecare target of 10%. Growth in investment, accompanied by multi-year sustainable funding and long-term planning, is particularly important for sustaining the voluntary and community sector to deliver essential frontline supports.

Growing our Impact

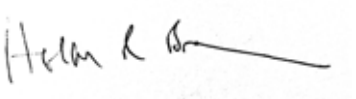
Throughout the year, MHR progressed its priorities under its strategic plan: Making Mental Health Matter. We strengthened our role as a unified voice for the sector, amplifying lived experience through initiatives such as the CoLab project and our Grassroots Forum. We expanded our policy impact, completing 21 submissions across national, EU and UN processes, and contributing to Ireland's review under the UNCRPD. We also continued to drive innovation through research partnerships, including our involvement in the CO-PRIME network and the development of evidence-based work on children and young people's mental health.

2025 was also a year of organisational transition. Changes in leadership and staffing required adaptability and resilience across the team. I would like to acknowledge the significant contribution of Philip Watt, Interim CEO, and the whole staff team who ensured continuity of delivery and upheld the organisation's standards during this period. Their work has provided a strong foundation for the next phase of development.

Looking Ahead

MHR is well-positioned to build on this foundation. Our priorities will include strengthening our organisational capacity, diversifying income streams, and ensuring that our strategic plan remains responsive to a rapidly evolving environment. At the heart of this work will be our continued commitment to human rights, collaboration, and the meaningful inclusion of lived experience.

I would like to thank our Board, staff, members, partners, and funders for their continued support and commitment. Together, we will continue to advocate for a mental health system that is accessible, equitable and grounded in dignity and respect for all.



Helen Gillespie Brown
CEO
Mental Health Reform

Directors' Annual Report

The directors present their Directors' Annual Report, combining the Directors' Report and Trustees' Report, and the audited financial statements for the financial year ended 31 December 2025.

The financial statements are prepared in accordance with the Companies Act 2014, FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

The Directors' Report contains the information required to be provided in the Directors' Annual Report under the Statement of Recommended Practice (SORP) guidelines. The directors of the charity are also charity trustees for the purpose of charity law and under the charity's constitution are known as members of the Board of trustees.

In this report the directors of Mental Health Reform present a summary of its purpose, governance, activities, achievements, and finances for the financial year 2025.

The charity is a registered charity and hence the report and results are presented in a form which complies with the requirements of the Companies Act 2014 and, although not obliged to comply with the Statement of Recommended Practice applicable in the UK and Republic of Ireland FRS 102, the organisation has implemented its recommendations where relevant in these financial statements. The charity is limited by guarantee not having a share capital.

Companies Act 2014:
Financial Reporting Council (FRC), FRS 102: *The Financial Reporting Standard applicable in the UK and Republic of Ireland (September 2024)*

Suzanna Weedle, Policy & Advocacy Coordinator, MHR pictured with Maria Cleary, CEO, Community Therapy Ireland at the launch of the Children and Youth Mental Health Project.

Marie-Ann Kenny, Mental Health Advocate, Senator Frances Black, Nicola Clare, Mental Health Advocate and Lisa-Marie O' Malley, Policy & Advocacy Coordinator, MHR at a Briefing on the Mental Health Bill for Senators in Leinster House.

Joseph Morning, Head Of Learning & Curriculum, spunout, Stephanie Manahan, CEO, Pieta, Joseph Duffy, CEO, Jigsaw, Suzanne Connolly, CEO, Barnardos and John Church, CEO, ISPCC pictured at the launch of the Children and Youth Mental Health Project.

Mission, Purpose & Objectives

Our Origins

Initially named The Irish Mental Health Coalition, MHR was founded in 2006. It began with five organisations: Shine, Bodywhys, Grow Mental Health, Peer Advocacy in Mental Health and Amnesty International. The coalition had three service providers, an advocacy organisation and a human rights organisation. Those pillars (service providers, advocacy and human rights) were present from the very beginning, and they were what was needed to move the coalition forward.

Ireland's mental health policy A Vision for Change, was launched in 2006. The coalition was focused on holding the Government accountable for its delivery of that policy. Over the years, a strong membership developed. That membership expanded to incorporate other organisations which had something to offer, particularly those that had strong grassroots involvement, so that we could hear the voices of mental health service users.

In February 2011, the Irish Mental Health Coalition was renamed Mental Health Reform (MHR). This marked the transition from a campaigning coalition operated as a project of Shine, to the establishment of a national support organisation for NGOs representing service users, families and community groups engaged in mental health. Today, MHR is Ireland's leading national coalition on mental health.

Our Purpose

The company was set up under a Memorandum of Understanding. Articles of Association which established the objects and powers of the charitable company, is governed by this constitution and is managed by a Board of Directors.

The objectives for which Mental Health Reform exist are:

- to benefit the community by promoting best practice in all aspects of service provision to people experiencing mental health difficulties,
- advancing the education of the public at large to the benefits of an Ireland where people achieve and enjoy the highest attainable standard of mental health.

Our Members

MHR was created by its member organisations as a place for them to come together and collectively provide a unified voice to Government, its agencies, the Oireachtas and the general public on mental health issues. MHR exists for its membership and its work is driven by its member organisations. Between 2011 and 2025, membership of MHR grew from 19 to 81 member organisations.

Our Vision

An Ireland with accessible, effective, and inclusive mental health services and supports.

Our Mission

To be the unifying voice that leads progressive and wide reform towards human rights-based mental health services and supports in Ireland.

Our Values

Rights-based

MHR will consistently champion best international standards and human rights norms as the benchmark we aspire to and progressively deliver.

Collaboration

MHR will work as one with members, those with lived experience of mental health difficulties and other stakeholders on our shared goals to achieve our vision.

Inclusive

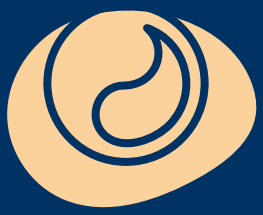
MHR will work constructively with all stakeholders with a particular emphasis on the active participation of those with lived experience of mental health difficulties and their family, friends, carers, and supporters. MHR will strive, in particular, to listen to and include those voices that have previously not been heard.

Informed

MHR will root our recommendations in consultation with stakeholders and in international and national evidence of good practice.

Progressive

MHR will identify and support new approaches across legislation, policy, and services that ensure better mental health outcomes for all.



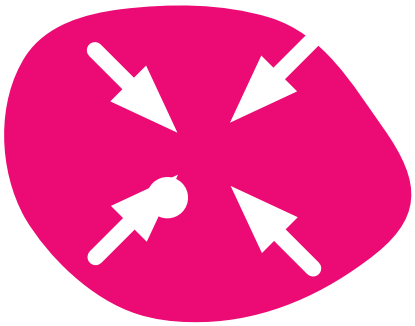
Principled pragmatism

We hold true to our principles while working towards pragmatic steps forward in reform of the mental health system.

Our Approach

The work of MHR is based on the values and experiences of our member organisations and of those with lived experience of mental health difficulties. MHR's approach is to provide a unified voice to the government, its agencies, the Oireachtas, and the general public on mental health issues. MHR performs a key role in the sector by providing an information provision service, a space for members to share resources and collaborate, and a united voice when approaching policymakers.

Key Activities



Coordination & Policy Development

We draw on the expertise and experience of the coalition and coordinate the views of our member organisations.

We represent the sector in public forums.

We prepare policy submissions on behalf of our member organisations, informed by our Grassroots Forum and other advisory groups.

Research & Innovation

We consult with people who use services and family members, reporting their experiences to the government and its agencies.

We conduct research to identify unmet needs and good practice solutions.

We support and demonstrate innovation in the way that mental health supports are provided.

Accountability & Advocacy

We monitor progress on government commitments and hold the government and its agencies to account for delivery.

We mobilise our membership and wider supporter network to make publicly visible the support for a better mental health system.

Operating Context

In 2025, the operating environment for mental health policy and services in Ireland continued to evolve, shaped by ongoing reform, increased investment, and wider system transformation. Across legislative, policy, and service delivery domains, there has been steady progress toward building a more modern, rights-based mental health system. However, this progress continues to be accompanied by significant and persistent challenges in implementation, workforce capacity, and equitable access to care.

The advancement of the Mental Health Bill 2024 has been a key development in the legislative landscape. The Bill is a landmark piece of legislation which will replace the Mental Health Act 2001 and bring Ireland's legal framework into closer alignment with international human rights standards. The Bill represents a critical opportunity to strengthen safeguards for individuals engaging with mental health services and to embed a more person-centred, rights-focused approach in our mental health system.

Policy implementation throughout the year continued to be guided by Sharing the Vision, our national mental health policy. The Sharing the Vision Implementation Plan 2025–2027, sets out renewed priorities and actions to drive delivery of the policy's commitments. There has been particular emphasis on enhancing crisis response capacity, expanding youth mental health services, and improving coordination across the system.

In parallel, public investment in mental health services continued to increase. In Budget 2026, the Government allocated just under €1.6 billion to mental health services, marking the sixth consecutive year of increased funding. While this sustained investment is welcome, this allocation represents just under 6% of Ireland's total health budget, whereas Sláintecare recommends that this should be increased to at least 10% over time.

2025 represents a pivotal year of reform and transition for Ireland's mental health system

Despite these positive developments, the system continues to face considerable pressure. Workforce shortages across key disciplines, rising demand for services, and persistent waiting times for specialist supports continue to impact timely access to care. These challenges underscore the need for sustained and targeted investment, effective implementation of existing policy commitments, and meaningful engagement with service users and civil society organisations. It is essential that MHR and its member organisations continue to advocate for additional resources for mental health services in Ireland.

Against this backdrop, 2025 represents a pivotal year of reform and transition for Ireland's mental health system. It presents a significant opportunity to advance a more responsive, integrated, and rights-based model of care, while also highlighting the urgency of addressing structural and capacity challenges to ensure that progress translates into real and lasting improvements for individuals and communities.

Karina Herlihy, Family Support Worker, Barnardos at the Waterford Members' Showcase.

Stephen Sheil, Interim Communications & Engagement Manager, MHR at the launch of the Children and Youth Mental Health Project.

Ciara Glynn, Board Member, MHR pictured at the launch of Pay the Bill – 2026 Pre-Budget Campaign.

2 Our Work

Nicola Clare, Mental Health Advocate and Marie-Ann Kenny, Mental Health Advocate at a Briefing on the Mental Health Bill for Senators in Leinster House.

Strategic Report

In 2025, Mental Health Reform (MHR) continued to progress its Strategic Plan for 2023 – 2028: 'Making Mental Health Matter'.

The strategic plan aims to equip MHR to adapt to the new post-COVID-19 environment, to identify ambitious yet achievable priorities for the coming years, and to support the coalition to continue to grow sustainably in size, reach, and influence.

The strategic plan focuses on strengthening MHR's role as the unified voice of the mental health sector, with an emphasis on increasing member engagement, collaboration, and knowledge-sharing to maximise collective impact. There is a strong commitment to human rights, ensuring the Government meets its obligations under the UNCRPD and champions a rights-based approach to mental health services.

Advancing improvements in mental health services and supports is a key strategic priority in the plan. The coalition aims to achieve this by monitoring and supporting the implementation of Sharing the Vision, raising public awareness, and facilitating innovative approaches to mental health.

The strategic plan focuses on strengthening MHR's role as the unified voice of the mental health sector

This strategic plan is accompanied by a detailed Operations Plan for 2025 which outlines the key objectives under each strategic priority; the actions to be undertaken; the risks associated with each objective; the resources required, and the timeframe for completion and outputs. To ensure full and successful implementation of the strategic plan, MHR regularly monitors the operations plan to evaluate progress and adapt to emerging developments when necessary.

The four strategic priorities for 2023 – 2028 are:

1

Mobilise public and political support to address inadequacies in Ireland's mental health system.

2

Drive evidence-based innovation in mental health to promote better outcomes for service users.

3

Advance policies and practice towards high-quality, rights-based mental health services and supports for all.

4

MHR strives to be a high-functioning and well-resourced organisation.

Strategic goals	Key Performance Indicators	Progress 2025
1 Mobilise public and political support to address inadequacies in Ireland's mental health system	• Greater awareness of MHR's work among the public • Increased investment in mental health • Increased engagement with Oireachtas members • Growth in participation of Service Users, Families, Friends, Carers and Supporters (SUFFCS) in the work of MHR	• 2.68% increase in social media audience growth • 38 media hits • Pre-Budget campaign launched on 30th July. Investment of just under €1.6 billion allocated to mental health services in Budget 2026 • 17 meetings with Oireachtas members • 41 individuals with lived experience involved in our campaigns representing diverse experiences
2 Drives evidence-based innovation in mental health to promote better outcomes for service users	• Strategic alliances are developed with key stakeholders to strengthen and enhance the work of MHR • Knowledge sharing and innovative projects are facilitated within and between member organisations • Research is identified, initiated and commissioned to produce insightful and impactful research outputs to advance improvement of mental health services and supports throughout Ireland	• Collaboration established with the CO-PRIME network, a landmark five-year initiative designed to transform mental health research across the island of Ireland • Briefing paper on 'Reshaping Healthcare' is published and presented to over 121 attendees • Research paper launched by the London School of Economics for Mental Health Reform's Children and Youth Mental Health project, in collaboration with members: Barnardos, ISPCC, Jigsaw, Pieta, and SpunOut

Strategic goals	Key Performance Indicators	Progress 2025
3 Advance policies and practice towards high-quality, rights-based mental health services and supports for all.	• Mental Health Bill is enacted • Government is held to account to honour its obligations under EU and UN commitments. Mental Health Reform is an interface for the unified voice of our members to government, the public and key stakeholders • Mental health is adopted as a whole of government priority issue and embedded across all relevant department policy and initiatives through representation and amplifying the voice of lived experience	• Advancement of the Mental Health Bill through the Oireachtas with enactment scheduled for 2026 • Joint shadow report submitted in partnership with VCS organisations to the UN's review of Ireland's implementation of the UNCPRD • 21 policy submissions completed in 2025 • Participation in over 25 external advisory groups convened by the Government, the HSE and the voluntary and community sector to inform mental health policy, services and research
4 MHR strives to be a functioning and well-resourced organisation	• Increased member engagement in MHR's activities • Increased unrestricted income and diversified funding stream • Strengthened internal capacity • MHR adheres to the recommendations as laid out by regulatory authorities	• 76% of member organisations attended at least one MHR event or briefing in 2025 in line with target • Unrestricted income generated from training, grants and public fundraising • Compliance with Governance code, CRO & CRA

Strategic Priority 1

Mobilise public and political support to address inadequacies in Ireland's mental health system.

1.1 Summary

As a coalition, Mental Health Reform (MHR) facilitates its members to influence and contribute to political and public discussion on mental health and human rights. Through work under this priority area, MHR and its members collectively engage with government stakeholders and the public to advocate for increased investment in the mental health system. MHR harnesses the voice of lived experience to ensure that our advocacy is inclusive and reflective of the lived realities of those accessing mental health services.

In 2025, we worked towards the following goals:

- Strengthen political and public awareness of mental health and human rights
- Build public and political support to ensure resources (financial and human) are in place to deliver high-quality, rights-based mental health services and supports
- Grow and strengthen the participation of Service Users and their Family, Friends, Carers and Supporters in the work of MHR

In 2025, MHR strengthened political and public awareness of mental health and human rights by growing its audience on social media and providing resources and information to politicians, the media, and the public. The coalition launched a new podcast series which has served as an innovative tool to promote the invaluable work of the voluntary & community sector.

In terms of impact, the Government invested just under €1.6 billion in mental health services for Budget 2026 including funding for perinatal mental health, crisis supports, talk therapies and suicide prevention initiatives. We recognise this investment is a positive step towards improving access to mental health services.

A highlight for 2025 was the establishment of the CoLab project, which aims to empower people with psychosocial disabilities and their supporters to advocate for improvements in the mental health system. This project has allowed us to strengthen the participation of people with lived experience in our advocacy and campaigns.

In 2025, MHR strengthened political and public awareness of mental health and human rights

L-R: Philip Watt, Interim CEO, MHR, Mary Butler TD, Minister for Mental Health & Older People and Stephen Sheil, Interim Communications & Engagement Manager, MHR pictured at Leinster House.

Podcast Contributors

Community Therapy Ireland

Community Therapy Ireland

BelongTo

Alone

Depaul

Merchants Quay ireland

PsyCare Ireland

Shine

2025 was a critical period for political engagement

1.2 Key Outcomes

1. Strengthened Political Engagement on Mental Health

2025 was a critical period for political engagement with the establishment of a new Programme for Government following the General Election. In January, we welcomed the appointment of Mary Butler TD to her role as Government Chief Whip with Responsibility for Mental Health. MHR had advocated in our Programme for Government submission that the mental health ministerial role post should be elevated to 'super junior Minister level', which includes attending cabinet meetings. This development was a significant milestone, as it demonstrated that mental health was being taken seriously at the highest levels of government.

In June, MHR was invited to present at the Oireachtas Health Committee to discuss key priorities in the reform of the Mental Health Bill 2024. This was a crucial opportunity for the coalition to acknowledge the positive progress on the Bill and highlight areas for further improvement to strengthen safeguards and protections for people with mental health difficulties.

MHR endeavoured to establish relationships with newly elected TDs and Senators in the Oireachtas. Direct meetings took place with 17 Oireachtas members including Minister Mary Butler. MHR monitored Dáil and Seanad interactions on mental health and proactively sent information resources and briefing notes to Oireachtas members who expressed an interest in addressing mental health challenges. Overall, this approach helped to strengthen knowledge and engagement on mental health across all parties.

Key Figures

1

Oireachtas Committee Appearance

17

meetings with Oireachtas members

51,000+

social media followers

41

experts by experience participating in mental health advocacy.

17% increase of participation on previous year

2. Growing awareness of mental health and human rights

In 2025, MHR aimed to strengthen political and public awareness of mental health and human rights by communicating relevant information to the public. MHR continued to provide commentary to the media on a range of issues including the Mental Health Bill, youth mental health, homelessness, and the criminal justice system. As always, amplifying the lived experience voice was central to this media engagement.

Overall, our approach generated coverage in 38 media outlets including the Irish Examiner, RTÉ Morning Ireland, Irish Independent, and the Irish Times. While this result represents a 36% decrease on our original target, the quality and influence of the media coverage significantly contributed to MHR's advocacy, particularly in relation to the Mental Health Bill.

MHR continued to innovate its digital communications, which included the launch of a new podcast series on mental health. In 2025, the podcast featured interviews with BelongTo, Alone, Merchant's Quay, Psycare, Shine, and DePaul which helped increase awareness of the positive contribution of the voluntary & community sector across Ireland.

MHR increased its social media audience by 2.68% in 2025 bringing the total number of social media followers to 51,367. Although this fell short of our original target of 10%, MHR achieved continued audience growth among mental health professionals on LinkedIn, with an increase of 1,375 followers. We continue to monitor and evaluate our digital communications approach to maintain meaningful engagement and ensure our online presence remains a strong tool for advocacy and public awareness.

3. Empowering People with Lived Experience

An important focus for MHR is empowering people with mental health difficulties and their families, friends, carers, and supporters to influence mental health policies, and campaign for improved mental health services.

People with lived experience played a vital role in advocating for improvements to the Mental Health Bill. Community networks and recovery colleges amplified concerns about the Bill by contacting their public representatives. The contribution of these lived-experience communities was significant in ensuring that the voices of those most affected were heard during the legislative process.

In 2025, MHR established its CoLab project with funding from Community Foundation Ireland. The group comprised 15 individuals who participated in a capacity-building programme, involving training on communications skills for mental health advocacy as well as consultation sessions to inform MHR's pre-budget submission. MHR also supported participants to attend a meet & greet event in Leinster House, where they met directly with politicians to discuss the need for greater investment in mental health services and supports. Through these activities, the project empowered participants to advocate for positive change in the mental health system.

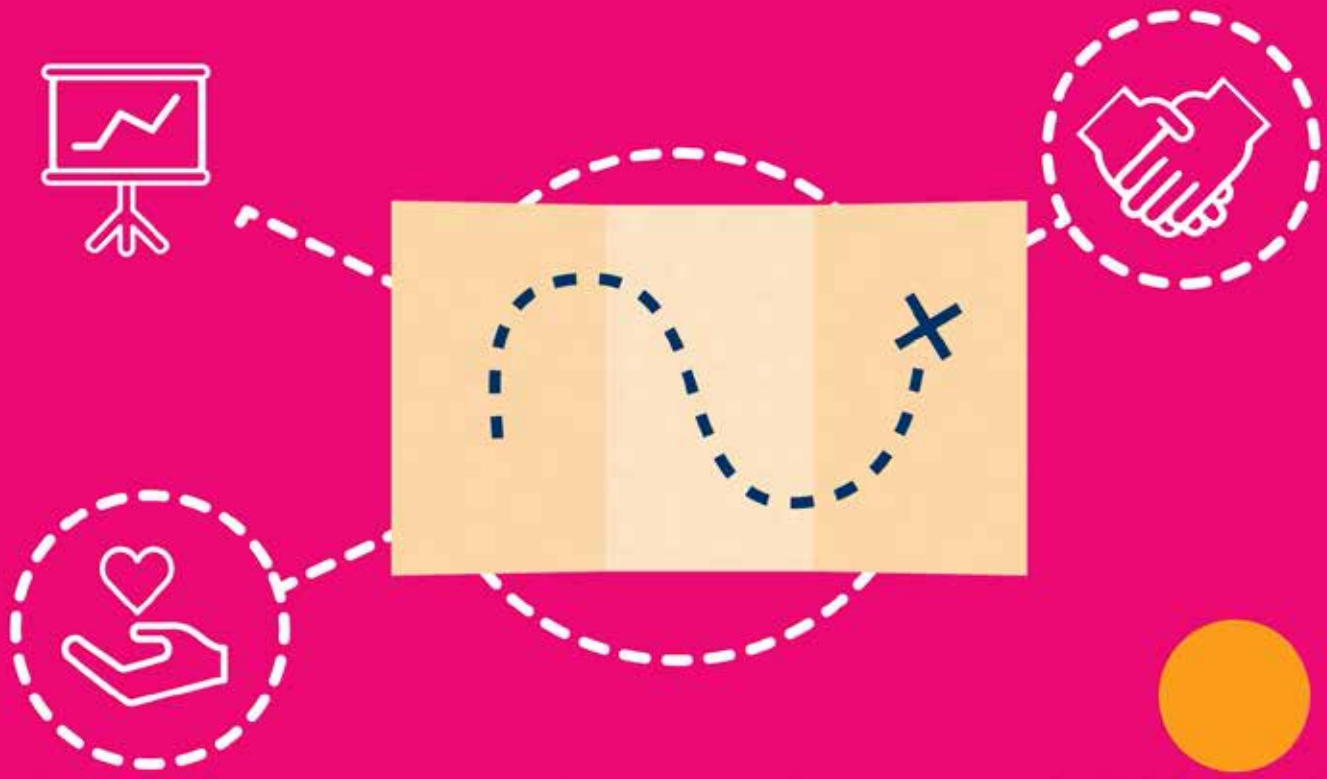
The group comprised 15 individuals who participated in a capacity-building programme, involving training on communications skills for mental health advocacy as well as consultation sessions to inform MHR's pre-budget submission. MHR also supported participants to attend a meet & greet event in Leinster House, where they met directly with politicians to discuss the need for greater investment in mental health services and supports.

As the project continues into 2026, MHR will continue to grow the capacity of the group to engage in advocacy activities with the goal of increasing their confidence and skills.

A key highlight in 2025 was the development of an animated video about Sharing the Vision, co-created in collaboration with people with lived experience of mental health difficulties. The video explains what our national mental health policy means in everyday life for people who use mental health services. Three participants from the Sharing the Vision Reference Group helped to inform the production of the video including the script, tone, and style. This collaborative approach ensured the video was accessible and reflected the perspectives and experiences of people who have accessed mental health services. The video will be launched in 2026 alongside an information webinar about Sharing the Vision for the public.

In total, 41 individuals with lived experience engaged in MHR's advocacy, research and consultations, representing a 17% increase on 2024. In 2026, MHR will continue to grow the participation of people with lived experience to influence policy development and strengthen political and public awareness of mental health and human rights.

SHARING THE VISION



Excerpts of **Experience**

Working with Mental Health Reform has meant far more to me than volunteering, it has been part of my healing, my growth, and my becoming. To be welcomed into spaces where lived experience is not only accepted but valued has had a profound impact on my recovery journey.

For so long, many of us move through the mental health system feeling unheard, reduced to diagnoses, or spoken about rather than listened to. Through Mental Health Reform, I found something different: community, respect, and purpose.

Being involved in lived experience groups has shown me that advocacy is not about having all the answers or being the loudest voice in the room. Sometimes advocacy is simply telling the truth of your own life and allowing that truth to stand with dignity. I have learned that our stories carry power, not because they are polished, but because they are real. Every conversation, consultation, event, and shared experience reminds me that change happens when people are brave enough to speak honestly about what systems often fail to see.

What I value most about Mental Health Reform is the genuine commitment to listening to lived experience in a meaningful way. I have grown in confidence through this work, but I have also grown in compassion, for myself and for others navigating difficult paths. To be part of a movement striving toward a more humane, compassionate, and person-centred mental health system in Ireland is something I carry with deep pride and passion.

Cathy Shah

Expert by Experience

Case Study

Campaigning for investment in mental health

In September, MHR launched its 'Pay the Bill' campaign which called on the Government to invest an additional €200 million in Ireland's mental health services for Budget 2026. This included €80M to sustain existing levels of services and €120 to develop new services to address unmet need.

The campaign emphasised the need to increase the percentage of the health budget spent on mental health from 6% to 10% in line with Sláintecare recommendations. It positioned Budget 2026 as a critical moment to deliver the scale of investment required to meet growing demand and fulfil the ambitions of Sharing the Vision, our national mental health policy.

We sent an open letter to An Taoiseach, Micheál Martin with signatures from 40 MHR member organisations.

We launched our pre-budget submission with a virtual launch featuring Emma Griffin, a member of our Grassroots Forum who spoke about the importance of mental health advocacy and Kerry Cuskelly, CEO of Exchange House Ireland who provided insights on the need for mental health supports for the traveller community. The online event brought together over 70 people including politicians, mental health professionals, and member organisations.

To promote awareness of the campaign, we organised a meet & greet event with our members and people with lived experience in Leinster House for Oireachtas members. Not only was this a powerful opportunity to educate politicians about the urgent need for reform in our mental health services but also an opportunity to amplify the voices of lived experience.

To sustain momentum in the campaign, we sent an open letter to An Taoiseach, Micheál Martin with signatures from 40 MHR member organisations. The letter highlighted the importance of transparent, targeted, and sustained investment for the voluntary and community sector which delivers vital prevention and early intervention services across Ireland.

In October, we welcomed the allocation of €1.597 billion in additional funding for mental health services. This marks the sixth consecutive year of increased investment, with mental health funding increasing by more than 50% since 2020.

The Government committed to increasing funding for early intervention services, youth mental health, and the expansion of National Clinical Programmes, which closely aligned with our recommendations. We also welcomed funding for talk therapies, digital mental health, and peer support.

While we recognise this progress, we continue to call on the Government to prioritise long-term, sustainable investment in mental health services. It is essential that the proportion of the health budget allocated to mental health increases to place Ireland on track to meet the Sláintecare commitment of 10% by 2030.

MHR Staff, Members and Mental Health Advocates pictured at the launch of Pay the Bill – 2026 Pre-Budget Campaign.

MHR Staff, Members and Mental Health Advocates pictured at the meet & greet event in Leinster House.

1.3 Key Challenges

A central challenge in 2026 was sustaining public and political urgency in a crowded policy landscape. While mental health remains a priority for the public, competing pressures such as housing and cost of living issues often diluted political focus, making consistent prioritisation difficult.

With sustained investment, services in the sector can expand capacity, reach people earlier, and ease pressure on acute care.

It was disappointing that Budget 2026 made no progress toward a commitment to multi-annual funding for the voluntary & community sector. Multi-annual funding is essential for organisations to meet growing demand, retain skilled staff, and deliver consistent, high-quality support. With sustained investment, services in the sector can expand capacity, reach people earlier, and ease pressure on acute care.

A further challenge for the coalition was the lack of transparency in budgetary reporting. MHR has urged the Government to provide a comprehensive and accessible breakdown of the mental health funding allocations to ensure accountability and enable stakeholders to track progress against national policy commitments.

In 2026, MHR will continue to engage with the Government to highlight the long-term benefits of sustainable investment in mental health.

Mental Health Budget 2026

Key Developments

€1.6bn

for mental health services – 50% increase since 2020

300

additional whole-time equivalent staff for mental health services to be recruited

€15m

focused on crisis supports and suicide prevention including voluntary and community services

€4m

investment in Child and Adolescent Mental Health Services

Strategic Priority 2

Drives evidence-based innovation in mental health to promote better outcomes for service users.

2.1 Summary

Through research and partnerships, Mental Health Reform (MHR) aims to identify promising practices that enhance outcomes for mental health service users.

In 2025 we worked towards the following goals:

- Build strategic alliances with key stakeholders to strengthen and enhance the work of MHR
- Facilitate and enable knowledge sharing and innovative projects within and between member organisations
- Research is identified, initiated and commissioned to produce insightful and impactful research outputs to advance improvement of mental health services and supports throughout Ireland

Mental Health Reform continued to strengthen its role as a national coalition by deepening relationships with member organisations, academic institutions, and the HSE, enabling the publication of innovative research to support the development of modern, inclusive mental health services. A key area of work was strengthening research partnerships across the sector, including collaborations with Jigsaw, Trinity College Dublin, University College Dublin, and other academic and statutory partners.

MHR supported the voluntary and community sector in navigating wider health system reform through the publication of Reshaping Healthcare, which explored the implications of the HSE's transition to Regional Health Areas and provided practical guidance on engagement with emerging structures. This work was shared through the Coalition Conversations webinar series, supporting knowledge exchange and cross-sector dialogue.

In parallel, MHR progressed its Children and Youth Mental Health (CYP-MH) project, presenting evidence on early intervention and the "missing middle," and reinforcing the importance of collaboration between statutory and voluntary services to improve outcomes for children and young people.

Across all activities, MHR continued to prioritise knowledge sharing, lived experience, and collaborative approaches to advancing rights-based mental health reform in Ireland.

2.2 Key Outcomes

1. Strengthening Research Partnerships

In 2025, MHR expanded its engagement with academic, legal, and sectoral partners, including collaboration with Jigsaw, Trinity College Dublin, University College Dublin, and several other institutions on grant submissions and research initiatives that position mental health as a national priority.

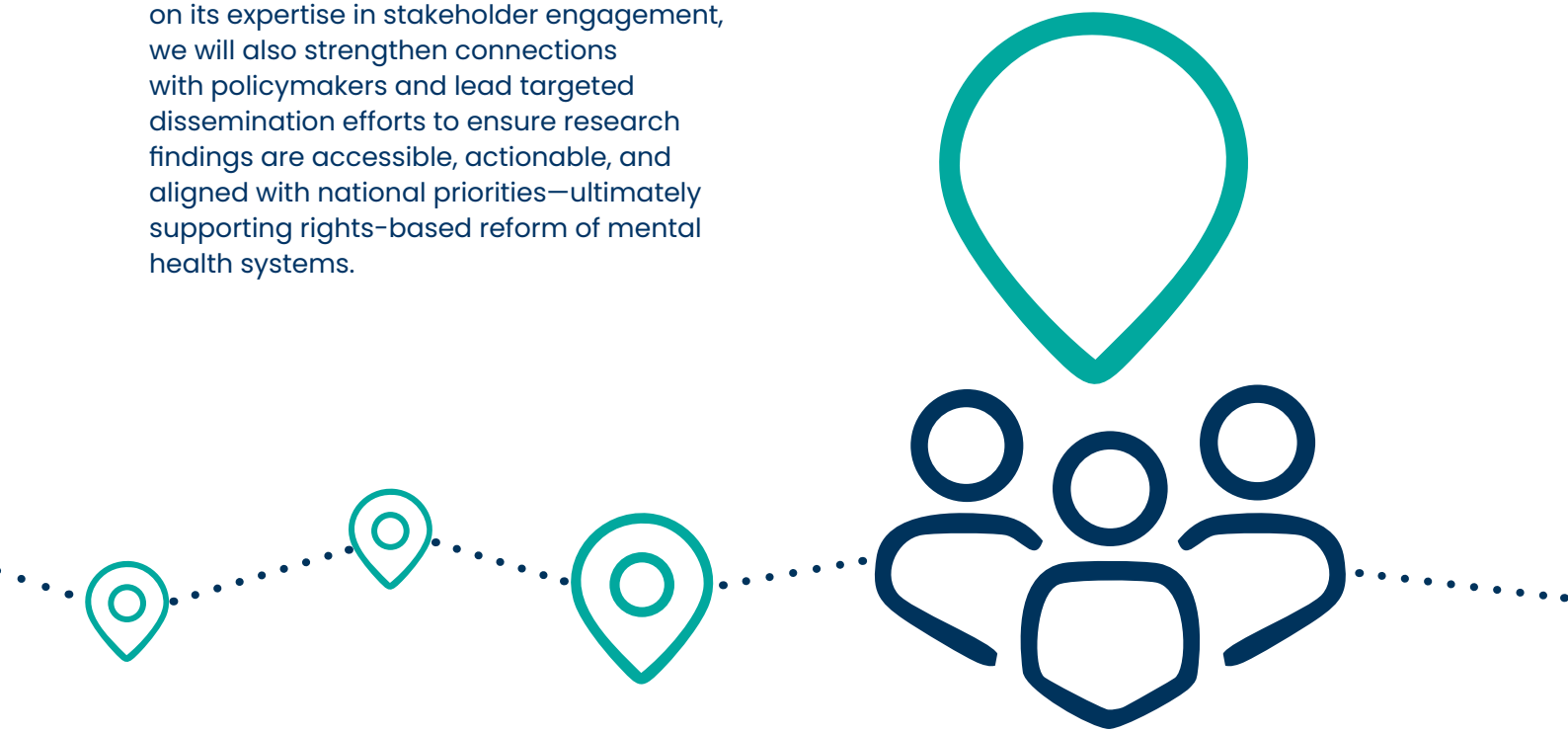
One significant example of this partnership approach is MHR's involvement in CO-PRIME, a landmark five-year initiative designed to transform mental health research across the island of Ireland. Funded by the Health Research Board, the project brings together a consortium of nearly 70 partners, including researchers, people with lived experience, clinicians, policymakers, and community organisations.

As a collaborator on the project, MHR will contribute its expertise in lived experience engagement, advocacy, and policy influence. By providing access to its Grassroots Forum and broader advocacy networks, the organisation will support inclusive, participatory research. Drawing on its expertise in stakeholder engagement, we will also strengthen connections with policymakers and lead targeted dissemination efforts to ensure research findings are accessible, actionable, and aligned with national priorities—ultimately supporting rights-based reform of mental health systems.

2. Supporting the Voluntary and Community Sector with Healthcare Restructuring

In May, Mental Health Reform launched Reshaping Healthcare. This briefing paper provides a clear and accessible overview of the ongoing restructuring of Ireland's health system and what it means specifically for mental health services and the voluntary and community sector (VCS).

It outlines the three core pillars of reform: the move to regional health areas, the devolution of decision-making from the centre of the HSE to six regions, and the greater integration of services across primary, community, and acute care. The aim of the paper was to translate this complex and evolving reform process into practical, policy-relevant insights for stakeholders, especially those in the VCS. It underscores the critical role of these organisations in service delivery, advocacy, and representing lived experience, while encouraging proactive engagement with new regional structures. It also reinforces the need for sustained investment and a rights-based approach to ensure that changes lead to meaningful improvements in outcomes for individuals and communities.



In May, MHR launched this paper as part of its Coalition Conversations webinar series on featuring contributions from Philip Watt, Interim CEO of Mental Health Reform, Suzanne Connolly, CEO of Barnardos Ireland, and Elaine Teague, CEO of the Disability Federation of Ireland. 121 people attended the webinar from across the mental health sector.

In 2026, MHR will continue to support the HSE and the voluntary and community sector in the rollout of the new regional structures by strengthening partnerships and supporting collaborative approaches to service planning and delivery.

3. Exploring Suicide Reporting in Ireland

In October 2025, Mental Health Reform launched its Suicide Reporting briefing note, a key contribution to informing Ireland's new suicide and self-harm prevention strategy, Connecting for Life. The briefing highlights the critical importance of timely and accurate suicide data in understanding trends, directing resources, and ultimately preventing suicide.

The paper provides a clear overview of the current challenges within Ireland's suicide reporting system, with a particular focus on the limitations of existing data. It identifies a number of interrelated issues, including the absence of real-time data on suspected suicides, the complexity and length of the coronial process, and the high evidential threshold required to return a verdict of suicide. These factors can result in delays and potential undercounting in official statistics, meaning that available data may be both lagging and incomplete. The briefing demonstrates how gaps in timely and accurate data can obscure the true scale and patterns of suicide and limit the effectiveness of national responses.

Gaps in timely and accurate data can obscure the true scale and patterns of suicide

Importantly, this research sets out the case for reforms to improve the timeliness and quality of suicide data, including the potential introduction of real-time surveillance mechanisms and changes to the coronial system. In doing so, it underscores that strengthening data systems is an essential component of effective suicide prevention, supporting more responsive services, informed decision-making, and improved outcomes for individuals and communities.

MHR launched this paper as part of its Coalition Conversations webinar series in October for 95 attendees. The webinar featured contributions from Fiona Tuomey, CEO and Founder of HUGG; Dr Paul Corcoran, Head of Research at the National Suicide Research Foundation; and Sarah Stack, Communications and Policy Manager at Samaritans Ireland. We would like to extend our thanks to all stakeholders who gave up their time and consulted with us to inform the briefing paper.

Case Study

Enhancing mental health outcomes for children and young people

On March, MHR proudly launched the findings of the Children and Youth Mental Health Project (CYP-MH) in collaboration with the London School of Economics and partner organisations Barnardos, ISPCC, Jigsaw, Pieta, and SpunOut. Two comprehensive outputs were launched on the day:

Scaling-up early intervention and services for the 'missing middle' in the children and young people's mental health system in Ireland: A mental health economics analysis

This report, produced by the London School of Economics for Mental Health Reform's CYP-MH project, presents a strong evidence-based and economic case for increased investment in youth mental health services in Ireland. It highlights significant unmet need, with over 180,000 cases among children and young people, particularly among those with mild-to-moderate anxiety, depression, and behavioural difficulties: the "missing middle." The analysis shows that early intervention and scalable supports, such as CBT and parenting programmes, are highly cost-effective, with substantial long-term benefits and returns on investment. Increasing funding, potentially by at least €75 million, could expand access, reduce pressure on specialist services, and improve outcomes, demonstrating both a compelling moral and economic rationale for reform.

Strengthening the First Pillar of Children and Young People's Mental Health Services in Ireland Scaling-up Early Support Services through effective leveraging of the Voluntary & Community Sector

The CYP-MH roadmap, developed in collaboration with voluntary and community sector partners Barnardos, ISPCC, Jigsaw, Pieta, and SpunOut, sets out a strategic plan to strengthen Children and Young People's Mental Health Services in Ireland. It makes an evidence-based case for scaling up supports for the "missing middle," particularly children and young people experiencing mild-to-moderate anxiety, depression, and behavioural difficulties. The roadmap proposes a five-year, twin-track approach combining increased service capacity with system development, including improved integration, care pathways, and co-production with the HSE. Supported by economic analysis from the London School of Economics, it demonstrates that investment in early intervention is both cost-effective and essential to reducing unmet need and improving long-term outcomes.

The next phase of the CYP-MH project is now underway. This includes close engagement with the HSE National Child and Youth Mental Health Office to establish a dedicated Child and Youth Mental Health Stakeholder Forum. This forum will provide a structured platform for ongoing dialogue and coordination between the HSE and VCS providers. In parallel, MHR is conducting a comprehensive mapping of both VCS and statutory services across all six HSE regions to build a shared understanding of existing service provision, identify gaps and unmet needs, and highlight opportunities for collaboration and innovation. This progress marks an important step toward a more coordinated and responsive system of care for children and young people in Ireland.

L-R: Joseph Duffy, CEO, Jigsaw, Suzanne Connolly, CEO, Barnardos and John Church, CEO, ISPCC, Stephanie Manahan, CEO, Pieta, Joseph Morning, Head Of Learning & Curriculum, spunout and Philip Watt, Interim CEO, MHR, pictured at the launch of the Children and Youth Mental Health Project.

2.3 Key Challenges

MHR continues to face significant challenges in advancing evidence-based innovation within Ireland's mental health sector. A persistent constraint is the limited availability of sustainable funding for the voluntary and community sector. This scarcity restricts the capacity to invest in research, pilot initiatives, and the scaling of innovative practices that are essential for systemic improvement.

Despite these challenges, MHR continues to proactively pursue diversified and longer-term funding opportunities and strengthen strategic partnerships. These efforts aim to ensure the organisation can maintain momentum in driving reform, supporting evidence-informed policy, and fostering innovation that improves outcomes for people with mental health difficulties.

Strategic Priority 3

Advance policies and practice towards high-quality, rights-based mental health services and supports for all.

Stephen Sheil, Interim Communications & Engagement Manager, MHR and Philip Watt, Interim CEO, MHR attending a meeting with the Oireachtas Health Committee in Leinster House to discuss priorities for the Mental Health Bill.

3.1 Summary

Mental Health Reform is at the forefront of mental health policy and law reform in Ireland. The relationships it has developed with elected representatives, Government departments, and State agencies provide the coalition with a unique and influential platform to advocate for, and secure, meaningful change in legislation and policy. Through this work, MHR contributes specialist knowledge on best practice in the design and configuration of mental health services, ensuring they are responsive to the needs of people with mental health difficulties and grounded in rights-based principles.

The Mental Health Bill 2024 represents the most significant reform of Ireland's mental health legislation in decades

In 2025 we worked towards the following goals:

- Reform of the Mental Health Act, 2001
- Hold the Government to account to on its obligations under EU and UN commitments
- Mental Health Reform is an interface for the unified voice of our members to government, the public and key stakeholders
- Hold Government and Departments to account for the implementation and development of national policies impacting mental health services and supports

The Mental Health Bill 2024 represents the most significant reform of Ireland's mental health legislation in decades, aiming to strengthen rights protections, enhance safeguards around involuntary care, and embed principles of autonomy, dignity, and least restrictive practice. In 2025, the Bill reached a critical stage, with MHR intensifying its engagement with policymakers and the public to advocate for timely, rights-based reform grounded in international standards and lived experience.

This work was reinforced by MHR's broader human rights advocacy, particularly through Ireland's review under the UN Convention on the Rights of Persons with Disabilities (UNCRPD). Alongside this, MHR expanded its policy influence through a high volume of submissions across UN, EU, and national processes, and by representing the voluntary and community sector in key advisory and implementation forums.

Through sustained advocacy, stakeholder engagement, and the active inclusion of lived experience, MHR helped ensure that mental health reform remains evidence-based, rights-focused, and responsive to the needs of those most affected.

3.2 Key Outcomes

1. Mental Health Bill 2024

Over the years, MHR has played a central role in shaping the direction of mental health law reform in Ireland. This focus is one of the founding aims of the organisation, which was established specifically to drive improvements in Ireland's mental health policies and legislation in line with human rights principles.

In 2025, Progress continued with the development of draft legislation and further public consultation. The Mental Health Bill 2024 was formally published in July 2024. In February 2025, the Bill was restored to Second Stage in the Dáil. Significant amendments were approved by Cabinet in May and debated at Committee Stage in June.

The Bill passed all stages in the Dáil in July 2025 before progressing to the Seanad in September for further scrutiny. Following continued debate and review, the legislation has now completed its passage through both Houses of the Oireachtas and is awaiting enactment, marking a significant milestone in the modernisation of Ireland's mental health framework.

The Mental Health Bill

TIMELINE

2011

Government announced a full review of the Mental Health Act 2001

2012

The Expert Review Group was appointed

2015

The 2015 Report of the Expert Group on the Mental Health Act 2001 made 165 recommendations to modernise Ireland's mental health legislation.

2021

Government approved the Heads of Bill for the Mental Health (Amendment) Bill, incorporating many Expert Group recommendations.

2024

The Mental Health Bill 2024 was published in July.

2025

In 2025, the Mental Health Bill passed through the Dáil before moving to the Seanad, undergoing detailed scrutiny between September – December.

2. Reform Activities

In 2025, MHR undertook an intensive programme of engagement, advocacy, and public information activities to support the progression of the Mental Health Bill 2024 and to advance understanding of a rights-based approach to mental health legislation. Central to this work was ongoing consultation with MHR's members and lived experience fora, ensuring that policy positions remained firmly grounded in the perspectives of those directly affected by mental health services and legislation.

Throughout the year, MHR engaged directly with Government and Opposition TDs and Senators, meeting with public representatives to discuss proposed amendments and provide detailed briefing notes to inform parliamentary debate. MHR also attended Dáil and Seanad debates alongside members and people with lived experience, ensuring that these voices were present during key stages of the legislative process.

L-R: Marie-Ann Kenny, Mental Health Advocate, Senator Frances Black, Nicola Clare, Mental Health Advocate and Lisa-Marie O' Malley, Policy & Advocacy Coordinator, MHR at a Briefing on the Mental Health Bill for Senators in Leinster House.

In August 2025, MHR published Mental Health Reform Update: Concerns and Recommendations for the Report Stage of the Mental Health Bill 2024, followed in October by Mental Health Reform Update: Mental Health Bill 2024 - A Plain English Guide to Key Concerns and Recommendations. These publications were designed to clearly communicate complex legislative developments, highlight remaining gaps, and set out practical recommendations for improvement.

In addition, MHR convened a roundtable consultation in July with the Coalition to Reform the Mental Health Act to inform preparation for Seanad debates. We also delivered information sessions to MHR's Grassroots Forum, SAGE advocacy, and Atlantic Technological University in Castlebar as part of our annual roadshow. In August, Mental Health Reform hosted a public information event titled Understanding the Latest Amendments to the Mental Health Bill 2024 for over 200 people to increase public understanding of the Bill and its implications.

Collectively, these activities aimed to gather key insights, promote understanding of the Bill, and build public support for a modern, human rights-based mental health legislative framework.

21 policy submissions

110%

on 2025 target

3. International Human Rights

MHR is one of Ireland's leading organisations advocating for the rights of people with psychosocial disabilities. As part of this work, we hold the Government to account to honour its commitments under the UN Convention on the Rights of Persons with Disabilities (UNCRPD). The UNCRPD is an international human rights treaty designed to protect, promote, and ensure the full and equal enjoyment of all human rights by people with disabilities.

In 2025, Ireland underwent a key milestone in its human rights obligations as the United Nations reviewed the State's compliance with the UNCRPD, marking an important moment for disability and mental health rights nationally.

MHR submitted both an independent shadow report and a joint shadow report in collaboration with Disability Federation of Ireland, Irish Wheelchair Association, Chime, Enable Ireland, and Rehab Group to the UN's review of Ireland's implementation of the UNCRPD. The reports identified key concerns across a range of interconnected areas, including mental health policy and legislation, where issues such as under-resourcing, uneven implementation, and insufficient rights protections were highlighted.

In addition, the UN Special Rapporteur overseeing aspects of disability rights engagement convenes a pre-sessional working group, where organisations and individuals who have submitted shadow reports are invited to present their concerns directly and highlight priority issues in advance of the formal review. MHR participated in this process, contributing evidence and lived experience perspectives on Ireland's compliance gaps. These submissions, along with those from other stakeholders, are then considered by the UN Committee when preparing its "List of Issues," which identifies key areas requiring clarification or action from the State before the review is completed with Concluding Observations and recommendations.

MHR will continue to advocate for the implementation of the UNCRPD, ensuring that legislation, policy, and services are aligned with human rights standards and that the voices of people with lived experience remain central to reform.

4. Coordinated Policy Input

In 2025, MHR completed 21 policy submissions, exceeding its annual target by 110%. These submissions were made across a wide range of influential forums, including the United Nations, the EU, government departments, statutory bodies, and civil society organisations. This level of activity reflects the growing recognition of MHR's expertise and the impact of its awareness-raising work on mental health and the role of the voluntary and community sector, which has led to an increase in requests for input into diverse consultation processes.

Key submissions included contributions to;

- EU LGBTIQ Equality Strategy 2026–2030 consultation
- National Strategy for Improving Community Safety
- Department of Children, Disability and Equality Statement of Strategy
- EU Anti-Poverty Strategy, the successor to Pathways to Work 2021–2025
- Department of Health Suicide Reduction Policy
- Stakeholder consultation on a new strategy to support the community and voluntary sector in Ireland.

5. Providing a Unified Voice in Key Policy Implementation Spaces

A key part of MHR's role is to represent the community and voluntary sector in critical policy and implementation spaces, ensuring that the collective voice of its diverse membership, including service users, advocacy groups, and frontline providers is meaningfully reflected in decision-making processes.

In 2025, MHR took part in over 25 external advisory groups convened by the Government, the HSE and the voluntary and community sector.

National Housing Strategy for People with Disabilities Implementation Monitoring Group	Disability Consultative Forum
Dialogue Forum with Voluntary Organisations	Sharing the Vision National Implementation and Monitoring Committee Steering Committee
National Mental Health Research Strategy Expert Group	HSE Assisted Decision Making Transitional Oversight Group
HSE Mental Health Engagement and Recovery Working Group on Sharing the Vision Recommendation 65	Digital Mental Health Specialist Group
HSE Regional Health Areas consultations	Sharing the Vision Working Group on Recommendations 26, 30 and 97
HSE Individual Placement Support Strategic Steering Group	HSE Service Arrangement and Grant Aid Agreement (SAGAA) Oversight Group
Sharing the Vision Working Group on Recommendation 74: peer-run/peer-led services	Disability Federation for Ireland Health Forum
Social Policy Network	Peace Plus
UNCRPD Alternative Report	Mental Health Commission Expert Advisory Group – Surveillance
Mental Health Commission Expert Advisory Group – Regulation of CAMHS	Psychotherapy Training Discussion Document Group
Loneliness Taskforce	Community Development Mental Health Network
Ukrainian Civil Society Coalition / USCF cluster forum	Oireachtas Disability Group
National Mental Health Experience Survey Advisory Group	Patient Empowerment Programme Steering Group

MHR will continue to focus on increasing its unrestricted income to ensure the sustainable delivery of its policy and advocacy work.

3.3 Key Challenges

A key challenge faced by MHR during this period was the significant pressure placed on organisational capacity due to the simultaneous progression of two major national and international processes: the UN review of Ireland's compliance with the UN Convention on the Rights of Persons with Disabilities and the return of the Mental Health Bill to the Oireachtas. While MHR strongly welcomed both developments as important opportunities to advance rights-based reform, they required an exceptional level of sustained engagement over a concentrated timeframe.

These parallel workstreams involved extensive policy analysis, the development of detailed submissions, stakeholder engagement, parliamentary briefings, public communications, and participation in national and international processes. This work was delivered alongside MHR's ongoing core programmes and day-to-day advocacy activities, placing considerable demands on staff time and organisational resources. As a result, maintaining the depth and quality of engagement across all areas required careful prioritisation and significant flexibility within the organisation.

This experience also reflects a broader structural issue within the civil society sector. Advocacy work, particularly that which is focused on law reform, international human rights mechanisms, and sustained policy engagement, is often under-resourced and difficult to fund, despite being essential to achieving systemic change. While service delivery and direct supports are more readily funded, advocacy, policy analysis, and knowledge-sharing functions are frequently reliant on short-term or project-based funding. In 2026, MHR will continue to focus on increasing its unrestricted income to ensure the sustainable delivery of its policy and advocacy work.

Strategic Priority 4

MHR strives to be a high functioning and well-resourced organisation

4.1 Summary

In order for Mental Health Reform (MHR) to deliver on its strategic plan, it must continue to build a strong membership and ensure that it has the right people, systems, structures, and resources in place.

In 2025, MHR worked towards the following goals:

- Enhance the ethos of collective endeavour and cooperation within the coalition
- Implement a sustainable funding model
- Implement an organisational structure and approach that supports the delivery of this strategy
- Impeccable Governance, financial and operational management and oversight in line with the organisational obligations as a registered charity

2025 was a year of transition for MHR with the appointment of a new CEO and Chair. Building organisational capacity and stability was a key focus for the Board to support the team during a period of significant change. Diversifying funding streams and increasing unrestricted income continued to be a priority with the implementation of the organisation's fundraising strategy. MHR raised funds through training services, grants and public fundraising activities. Although, there was a decrease in income from 2024, significant progress was made in enhancing MHR's offering as a training provider on mental health and human rights for employers.

MHR continued to strengthen engagement in the coalition by creating spaces for members to connect, collaborate and share knowledge. This approach maximised the participation of members in key campaigns, research and advocacy.

Dr Judith Malone, Chair, MHR pictured with Phyllis Conway, HUGG Waterford Volunteer at the Waterford Members' Showcase.

“At the member showcase, it was both inspiring and informative to engage with so many community organisations, an opportunity that would normally only present itself in isolation.”

Lola Fitzgibbon, Alone

4.2 Key Outcomes

1. Strengthening Collaboration in the Coalition

MHR relies on its membership to deliver its mission to be the unifying voice that drives progressive reform of mental health services and supports in Ireland. As a coalition, MHR's success depends on the participation and support of its members through their engagement with the network.

In 2025, MHR hosted a number of consultations, meetings and webinars for members to network, share knowledge and showcase their work. The coalition is committed to fostering relationships with members in every region in Ireland. To this end, we organised a regional showcase for our members in Waterford. Mayor of Waterford, Councillor Adam Wyse presented at the event which was attended by five members including Alone, Pieta, Samaritans and HUGG and Barnardos.

From suicide support networks to youth mental health services, the showcase shone a light on the wide range of mental health supports provided by charities in the South-East.

76% of member organisations attended at least one event or briefing in line with our target. Although this represents a small decrease on 2024, it indicates a clear commitment among our members to connect, collaborate, and drive forward our shared mission.

During this period, MHR welcomed three new members: Kyrie Farm, Psycare Ireland and the National Suicide Research Foundation. The addition of these members has further enhanced the diversity of expertise and knowledge within the coalition. In 2026, MHR will continue to expand its membership sustainably with a view to strengthening the collective voice of the mental health sector.

Metropolitan Mayor of Waterford, Counsellor Adam Wyse pictured with MHR members at the Waterford Members' Showcase.

MHR staff visiting the team at Kyrie Farm in Kildare.

2. Diversifying funding

Diversifying funding streams and increasing income is key to ensuring that MHR achieves sustainable growth in size, reach and influence. This is crucial for MHR to develop its team, advance its mission and effectively serve the needs of the coalition.

The Fundraising Advisory Committee is responsible for overseeing the implementation of MHR's 2023 – 2026 Fundraising Strategy and reporting to the Board on fundraising performance. The Committee met on two occasions in 2025 and played a significant role in advising MHR on its fundraising activities.

In 2025, MHR continued to deliver training courses for employers on mental health and human rights in the workplace. MHR delivered training to 46 public sector organisations on 'Mental Health and Human Rights in the Workplace'. Staff resource constraints limited MHR's capacity to expand training delivery. Increasing organisational capacity will be a key focus in 2026 to enable income growth through training.

MHR also launched Starry Night, a new mental health awareness initiative inspired by the famous painting by Vincent van Gogh, who experienced enduring mental health difficulties. Members of the public were encouraged to highlight the need for investment in mental health services by raising funds in support of MHR.

In 2025, MHR generated a total of €42,062 in unrestricted income from public speaking engagements, fundraising activities, donations, unrestricted grants, and service income. This total included €13,927 generated from training services, demonstrating the ongoing contribution of training and service-based activities to MHR's work. Although the organisation did not meet its fundraising target in 2025, there has been significant income growth since 2023, thanks to the impact of MHR's fundraising strategy.

Fundraising Income: 2023 – 2025

2023
€17,116

2024
€42,824

2025
€42,062

3. Supporting stability during a time of transition

During 2025, MHR implemented a number of adjustments to its organisational structure and ways of working to support delivery during a period of transition.

In response to an increased number of vacancies, MHR reviewed and updated its reporting lines to ensure clarity in roles and responsibilities and maintain effective oversight. Temporary changes to operational systems and processes were introduced to support continuity, including the delegation of authority following Board approval.

MHR introduced additional check-ins and coordination mechanisms to support staff and maintain communication across the organisation. Job descriptions were also reviewed to ensure alignment with evolving organisational needs and priorities. Overall, these measures supported the organisation in maintaining effective operations and delivery of its strategic objectives throughout the year.

4. Ensuring the highest standards of governance

MHR is committed to maintaining strong governance and operational standards in line with its obligations as a registered charity. Each year, the organisation conducts a comprehensive review of the Charities Governance Code, using a structured record form that is circulated to the Board for consideration and discussion. MHR ensures regulatory compliance by filing its Annual Report with the Charities Regulator before the statutory deadline.

During the year, external expertise was engaged to support the recruitment of a new CEO, Chair and Board members. Steering Point supported the CEO recruitment process, while Boardmatch supported the recruitment of the Chair and an additional Board member. These appointments followed an open and transparent process and have strengthened the Board through the addition of members with a diverse range of skills and experience.

In January, the Board approved a transition from bi-monthly to monthly management accounts, strengthening financial oversight by ensuring more timely information is available and supporting closer monitoring of performance.

In June, the Board undertook a detailed review of the organisation's Risk Register, assessing the relevance of identified risks, the effectiveness of mitigation measures, and the policies supporting those controls, further strengthening governance and oversight.

4.3 Key Challenges

Maintaining organisational capacity was a key focus during the year. Periods of staff vacancies, including at senior leadership level, placed additional demands on existing team members and required a continued emphasis on prioritisation and workload management. Recruitment progressed during the year, with roles filled to support ongoing delivery and organisational stability.

The organisation also incurred a number of non-recurring costs during the year, resulting in an overspend against head office costs, which impacted unrestricted reserves.

Capacity constraints during the year also limited the organisation's ability to progress certain income-generating activities, and as a result, self-generated income targets were not fully achieved. This had a corresponding impact on the organisation's ability to grow its unrestricted reserves.

Stephen Sheil, Interim Communications & Engagement Manager, MHR and Stephen Donnelly, Communications & Membership Officer pictured at the launch of the Starry Night mental health awareness initiative.

Future Plans

Looking ahead, 2026 will be a year of consolidation and development for MHR, building on the organisational changes experienced during 2025.

Strengthening and diversifying the organisation's funding model remains a key priority. While progress in advancing certain fundraising and income-generating initiatives was constrained during 2025 due to capacity and leadership changes, this work will continue in 2026, with a renewed focus on developing sustainable, and diversified income streams.

A review of the Strategic Plan, originally planned for 2025, will be undertaken in 2026 following the appointment of a new CEO, ensuring that the organisation's objectives are aligned with both the evolving mental health policy landscape and its operational capacity.

In addition, MHR plans to commence a review of its IT systems and software to assess effectiveness, improve efficiencies, and ensure that systems adequately support operational and governance requirements. This work is expected to extend into 2027 as part of a phased approach.

The appointment of a new CEO and Chair brings renewed leadership and a diverse skillset. This provides an opportunity to strengthen organisational capacity, enhance governance frameworks, and support the delivery of MHR's strategic priorities.

Excerpts of **Experience**

Working with Mental Health Reform has been such a positive experience for me in recovery and has meant I have been able to use my voice and connect with other people with lived experience. Being involved with Mental Health Reform has helped me feel heard, supported, and more confident in sharing my experiences in a meaningful way.

My involvement has also shaped my understanding of advocacy. It has made me want to advocate even more for mental health awareness and has changed my understanding of what advocacy means by giving me the platform to use my voice to raise awareness. I have learned that advocacy is not only about sharing personal experiences, but also about helping create change, improving understanding, and ensuring that people with lived experience are included in important conversations around mental health services and supports.

Being part of the lived experience groups has given me so much confidence. The groups created a safe and respectful space where I was able to openly share my experiences without judgment. I really value the support, connection, and sense of community that came from being involved.

Overall, my experience with Mental Health Reform has had a very positive impact on both my recovery journey and my confidence in speaking up to support change and awareness around mental health.

It makes me so happy to be asked to contribute by Mental Health Reform and shows that recovery and self-compassion are possible.

Seán Blake

Expert by Experience

Philip Watt, Interim CEO, MHR pictured with David Carroll, CEO, Depaul at the launch of "Breaking the Cycle" – A report on mental health and homelessness.

3 Governance, structure and management

Our People

Board of Directors:	Dr Judith Malone (Appointed July 2025)
	Dr Sheila Gilheany (Appointed July 2022)
	Fiona Tuomey (Appointed July 2021)
	Ciara Glynn (October 2023)
	Stephanie Manahan (July 2023)
	Ken Kilbride (July 2024)
	Suzanne O'Toole (Appointed September 2025)
	Kevin O'Higgins (Appointed September 2025)
	Jennifer Owens (Appointed July 2025)
Resignation:	Michael Culhane (Resigned January 2025)
	Martin Markey (Resigned July 2025)
	Sean Sheridan (Resigned July 2025)
	Louise Jennings (Resigned July 2025)
	Michele Kerrigan (Resigned July 2025)
	John Church (Resigned February 2026)
	Nicola Byrne (Resigned April 2026)
Committees:	**Finance, Audit & Risk Committee**
	Jennifer Owens
	Kevin O'Higgins
	Nicola Byrne (Resigned April 2026)
	Suzanne O' Toole (Appointed June 2026)
	Nominations Committee
	Stephanie Manahan
	Ciara Glynn
	Fiona Tuomey
	Fundraising Advisory Committee
	Dr Sheila Gilheany
	Ken Kilbride
	Suzanne O'Toole

Chair:	Dr Judith Malone (Appointed July 2025)
	Michele Kerrigan (Resigned July 2025)
Company Secretary:	Jennifer Owens
Board of Directors:	Helen Gillespie Brown (Appointed 1st December 2025)
	Philip Watt, Interim CEO (11th September 2024 – July 2025)
	Fiona Coyle (Resigned June 2025)
Management Team:	Dr Louise Rooney - Policy & Research Manager
	Niamh Fahy - Communications & Engagement Manager
	Stephen Sheil - Interim Communications & Engagement Manager (maternity cover December 2024 - July 2025)
	Wendy Mitchell - Head of Operations
Charity Numbers	CYN 19958 Charity Registration Number 2007873
Registered number:	50685
Registered office:	Carmichael House, 4 Brunswick Street, Dublin 7
Independent auditors:	Whelan Dowling & Associates, Block 1, Unit 1 & 4 Northwood Court, Santry, Dublin 9, D09 E348
Bankers:	Dillon Eustace, 33 Sir John Rogerson's Quay, Grand Canal Dock, Dublin 2, D02 XK09
Legal name:	Mental Health Reform, a Company Limited by Guarantee
Governing Documents:	Mental Health Reform Limited, trading as Mental Health Reform, is a company limited by guarantee and not having a share capital. It was incorporated in 2011. MHR is a charitable organisation registered with the Charities Regulator (CRA) in accordance with the Charities Act 2009. MHR is a public benefit entity as defined by FRS 102.

Mental Health Reform team

Helen Gillespie Brown
CEO

Helen Brown has over 25 years' experience in social policy, mental health, and international development across the public, third, and global sectors. Most recently she has served as a Mental Health Consultant for a Scottish Government funded initiative 'Think Positive' supporting student mental health across Scottish colleges and universities. Under her leadership, the project won the Outstanding Impact in Education award at the 2025 Mental Health and Wellbeing Scotland Awards. Helen's career encompasses a range of senior leadership roles, including Chief Executive Officer of Visualise Scotland, and Head of Volunteering at The Prince's Trust. She has also held leadership positions with the British Red Cross, grassroots advocacy charity Lewisham Speaking Up and various international NGOs. Helen has a longstanding interest in the implementation of the UNCRPD, having engaged in its early development in Brussels.

Wendy Mitchell
Head of Operations

Wendy Mitchell is currently Mental Health Reform's Head of Operations. Wendy joined Mental Health Reform in July 2021 as Operations and Finance Coordinator. Prior to this Wendy worked in the financial services sector, holding positions in the area portfolio case management, stakeholder engagement and legal services. She has an LLB in Law and in the course of completing her Masters in Public Policy 2020, undertook a dissertation on the topic of dual diagnosis of addiction and mental health difficulties.

Dr Louise Rooney
Policy & Research Manager

Dr. Louise Rooney joined Mental Health Reform in March 2025 as Policy and Research Manager. Louise has over a decade of experience as a multidisciplinary social scientist in both the voluntary and statutory sectors. She has extensive experience collaborating with organisations supporting seldom-heard groups, including the Garda Síochána, the Probation Service, Child and Adolescent Mental Health services, and Tusla. Louise has also lectured on numerous master level research programs in University College Dublin, Technological University Dublin and Maynooth University.

Niamh Fahy,
Communications & Engagement Manager

Niamh Fahy joined Mental Health Reform in June 2021 as Communications & Engagement Manager. With over a decade of experience in communications, Niamh is passionate about developing advocacy and public awareness campaigns that effect positive change. Niamh was previously a Programme Executive at Transparency International Ireland where she managed communications and programme development across a global coalition of civil society organisations. Niamh has a background in public relations, representing a broad range of clients in the healthcare and non-profit sectors. She holds an MA in Media and Communication from the University of Greenwich, London and a Diploma in Digital Marketing from the Digital Marketing Institute. Niamh is a member of the Public Relations Institute of Ireland.

Lisa-Marie O'Malley
Policy & Advocacy Coordinator

Lisa-Marie O'Malley joined Mental Health Reform in May 2025 as Policy and Advocacy Coordinator. With a background in psychology and economics, she previously worked as lead corporate governance research analyst at Glass Lewis. Since 2023, she has co-ordinated the Clare trauma-informed interagency working group, supporting frontline services in embedding trauma-informed practices. She has enjoyed volunteering with many different organisations, often on initiatives with a focus on mental health and supporting young people, and continues to volunteer with Childline. Additionally, she has hands-on experience directly advocating for the rights of individuals experiencing mental health difficulties. Passionate about working towards a world where every person has a chance to thrive, she is committed to amplifying diverse voices and pushing for the progressive reform of mental health services.

Giulia Camera
Innovation Programme Coordinator

Giulia Camera joined Mental Health Reform in April 2025 as Innovation Programme Coordinator. She leads the design and delivery of evidence-based innovation projects, fosters collaboration across member organisations, and builds strategic partnerships to advance mental health outcomes. With a background in psychology and community engagement, Giulia brings expertise in multi-stakeholder collaboration, digital innovation, and wellbeing initiatives. She is currently training as a Systemic Psychotherapist and is passionate about applying psychological insights to shape impactful, user-focused mental health solutions. Giulia holds a Master in Clinical and Community Psychology, and is working toward psychotherapy accreditation.

Stephen Donnelly
Communications & Membership Officer

Stephen Donnelly joined Mental Health Reform in January 2025 as our Communications and Membership Officer. Supporting the work of the Communications and Engagement Manager, his role is to grow our voice through social media, events and webinars as well as support fundraising campaigns to action our strategic goals. He is currently training as an Integrative Psychotherapist and embracing the opportunity to help those facing mental health difficulties. Prior to this, Stephen has over 20 years of experience as a Graphic Designer, working across a range of visual media to produce compelling content to engage with people. He holds a Bachelor of Design in Visual Communications, Diploma in Creative Advertising, Diploma in UX Design and is working towards accreditation in psychotherapy. Stephen understands the power of effective communication and brings both his design and therapeutic experience to the Mental Health Reform team.

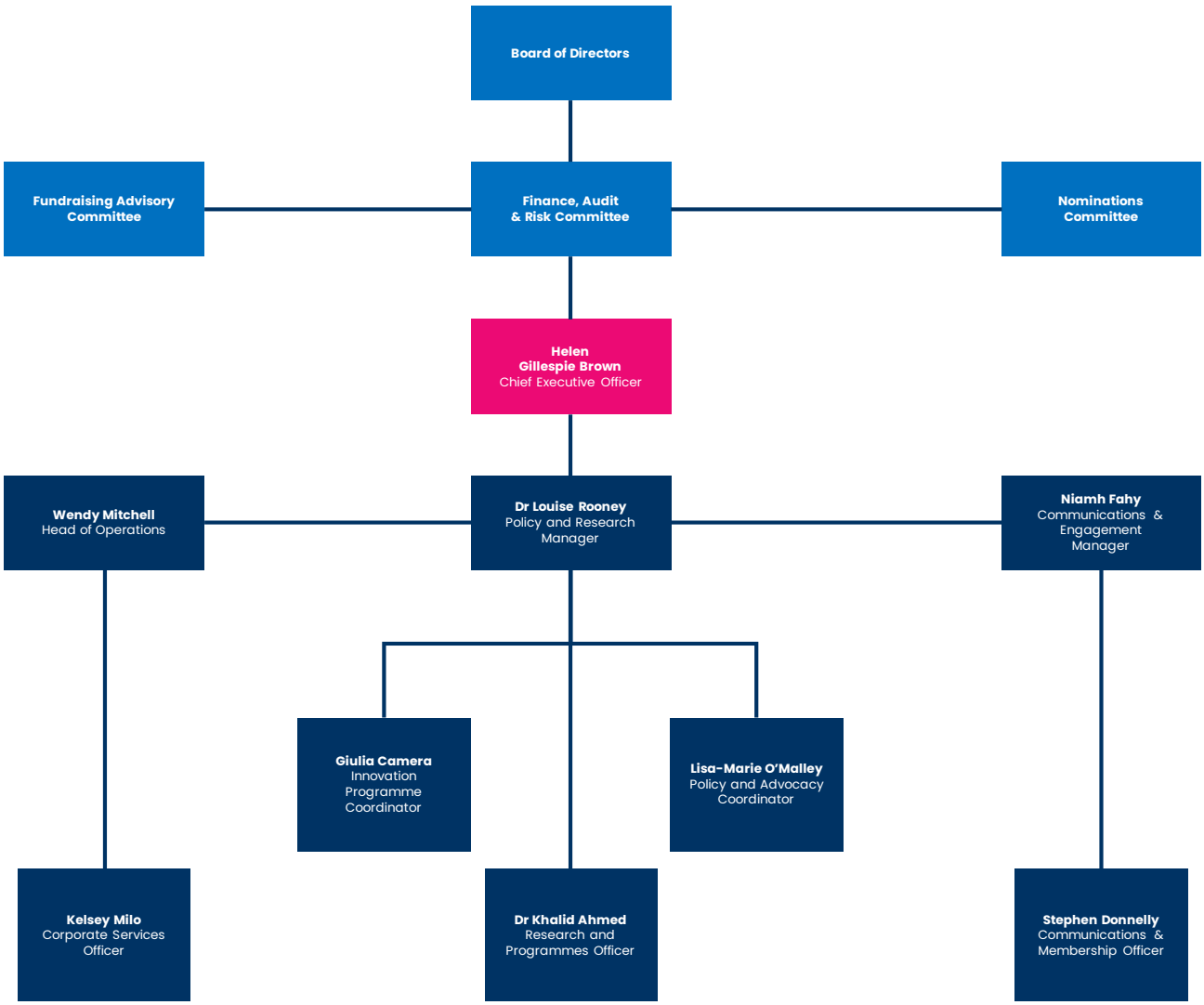
Dr Khalid Ahmed
Research & Programmes Officer

Khalid Ahmed is a medical doctor and public health professional with over six years' experience across health, humanitarian, and development organisations. He has worked with Oxfam, Global Health Partnership, and Save the Children, contributing to programme delivery, project management, medical coordination, and stakeholder engagement in complex and multidisciplinary settings. Khalid holds a Bachelor's degree in Medicine from University of Hargeisa and a Master's degree in Managing Health Services from the Liverpool School of Tropical Medicine. His work focuses on health systems, partnerships, and evidence-informed approaches to supporting positive change in mental health policy and services.

Kelsey Milo
Corporate Services Officer

Kelsey is currently Mental Health Reform's Corporate Services Officer, having joined the organisation in May 2026. Prior to joining Mental Health Reform, Kelsey worked in Dublin-based law firms, including James Watters & Co. Solicitors and Abbey Law, where she focused on human rights and judicial review cases. Through this work, she developed a strong commitment to advocacy, access to justice, and ensuring that people's voices are heard within systems that affect their lives. Kelsey holds a BA in English Literature from the University of Central Florida, an LLB from the University of Limerick, and a Master's degree in International Commercial Law from the University of Limerick. Her academic and professional background has fostered a particular interest in human rights advocacy, governance, and public policy. Passionate about mental health, Kelsey is proud to contribute to Mental Health Reform's work to create a more inclusive and responsive mental health system in Ireland.

Mental Health Reform Organisational Chart



Mental Health Reform Board Members

Dr Judith Malone
Chair

Appointed: 22/07/2025
Expertise: Mental health

Biography: Dr Judith Malone is a distinguished psychologist and healthcare leader whose career spans over two decades across Ireland, Canada, and Australia. With professional registration in three countries, she brings a truly global perspective to mental health leadership and organizational excellence. Recognized as a Fellow of both the Canadian and American Psychological Associations, Judith has received numerous lifetime achievement awards, serves as an adjunct professor for two universities, and is committed to positively influencing society and championing stakeholder engagement in healthier communities. An Irish citizen, she considers it a privilege to serve as chair of the board of Mental Health Reform together with board members who bring their dedication and leadership to help drive the progressive reform of mental health services and supports, through coordination and policy development, research and innovation, accountability and collective advocacy.

Dr Sheila Gilheany
Deputy Chair

Appointed: 14/06/2022
Expertise: Policy & research, Science, Education and Advocacy

Dr Sheila Gilheany is CEO of Alcohol Action Ireland (AAI), the national independent advocate for evidence-based alcohol policy. Under her leadership since 2019, AAI has focused on issues such as pricing, marketing, and availability of alcohol, while also promoting trauma-informed services for those affected by alcohol harm, including children living with parental problem alcohol use. Sheila has previously led organisations in science, education, and autism. She is a Board member of Eurocare, the European alliance for alcohol policy NGOs.

Jennifer Owens
Director

Appointed: 22/07/2025
Expertise: Strategic Leadership, Finance, Corporate Governance

Jennifer is a qualified accountant and Chief Executive Officer with extensive experience across the public, private and voluntary sectors. She currently leads a specialist supported accommodation service for women experiencing homelessness, providing tailored programmes that address complex needs and support pathways to safe, sustainable independent living. She brings significant expertise in financial governance, audit, compliance, risk management and long-term sustainability planning. Throughout her career, she has worked closely with Boards and senior leadership teams to strengthen financial oversight, enhance internal controls and align financial strategy with organisational mission and impact. Passionate about mental health and women's services, Jennifer is committed to ensuring that robust financial stewardship underpins high-quality, person-centred care and sustainable service delivery.

Kevin O' Higgins
Director

Appointed: 30/09/2025
Expertise: Law

Kevin O'Higgins is a qualified solicitor. He is currently Director and In-House Legal Counsel at KPMG. Kevin primarily works in the area of commercial contracting but advises on a broad range of issues within his role. Kevin previously worked in private practice across diverse legal areas including commercial litigation, financial regulation and regulatory investigations. Kevin completed his legal training at the Law Society of Ireland, Blackhall Place and holds a Bachelor of Arts in Economics from University College Dublin, a Postgraduate Diploma in Law from Technological University Dublin, a Master of Laws in Commercial Law from University College Dublin and a Diploma in Commercial Litigation from the Law Society of Ireland.

Suzanne O' Toole
Director

Appointed: 30/09/2025
Expertise: Business, management, marketing

Suzanne O' Toole is a General Manager for Global Datacenter Capacity Planning at Microsoft. Suzanne has over 20 years' experience spanning across automotive, aerospace, and technology industries having held various positions in Operations, Supply Chain and procurement. Throughout her career Suzanne has been passionate about helping build representation for women and other underrepresented groups. Suzanne actively supports women in technology through her mentoring, volunteering and leading of women's initiatives.

Fiona Tuomey
Director

Appointed: 06/07/2021
Expertise: Marketing, communications

Fiona Tuomey is a Member Appointed Director and the CEO and founder of HUGG, the national organisation which provides peer led support for people bereaved by suicide. She brings a proven track record in organisational leadership, communications, and service delivery, alongside a deep commitment to improving suicide postvention supports in Ireland. Fiona holds an MSc in Loss and Bereavement from RCSI, and her work is grounded in both professional expertise and a compassionate, person-centred approach.

Ken Kilbride
Director

Appointed: 18/07/2024
Expertise: Mental Health

Ken Kilbride is CEO of ADHD Ireland, where he leads the implementation of the organisation's vision and strategic goals. With over 20 years' experience in senior management, Ken has worked across a wide spectrum of not-for-profit organisations in Ireland, ranging from large national bodies to smaller community-based groups. He brings a strong track record in organisational leadership, governance, and service delivery. At ADHD Ireland, Ken is committed to improving support, awareness, and advocacy for individuals and families affected by ADHD.

Ciara Glynn
Director

Appointed: 10/10/2023
Expertise: Advocacy, Community Mental Health, Service Innovation

Ciara Glynn is a peer support worker and a member of the Mental Health Reform Board since 2023. She was part of the Advocacy, Community Mental Health, Service Innovation first cohort of graded peer support workers employed by the HSE in 2017, marking a significant step in the recognition of lived experience within mental health services. Ciara has worked for nearly seven years on a community mental health team, offering support grounded in empathy and recovery. Her role reflects a commitment to person-centred care and the integration of peer-led approaches within Ireland's mental health system.

Stephanie Manahan
Director

Appointed: 20/07/2023
Expertise: Strategic Leadership, Corporate Governance

Stephanie Manahan is CEO of Pieta, leading the organisation's operations and services supporting individuals in suicidal distress and engaging in self-harm. Passionate about mental health, she places particular focus on the needs of children and young people. Stephanie brings extensive experience from senior executive and non-executive roles, with professional training in both mental health and corporate governance. She holds a BSc from Trinity College Dublin, an MSc from the University of London, and a Professional Diploma in Corporate Governance. She is a qualified Executive Coach.

Board Structure and Composition

Mental Health Reform (MHR) is governed by its Constitution and pursues activities aligned with its charitable purpose and stated objectives. The Board of Directors provides oversight and strategic direction to the organisation. It consists of no more than 13 members, including the Chair, with a minimum of three Directors required.

In addition to the Chair, the Board comprises a mix of Member-Appointed Directors and five "Expert Directors", each bringing relevant professional expertise across areas such as law, management, public affairs, and finance. Up to five Directors (the "Member-Appointed Directors") may be nominated by member organisations and appointed by vote at a general meeting. Expert Directors are nominated by an existing Director and their appointment is subject to ratification by the Members at a general meeting.

The Board may also include up to two additional Directors, nominated by an existing Director, in line with the organisation's Constitution. These appointments may reflect lived experience or service user experience of mental health services or address specific skills or expertise required by the organisation.

Collectively, the Board reflects a broad range of expertise, including law, telecommunications, public affairs, business, finance, risk management, governance, marketing, psychology, and lived experience of mental health services in Ireland.

The CEO does not sit on the Board. The role of Company Secretary is held by Jennifer Owens.

Board Appointment, Tenure and Recruitment

Directors are appointed for an initial term of three years and may be re-elected for up to two further consecutive terms, bringing the maximum tenure to nine years. This supports the regular introduction of fresh perspectives, skills, and expertise.

The Board retains the authority to temporarily fill vacancies in line with organisational needs. Any such appointments are subject to ratification at the next Annual General Meeting (AGM), or an alternative nomination may be proposed.

MHR has an established process for Board appointments. In 2026, this will be further strengthened through the formalisation of a Board Recruitment and Selection Process, ensuring a more structured, transparent, and skills-based approach to Board composition.

Recruitment of Expert Directors is typically undertaken through external networks such as Boardmatch, The Wheel, and Activelink. Candidates are assessed based on skills, experience, and competencies, with shortlisted applicants interviewed by the Nominations Committee.

Prior to initiating recruitment, the Chair leads a Board skills audit to ensure alignment with governance best practice, including financial expertise, an appropriate balance of sectoral and corporate experience, and consideration of gender balance. In 2026, MHR also plans to appoint an external consultant to undertake a formal Board evaluation, further strengthening governance and informing future recruitment and development priorities.

Board Changes During the Year

Michael Culhane stepped down from his role as Expert Finance Director in January 2025. Following a recruitment process in April 2025, Jennifer Owens was ratified as an Expert Director at the AGM held on 22 July 2025.

At the same AGM, Dr Judith Malone was appointed Chair following a robust recruitment process undertaken by Boardmatch, succeeding Michele Kerrigan. Dr Sheila Gilheany was re-elected for a second term as a Members' Appointed Director.

Sean Sheridan, Martin Markey, and Louise Jennings stepped down from the Board in July 2025. Boardmatch was subsequently engaged to support recruitment for the roles of Expert Legal Director and Expert Business Director. This process concluded in September 2025, with Suzanna O'Toole and Kevin O'Higgins co-opted to the Board in September 2025. Their appointments will be brought forward for ratification at the 2026 AGM meeting.

Board Induction and Development

MHR maintains a structured induction process for all new Directors. Induction is carried out as soon as possible following a Director being co-opted to the Board or ratified at the AGM. Responsibility for the induction process lies with the Chair and CEO.

New Directors attend an induction session which covers:

- MHR's mission, strategic objectives, and operational priorities
- The history and recent achievements of the organisation
- The structure of the Board and its Committees
- Key roles and responsibilities of Board members

Members of the senior management team may also be invited to contribute to the induction process, providing insight into key policy areas aligned with the organisation's strategic plan, MHR's guidance on language, and current priorities, campaigns, and engagement with members.

Prior to the induction meeting, new Directors receive an orientation pack that includes:

- A welcome and appointment letter from the Chair
- MHR's Memorandum and Articles of Association
- An organisational chart
- Minutes from the previous six Board meetings
- A schedule of upcoming Board meetings
- The most recent Annual Report and financial statements
- MHR's Strategic and Operational Plans
- The Charities Governance Code (Charities Regulatory Authority)
- MHR's Financial Procedures and Policies Manual
- MHR's Governance Handbook
- The Code of Conduct and Conflict of Interest Policy

Following induction, Directors are required to sign a declaration acknowledging their understanding of the Code of Conduct and their responsibilities as Board members.

Throughout the year, Directors are encouraged to undertake training and development to strengthen their governance skills, deepen their understanding of the sector, and stay informed on emerging best practice. Relevant learning opportunities are shared via email and highlighted at Board meetings.

While Directors are encouraged to undertake ongoing training and development, MHR does not currently operate a formalised Board training framework beyond induction.

Recognising the importance of continuous development, MHR will, in 2026, introduce a more structured Board Training and Development Framework. This will include access to external training providers (such as Carmichael and The Wheel), as well as supports such as mentoring and Board coaching to strengthen specific skill sets and enhance overall Board effectiveness.

The Board retains authority over the following matters:

1. Strategy and Oversight

- Approval of the Strategic Plan
- Review of the Annual Operational Plan, providing strategic guidance
- Oversight of organisational performance

2. Governance

- Approval of the Annual Report and Financial Statements
- Oversight of governance structures, including Board Committees
- Approval of key governance, legal compliance, and risk management policies and frameworks

3. CEO Oversight

- Appointment, remuneration, performance review, and removal of the CEO
- Oversight of succession planning

4. Finance and Risk

- Approval of budgets and monitoring of financial performance
- Oversight of financial controls and risk management

5. Compliance

- Oversight of legal, regulatory, and ethical compliance

6. Organisation and People

- Approval of organisational structure and new staff roles

7. Board and External Appointments

- Approval of new members
- Appointment of the Chair and Company Secretary
- Co-option of Board members (subject to AGM ratification)
- Appointment and removal of external auditors

The Board delegates responsibility for day-to-day management to the CEO.

The CEO, supported by the Senior Management Team, develops strategic, and operational proposals for Board consideration, including plans, budgets, policies, fundraising strategies, and advocacy priorities. Operational and routine HR policies are developed and approved by management in line with delegated authority and internal procedures.

The CEO is accountable to the Board and is responsible for delivering the organisation's objectives. Key responsibilities include:

CEO Responsibilities

- Implementing the Strategic Plan and the Board's strategic decisions
- Preparing annual operational plans for Board consideration
- Leading advocacy, policy, and campaign work
- Ensuring the effective delivery of organisational objectives
- Preparing budgets and maintaining financial sustainability
- Managing organisational risk and implementing the Risk Management Framework
- Ensuring compliance with legal, regulatory, and funder requirements
- Reporting regularly to the Board on performance and key developments

The CEO may delegate responsibilities to members of the Senior Management Team; however, overall accountability for the management and performance of the organisation remains with the CEO.

Through regular reporting and engagement with the CEO, the Board monitors progress against strategic objectives. The Chair and Committees provide guidance and support as appropriate.

Conflicts of Interest

Mental Health Reform (MHR) has a policy in place to manage conflicts of interest and loyalty that may arise for Board and committee members. Declaring conflicts of interest is a standing agenda item at meetings of the Board and its committees, ensuring that any actual, potential, or perceived conflicts are identified and addressed in a timely manner.

Upon appointment, all members of the Board of Directors are provided with the organisation's Conflict of Interest Policy and are required to complete a Declaration of Interests.

At the beginning of each Board and committee meeting, members are invited to declare any conflicts of interest or any developments that may affect their independence or loyalty. All declarations are formally recorded in the meeting minutes. Where a conflict arises, the nature and extent of the conflict, along with any actions taken to manage it, are documented as part of the official record.

In managing conflicts, the Board or relevant committee may require the individual concerned to abstain from discussion or decision-making on the relevant matter, or to withdraw from the meeting for the duration of the discussion. In cases where a conflict is considered significant, the Board will consider whether it impacts the individual's ability to continue in their role.

Board and committee members are also required to promptly inform the Company Secretary of any changes in circumstances that may give rise to a conflict of interest.

With effect from 2026, Board and committee members will be required to submit an annual declaration to ensure that the organisation's Register of Interests is maintained and kept up to date.

The organisation will also review its Conflicts of Interest Policy in 2026 to further strengthen its approach to identifying and managing conflicts of interest and loyalty, including those arising in the context of income generation, fundraising, and partnerships.

Board Meetings & Reporting

The Board of Directors is required to convene a minimum of six meetings annually. In 2025, the Board met six times. These formal meetings do not include Board induction sessions or the Annual General Meeting, which was held in July. Board attendance is set out in the organisation's Constitution, with responsibility for monitoring and implementation resting with the Chair.

Board members receive a comprehensive meeting pack, including the agenda and supporting documentation, in advance of each meeting, typically one week prior. This ensures that Directors have adequate time to review and prepare for informed discussion and decision-making. The Chair and CEO collaborate in advance of each meeting to agree the agenda, with Board members also able to submit items for consideration through the Chair, Company Secretary, or CEO.

Standing agenda items include a CEO report, conflict of interest declarations, updates on lobbying activities, finance updates including approval of monthly management accounts, risk management (including new and emerging risks), updates from Board Committees, and governance matters. During the year, the Board also engaged in strategic discussions, including a dedicated session facilitated by the Chair, incorporating a SWOT analysis and focused discussion on the organisation's vision, goals, and strategy. The CEO's report outlines progress against the operational plan and strategic goals, as well as any significant challenges or developments affecting the organisation. Board minutes are reviewed by the Chair and approved as the first item at the subsequent meeting. Attendance records are maintained by the Chair and CEO. Individual Board member attendance rates are published to support transparency and accountability.

Board Meetings in 2025

The Board met on the following dates in 2025

- 25th February 2025
- 29th April 2025
- 4th June 2025
- 24th June 2025
- 30th September 2025
- 2nd December 2025

Key Matters Considered by the Board

During the year, the Board considered and approved a range matters, including:

25th February 2025

At the first meeting of the year, the Board:

- Reviewed and approved the 2024 year-end financial statements
- Reviewed and approved the January 2025 management accounts
- Considered the 2025 Operational Plan
- Considered applications for new membership
- Reviewed the Board skills matrix and assessment
- Reviewed the role description for the Vice Chair position
- Considered Board training and development needs

29th April 2025

At this meeting, the Board:

- Reviewed the Software Policy as part of risk management and governance oversight
- Received updates on staffing, including organisational structure and resourcing matters
- Received an update on membership applications
- Considered a report from the Nominations Committee regarding upcoming Board vacancies during 2025, together with associated succession planning, including the role of Chair

4th June 2025

At this meeting, the Board:

- Approved the CEO recruitment strategy
- Received an update on human resources and organisational resourcing
- Reviewed governance arrangements in relation to financial controls

24th June 2025

At this meeting, the Board:

- Approved the audited financial statements
- Considered and approved a temporary delegation of financial authority to a member of the senior leadership team, pending appointment of a CEO
- Reviewed the agenda for the Annual General Meeting
- Considered Board appointments and handover arrangements in respect of the transition between the incoming and outgoing Chair
- Approved the appointment of an external recruitment provider to lead the CEO recruitment process, including associated cost
- Approved the appointment of a Head of Operations, pending the appointment of a CEO, to support continuity and transition

30th September 2025

At this meeting, the Board:

- Undertook a strategic review, including a SWOT analysis
- Received an update on the CEO recruitment process and, following consideration, ratified the appointment of the incoming CEO
- Confirmed Board appointments following the Annual General Meeting
- Ratification of Company Secretary
- Approved committee appointments, reflecting changes in Board composition
- Reviewed and approved the annual return and compliance record for the Charities Regulator
- Considered operational updates, including office relocation and organisational resourcing arrangements

2nd December 2025

In the final meeting of the year, the Board:

- Reviewed and approved revised Terms of Reference for Board committees
- Noted committee priorities for the first half of 2026
- Considered Board and Executive functions to support strategic governance

A summary of Board attendance for the year is provided below.

	Board	Finance, Audit & Risk	Fundraising Advisory	Nominations
Number of meetings	**6**	**5**	**2**	**5**
Dr Judith Malone	2/2	1/1		2/2
Dr Sheila Gilheany	6/6		2/2	5/5
Michele Kerrigan	4/4			2/2
Ken Kilbride	5/6		1/1	
Stephanie Manahan	5/6			1/1
Fiona Tuomey	4/4			1/1
John Church	3/3	1/1		
Nicola Byrne	5/6	2/4		
Ciara Glynn	4/6			3/3
Jennifer Owens	2/2	2/2		
Kevin O'Higgins	2/2	1/1		
Suzanna O'Toole	1/2		1/1	
Louise Jennings	2/4			2/2
Martin Markey	4/4	4/4	0/1	
Sean Sheridan	3/4	3/3		2/2

Governance Through Board Committees

Finance, Audit & Risk Committee

The Finance, Audit and Risk Committee supports the Board in its oversight of key financial and governance areas, including financial reporting, external audit, internal controls, risk management, budgeting, financial performance, and monitoring the organisation's reserves and cashflow position.

The Committee reviews and makes recommendations to the Board on the annual budget, management accounts, audited financial statements, and the organisational risk register. During 2025, the Committee's Terms of Reference were reviewed and updated to strengthen its oversight in areas including financial reporting, audit, internal controls, and membership.

Following changes to Board composition during the year, the Committee was reconstituted and a new Chair, Jennifer Owens was appointed. The Committee comprises the Chair and three Board members. Members of the senior leadership team and external advisors attend meetings as required. The Committee met on five occasions during 2025.

Nominations Committee

The Nominations Committee supports the Board in overseeing Board composition, succession planning, and appointments.

Its responsibilities include reviewing Board skills, experience and diversity; identifying and recommending candidates for Board vacancies; supporting succession planning, including for the role of Chair; and overseeing the recruitment and recommendation of candidates for the position of CEO.

During 2025, the Committee's Terms of Reference were reviewed and updated to strengthen its role in Board composition, succession planning, and appointments. The Committee also considers applications for membership of the Coalition and makes recommendations to the Board.

The Committee comprises four Board members, including the Chair, Stephanie Manahan. Following changes to Board composition during 2025, the Committee was reconstituted with updated membership and a new Chair. The Committee met on five occasions during 2025.

Fundraising Advisory Committee

The Fundraising Advisory Committee supports the organisation in strengthening its fundraising approach and explores opportunities to enhance income generation. Its responsibilities include advising on fundraising strategy and supporting the development of sustainable income streams.

During 2025, following changes to Board composition, the Committee was reconstituted, with the appointment of a new Chair, Dr Sheila Gilheany. The Committee comprises three Board members, which is considered appropriate to support its functions. The Committee met on two occasions during 2025.

Board and Committee Development

The Board is committed to ensuring that its governance and committee structures remain effective and aligned with the organisation's evolving needs.

Following changes to Board composition during 2025, the Board undertook an internal assessment in early 2026, identifying areas of strength as well as areas for development. An external Board evaluation is planned to inform

development priorities and actions, and to support their implementation. This will also contribute to a review of committee structures during 2026 to ensure they remain aligned with the organisation's strategic priorities.

Governance Framework

The Board of Directors of MHR is committed to maintaining high standards of governance, including transparency and accountability.

In July 2025, a new Chair was appointed. Following this transition, the Board placed a renewed focus on strategic governance, including the introduction of dedicated strategic discussions at each Board meeting.

During the year, the Chair initiated targeted Board reflection exercises on organisational strategy and governance, which informed ongoing Board development, including an in-person Board workshop held in February 2026. This continued focus on governance is reflected in the organisation's adherence to the Governance Code.

In October 2025, Mental Health Reform completed its annual return in full compliance with the Charities Regulator's Governance Code. As a complex charity, the organisation adheres to the additional governance requirements set out in the Code.

Mental Health Reform also complies with relevant legal and regulatory frameworks, including:

- The Charities Regulator's Guidelines for Charitable Organisations on Fundraising from the Public
- The Companies Act 2014
- The Charities SORP (FRS 102), governing financial reporting for charities

Legal Compliance

MHR's Strategic Plan reflects the organisation's commitment to ensuring that the Board and management comply with all relevant legal and regulatory requirements, supported by appropriate financial and risk management controls.

During 2025, MHR met its key compliance obligations, including the timely submission of its Annual Report to the Charities Regulator and returns to the Companies Registration Office.

As required under the Regulation of Lobbying Act 2015, the organisation records all lobbying activity and communications with Designated Public Officials and made all required returns during the year.

The organisation also complies with the European Union (Anti-Money Laundering: Beneficial Ownership of Corporate Entities) Regulations 2019. As a company limited by guarantee and a registered charity, there are no beneficial owners; accordingly, the Directors and Chief Executive Officer are recorded as senior managing officials on the relevant register.

Environmental, Social and Governance (ESG)

In the 2024 Annual Report, MHR outlined its intention to undertake an ESG (Environmental, Social and Governance) review in 2025.

Due to organisational changes during the year, including senior leadership transition and staff resourcing pressures, this review did not progress as planned. In early 2026, the management team-initiated discussions on a more structured approach to ESG. These discussions will inform a phased approach to ESG development, with the intention of progressing this work during 2026.

Director's remuneration

All Directors serve in a voluntary, non-executive capacity and receive no remuneration or other benefits. In 2025, one Board member submitted an expense claim in respect of public transport costs incurred in attending an MHR event.

Staffing and Renumeration

The key management personnel of MHR in 2025 were Philip Watt, Interim CEO; Niamh Fahy, Communications and Engagement Manager; Stephen Sheil, Interim Communications and Engagement Manager; Dr Louise Rooney, Policy and Research Manager; and Wendy Mitchell, Finance, Operations and Governance Manager.

Following the conclusion of the Interim CEO appointment, Wendy Mitchell was appointed to the role of Head of Operations through an internal recruitment process, providing continuity of leadership while the organisation progressed the recruitment of a permanent Chief Executive Officer.

The average number of employees during the year was 9. While the total number of individuals employed during the year exceeded this figure, this reflects the average number of employees on a yearly basis. There were no volunteers during the year.

Fiona Coyle resigned from her role as Chief Executive Officer in June 2025 and received remuneration of €30,029.13 during the year. The incoming Chief Executive Officer, who joined in December 2025, received remuneration of €7,291.66. Both received a 5% employer contribution to a defined contribution pension. The Interim Chief Executive Officer received remuneration of €43,076.88, with no employer pension contributions made due to the short-term nature of the appointment.

The Chief Executive Officer and Interim Chief Executive Officer are appointed by the Board of Directors but are not members of the Board.

During the financial year, all staff were remunerated within the following salary bands:

- €0.00 - €19,999: 2 employees
- €20,000 - €29,999: 2 employees
- €30,000 - €39,999: 7 employees
- €40,000 - €49,999: 2 employees
- €50,000 - €59,999: 0 employees
- €60,000 - €69,999: 1 employee

People and Organisation

During 2025, the organisation experienced a period of significant staff transition, including changes in senior leadership and across the team. This required a focused programme of recruitment to ensure continuity of operations and delivery of funded programmes.

This period of transition was actively managed by the senior leadership team, the Board, and the Chair, ensuring continuity of operations and delivery of organisational priorities. Key roles were successfully filled during the year, supporting organisational capacity during a period of transition.

During this period, priority was given to the induction and integration of new team members, ensuring they were supported to meet role requirements and programme objectives. The organisation-maintained delivery of its core programmes and commitments during the year.

MHR remains committed to supporting staff development and creating an environment where employees can grow and contribute effectively. Formal performance management processes remained in place during this period, with an increased focus on supporting staff through induction and role integration.

Appropriate systems are in place to support performance management processes and to track staff training and development.

In March 2025, following a Workplace Relations Commission (WRC) agreement relating to Section 39 organisations, MHR received additional funding which enabled the organisation to implement salary increases for staff. This was an important step in supporting staff and strengthening the organisation's ability to recruit and retain talent.

This period also provided opportunities to support staff development and progression, including:

- The promotion of a staff member to Interim Communications and Engagement Manager following a competitive recruitment process
- The participation and completion of structured mentoring opportunities by staff
- Members of the Senior Leadership Team assuming additional responsibilities during a period of organisational transition, with appropriate oversight

These developments reflect a continued focus on supporting staff growth and building internal capability. The organisation enters 2026 with a strengthened team and renewed focus on delivery of its strategic priorities. A People and Culture Strategy is being progressed as a priority to support staff development and organisational effectiveness.

Risk Management

MHR actively manages its principal risks through a structured and transparent process. A comprehensive Risk Register is maintained to identify key financial, reputational, operational, strategic, legal, environmental, and other relevant risks. Each risk is assessed for likelihood and impact, and appropriate mitigation controls are implemented to manage them effectively.

In June 2025, the Board undertook a review of the Risk Register to assess the continued relevance of identified risks, the appropriateness of mitigation measures, and the policies in place to support those mitigations.

Risk oversight is embedded within MHR's governance structures at all levels:

- The Senior Leadership Team reviews the full Risk Register on a bi-monthly basis, ensuring that risks across all operational areas are actively monitored and addressed.
- The Finance, Audit & Risk Committee reviews the Risk Register at each of its meetings, with a particular focus on the identification of new risks, changes to the likelihood or impact of existing risks, and the effectiveness of current mitigation measures.
- The Board of Directors receives updates on key changes to the Risk Register at every Board meeting. This includes recommendations for any necessary adjustments to internal procedures, policies, or resource allocation in response to emerging or evolving risks.
- identification of new risks, changes to the likelihood or impact of existing risks, and the effectiveness of current mitigation measures.
- The Board of Directors receives updates on key changes to the Risk Register at every Board meeting. This includes recommendations for any necessary adjustments to internal procedures, policies, or resource allocation in response to emerging or evolving risks.

Key Risk Themes in 2025

A number of key risk areas continued to be actively managed during 2025, reflecting both internal operational capacity challenges and the external funding environment in which MHR operates.

- Staff retention and organisational capacity remained a significant risk during the year. While vacancies that arose in late 2024 and early 2025 were filled by mid-year, the organisation experienced a period of reduced capacity, including at senior leadership level. Pay competitiveness across the sector also continues to present an ongoing challenge in retaining staff, particularly in the context of wider public sector pay dynamics. To support retention and provide greater stability, the Board approved a transition from fixed - term to permanent contracts for core staff.

- Over-reliance on statutory funding and limited unrestricted income remained a key strategic risk. Capacity constraints during the year meant that planned activities to grow and diversify income streams — including the development and delivery of training programmes and the expansion of corporate partnerships — were not progressed as intended. As a result, the organisation remained reliant on statutory funding, with a continued impact on its ability to build unrestricted reserves. Operational focus was prioritised on the delivery of funded programme outputs in line with grant agreements.

- Funding certainty and sustainability continued to present a risk. A significant proportion of funding remains short-term in nature, requiring annual or periodic reapplication. This creates an ongoing level of uncertainty for forward planning and reinforces the importance of developing more sustainable and diversified income streams.

- Stakeholder engagement and reputational risk remained an inherent aspect of MHR's work. As a national organisation working across a diverse membership base and engaging with a wide range of stakeholders, there is an ongoing risk associated with differing perspectives and expectations. This includes the potential for reputational impact arising from misinformation or misunderstanding in relation to MHR's activities, advocacy positions, or those of the wider charity sector. This was further heightened during a period of senior leadership transition. The risk has been managed through strengthened internal procedures and policies, including the implementation of communications framework guidelines and sign-off structures, together with ongoing engagement with members and stakeholders, including through sector representative bodies such as The Wheel.

- ICT systems and data security remained an operational risk area. During the year, improvements were made to strengthen controls, including enhanced password management, system access controls, and the introduction of a software policy. Further work is planned to continue strengthening the organisation's cybersecurity framework

Investment policy

MHR does not hold any fixed or cash assets for the purposes of investing, therefore the organisation does not have an Investment Policy.

Excerpts of **Experience**

Working with MHR has been quite the cathartic journey. I had been steeped in shame and silenced by many of the experiences I endured whilst in receipt of services. Speaking about them and feeling heard and valued has helped to begin to dissolve and transmute that shame into something more powerful.

My involvement is helping to bring meaning to some of the darkest aspects of my experiences. It has aided the integration process as well as allowing me to feel hope and solidarity as I experience others being passionate about bringing change for the betterment of all in receipt and delivery of services.

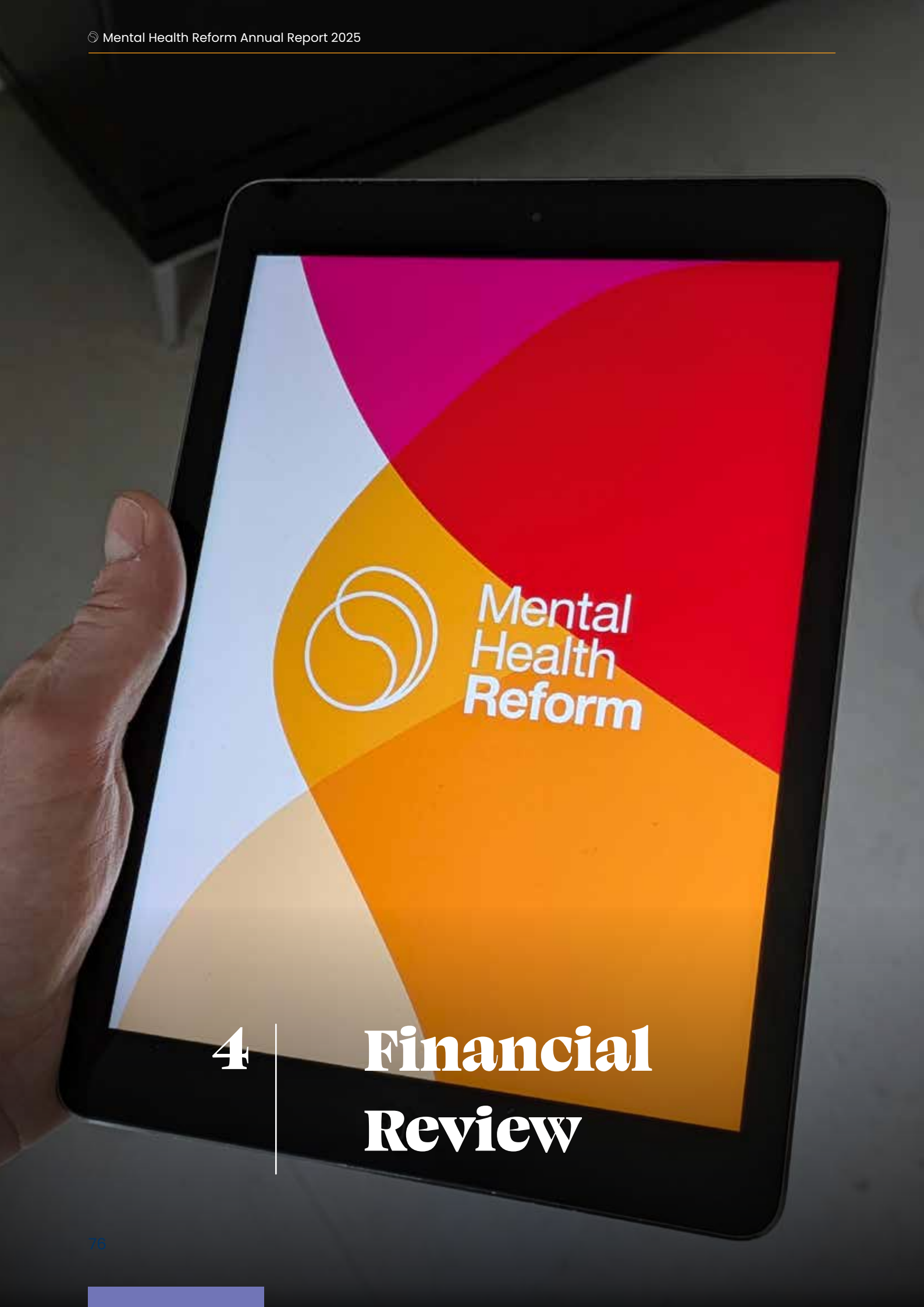
I have experienced a shift away from tokenistic advocacy towards something of greater respect and value. As well as potentially influencing some decisions it also allows for the development of community and the possible potential for a slow and steady return to trust.

Speaking aloud the name of my great grandmother, Mary Moore, (who was sadly lost to psychiatry many years ago) in Leinster House remains one of my most bittersweet moments to date.

Thank you for that opportunity.

Nicola Clare

Expert by Experience



4 Financial Review

Directors' Annual Report

for the financial year ended 31 December 2025

The financial results for 2025 are outlined in the Statement of Financial Activities.

Total income for the year amounted to €653,174, representing a 24.6% decrease compared to 2024. This reduction reflects lower expenditure during the year, as income is not drawn down where related costs are not incurred.

Staff costs decreased to €539,613 in 2025, compared to €651,451 in 2024. This reduction primarily reflects a period during which the organisation operated without a Chief Executive Officer following the conclusion of an interim appointment, together with a number of staff vacancies during the year, resulting in a temporary underspend on salaries

In 2025, MHR generated income across a number of streams, including fundraising and donations, training delivery, membership fees and other income.

Fundraising and donations generated €2,264 during the year. Training delivery generated €13,927 in 2025 and is presented as a separate income stream, reflecting the completion of the pilot phase in 2024 and the continued development of this area. In the prior year, income from this activity was included within fundraising and donations.

MHR also generated €25,871 in other income including income from speaking engagements and unrestricted grants.

Membership income remained strong at €38,920, consistent with the prior year and reflecting continued engagement from member organisations. The organisation also intends to further grow its membership base in the coming years.

On a comparable basis, total self-generated income remained broadly consistent with 2024, decreasing slightly from €83,382 in 2024 to €80,982 in 2025, a reduction of approximately 2.9%.

MHR aims to expand its training delivery programme in 2026 and 2027 with incremental income targets and extended reach into the wider private and corporate sectors

Total expenditure in 2025 was €695,261, representing a 18.7% decrease compared to 2024 (€855,444). MHR incurred an overspend of €42,087 against its unrestricted budgeted expenditure in 2025, primarily reflecting a number of non-recurring and exceptional costs during the year, including senior leadership transition costs, additional professional support, and temporary staffing-related expenditure.

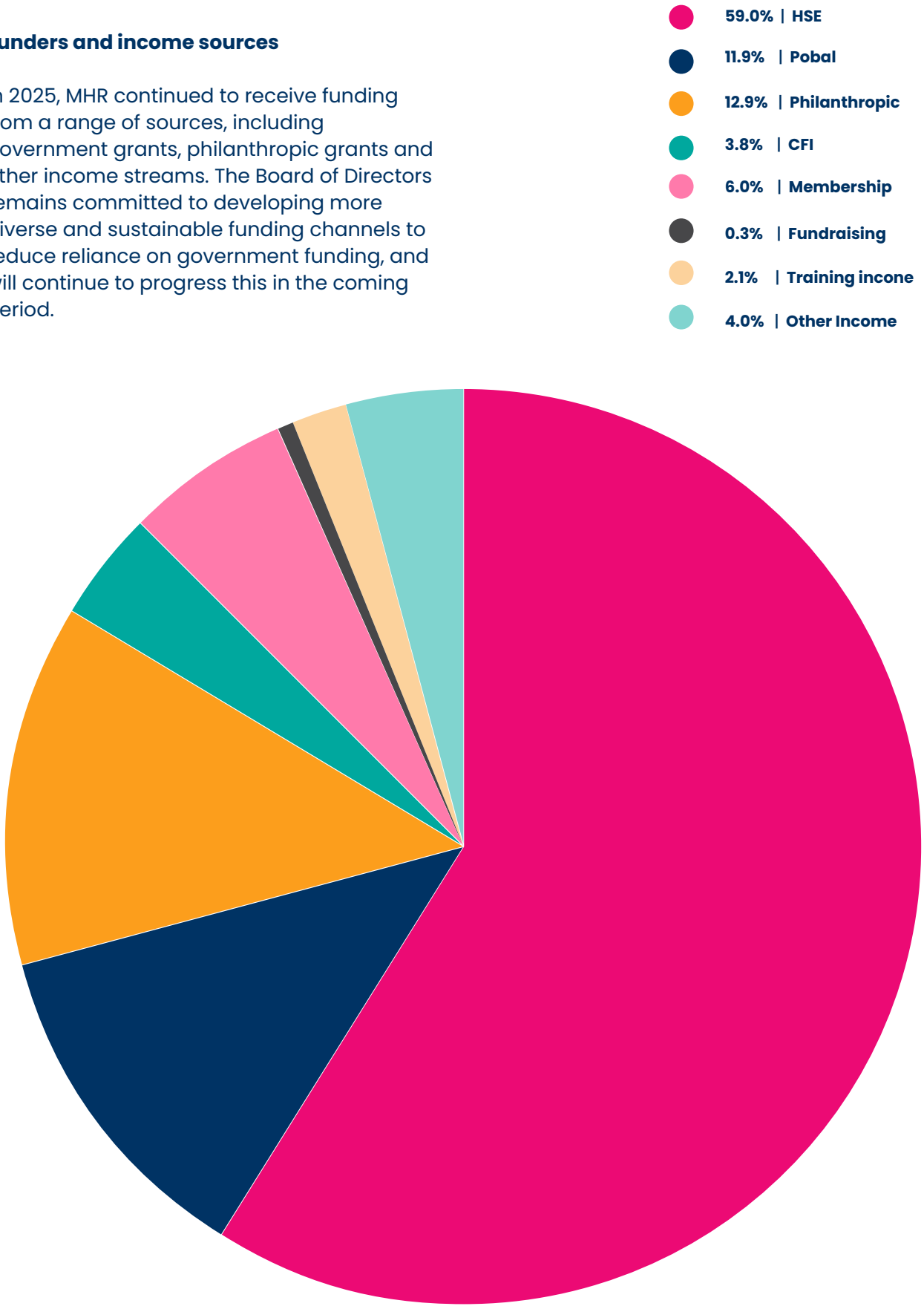
Expenditure includes:

- Programme and activity costs of €35,600, representing a 69.1% decrease from 2024 (€115,137). These costs accounted for approximately 5% of total expenditure.
- Staff costs of €539,613, representing a 17.2% decrease from 2024 (€651,451) and approximately 77.6% of total expenditure.

As MHR prepares its accounts on an accrual basis, €207,438 in income has been deferred into 2026. This deferral reflects funding received in advance for projects continuing as well as other new initiatives set to commence early in the new year.

Funders and income sources

In 2025, MHR continued to receive funding from a range of sources, including government grants, philanthropic grants and other income streams. The Board of Directors remains committed to developing more diverse and sustainable funding channels to reduce reliance on government funding, and will continue to progress this in the coming period.



Reserves policy

Mental Health Reform (MHR) operates under a Board-approved policy to maintain unrestricted reserves equivalent to a minimum of three months' average core expenditure.

Unrestricted reserves represent funds that have built up over time where income has exceeded expenditure, generating a surplus. These funds are not designated for specific purposes and are available to support the organisation's ongoing operations. They play an important role in maintaining financial stability and provide protection against unexpected events or costs. Maintaining such reserves is considered good practice for charities and supports the organisation's financial resilience.

These unrestricted reserves, as reflected in the financial statements, serve as a financial safeguard to:

- Provide a financial buffer to meet core operational costs, including staff salaries and contractual obligations, in the event of unforeseen shortfalls;
- Ensure the organisation can respond to emergencies or sudden changes in funding without compromising strategic objectives;
- Support effective planning, risk management, and financial sustainability.

The Finance, Audit and Risk Committee and the Board review unrestricted reserve levels on a bi-monthly basis, ensuring that they remain a core component of MHR's planning, budgeting, and forecasting processes, and form part of the organisation's overall risk management framework.

As of 31 December 2025, MHR held unrestricted reserves of €149,975, against an average monthly core expenditure of €54,972, equivalent to approximately 2.7 months of expenditure.

Over the past two years, the organisation's unrestricted reserves have been impacted by a number of exceptional and largely non-recurring costs, including maternity leave cover, CEO recruitment consultancy fees, and additional HR support. As a result, reserves were maintained below the previous target level of four months' core operating expenditure.

As of the end of Q1 2026, unrestricted reserves have recovered to a level equivalent to three months' core operating expenditure. In light of this, and to ensure alignment with the organisation's current financial position and provide a realistic and achievable benchmark, the reserves policy has been revised from four months to three months.

This revised target maintains an appropriate level of financial resilience while providing a realistic and sustainable benchmark.

The unrestricted reserves position will be kept under review, with a formal reassessment planned at year-end 2026. The revised reserves policy is supported by the organisation's fundraising plans and financial projections for 2026. At the time of publication, MHR is operating in line with its reserves target and will continue to monitor performance against this throughout the year.

Going Concern

The organisation has cash and cash equivalents of (€363,688.00) as at 31st December 2025. The Directors are in a position to manage the activities of the organisation such that existing funds available, together with confirmed funding and anticipated recurring funding streams, will be sufficient to meet the organisation's obligations and to continue as a going concern for a period of at least 12 months from the date of approval of these financial statements. On that basis, the Directors do not consider that a material uncertainty exists in relation to going concern and have deemed it appropriate to prepare the financial statements on a going concern basis. The financial statements do not include any adjustments that would result if the organisation was unable to continue as a going concern.

The Auditors

Whelan Dowling & Associates was appointed as auditor for the organisation at the AGM on 22nd July 2025. The auditors, Whelan Dowling & Associates, (Chartered Accountants) continue in office in accordance with the provisions of section 383(2) of the Companies Act 2014.

Statement on Relevant Audit Information

In accordance with section 330 of the Companies Act 2014, so far as each of the persons who are directors at the time this report is approved are aware, there is no relevant audit information of which the statutory auditors are unaware. The directors have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and they have established that the statutory auditors are aware of that information.

Compliance Statement

The directors are responsible for securing the company's compliance with its relevant obligations (compliance with both company and tax law) and with respect to each of the following three items, we confirm that it has/ has not been done. We confirm:"

- the existence of a compliance policy statement;
- appropriate arrangements or structures put in place to secure material compliance with the company's relevant obligations;
- a review of such arrangements and structures has taken place during the financial year

Accounting Records

To ensure that adequate accounting records are kept in accordance with sections 281 to 285 of the Companies Act 2014, the directors have employed appropriately qualified accounting personnel and have maintained appropriate computerised accounting systems. The accounting records are located at the company's office at Carmichael House, 4 Brunswick St., Dublin 7.

Approved by the Board of Directors on 24 June 2026 and signed on its behalf by:

Dr Judith Malone
Director

Dr Sheila Gilheaney
Director

Directors' Responsibilities Statement

for the financial year ended 31 December 2025

The directors are responsible for preparing the Directors' Annual Report and Financial Statements in accordance with the Companies Act 2014 and applicable regulations.

Irish company law requires the directors to prepare financial statements for each financial year. Under the law the directors have elected to prepare the financial statements in accordance with the Companies Act 2014 and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" issued by the Financial Reporting Council. Under company law, the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the charity as at the financial year end date and of the net income or expenditure of the charity for the financial year and otherwise comply with the Companies Act 2014. In preparing these financial statements, the directors are required to:

- select suitable accounting policies and apply them consistently;
- make judgements and accounting estimates that are reasonable and prudent;
- state whether the financial statements have been prepared in accordance with applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The directors confirm that they have complied with the above requirements in preparing the financial statements.

As explained in note 4, state whether the applicable in the UK and Republic of Ireland FRS 102 has been followed;

The directors are responsible for ensuring that the charity keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the charity, enable at any time the assets, liabilities, financial position and net income or expenditure of the charity to be determined with reasonable accuracy, enable them to ensure that the financial statements and the Directors' Annual Report comply with Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the directors are aware:

- there is no relevant audit information (information needed by the charity's auditor in connection with preparing the auditor's report) of which the charity's auditor is unaware, and
- the directors have taken all the steps that they ought to have taken as directors in order to make themselves aware of any relevant audit information and to establish that the charity's auditor is aware of that information.

Approved by the Board of Directors on 24 June 2026 and signed on its behalf by:

Dr Judith Malone
Director

Dr Sheila Gilheaney
Director

Independent Auditor's'Report

to the members of Mental Health Reform

Report on the audit of the financial statements

Opinion
We have audited the charity financial statements of Mental Health Reform ('the Charity') for the financial year ended 31 December 2025 which comprise the Statement of Financial Activities (incorporating an Income and Expenditure Account), the Balance Sheet, the Statement of Cash Flows and the notes to the financial statements, including the summary of significant accounting policies set out in note 2. The financial reporting framework that has been applied in their preparation is Irish law and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with FRS 102.

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the Charity as at 31 December 2025 and of its deficit for the financial year then ended;
- have been properly prepared in accordance with FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland"; and
- have been properly prepared in accordance with the requirements of the Companies Act 2014.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described below in the Auditor's responsibilities for the audit of the financial statements section of our report.

We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of financial statements in Ireland, including the Ethical Standard for Auditors (Ireland) issued by the Irish Auditing and Accounting Supervisory Authority (IAASA), and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the directors' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from the date when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the directors with respect to going concern are described in the relevant sections of this report.

Other Information

The directors are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our Auditor's Report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2014

In our opinion, based on the work undertaken in the course of the audit, we report that:

- The information given in the Directors' Annual Report is consistent with the financial statements;
- The Directors' Annual Report has been prepared in accordance with the Companies Act 2014; and
- We have obtained all the information and explanations which, to the best of our knowledge and belief, are necessary for the purposes of our audit.

In our opinion the accounting records of the charity were sufficient to permit the financial statements to be readily and properly audited and the financial statements are in agreement with the accounting records.

Respective responsibilities

Responsibilities of directors for the financial statements

As explained more fully in the Directors' Responsibilities Statement set out on page 9, the directors are responsible for the preparation of the financial statements in accordance with the applicable financial reporting framework that give a true and fair view, and for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless they either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's Report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Further information regarding the scope of our responsibilities as auditor

As part of an audit in accordance with ISAs (Ireland), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the charity's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by directors.

- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditor's Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our Auditor's Report. However, future events or conditions may cause the charity to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

The purpose of our audit work and to whom we owe our responsibilities

Our report is made solely to the charity's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the charity's members those matters we are required to state to them in an Auditor's Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

Sean Whelan FCA
for and on behalf of

WHELAN DOWLING & ASSOCIATES
Chartered Accountants and Statutory Auditors
Block 1, Unit 1 & 4,
Northwood Court
Santry
Dublin 9

24 June 2026

Board members and MHR staff pictured at a planning session.

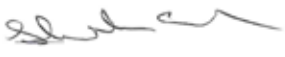
Statement of Financial Activities

(Incorporating an Income and Expenditure Account)
for the financial year ended 31 December 2025

	Notes	Unrestricted Funds 2025 €	Restricted Funds 2025 €	Total Funds 2025 €	Unrestricted Funds 2024 €	Restricted Funds 2024 €	Total Funds 2024 €
Income							
Donations and legacies	6.1	**40,623**	**-**	**40,623**	42,277	-	42,277
Charitable activities • Statutory and philanthropic grants	6.2	**-**	**572,192**	**572,192**	-	782,779	782,779
Other trading activities	6.3	**40,359**	**-**	**40,359**	41,105	-	41,105
Total income		**80,982**	**572,192**	**653,174**	**83,382**	**782,779**	**866,161**
Expenditure							
Raising funds	7.1	**-**	**-**	-	1,491	-	1,491
Charitable activities	7.2	**123,069**	**572,192**	**695,261**	79,125	774,828	853,953
Total Expenditure		**123,069**	**572,192**	**695,261**	80,616	774,828	855,444
Net income/ (expenditure)		**(42,087)**	**-**	**(42,087)**	2,766	7,951	10,717
Transfers between funds		**-**	**-**	**-**	-	-	-
Net movement in funds for the financial year		**(42,087)**	**-**	**(42,087)**	**2,766**	**7,951**	**10,717**
Reconciliation of funds:							
Total funds beginning of the year	17	**192,062**	**-**	**192,062**	**189,296**	(7,951)	181,345
Total funds at the end of the year		**149,975**	**-**	**149,975**	**192,062**	**-**	**192,062**

Approved by the Board of Directors on 24 June 2026 and signed on its behalf by:

Dr Judith Malone
Director



Dr Sheila Gilheaney
Director

Balance Sheet

as at 31 December 2025

	Notes	2025 €	2024 €
Current Assets			
Debtors	11	**11,587**	5,765
Cash at bank and in hand	12	**363,688**	313,988
		375,275	319,753
Creditors: Amounts falling due within one year	13	**(225,300)**	(127,691)
Net Current Assets		**149,975**	192,062
Total Assets less Current Liabilities		**149,975**	192,062
Funds			
General fund (unrestricted)		**149,975**	192,062
Total funds	17	**149,975**	192,062

Approved by the Board of Directors on 24 June 2026 and signed on its behalf by:

Dr Judith Malone
Director

Dr Sheila Gilheaney
Director

Statement of Cash Flows

for the financial year ended 31 December 2025

Cash flows from operating activities	Notes	2025 €	2024 €
Net movement in funds		**(42,087)**	10,717
		(42,087)	10,717
Movements in working capital:			
• Movement in debtors		**(5,822)**	(3,380)
• Movement in creditors		**97,609**	(20,179)
Cash generated from/(used in) operations		**49,700**	(12,842)
Net increase/(decrease) in cash and cash equivalents		**49,700**	(12,842)
Cash and cash equivalents at the beginning of the year		**313,988**	326,830
Cash and cash equivalents at the end of the year	12	**363,688**	313,988

Approved by the Board of Directors on 24 June 2026 and signed on its behalf by:

Dr Judith Malone
Director

Dr Sheila Gilheaney
Director

Notes to the Financial Statements

for the financial year ended 31 December 2025

1. GENERAL INFORMATION

Mental Health Reform is a company limited by guarantee incorporated in Ireland. The registered office of the charity is Carmichael House, 4 Brunswick St., Dublin 7 which is also the principal place of business of the charity. The financial statements have been presented in Euro (€) which is also the functional currency of the charity.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the charity's financial statements.

Basis of preparation

The financial statements have been prepared under the historical cost convention, modified to include certain items at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland FRS 102".

The Charity has applied the Charities SORP on a voluntary basis as its application is not a requirement of the current regulations for charities registered in the Republic of Ireland. As permitted by the Companies Act 2014, the charity has varied the standard formats in that act for the Statement of Financial Activities and the Balance Sheet. Departures from the standard formats, as outlined in the Companies Act 2014, are to comply with the requirements of the Charities SORP and are in compliance with section 4.7, 10.6 and 15.2 of that SORP.

Statement of compliance

The financial statements of the charity for the financial year ended 31 December 2025 have been prepared on the going concern basis and in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland FRS 102".

Fund accounting

The following are the categories of funds maintained:

Restricted funds

Restricted funds represent income received which can only be used for particular purposes, as specified by the donors. Such purposes are within the overall objectives of the charity.

Unrestricted funds

Unrestricted funds consist of General and Designated funds.

- General funds represent amounts which are expendable at the discretion of the board, in furtherance of the objectives of the charity.
- Designated funds comprise unrestricted funds that the board has, at its discretion, set aside for particular purposes. These designations have an administrative purpose only, and do not legally restrict the board's discretion to apply the fund.

Income

Income is recognised by inclusion in the Statement of Financial Activities only when the charity is legally entitled to the income, performance conditions attached to the item(s) of income have been met, the amounts involved can be measured with sufficient reliability and it is probable that the income will be received by the charity.

Donations and membership

Income is recognised at the fair value of the donations received or receivable. Donations with restrictions or conditions attached shall be recognised as income if the restrictions and conditions are under the Company's purview and it is probable that these restrictions and conditions will be met. Otherwise, these donations are recognised as deferred income until the above criteria are fulfilled or when the restrictions or conditions expire.

Income from charitable activities

Income from charitable activities include income earned from the supply of services under contractual arrangements and from performance related grants which have conditions that specify the provision of particular services to be provided by the charity. Income from government and other co-funders is recognised when the charity is legally entitled to the income because it is fulfilling the conditions contained in the related funding agreements. Where a grant is received in advance, its recognition is deferred and included in creditors. Where entitlement occurs before income is received, it is accrued in debtors.

Grants from governments and other co-funders typically include one of the following types of conditions:

- Performance based conditions: whereby the charity is contractually entitled to funding only to the extent that the core objectives of the grant agreement are achieved. Where the charity is meeting the core objectives of a grant agreement, it recognises the related expenditure, to the extent that it is reimbursable by the donor, as income.
- Time based conditions: whereby the charity is contractually entitled to funding on the condition that it is utilised in a particular period. In these cases the charity recognises the income to the extent it is utilised within the period specified in the agreement.

In the absence of such conditions, assuming that receipt is probable and the amount can be reliably measured, grant income is recognised once the charity is notified of entitlement.

Grants received towards capital expenditure are credited to the Statement of Financial Activities when received or receivable, whichever is earlier.

Expenditure

Expenditure is analysed between costs of charitable activities and raising funds. The costs of each activity are separately accumulated and disclosed, and analysed according to their major components. Expenditure is recognised when a legal or constructive obligation exists as a result of a past event, a transfer of economic benefits is required in settlement and the amount of the obligation can be reliably measured. Support costs are those functions that assist the work of the charity but cannot be attributed to one activity. Such costs are allocated to activities in proportion to staff time spent or other suitable measure for each activity.

Allocation of support funds

Support costs are those functions that assist the work of the Charity but do not directly undertake charitable activities. Support costs include general management and back office costs, IT, finance, HR, payroll and governance costs which support the Charity's programmes and activities. These costs have been allocated between cost of raising funds and expenditure on charitable activities. The bases on which support costs have been allocated are set out in note 6.

Debtors

Debtors are recognised at the settlement amount due after any discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due. Income recognised by the charity from government agencies and other co-funders, but not yet received at financial year end, is included in debtors.

Trade and other creditors

Trade and other creditors are initially recognised at fair value and thereafter stated at amortised cost using the effective interest rate method, unless the effect of discounting would be immaterial, in which case they are stated at cost.

Cash at bank and in hand

Cash at bank and in hand comprises cash on deposit at banks requiring less than three months notice of withdrawal.

Taxation

No current or deferred taxation arises as the charity has been granted charitable exemption, charity number 20078737 (CHY number: 19958). Irrecoverable valued added tax is expensed as incurred.

Grants receivable

Grants are accounted under the performance model as permitted by FRS 102. Grants relating to expenditure on tangible fixed assets are credited to the statement of financial activities at the same rate as the depreciation on the assets to which the grant relates. The deferred element of grants is included in creditors as deferred income.

Pensions

The charity operates a defined contribution pension scheme for employees. The assets of the scheme are held separately from those of the charity. Annual contributions payable to the charity's pension scheme are charged to the income and expenditure account in the period to which they relate

Financial Instruments

The Company only enters into basic financial instrument transactions that result in the recognition of financial assets and liabilities like trade and other debtors and creditors, loans from banks and other third parties, loans to related parties and investments in ordinary shares.

Debt instruments (other than those wholly repayable or receivable within one year), including loans and other accounts receivable and payable, are initially measured at present value of the future cash flows and subsequently at amortised cost using the effective interest method. Debt instruments that are payable or receivable within one year, typically trade debtors and creditors, are measured, initially and subsequently, at the undiscounted amount of the cash or other consideration expected to be paid or received. However, if the arrangements of a short-term instrument constitute a financing transaction, like the payment of a trade debt deferred beyond normal business terms or in case of an out-right short-term loan that is not at market rate, the financial asset or liability is measured, initially at the present value of future cash flows discounted at a market rate of interest for a similar debt instrument and subsequently at amortised cost, unless it qualifies as a loan from a director in the case of a small company, or a public benefit entity concessionary loan.

Financial assets that are measured at cost and amortised cost are assessed at the end of each reporting period for objective evidence of impairment. If objective evidence of impairment is found, an impairment loss is recognised in the Profit and Loss Account.

For financial assets measured at amortised cost, the impairment loss is measured as the difference between an asset's carrying amount and the present value of estimated cash flows discounted at the asset's original effective interest rate. If a financial asset has a variable interest rate, the discount rate for measuring any impairment loss is the current effective interest rate determined under the contract.

For financial assets measured at cost less impairment, the impairment loss is measured as the difference between an asset's carrying amount and best estimate of the recoverable amount, which is an approximation of the amount that the Company would receive for the asset if it were to be sold at the balance sheet date.

Financial assets and liabilities are offset and the net amount reported in the Balance Sheet when there is an enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

3. SIGNIFICANT ACCOUNTING JUDGEMENTS AND KEY SOURCES OF ESTIMATION UNCERTAINTY

The preparation of these financial statements requires management to make judgements, estimates and assumptions that affect the application of policies and reported amounts of assets and liabilities, income and expenses. Judgements and estimates are continually evaluated and are based on historical experiences and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The company makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

4. GOING CONCERN

The directors have prepared budgets and cash flows for a period of at least twelve months from the date of the approval of the financial statements which demonstrate that there is no material uncertainty regarding the company's ability to meet its liabilities as they fall due, and to continue as a going concern. On this basis the directors consider it appropriate to prepare the financial statements on a going concern basis. Accordingly, these financial statements do not include any adjustments to the carrying amounts and classification of assets and liabilities that may arise if the company was unable to continue as a going concern.

5. CRITICAL ACCOUNTING JUDGEMENT AND ESTIMATES

Useful economic lives of tangible fixed assets

The annual depreciation on tangible fixed assets is sensitive to changes in the estimated useful economic lives and residual values of the assets. The useful economic lives and residual values are reviewed annually. They are amended when necessary to reflect current estimates, based on technological advancement, future investments, economic utilisation and the physical condition of the assets. See note 8 for the carrying amount of the tangible fixed assets.

Income recognition

In applying the income recognition principles of the Charities SORP, judgements are occasionally required to ascertain whether a grant agreement is performance or non-performance based. This is done using established criteria that are applied consistently across all funding instruments and from one period to the next. Furthermore, where grant agreements are found to be performance based, judgements are required as to the level of income that should be recognised for the year. All judgements are made at the individual grant level and are subject to appropriate review and approval processes.

6. INCOME

6.1	DONATIONS AND LEGACIES	Unrestricted Funds	Restricted Funds	2025	2024
		€	€	€	€
	Donations	1,703	-	1,703	1,719
	Membership	38,920	-	38,920	40,558
		40,623	-	40,623	42,277

6.2	CHARITABLE ACTIVITIES	Unrestricted Funds	Restricted Funds	2025	2024
		€	€	€	€
	Grants from governments and other co-funders:				
	HSE Grant	-	**385,553**	**385,553**	424,104
	Mental Health Ireland	-	-	-	3,083
	IHREC 2023-2024	-	-	-	10,870
	The Giving Circle	-	-	-	3
	Children & Youth MH Project (CYMHP)	-	**84,002**	**84,002**	182,161
	Community Foundation Ireland (Social Inclusion)	-	**24,686**	**24,686**	64,797
	Department of Children, Equality, Disability, Integration and Youth	-	-	-	9,999
	Pobal funding SSNO 2022-2026	-	**77,951**	**77,951**	87,762
		-	**572,192**	**572,192**	782,779

6.3	OTHER TRADING ACTIVITIES	Unrestricted Funds	Restricted Funds	2025	2024
		€	€	€	€
	Other income	**25,871**	-	**25,871**	20,643
	Fundraising income	**561**	-	**561**	20,462
	Training	**13,927**	-	**13,927**	-
		40,359	-	**40,359**	41,105

7. EXPENDITURE

7.1	RAISING FUNDS	Direct Costs	Other Costs	Support Costs	2025	2024
		€	€	€	€	€
	Raising funds	-	-	-	-	1,491

7.2	CHARITABLE ACTIVITIES	Direct Costs	Other Costs	Support Costs	2025	2024
		€	€	€	€	€
	Expenditure on charitable activities	-	-	**687,616**	**687,616**	846,888
	Governance Costs (Note 7.3)	-	-	**7,645**	**7,645**	7,065
		-	-	**695,261**	**695,261**	853,953

7.3	GOVERNANCE COSTS	Direct Costs	Other Costs	Support Costs	2025	2024
		€	€	€	€	€
	Audit fees	-	-	**3,690**	**3,690**	3,690
	Internal audit and governance	-	-	**3,955**	**3,955**	3,375
		-	-	**7,645**	**7,645**	7,065

7.4	SUPPORT COSTS	Charitable Activities	Governance Costs	2025	2024
		€	€	€	€
	Running costs	**112,403**	**7,645**	**120,048**	88,856
	Staff Costs	**539,613**	-	**539,613**	651,451
	Consultation, education and advocacy costs	**35,600**	-	**35,600**	115,137
		687,616	**7,645**	**695,261**	855,444

8. ANALYSIS OF SUPPORT COSTS

	2025	2024
	€	€
Running costs	**120,048**	88,856
Staff Costs	**539,613**	651,451
Consultation, education and advocacy costs	**35,600**	115,137
	695,261	855,444

9. EMPLOYEES AND REMUNERATION

Number of employees

The average number of persons employed (including executive directors) during the financial year was as follows:

	2025	2024
	Number	Number
Employee	**9**	10

The staff costs comprise:	**2025**	2024
	€	€
Wages and salaries	**468,700**	574,467
Social security costs	**48,367**	56,289
Pension costs	**12,514**	20,695
Compensation payment	**10,032**	-
	539,613	651,451

10. EMPLOYEE BENFITS

The number of employees whose total employee benefits (excluding employer pension costs) for the reporting period fell within the bands below were:

	2025	2024
	Number of Employees	Number of Employees
€0 - €60,000	**11**	11
€60,000 - €70,000	**1**	1
€80,000 - €90,000	**-**	1

The average number of employees during the year was 9. While the total number of individuals employed during the year exceeded this figure, this reflects the average number of employees on a yearly basis. There were no volunteers during the year.

Fiona Coyle resigned from her role as Chief Executive Officer in June 2025 and received remuneration of €30,029.13 during the year. The incoming Chief Executive Officer, who joined in December 2025, received remuneration of €7,291.66. Both received a 5% employer contribution to a defined contribution pension. The Interim Chief Executive Officer received remuneration of €43,076.88, with no employer pension contributions made due to the short-term nature of the appointment.

The Chief Executive Officer and Interim Chief Executive Officer are appointed by the Board of Directors but are not members of the Board.

Included in note 9 above is a statutory redundancy payment made to a former employee during the year.

11. DEBTORS

	2025	2024
	€	€
Other debtors	**6,502**	3,222
Prepayments	**5,085**	2,543
	11,587	5,765

12. CASH AND CASH EQUIVALENTS

	2025	2024
	€	€
Cash and bank balances	**363,688**	313,988

13. CREDITORS

	2025	2024
Amounts falling due within one year	€	€
Trade creditors	**2,189**	1,538
Taxation and social security costs	**12,667**	18,962
Other creditors	**828**	1,601
Pension accrual	**(1,512)**	(817)
Accruals	**3,690**	3,690
Deferred Income	**207,438**	102,717
	225,300	127,691

14. PENSION COSTS - DEFINED CONTRIBUTION

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in an independently administered fund. Pension costs amounted to €12,514 (2024 - €20,695).

The Company allocates the defined contribution plan pension liability and expense between restricted and unrestricted funding depending on whether the funding for the employment is restricted or unrestricted.

15. STATE FUNDING

Agency	Pobal
Government Department	Department of Social Protection
Grant Programme	Statutory Scheme for National Organisations
Purpose of the Grant	To fund three core positions, along with a contribution to overhead costs and staff training and development. The positions will contribute to increased representation and/or advocacy plans developed and actioned; strengthened research/policy development and implementation; and strengthened community and voluntary sector with improved collaborations and partnerships among organisations.
Term	01/07/2022 until 30/06/2026
Total Fund	€363,771
Expenditure	€77,951
Fund deferred or due at financial year end	€16,467
Received in the financial year	€94,418
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA
Agency	**Department of Health**
Government Department	HSE
Grant Programme	Mental Health Community Operations
Purpose of the Grant	Fund core services
Term	1st January 2025 until 31 December 2025
Total Fund	€429,561 for core finding. (Addiitonal WRC payment: €12,589)
Expenditure	€385,553
Fund deferred or due at financial year end	€56,597
Received in the financial year	€442,150
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA
Agency	**Department of Health**
Government Department	HSE
Grant Programme	Digital Divide
Purpose of the Grant	Deliver Digital Divide Report
Term	1st January 2022 until 31 December 2022
Total Fund	-
Expenditure	-
Fund deferred or due at financial year end	€124
Received in the financial year	€NIL
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA

NOTE 1

The State's investment is protected and will not be used as security for any other activity without prior consultation with the HSE (insert as appropriate).

NOTE 2

The charity is compliant with Circular 44/2006 "Tax clearance procedures: grants, subsidies and similar type payments".

NOTE 3

The charity is compliant with Circular 13/2014 "Management of and Accountability for Grants from Exchequer Funds".

16. RESERVES

	2025	2024
	€	€
At the beginning of the year	**192,062**	181,345
(Deficit)/Surplus for the financial year	**(42,087)**	10,717
At the end of the year	**149,975**	192,062

17. FUNDS

17.1 RECONCILIATION OF MOVEMENT IN FUNDS	Unrestricted Funds	Total Funds
	€	€
At 1 January 2024	**189,296**	181,345
Movement during the financial year	**2,766**	10,717
At 31 December 2024	**192,062**	192,062
Movement during the financial year	**(42,087)**	(42,087)
At 31 December 2025	**149,975**	149,975

17.2 ANALYSIS OF MOVEMENTS ON FUNDS

	Balance 1-Jan 2025	Income	Expenditure	Transfers between funds	Balance 31-Dec 2025
	€	€	€	€	€
Restricted	-	572,192	572,192	-	-
Unrestricted funds					
Unrestricted General	192,062	80,982	123,069	-	149,975
Total funds	**192,062**	**653,174**	**695,261**	**-**	**149,975**

17.3 ANALYSIS OF NET ASSETS BY FUND

	Current assets	Current liabilities	Total
	€	€	€
Unrestricted general funds	375,275	(225,300)	149,975
	375,275	**(225,300)**	**149,975**

18. STATUS

The charity is limited by guarantee not having a share capital.
The liability of the members is limited.
Every member of the company undertakes to contribute to the assets of the company in the event of its being wound up while they are members, or within one financial year thereafter, for the payment of the debts and liabilities of the company contracted before they ceased to be members, and the costs, charges and expenses of winding up, and for the adjustment of the rights of the contributors among themselves, such amount as may be required, not exceeding € 1.

19. CAPITAL COMMITMENTS

The charity had no material capital commitments at the financial year-ended 31 December 2025.

20. CONTINGENT LIABILITIES

The company had no contingent liabilities at the financial year-ended 31 December 2025.

21. RELATED PARTY TRANSACTIONS

No remuneration or other benefits were paid, either directly or indirectly, to any member of the Board of Directors. In 2025, director expenses were claimed in the sum of €1,524.

22. POST-BALANCE SHEET EVENTS

There have been no significant events affecting the Charity since the financial year-end.

23. DEFERRED INCOME

	2025	2024
	€	€
Community Foundation Ireland (CFI-Brave New Connections 2.0)	**2,253**	2,253
Community Foundation Ireland (2024-2026)	**42,172**	28,608
SSNO - Pobal	**16,464**	3,472
HSE Core Funding	**92,921**	36,324
Giving Circle of Ireland	**3**	3
IHREC 2023-2024	**405**	405
HRB	**5,000**	-
Other (EMEN, Hospital Saturday Fund & Digital Divide)	**593**	543
Children & Youth Mental Health Project	**46,987**	30,989
HSE Digital Divide	**124**	124
Interest Income Deposit account	**516**	-
	207,438	102,722

The above amounts comprise monies received in respect of specific projects where the perfromance related tasks have not been completed at year-end. The funders are aware and have agreed to the deferral of these grants at year-end.

24. APPROVAL OF FINANCIAL STATEMENTS

The financial statements were approved and authorised for issue by the Board of Directors on 24 June 2026.

Mental Health Reform

Supplementary Information Relating To The Financial Statements

For The Financial Year Ended 31 December 2025

Not Covered By The Report Of The Auditors

Supplementary Information Relating To The Financial Statements

Operating Statement

for the financial year ended 31 December 2025

		2025	2024
	Schedule	€	€
Income			
- Donations and membership		**40,623**	42,277
- Grant 1 from charitable activities		**572,192**	788,151
- Fundraising income		**561**	15,090
- Income from charitable activities 2		**25,871**	15,271
- Income from charitable activities 3		**-**	5,372
- Income from charitable activities 4		**13,927**	-
		653,174	866,161
Charitable activities and other expenses	1	**(695,261)**	(855,444)
Net (deficit)/surplus		**(42,087)**	10,717

Supplementary Information Relating To The Financial Statements

Schedule 1: Charitable Activities And Other Expenses

for the financial year ended 31 December 2025

	2025	2024
	€	€
Expenses		
Wages and salaries	**478,732**	574,467
Social security costs	**48,367**	56,289
Staff defined contribution pension costs	**12,514**	20,695
Staff training	**2,176**	2,649
Workshops, seminars and study tours	**571**	9,241
Sundry advocacy expenses	**18,927**	74,787
Research costs	**-**	5,700
Communication supports	**3,630**	6,256
Rent, rates and utilities	**29,650**	28,508
Fundraising events	**-**	1,491
Insurance	**3,514**	3,194
Computer bureau costs	**2,214**	2,214
Office equipment	**17,035**	13,086
Repairs and maintenance	**566**	-
Printing, postage and stationery	**2,993**	2,593
Publications and materials	**10,258**	15,448
ICT (Telephone)	**2,968**	2,749
Travel and subsistence	**-**	2,193
Legal and professional	**-**	3,202
Consultancy fees	**31,266**	5,446
Accountancy and payroll	**15,413**	12,159
Internal audit costs/ Governance	**3,955**	3,375
Auditor's/Independent Examiner's remuneration	**3,690**	3,690
Bank charges	**202**	104
Staff welfare	**1,208**	492
General expenses	**-**	(1)
Subscriptions	**5,412**	5,417
	695,261	855,444

With special thanks

The Hospital Saturday Fund

HSE

Rialtas na hÉireann
Government of Ireland

pobal
government supporting communities

Community Foundation Ireland

The Scheme to Support National Organisations is funded by the Government of Ireland through the Department of Rural and Community Development.

Mental Health Reform

Mental Health Reform
Carmichael House,
4 Brunswick St N, Dublin,
D07 RHA8

T: 01 874 9468
E: info@mentalhealthreform.ie
CHY: 19958
REG NO: 506850

mentalhealthreform.ie