



## Therapeutic Relationships: What To Do When Things Go Wrong

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Lee Crothers, Mental Health OT

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**Host (00:01):**

Hi there. Welcome to Mental Health Professionals Network podcast series. MHPN's aim is to promote and celebrate interdisciplinary collaborative mental healthcare.

**Lenice Murray (00:19):**

Welcome to Mental Health In Practice, a podcast from the Mental Health Professionals Network. In this episode, we're focusing on rupture and repair in relational practice from the subtle moments of disconnection that we often miss to how naming and working with them can transform client and team relationships. My name is Lenice Murray and I'm a mental health social worker. I work in private practice and run a training business as well, teaching relational practice to mental health professionals. I'm joined today by Lee Crothers, who also works with me and runs mental health training for people in cognitive analytic therapy as well as relational practice techniques for other mental health professionals. Lee is a mental health OT. Welcome, Lee.

**Lee Crothers (01:02):**

It's nice to be here.

**Lenice Murray (01:04):**

So one of the things that would be good to sort of set the scene, and we were talking about this before coming here around why is it actually important to have a conversation right now about rupture and repair and relational practice and relational practice in general?

**Lee Crothers (01:16):**



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I think relational practice has always been needed, but I don't know about you, Lenice. It feels like the whole world is a bit more disconnected and we would say a bit out of dialogue that you feel at the moment pushed into polarised views. So relational practice, it's an important conversation to be having right now because people are noticing how easily relationships can become shaped by defensiveness, disconnection and misunderstanding. And in therapy, workplaces, families, and services, it could become harder to stay open, curious and connected when people feel under pressure or unheard. I don't know about you, but I also think that relational practice means kind of sitting with difference and still being connected. I understand you're different to me, but I can still connect. So it's pretty pertinent now in the world. And I think geopolitical forces, they reverberate down to systems and teams, health systems and are seen in the therapy room or through the helping professional.

(02:20):

So I'm glad to be here to think about how people can be more relational even with their colleagues and within their systems, but particularly in the room with people who perhaps are not feeling like the world is relating to them in a way that they want to be related to.

**Lenice Murray** (02:37):

Beautiful. I was listening to your talk then and one of the things that was really resonating is that idea of how relational practice has that capacity to support connection. And it was so beautifully put when you said it's like we can be two different people and share a space somehow and recognise the space between us and the differences, but also how do we do that and how do we navigate that together, which is a really rich, beautiful work, isn't it? It's like staying connected when there's all that going on and not moving to a point of defensiveness or blaming or shaming. It's like, oh, I can have this experience over here and you can have it over there. And there might be points of conflict or flashpoints, but it's like how do we stay connected with each other while that's happening and what do we need to do that?

(03:25):

So I loved hearing you talk about it that way.

**Lee Crothers** (03:27):

Thanks, Lenice. You know that we can talk about this forever. Through relate and reflect, that's kind of what we want to think about with systems and teams and of course individuals is how we turn up in the room might not be how we're felt in the room and relational practice is actually attending to what's between rather than what's going on in one individual.

**Lenice Murray** (03:53):

It's sort of this desire for mutuality. We both show up in the room and it's the space in between the intersubjective, like it's giving that validation. It's giving that what I'm putting into that space and what you're putting into that space. And then, oh, let's be curious about that space between us without flipping into blame or one has to be right or one has to necessarily be wrong. And how do we sort of stay accountable there and share responsibility about that space and what we're each bringing into it. And what you were saying too about that bigger picture frame of when we do supervision with people



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working in mental health systems and other community care systems or we're doing group work with them or training with them and it's really that part and for ourselves and our own reflections and work with our one-to-one work, it's like, or our group work, what are we bringing in?

(04:40):

What are we each bringing in and what's the context bringing in for us as well?

**Lee Crothers (04:43):**

What are we representing and what are we replaying unwittingly. I think a relational model does help you feel a bit more empathic even to yourself as a clinician. We stuff up. We don't mean to, but we usually try and be caring with people, I think, helpful. But if someone has never been related to in that way or not enough, they've had that kind of relational poverty, they might see it as controlling or intrusive and relational practices thinking about, oh, I have an intention, but if that person doesn't have say that relational template, it might not mean that they'll see that as caring. They might see you as totally different and it gives you this language to think about and bring it up in the room in a way that's equal.

**Lenice Murray (05:33):**

Yeah, beautiful. I was just thinking, I mean, we've known each other for a number of years and worked in the same circles, but we got involved together on a project where I came in to do some evaluation work around a pilot that you had run. And I think what really always stays with me and what came up for me in that is your passion about, you've often said to me, "I want to relationalise the world."

**Lee Crothers (05:54):**

Oh God, that sounds narcissistic.

**Lenice Murray (05:55):**

Oh no! It's the opposite, right? It's like I want us to be able to, be able to show up with each other and just the passion about how valuable that is when you're working in human systems because we're not robots operating in these systems as mental health professionals or allied health professionals or community service professionals. It's like we're going to bring something in and we're going to try something and it often comes from this intention and desire to be caring, but we can't see and know everything we can misunderstand. And I think for me like, oh, that's so cool that you have that passion and I have that passion and like how do we help each other really?

**Lee Crothers (06:34):**

Yeah. Well, I think we live it, Lenice, let's not have a love in, but we are relational in the way we teach as well. I liked your description how you're more of a cat and I'm more of a dog. It's like, yeah, I'm all over people like, please like me, please like me, which I hope is likeable, but it can be too much for people. And then I loved how you described yourself as a cat that you like to kind of sit back think about things and some people love that about you and then they might think, oh no, she doesn't care, which is



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absolutely not true. So I think we are trying to live it as well. It doesn't mean we don't stop up though as well.

**Lenice Murray (07:11):**

Yeah. And like how we show up and what it's like to be a cat and a dog to hang out together, right?

**Lee Crothers (07:16):**

Yeah. You want to get rid of me after this, don't you? And you can't.

**Lenice Murray (07:21):**

But that's the thing, isn't it? When you're working with someone relationally and why it's so important is we're all kind of going to show up with these different ways of being and knowing in the world and it's staying curious about that and present with each other around that. And how do we work this out together if I just want to lay in the sun by the window and you want to like, let's go, let's go talk time.

**Lee Crothers (07:42):**

Very annoying. I know.

**Lenice Murray (07:43):**

Not annoying. I'm the Debbie downer sometimes, right? When you want to relationalise it, I'm like, yes, but how are we going to do it?

**Lee Crothers (07:51):**

Just bring me down Lenice. But that brings us back to that question, what is relational practice? Because relational is a bit of a buzzword I think at the moment. It doesn't just mean engaging or being nice to people or being caring. It really is about paying attention to what's happening between people, not only what's happening within one person and it builds or it's an extension on person centred care that goes further. It recognises that we're shaped in relationships and we also heal in relationships. So the therapeutic encounter is not just one person observing another, it is two people influencing each other in real time. And that means the clinician or helping professionals, not a neutral expert standing outside the interaction. We bring our own responses, those feelings, assumptions and humanity into the room, which AI can't do, can it? Not just yet. And I think just used thoughtfully, it can be so powerful.

**(08:52):**

Relational practice is also taking relational responsibility for when something goes on in the room. And we were talking about this on the tram, weren't we, that I feel like us as clinicians or helpers have more power. So we should take the responsibility when something happens to say, "Oh, relationally, actually I think I came across a bit controlling." And that's the difference between relational practice and say just client centred care. You don't say, "Oh, I think you felt something then." You go up and you observe what's happening between you. So it's a bit like mentalisation. You're tuning into the person, but you're tuning into yourself and the in between, "I think I came across as a bit controlling or like me, the dog, or



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did I come across a bit like too much? Then I can do that. " And here I am bringing in the relationship into the room and I'm saying, "I am in this with you.

(09:59):

I am going to help us together figure this out. You're not alone. Let's see. And then you can ask a bit more like you're a bit sick of people being controlling in your life and then you're in, I reckon.

**Lenice Murray** (10:13):

It opens up an opportunity. This is what I often think about and I think this is where your dog's great. It's an opportunity for playfulness. It's a lightness about, hang on a minute something's here and I'm going to say I've got skin in the game as well and that means I care enough to invite you to play back with me about this and take some ownership as well and it sets up this, again, I think mutuality is the word in some way and it invites agency. You can be you having a different experience of me than perhaps I intended and I can be me knowing that I intended that, but recognising that I impacted you like that, right?

**Lee Crothers** (10:52):

I can talk about it. It's not going to destroy us. It's not going to destroy our relationship to have a difference because that's a moment then of say disconnection to connect back. It's an invitation, isn't it? Yeah. Which makes me think about what we're really talking about is what is a rupture.

**Lenice Murray** (11:10):

Yeah. I mean, it's such a big sounding dramatic word and you can think in the medical model, like a rupture of an appendix is quite a significant word. And I think there's so many influences in relational practice theory and that concept of rupture that comes from different areas, whether it's attachment or development theory or psychoanalytic theories and things like that. When we're talking about relational rupture, it really is that if we think about it on a spectrum, it could be that really far level of not being really understood, seen, felt, heard, considered, held in some sort of way in the other person's minds and not mentalized about it, as you mentioned earlier, or to the other end of the spectrum where it can just be those minor things that happen in every relationship, every day, all day long where two people were in our own heads, we're bumping along together and we might miss something and it's being able to come back and recognise when that happens somehow and repair that.

(12:07):

I always remember Ed Tronic, who's like a professor in the US that has a great set of tools where he educates people about attachment and early development and he always stands out, the good, the bad, the ugly, and we all have the good, the bad, and it's the ugly when we don't come back and repair. And so it's recognising that we will stuff up, we will miss each other and that is a little rupture, but it's sort of being able to have an experience where you come back and repair that. And I was just thinking the other day, I was in a bookshop with my son and I'd had a really busy week and I was not in my best parenting form and he's just early teens and we were standing there looking at the psychology section or he was looking at other things and he came and stood next to me and then he just all of a sudden picked up a book and handed it to me and said, "Maybe this one's for you".



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(12:49):

And it was like the title was in the self-help section, "How Not to be a Grumpy Bugger" or something.

**Lee Crothers (12:55):**

Oh, he's tuned in.

**Lenice Murray (12:56):**

He's very tuned in. And I was like, "Fair play, fair play." That's a moment, I mean, that stuff is connection from teens, it's like they're sarcastic. They ground you really quickly. They're great to have around in that sense, but he's sort of saying, "Hey, you are somewhere else, you're not kind of tuning in, you're not really showing up with your best self and seeing me and here's me just letting you know. Come back, mum".

**Lee Crothers (13:22):**

Yeah.

**Lenice Murray (13:22):**

Then the other thing that I always think about with ruptures, I'm not sure about you is it's often thought of as like a rupture is this really big confrontational thing or very high conflict and they can be. We've all had those experiences I think, but they've also got the capacity to be so subtle and often it's sort of more of a withdrawal from the other. We sort of disconnect, we armour up, we show up, we're like, "All right, I'm walking away from this." And don't say something. And I think they're just as important and so relevant to understanding the other person and the relationship and what's going on as well as the big eruptive ones that are really obvious.

**Lee Crothers (13:58):**

Oh, I agree. I think we're trained to skip over those, to go into professional mode and keep on formulating or, you know when you get that gut feeling of, "I'm not quite on the right page with this person, but dum dee dum, I'll give you this worksheet", and I've got so much better at going, this is an opportunity to come back and say, "Have I missed something?" Sometimes I kind of give them a look out. Maybe it's because I haven't had my coffee yet, but I just wondered if I didn't notice something and I keep on going on and on about it and usually it invites people to go, "Well, Lee, yeah, I don't actually agree with you", because they're the ones that I've got so much better at. The pleasing kind of that's a rupture when they just nod and ...

**Lenice Murray (14:47):**

And a repeat ride of, "I can't bring my full self forward somehow with you, so I'm just sort of going to withdraw for a variety of reasons that we need to sort of try and understand." But as you were talking, it reminded me of a moment with a client that I was seeing in private practice and they came in and they're really intelligent, clever person and started the session and I'd had the history where they'd seen other people before and hadn't really kind of got very far in therapy and we sat down and I was like,



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"The usual questions that you ask." And as soon as I think I got to question three about tell me about your family, it was like someone had cut the strings on her puppet. She just sort of dropped down and my intention is just like, "Tell me more about you."

(15:27):

But the impact of that question was just complete withdrawal and cut off and I had to say, "Hang on a minute. Something about my questions taken you somewhere and I'm just wanting to check what happened." And there was a history and a story about, her sibling had significant developmental and intellectual disability and the family story was that everything that was happening in their lives was because of that and all her needs had been neglected and dismissed. You don't know with language it's just that simple question that looks like just a standard technique, but the impacts of that on her was like, oh, she said, "This is going to go in the same direction as it's always gone in." The story about the narrative, "Oh, you're going to hear this and you're going to formulate that this is why." And there's no space for her to kind of grow and develop a different story about herself and her experiences and to have that be more open than the narrow one that had been available in her life.

(16:23):

And so I said, "Okay, hang on a minute. How about you just drive us. You run this session. You know what you're doing, what do I need to know?" I'm not being useful here by following this formula. The puppet was no longer a puppet. She was a fully fledged moving, animated person with life in her again.

**Lee Crothers** (16:42):

You did something different because you said I did something first in relation to you, you didn't say, "I feel stuck." Lots of people go with that. You went, "I'm not leading this right or I can't remember what you said. I'm not asking the right questions." So you were saying in relation to you, maybe I'm coming across dismissively.

(17:03):

And you picked up that pattern and then you moved and so it's a very good example of relational practice. Some people go, "Oh, something happened for you then." And that's just sometimes too hot for people. If you're feeling dismissed, why would you then quickly want the spotlight on you? And so you did this beautiful move of actually I'm not asking the right questions. You took relational responsibility there and then I think that leads to a different relationship even just saying, "I've got something to do with this is relationally giving someone, oh, maybe it's not just me, maybe this isn't my problem, maybe this is a problem I can share, think about, change a bit."

**Lenice Murray** (17:48):

And there's choices. We don't have to just reinforce this role or this narrative or this sense of powerlessness. That's the other thing, isn't it? It's like the other thing I love about, you come from a background of cognitive analytic therapy and with the work that we do with Relate and Reflect, we've taken some of these core elements about how you can maybe map and put down very abstract things that go on between people and in between people and in ourselves and how they then interact, which is really helpful because it's very grounding to then step back and to externalise it for a minute and to join in looking at it together. How can we sort of see what happened there between us in that moment and



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why? And that's sort of the lovely thing really of then how you can track a rupture and talk about it together and make it safe is what you're sort of saying as well around no one's going to get blamed for this.

(18:37):

It's like we can invite each other to both be curious together about it in this sort of gentle way. We can be intellectually curious, but that's not the same as this sort of gentle relational curiosity and that's sort of the beauty of this model and how that works I think for people. And we can get so stuck in the systems that we're trained in when we're given so many frameworks and so much pressure on us sometimes to work in particular ways and meet certain sort of standards and we can lose that looseness to move. And we actually end up then engaging in ruptures. I was supervising someone last year and they really have studied relational theory. They're great at this stuff and they came and they were like, "Oh, I'm working with this client." And they just kept having these experiences like, "I just really want to give her a reparative experience, Lenice." And I was like, "Okay." But the client was really saying, every time you try to move to give me a reparative experience, I actually feel less seen because she needed space for her anger and her mistrust.

(19:34):

And it's funny, isn't it? I've done this, I'm sure you've done this, it's like even though we're actually trying to be relational in that moment and caring, we're slipped into, "No, no, I really want you to have ... This is what I want in this relationship," rather than, "Oh, hang on a minute, I'm not seeing you."

**Lee Crothers** (19:48):

I think you've given some good examples and being relational also means that it gives you permission to be relational with yourself. You gave an example of we've got so much to do and we've got lots of models, but we've also got lots of ticket box things, haven't we? Particularly say in public mental health where you have to report to a system.

(20:09):

And I've had a client say to me, "Well, you have to go through your risk assessment, don't you Lee?" So to them it seemed dismissive because they'd had so many risk assessments, but for me, I have that part of the job as well. That was a rupture, but that was a good invitation to kind of go there and I'm like, "You're right. For me to feel like I can be back with you and think about the real issue, I probably have to go through this first and then we can talk about the real issue of what's actually underneath these suicidal thoughts." And we were back because she was like, "You've got these things to do that you have to do to feel safe and you heard me. Okay, we're back in collaboration." And that was true collaboration. She was kind of looking after me as well and me accepting that too is relational.

**Lenice Murray** (21:05):

Which is how things are in the real world if we want to have relationships and connections. Yeah. So it's the kind of in-situ chance to practice seeing the other and being with the other. Yeah. Beautiful.

**Lee Crothers** (21:20):



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Yeah. You've got this chance, I suppose, this safe space to play around. I liked your words, being playful about it. So maybe they'll take a risk of doing that outside. Can I ask you, because we talked about rupture and repair with individuals and in private practice and practice, how does it show up in systems and teams?

**Lenice Murray (21:44):**

Yeah. I mean, I think we both slip in and out of it. We're in a sort of privileged role in some way we get to go into other orgs and we've been in orgs, worked in those teams ourselves, but you get this different chance to see those moments, don't you, where things can show up because you're often coming into group effective practice and so stuff will bubble up. And I think it's that thing I was sort of touching on earlier. There's two things. I think one of the things when we really get an over emphasis on team functioning over group connection, you think about the Marvel universe where you've got the Avengers who are all these heroic characters that show up perfectly and have these amazing superpowers and they can function as little parts of a team that come in and then you come in with your laser and you come in with this versus the guardians of the galaxy who are all pretty messy, they'll show up and the whole message is like, you've got to work together as a team and you've got to recognise that you're all a bit infallible.

**(22:40):**

And that's really when we start to actually be able to go, I can kind of recognise my strengths and weaknesses and as a team how we're functioning. And I get to show up as a whole human, even though some of that aliens, but I get to show up as a whole being that can be a bit fallible. And it's not that team functioning's not important. It's so important, but it's when it takes over from individuals being able to feel like they can bring their whole selves and have a language to talk about that and safety and permission and supportive containing environment when we just get too focused on the outcome or winning the day or rescuing or something that's kind of ungrounding for people and then they get lost in that system and you start to see people reacting and trying to cope with that and we all have those different ways and then they bump into each other and then it feels really messy for people and people start to feel burnt out.

**(23:30):**

Some will withdraw some will get more reactive, people will do their own version of coping with that really and you start to witness split sometimes. Sometimes it's much more subtle and it's kind of like you were talking about earlier, that more polite withdrawal where there's a lot of unsaid things that people don't feel safe saying somehow and there's this sort of almost like a speech bubble over their head is, "I'm not really allowed to be human in this moment and talk about how the work's impacting me or how the team functioning is impacting me or whatever it is." And you do this work a lot as well. So are there ways that you see that it shows up?

**Lee Crothers (24:05):**

It's the same in individuals as systems and teams that there's certain parts that have bigger voices and those parts are often protective. And I think teams, a lot of our systems feel overstretched and so different people have different ways of being with overstretched. Some people are the overachievers, so they'll try and fill the gap and then other people need to withdraw and think about it and then they



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impact on each other, those two parts, don't they? Because the people who are doing heaps are like, "Why aren't those people doing more?" And then the split increases and the people who've kind of withdrawn to think about it, "Why are they doing so much? They're making a mess." So these ruptures occur similarly with individuals and a relational model or a systemic model is very helpful in bringing people back together that maybe we are replaying things that are being played out with the people that we see as well, that they feel stretched and demanded upon and not good enough or not enough.

(25:19):

Gosh, it's the theme of the day, not enough. We are enough, Lenice, but not enough. So they do certain things, of course, maybe confirm it and it's a really nice way of thinking with teams. So when you go in and see teams and we use this model and we map this kind of as a system and get everyone's voices. So it's similar. Yeah.

**Lenice Murray (25:43):**

And I think the other thing is we don't exist in a politically neutral world and I think everyone is quite switched onto that, especially in our profession and the services that we work with, right? And there's something a bit overwhelming sometimes about that context that we're working in and that people's lives are being impacted, both workers and the people that are coming and using services. That's the other big part about this is we're all swimming around in the same polluted waters in some sort of way. It's like, okay, how do we navigate that?

(26:13):

And it's easy for that to fracture, I think services and teams sometimes and especially if people don't feel there's some sort of way to have a conversation about how it's impacting them and how that's showing up and it can show up in like that person's contract wasn't renewed because there's not enough funding or it can show up in the pain you might feel of having walked out of sitting with a client and the issues that are presenting the sociopolitical in so many ways and you feel a bit powerless to do something with that and the system starts to sort of enact some stuff and you get some parallel process of powerlessness and people seeking to do something about that, which is good. The impulse is good. It's just sort of fractures the team sometimes rather than brings people together. And I think when you do group relational reflective practice, again, it's like, oh, we're all swimming in these same waters, but we've got different styles of swimming. How do we be with each other?

**Lee Crothers (27:03):**

Yeah. And we've all got the same intention. The intention is to connect and to do things well, to help people, but we all relate to that issue differently and we all do things that we think are helpful, but unwittingly might replace something that looks controlling, rescuing, crossing boundaries, not doing enough. Yeah. I think this model helps people kind of think about it together in a kind of shared language. Thinking about this model, how's it changed your practice?

**Lenice Murray (27:35):**

Oh I think it keeps changing it. And even coming in here and thinking about this today, I think that's what I love about relational work. There's an aliveness and even someone that you've seen for two



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years, if you're working relationally, you will get to know something different about them and about you and about that moment in time and you will be more present if you are open to actually connecting with what is happening right now. I think that for me that's like, there's some space in there that's real, that's authentic, that's beautiful somehow. It's awful sometimes too, because you have to connect with someone that you don't want to connect with, but it's like, okay, now we're alive, now we're real. That feels therapeutic to me.

**Lee Crothers (28:19):**

That's how it's changed my practice. It's the work. It's not an interruption to the work. And I used to think avoid ruptures. That's true engagement.

**Lenice Murray (28:29):**

It's competent, I think.

**Lee Crothers (28:31):**

Yeah. And so it's helped me slow down and go, "No, this is the actual work. This is what we would call relational repair." You've invited me into how you see how the world relates to you. Let's go there even if it's conflictual, which, well, remember I'm the dog that likes to be liked, I want to run away, but this model's really helped me go, "No, it's true." I've had someone say to me, "You're really angry with me, Lee." And I wanted to say, internally I'm like, "Oh, I can't be angry with a client. That's so unprofessional." She was dead right. She was more tuned into me than I was tuned into myself and I could say, "Actually, you took me aback then and maybe I wasn't connected to it and I'm really sorry because I think I'm actually angry with the situation you're in, not with you and I'm sorry it came across like I was angry with you."

**(29:28):**

And we just had, I feel like a moment. And so yeah, this models really helped me I think in having those moments of true connection and I hope that they are healing.

**Lenice Murray (29:41):**

And I think just to add my last thought about that is we're often as people trained in the system and mental health, you're often given messages about not bringing yourself in or there's messages that are really strict about how to do that. And I think that's the big thing about this model isn't it's like there's a real intentionality about how to use self in a reparative way relationally, right?

**Lee Crothers (30:04):**

Totally. I want to talk more, but we have to sum up. We've explored that idea that many of the difficulties seen in therapy teams and services are not located solely with an individual, but often emerge in relationships and interaction rather than focusing only on diagnosis, behaviour, or who is the problem or what is the problem, relational practice invites us to pay attention to what is happening between people in the moment. We discussed how current pressures can increase defensiveness, disconnection, and transactional ways of working, making this conversation especially important now, I



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reckon. Relational work offers an alternative stance based on curiosity, shared responsibility, and mutuality. It helps move away from labels such as complex or difficult and toward understanding patterns that are co-created. You know I have a beef that people say that they're very complex, but actually I think it's what happens between people. That's the complexity.

**(31:04):**

And a key theme was rupture and repair, that ruptures aren't these big, to use your words, volcanic kind of moments of conflict, but they're moments of inviting us into thinking about what happened, did we get disconnected and coming back to connection.

**Lenice Murray (31:22):**

Beautiful. Yeah. Thanks for listening to Mental Health In Practice, a podcast from the Mental Health Professionals Network. If you'd like to learn more about today's guests or access related resources, visit this episode's landing page. We'd also love your feedback. You'll find a short survey on the landing page to share what was useful and what you'd like to hear more of. Thank you for your commitment to multidisciplinary care and lifelong learning.

**Host (31:47):**

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