



Health and Disability Commissioner
Te Toihau Hauora, Hauātanga

Aotearoa New Zealand's mental health and addiction services: The monitoring and advocacy report of the Mental Health Commissioner
Embargoed to 12pm Wednesday 17 June 2020

Questions and answers

Why has this report been produced?

It is part of the Mental Health Commissioner's statutory role to monitor and advocate for improvements to mental health and addiction services. This report is an independent assessment of the state of mental health and addiction services in New Zealand. It helps identify where services are working well and where they need to be improved. The report makes a number of recommendations to the Minister of Health, and calls for a clear action plan to respond to New Zealanders' mental health and addiction needs.

What has changed since *He Ara Oranga* was released?

There have been some significant changes since *He Ara Oranga* (the report of the Independent Inquiry into Mental Health and Addiction) was released.

There has been progress on a range of the Inquiry's recommendations, including:

- a \$455 million investment in the expansion of a primary and community care response to mental health and addiction including investment in kaupapa Māori approaches,
- repealing and reforming the Mental Health Act,
- development of a suicide prevention strategy and the establishment of the Suicide Prevention Office, and
- preparation to establish a new Mental Health and Wellbeing Commission.

Another key change has been the investment the Ministry has made in its own capacity to provide stewardship and leadership including the appointment of a Deputy Director-General Mental Health to provide a mental health and addiction voice in the leadership team.

Sector leaders are also reporting increased collaboration across Government agencies and within communities as the Ministry of Health and DHBs led the mental health and addiction response to support people through the COVID-19 emergency pandemic response.

What is the most important priority now?

It is critical that there is clear plan of action for transformation. This requires a whole-of-government, whole-of-community wellbeing agenda which delivers clarity of vision, execution and accountability to lift the wellbeing of all New Zealanders. While *He Ara Oranga* provided priorities for action, it did not set out a roadmap. That's what's needed now - what needs to

happen, when, who's going to do it and how does it all work together. *This plan needs to be in place by the end of the year.*

What impact has the lockdown had on people's mental health and demand for mental health services?

People had very different experiences of the lockdown. Some people benefitted from opportunities to spend more time with family and/or to do things that they enjoyed. Some found it helpful that there was reduced availability of, or pressure to use, alcohol and other drugs. Others had a rough time, with some people's issues worsening and even those who may never have experienced mental health or addiction issues before having to confront feelings, urges or states of mind they were not accustomed to.

The sector did a remarkable job at responding to changing needs despite the constraints of the situation and there are some valuable new initiatives and insights to draw on as the ongoing impacts of the COVID-19 pandemic, including rising unemployment, continue to affect the wellbeing of New Zealanders. For example, the development of new online platforms for self-help, and the use of zoom for consultations and group therapies, and to support whānau participation in care and transition planning.

Do you think the Government needs to set targets for the mental health sector?

Yes. But the first step is to get up to date information about the level of need in the community.

Why aren't things improving for Māori?

There are a complex range of factors that contribute to poorer mental health outcomes for Māori. These include higher levels of need, higher levels of deprivation and the fact that many mainstream services are not yet culturally safe or able to effectively engage with or respond to Māori whānau.

While it is important to invest in kaupapa Māori services, all services need to work for Māori and be culturally safe. Strengthening Māori participation and leadership in the design and delivery of services is essential - both for improving outcomes and meeting obligations under Te Tiriti o Waitangi.

As we work on a new system of care it will be important to ensure that any changes are having an equitable impact, and I support the new Mental Health and Wellbeing Commission having a particular responsibility for taking Māori experiences and outcomes into account as it performs its functions.

Do we need more funding for mental health?

Right now we need to invest in capacity to support transformation. Services are currently under pressure and are struggling to meet current demand – they need support to make the changes required while, at the same time, continuing to provide services in response to growing demand.

It is likely that greater investment will be required in services and supports but it is crucial that we have a more up-to-date understanding of need first. New Zealand also needs to rethink how it best provides support for people rather than doing more of the same.

New Zealand will be voting on whether or not to legalise cannabis at the next election. If this goes ahead, what impact do you think this will have on mental health and addiction – particularly for young people?

My focus is on addiction services rather than drug policy. Regardless of the outcome of the referendum, New Zealand needs to do a lot of things differently if we are serious about moving towards a health response to drug use.

The upcoming referendum is just one part of a long conversation this country has been having about the need to shift towards a health based response. Actually doing so is more than just making changes to legislation or enhancing our treatment response. A health approach to drug use focuses on prevention, health promotion and harm reduction as well as treatment. It recognises the need for early intervention and to address stigma which is a significant issue for people with substance use disorders and a barrier to people seeking help and on their recovery.

How does New Zealanders' mental health compare internationally?

Our rate of mental health and addiction issues is similar to populations in comparable countries. We know that one-in-two of us will have a mental health or addiction issue at some stage in our lives and that one-in-five of us will at any one time have a mental health or addiction issue where we may need support. However, these figures are not recent (2006) and the information needs updating.

Do you support the establishment of the new Mental Health and Wellbeing Commission? What will your role be when it is in place?

Yes. It is important that there is independent oversight of Aotearoa New Zealand's collective efforts to lift wellbeing, not just mental health and addiction services, and a dedicated champion for these important issues, and those most affected by them. History has taught us that while mental health may be a Government priority now, momentum is easily lost when the focus shifts to other issues.

HDC provided input into the Mental Health and Wellbeing Commission Bill to help ensure the new Commission would have the necessary independence, powers and mandate to enable it to play its role effectively. We are in regular contact with the Interim Commission to share information and insights. While HDC's statutory role to monitor mental health and addiction services and advocate for improvements to those services will shift to the new Commission, HDC will continue to consider and resolve complaints relating to mental health and addiction services, and to assess and respond to systemic issues that arise through complaints.

Where to find help and support

In an emergency

If it is an emergency and you feel that you or someone else is at risk:

- Call 111 or
- Go to your nearest hospital emergency department (ED) or
- Call your local DHB Mental Health Crisis Team (CATT) 0800 611 116 and stay until help arrives.

If someone is unconscious, call an ambulance (111).

Helplines and e-support

A helpful collection of links to a wide range of services and supports available can be found at: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-health-advice-general-public/covid-19-mental-health-and-wellbeing-resources>.

If you need to talk to someone, you can free call or text any of these services at any time:

- Need to talk? Call or text 1737 for support from a trained counsellor
- The Depression Helpline: 0800 111 757 or free text 4202
- Healthline: 0800 611 116
- Lifeline: 0800 543 354
- Samaritans: 0800 726 666
- Youthline: 0800 376 633 or free text 234 (8am–12am), or email talk@youthline.co.nz
- The Lowdown: www.thelowdown.co.nz or free text 5626
- Kidsline (ages 5–18 years): 0800 543 754
- OUTline NZ: 0800 688 5463 for confidential telephone support for the LGBTQI+ family, as well as their friends and families
- Alcohol Drug Helpline: 0800 787 797 or free text 8681
- Gambling Helpline: 0800 654 655 or free text 8006

Accessing mental health services and addiction services

If you feel unwell, or want help for mental distress and/or addiction need, your best starting point is usually your GP (family doctor). GPs are trained to assess, treat, and manage many mental health issues. Your GP can refer you to your local community mental health service or addiction service or elsewhere if needed, or your GP may be able to help you to manage your mental health and wellbeing.