

WHAT WORKS

YOUR ELECTION
MENTAL HEALTH POLICY TOOLKIT

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A NOTE FROM OUR CHIEF EXECUTIVE

Tēnā koe,

As the 2026 general election draws nearer, your party will be refining its positions on the issues New Zealanders care about most.

Mental health will always be one of these issues. It's a complex topic with widespread impact.

We all have mental health, and just like our physical health, how mentally well we are fluctuates throughout our lives. Supporting good mental health requires building on our strengths, while addressing the challenges.

Almost one in two New Zealanders will experience mental health challenges in their lifetime, and most people (77%) know someone who has experienced them already.¹ Youth mental health is a particular concern right now, with more than one in four young people experiencing significant distress.²

Suicide also remains a critical issue. Many of your constituents will have been personally impacted by suicidality or suicide loss. For every person that dies by suicide, as many as 135 people are affected.³

The effects of mental health challenges and suicide aren't experienced solely by individuals — they ripple across whānau, communities, iwi and hapū; across workplaces, schools, institutions and the media; and across wider society. They also carry profound personal and economic costs.

Consider, for example, that mental health challenges are estimated to cost the nation at least \$22 billion a year — or 5% of GDP.⁴ Or that people living with serious mental health conditions can die up to 30 years earlier than people who do not, often from preventable physical health conditions.⁵

Investing in mental health and wellbeing across the spectrum of need can help alleviate these issues and yield other benefits, such as better educational performance and higher productivity rates.⁶

New Zealanders will be looking to your party for capable, compassionate responses and solutions to these issues this election. We've developed this election policy toolkit because while there are no simple fixes or one-size-fits-all policy solutions, there are clear, evidence-based approaches that deliver results.

This guide outlines what works, and recommends tangible actions to deliver meaningful outcomes for your constituents, some of which can be delivered during your first year of government.

Face-to-face kōrero can be invaluable when navigating issues of this scale. Our specialist policy advisors and I are available to offer confidential, politically neutral advice at any stage of your policy or manifesto development. Our door is always open.

We look forward to hearing from you, and to learning about the work your party is undertaking to support better mental health outcomes across the motu.



Ngā manaakitanga

A handwritten signature in black ink, appearing to read 'S. Robinson', with a long horizontal flourish extending to the right.

Shaun Robinson
Chief Executive
Mental Health Foundation

YOUR POLICY FRAMEWORK: THE THREE PS

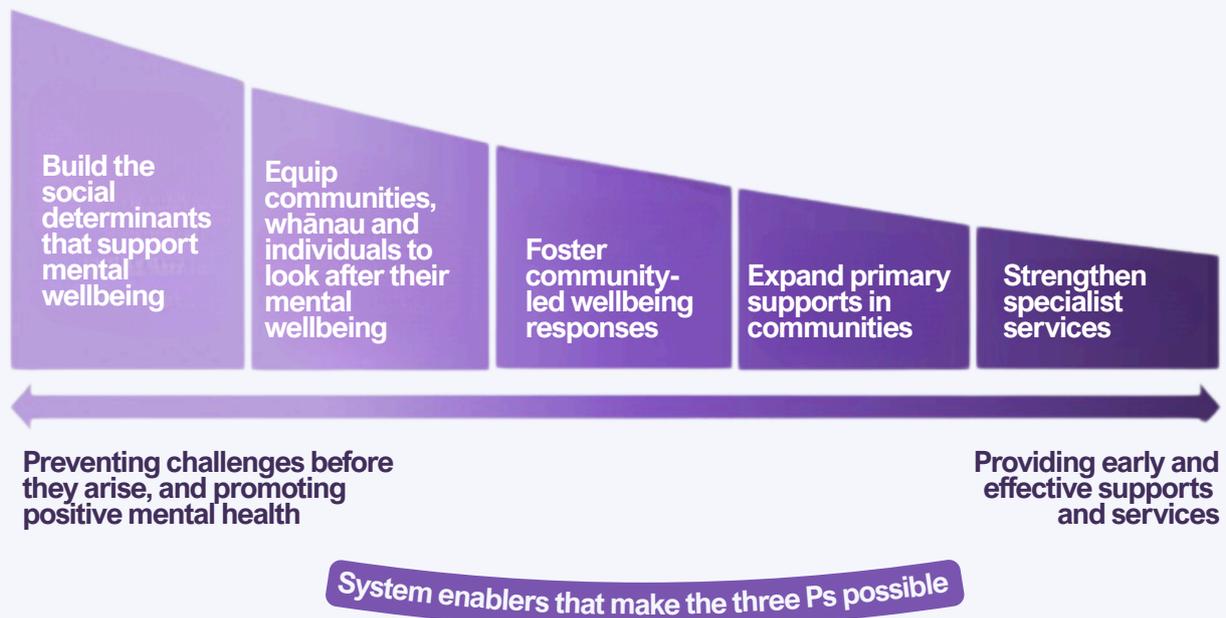
Mental health and wellbeing can be complex, but your policy framework doesn't have to be. To be effective and evidence-based, **we recommend your policies or manifesto follow the three Ps.**

The three Ps echo the findings of the formative 2018 Report of the Government Inquiry into Mental Health and Addiction.⁷ The three Ps call for government to:



The diagram below⁸ shows how the three Ps work together to address the full spectrum of need. Investing across all three Ps is wise — when governments invest not only in services, but also in promoting positive mental health and preventing challenges early, overall demand for services decreases.

How the three Ps work in practice



Adapted from Ministry of Health, 2021

The three Ps are supported by a foundation of 'system enablers' — or the infrastructure, processes and resources that help the mental health and addiction system function effectively.

In the following pages, we delve into the three Ps and system enablers, and recommend **15 tangible actions** to commit to in your election manifesto or mental health and addiction policies.

These recommendations are designed to be achievable and responsive to need. Together, they offer options to support your party's short-term election promises and achieve progress long-term.

PROMOTING POSITIVE MENTAL WELLBEING

“ I’m someone who’s experienced the impact of significant mental health challenges... I would have been stuck within the mental health system if it wasn’t for my strong family network, system knowledge, and the skills and strategies I had to navigate my way to wellbeing.

Kerri Butler, Māori lived experience leader

We all have mental wellbeing, and we all need to look after it. Mental wellbeing promotion supports populations or communities to identify their strengths, and use those strengths and other tools to protect, manage and grow their mental health and wellbeing.

Mental wellbeing promotion initiatives improve lives, prevent crises, relieve pressure on services and save money, with many showing return on investment after only a short period of time.⁹ These initiatives can also:

Reduce mental health **prejudice and discrimination**

Foster social inclusion, and **prevent bullying** in schools and workplaces

Improve **educational performance**

Strengthen cultural identity (which supports better mental health outcomes)

Boost **higher employment rates and productivity**,¹⁰ and **reduce workplace accidents**.¹¹

ACTIONS YOUR PARTY CAN COMMIT TO

Expanding community wellbeing promotion

NGOs, kaupapa Māori and lived experience organisations, and community groups are well-placed to provide effective mental wellbeing promotion, because they understand and are trusted by the communities they serve.

We recommend investing in and expanding both population-level social marketing campaigns (such as *Top Up* and *All Sorts*) that promote everyday actions to lift wellbeing, as well as localised community initiatives with proven efficacy, such as *Farmstrong*, an initiative helping farmers, growers and their families to cope with the ups and downs of farming. *Farmstrong* delivers a return of over \$7 for every \$1 invested, and has saved ACC over \$50m over the past decade.¹²

Investing in mental wellbeing promotion in schools and kura

Imagine a nation where all tamariki were taught about mental health and wellbeing from a young age — how to navigate big feelings, how we can support each other, and what to do when times are tough. Our country would be transformed for generations.

To make this happen we must invest in mental wellbeing programmes (such as *Mana Ake*, *Pause Breathe Smile* and *Sparklers*). Evaluations show these programmes are making a positive difference to the wellbeing of tamariki, including for Māori.¹³ We also recommend supporting whole-of-school approaches, and a robust mental health and wellbeing curriculum.

Promoting mentally healthy workplaces and training settings

Every dollar small businesses invest in company-wide wellbeing initiatives returns up to 12 times its value within a year.¹⁴

We recommend supporting and expanding mental wellbeing promotion initiatives that create psychologically healthy workplaces and training environments — such as programmes that:

- strengthen leadership capability
- establish effective wellbeing policies, and
- build cultures that actively protect and promote positive mental health and wellbeing.

PROVIDING EARLY AND EFFECTIVE SUPPORTS AND SERVICES

A lot of mental health challenges can be prevented if we intervene early, and de-escalate and treat early rather than waiting for things to get to crisis level.

Professor Terryann Clark, youth mental health academic

Mental health challenges are common. Almost one in two New Zealanders will experience mental health challenges in their lifetime,¹⁵ and 14% of adults (and over one in five Māori and Pacific peoples) are currently living with high or very high psychological distress.¹⁶

There are high levels of unmet need for specialist mental health and addiction services, particularly for Māori and young people,^{17,18} and for appropriate and culturally responsive options.¹⁹ As people wait, their mental health and wellbeing can deteriorate and their needs can become more complex, stalling recovery and requiring additional resources to support them.

Providing early support — both early in life, and early when challenges first appear — and offering effective responses to distress can:

reduce, by up to 87%, the symptoms, severity and duration of mental health challenges²⁰

prevent lifelong mental health conditions, which mostly begin before 25 years of age²¹

prevent premature death, social isolation, poor functioning and reduced educational and vocational productivity.²²

ACTIONS YOUR PARTY CAN COMMIT TO

Building in early intervention approaches for young people

Young people experience the highest rates of mental distress of any age group, yet wait the longest for support.²³ Intervening early and effectively with services that reflect what young people want and need can help rangatahi maintain wellbeing, and manage emerging mental health challenges.

We recommend:

- expanding access to school-based mental health and wellbeing services²⁴ and integrated youth primary health services, such as providing Youth One-Stop Shops in every region
- increasing capacity in youth-accessible 24/7 helplines
- expanding Access and Choice (primary mental health) youth services
- raising the age limit for specialist child and youth services to 24 years.

Investing in kaupapa Māori supports

Over the past five years, fewer than one third of Māori accessing specialist mental health and addiction services could access kaupapa Māori services.²⁵ Yet despite this service gap, less than 10% of mental health and addiction services investment is allocated to kaupapa Māori options.²⁶

To address this gap, we recommend:

- increasing investment in, and growing, a wide range of kaupapa Māori services nationwide
- embedding mātauranga Māori and hauora Māori approaches across the system (given strong evidence they improve Māori mental health and broader health outcomes),²⁷ and
- strengthening legal mechanisms that ensure active partnership with Māori in the planning and design of services.

Urgently increasing access to specialist mental health and addiction services

Over the past five years, the access rate for specialist mental health and addiction services decreased by 8% for all New Zealanders — and by almost 20% for 19-24-year-olds — mostly due to workforce challenges and higher access thresholds.²⁸

We recommend:

- expanding specialist service capacity — including perinatal and maternal mental health services such as mother and baby units
- increasing youth and forensic specialist services and supports
- strengthening supports for people with co-existing substance use challenges, and
- improving integration and referral pathways between primary, community and specialist services to ensure people don't fall through the gaps.

Reducing barriers to early support

Long wait times, workforce shortages and high service thresholds mean many New Zealanders are unable to access mental health, addiction and substance use harm supports when they first need them.²⁹ These barriers delay care, exacerbate unwellness and can contribute to avoidable crises.³⁰

Alongside expanding workforce capacity, we recommend:

- making it easier for New Zealanders to access support early by strengthening navigation supports and service access pathways
- broadening eligibility criteria, and
- investing in flexible delivery models, such as telehealth.



PREVENTING CHALLENGES BEFORE THEY ARISE

“If people were getting their basic needs met — housing, food, all that sort of stuff — there would be less need for mental health services.”

Balance Aotearoa

Everyone deserves to enjoy good mental health and wellbeing. But good mental health and wellbeing don't happen by accident.

'Social determinants' — such as whether we're employed, live in poverty, experience racism, feel safe at home, work or school, or are being discriminated against — have a huge impact on our mental health, both in the short and long term.³¹ For example, ending childhood adversities alone can reduce the lifetime prevalence of mental health conditions by 30%.³²

ACTIONS YOUR PARTY CAN COMMIT TO

Taking evidence-based action to prevent suicide

Every year, hundreds of New Zealanders die by suicide. For every suicide, an average of 135 people are affected.³³

Preventing suicide requires sustained investment in community-led prevention and postvention initiatives that are safe, effective, and culturally responsive. These initiatives play a critical role in supporting bereaved whānau, reducing distress and preventing further harm.

Continuity of care is also essential, including wrap-around support and active follow-up after emergency department presentations for self-harm, or after admissions following suicide attempts.

Ensuring access to safe, secure housing

Safe, secure and stable housing is a human right.

Right now, increasing housing insecurity and homelessness are contributing to worsening mental health outcomes, with more people experiencing crises in public and unsafe settings.³⁴

We recommend investing in outreach and integrated services that provide 'third spaces' where people can access support, connect and build community, as well as resourcing emergency housing solutions; implementing Duty to Assist legislation to prevent homelessness,^{35,36} and building public housing at scale to meet long-term need.

Taking cross-government action to prevent mental health and addiction challenges

Mental health and addiction challenges are often driven by social determinants that cut across portfolios and electoral cycles.

We recommend establishing shared, cross-government and cross-party mental health and addiction investment goals and priorities through the parliamentary Cross-Party Mental Health and Addictions Wellbeing Group, to prevent challenges in the long term. We also recommend explicitly naming mental health in all government policies, and holding government strategies and work programmes accountable for improving mental health and addiction outcomes.

Integrating housing, employment and mental health and addiction supports

We know that access to good, stable housing and meaningful employment improves mental health.³⁷ Yet, in 2023/24, fewer than half of people accessing specialist mental health and addiction services were in employment, education or training, and 6% of specialist service users were homeless.³⁸

To support wellbeing and recovery and reduce demand on crisis and specialist services, we recommend expanding integrated models with strong evidence and solid return on investment, such as Housing First and Individual Placement and Support (IPS).³⁹

SYSTEM ENABLERS

“ Communities don't often know how to apply for resourcing, so they don't have access to the additional scaffolding to grow the way that big organisations do. Less resourcing means they often miss out on realising the vision they have.

Kerri Butler, Māori lived experience leader

For the mental health and addiction system to function effectively, it needs strong infrastructure, processes and resources — or 'system enablers'. These enablers include system leadership, adequate funding, robust data, culturally embedded practices, workforce development and being able to respond flexibly, appropriately and innovatively to need and emerging trends.

ACTIONS YOUR PARTY CAN COMMIT TO

Investing in national mental health, addiction and substance use harm data and evidence

Effective mental health and addiction policy and planning relies on accurate, timely and nationally consistent data — yet the country's last comprehensive mental health and addiction prevalence survey was conducted over 20 years ago.⁴⁰ Current service data is also fragmented and does not consistently capture service access, outcomes or people's experiences.

We recommend investing in a national mental health and addiction data improvement programme — covering workforce, service access, outcomes, tāngata whaiora and whānau experiences, and culturally-appropriate data — to support long-term planning and investment.

We also recommend progressing the design of an adult mental health and addiction prevalence survey, with a view to extend this to older persons and other priority populations.

Building an integrated crisis system

Crisis services are fragmented, hard to navigate and inconsistent nationwide, meaning many people do not receive timely or appropriate support. Māori and young people are disproportionately affected by wait times and complex need, and are more likely to need urgent support.⁴³

A nationally cohesive crisis response system that offers timely access to a range of coordinated options, including peer-led, kaupapa Māori and youth-specific responses, is needed.

Growing and sustaining a strong, diverse mental health and addiction workforce

Workforce shortages are limiting access to care, particularly in specialist services. Our nation has less than half the recommended number of child and adolescent psychiatrists,⁴¹ and the workforce does not reflect the communities it serves — Māori make up around 30% of people accessing specialist services, but only around 15% of the workforce.⁴²

We recommend:

- sustained investment in growing and retaining a diverse workforce by removing financial and structural barriers to training
- investing in pathways for people with lived experience (especially Māori) to progress into leadership and decision-making roles
- improving retention through safe workloads and fair pay, and
- strengthening Māori, peer and community-based roles to ensure services are accessible and responsive.

Improving government contracting processes for community groups and NGOs

NGOs and community-based groups deliver nearly one-third of government-funded mental health and addiction services — yet funding insecurity, fragmented procurement and high compliance costs limit their ability to sustain and expand supports.

More flexible, predictable and mutually-accountable commissioning and funding arrangements would enable NGOs and community groups to better serve the communities that rely on them, and strengthen innovation and collaboration across the sector.

WORDS THAT WILL WIN SUPPORT

The way you talk about mental health, addiction and suicide in public — such as on social media, or in public debates or Parliament — is powerful. Many New Zealanders will be affected by these issues, and they will be listening closely.

Below are two ways you can use your words this election to show New Zealanders you and your party understand mental health, wellbeing and addiction, and can deliver the compassionate and considered mental health responses they want and need.

Publicly acknowledging the scale of need, and planning accordingly

An honest assessment of mental health and addiction need builds trust with voters who see the realities on the ground.

We recommend:

- clearly acknowledging the significant breadth and depth of mental health and addiction need across the population, and
- adopting policies and actions that demonstrate an understanding of where gaps exist and how they will be addressed.



Avoiding using mental health and suicide as a political football

The months leading up to an election are often marked by heated public debates. Mental health and suicide-related topics can wind up in a game of political football during these debates, which can put people at risk.

Your words have great power, and it's important to use them to inspire hope, not hopelessness.

We've put together a factsheet packed with tips on talking about, or reporting on, mental health and suicide safely this election and beyond.

See the factsheet [linked here](#) for further guidance.



THANK YOU

Thank you for taking the time to engage with *What works*.

We appreciate your commitment to improving mental health, wellbeing and addiction outcomes, and hope our framework and the insights provided support your work shaping effective, equitable mental health and addiction policies and manifestos.

If you would like further advice or tailored information, our door is always open.



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The Mental Health Foundation of New Zealand is proud to be politically neutral. We do not hold biases or preferences towards any political party.

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mauri tū, mauri ora OF NEW ZEALAND