

OUR CALL TO ACTION: Implement He Ara Oranga

We are calling for the Government to show us how *He Ara Oranga*, the report of the Government Inquiry into mental health and addiction, will be implemented.

We urge the Government to prioritise progress on:

APPLYING A TE TIRITI AND EQUITY LENS See He Ara Oranga Principles

Te Tiriti principles of tino rangatiratanga, equitable outcomes, active protection, options and partnership must be understood and upheld in the delivery of He Ara Oranga's recommendations.

Inclusive decision-making will support the recommendations' delivery to achieve equitable outcomes for Māori, Pasifika, people with disabilities, LGBTQI+, children and youth, rural populations and those that experience overlapping and interdependent systems of discrimination or disadvantage (intersectionality).

2 IMPLEMENTING A WHOLE-OF-GOVERNMENT APPROACH TO WELLBEING, PREVENTION AND SOCIAL DETERMINANTS

He Ara Oranga Rec. 16

Some of the most powerful determinants of good health lie outside the health system.

The Government must have a long-term plan about how to best measure and incentivise cross-government efforts, and invest in prevention and the social determinants that impact mental health and wellbeing outcomes and inequities.

3 DEVELOPING A STRATEGY FOR ACHIEVING POSITIVE MENTAL HEALTH AND WELLBEING

See He Ara Oranga Recs. 18 & 19

The Mental Health and Wellbeing Commission or another appropriate agency needs to develop high-level principles and a strategy to invest in, and ensure the quality of, Aotearoa's mental health and wellbeing promotion and prevention.

This will ensure mental health promotion and prevention is safe and effective, and funding is appropriately directed.

REPEALING AND REPLACING THE MENTAL HEALTH ACT, AND STARTING NATIONAL CONVERSATIONS ABOUT MENTAL HEALTH AND RISK

He Ara Oranga Recs. 34 & 35

A full review of the Mental Health (Compulsory Assessment and Treatment) Act must gain momentum to ensure the Act reflects a human rights approach and Te Tiriti principles, is aligned with modern models of mental health care and minimises the use of compulsion and restraint, while eliminating seclusion.

Public discussion about beliefs, evidence and attitudes about mental health and risk is a vital part of this work.

Lived experience groups/tāngata whaiora must inform the outcomes of legislative change.

5 PUBLISHING TWO IMPLEMENTATION PLANS TO ENACT THE NATIONAL SUICIDE PREVENTION ACTION PLAN

Related to He Ara Oranga Rec. 30

It is time to show us how the actions in the national suicide prevention action plan will be prioritised and implemented to prevent suicide in Aotearoa.

A separate Māori-specific implementation plan needs to be developed alongside an overarching plan to prevent Māori suicide.

The <u>Tūramarama Declaration</u> should be used as the basis for delivering many of the actions.

CONTINUE INCREASING ACCESS AND CHOICE IN MENTAL HEALTH AND ADDICTION SERVICES, AT PACE He Ara Oranga Recs. 1-6, 10 & 12

New Pasifika and kaupapa Māori primary mental health and addiction service providers should be given ongoing support, not overburdened with compliance requirements, and offered longer-term contracts that focus on ending persistent community inequities.

We must ensure the increasingly-available e-mental health supports and treatments are safe, effective and accessible to all, particularly Māori and Pasifika.

KEEPING MOMENTUM ON THE CO-DESIGN PROCESS FOR SYSTEM TRANSFORMATION

He Ara Oranga Recs. 7-9

The Government needs to be clear about the timeframe and phases of work for the co-design process. Let's not lose sight of the gains and insights made as a result of COVID-19, especially the successes of localised approaches.

The voices of people with lived experience/ tāngata whaiora and Māori must be at the heart of any co-design process, so that the new mental health and addiction system is built around the people who use it.

STEPPING-UP WORKFORCE DEVELOPMENT AND SUPPORTED EMPLOYMENT INITIATIVES

He Ara Oranga Rec. 10

Boosting the Māori and Pasifika-led mental health and addictions workforce – and making it culturally safe – should be a priority. This should be achieved not only through cultural competency training, but also ongoing monitoring of organisational systems to ensure that cultural bias is removed in decision-making and a culture of equity is created.

To help lower unemployment during the COVID-19 recovery phase, we must support people who experience mental distress to gain and maintain employment through supported employment initiatives. Supported employment should be provided to everyone with experience of distress and throughout employment, not just at the start.

MPROVING THE COMMISSIONING OF KAUPAPA MĀORI SERVICES He Ara Oranga Rec. 15

National discussions about what powers the proposed Māori Health Authority will have to reduce health inequities and improve health outcomes for Māori are vital (see Health and Disability System review).

Expert advisory groups recommend commissioning powers with a variety of functions, including commissioning for outcomes.

10 COMMISSIONING A RAPID REVIEW TO IDENTIFY GAPS IN WHĀNAU SUPPORT

He Ara Oranga Rec. 25

Commissioning a rapid review to identify the most significant gaps in support for families and whānau is urgently needed.

Services and groups that already experience these gaps in support will have the immediate answers to the most pressing areas of concern. Addressing these concerns will ensure families and whānau can receive the support they need for their own wellbeing.

For more information on our recommendations, please visit https://bit.ly/mhfcta2020

