# Mental health and addiction: Regional meetings: summary of key themes

## Background

The Mental Health and Addictions Directorate at the Ministry of Health recently held a series of regional meetings to discuss mental health and addiction developments planned as part of the Government’s response to He Ara Oranga. The meetings were held in five locations, Wellington, Christchurch, Dunedin, Hamilton and Auckland throughout July.

There was significant interest in the events and every location was at full capacity with attendees from DHBs, PHOs and NGOs.

The meetings followed a set agenda with presentations on topic areas in the morning and a workshop in the afternoon to seek feedback on key questions and provide opportunity for discussion. The presentation topics were:

* Expanding access to, and choice of, primary mental health and addiction support
* Enhancing our responses for Māori
* Substance and gambling harm
* Developing infrastructure to support change: implementation support

The Ministry appreciates the support and contribution of all who attended, and looks forward to continuing to engage with the sector to improve access and choice in relation to primary mental health and addictions services.

## Key themes

A number of key themes emerged from discussions at the meetings, with a high degree of consistency across all five meetings. These are outlined below.

### People and whānau

* There was very clear feedback at each meeting about wanting to see people and whānau at the centre of all the work we do.

### Equity

* Participants sent a clear message that we need to apply an equity lens to the transformation programme laid out by He Ara Oranga, and across all of the work of the sector.

### A holistic approach

* A strong desire was expressed to see a more holistic approach to mental health and wellbeing that is less medicalised and reflects the impact of social determinants, for example:
  + significant interest in service integration and infrastructure, including questions about whether/how the Ministry is working with other agencies such as MSD and Education on the transformation programme
  + a desire for new approaches and funding models (e.g. cross-agency contracts) that better enable holistic models of care and 'joined-up' service provision - "treating people as people rather than patients"; "any door is the right door”
  + widespread support for more collaborative approaches and breaking down silos - more clarity wanted on how this will work in practice
  + a desire to see significant environmental risk factors addressed, such as availability of alcohol and pokie machines in communities.

### Māori and Pacific peoples

* Participants reflected a very strong interest in the practicalities of how Māori and Pacific peoples’ communities can better be supported through general services and through Māori and Pacific peoples’ services (an 'and-and' approach).

### Lived experience

* One of the strongest themes that emerged from participant feedback was interest in, and support for, expanding the role of lived experience practitioners across the sector, as well as recognising and supporting other parts of the 'unrecognised' workforce, e.g. whānau, iwi, and community leaders.
* A clear and consistent view that lived experience should be self-defined/self-determined and based in our shared humanity, and that the lived experience workforce needs to be valued and supported to meaningfully contribute across all the work we do across the sector.

### Workforce

* There was much discussion and some concerns expressed about how to grow the workforce needed for the transformation programme, including points about:
  + making greater/more creative use of the existing workforce
  + the need for Health to work with other government agencies such as Corrections and Education to ensure the new workforce needed for mental health and addictions isn't simply transferred from related sectors also experiencing workforce pressures
  + existing pay equity issues across mental health and addictions sector organisations.

## Other discussion themes

* Many people who attended the meetings wanted a clear vision for change, while noting “the devil will be in the detail”. There was widespread support for change and the mahi entailed to make this happen, as well as a general desire for more information, more communication and clarity on next steps.
* It was noted that large parts of the sector, in particular NGOs, are experiencing significant funding and operational pressures – this makes it difficult for them to play the role they should have, and would like to have, in the strategic/change work ahead of us all.
* There was a consistent message that the sector has lots of knowledge, experience and ideas about the changes that need to happen; there is a strong desire to help drive transformation and build on existing examples of good practice.

## Staying in touch

These regional meetings related to just one initiative within the Directorate’s wider work programme. They represent a first step in the Ministry’s efforts to connect more often and easily with organisations and communities across the motu to achieve our shared vision for change.

To stay in touch, keep up to date with the latest news and learn more about upcoming opportunities to get involved, [subscribe to the Directorate’s fortnightly e-newsletter](https://www.health.govt.nz/our-work/mental-health-and-addictions/updates-mental-health-and-addiction-directorate/subscribe-mental-health-and-addiction-update?utm_medium=email&utm_campaign=Mental%20Health%20%20Addiction%20update&utm_content=Mental%20Health%20%20Addiction%20update+CID_fbc7f71266d8df9977179c3bb29fb74d&utm_source=Campaign%20Monitor&utm_term=subscribe%20on%20the%20Ministrys%20website) and share the link with your networks.