

# Briefing

## Publication of Te Huringa Tuarua 2023: Lived experiences of compulsory community treatment orders

<b>Date due to MO:</b>	30/06/2023	<b>Action required by:</b>	3/07/2023
<b>Security level:</b>	UNCLASSIFIED	<b>Briefing number:</b>	BN2023-008
<b>To:</b>	Hon Ayesha Verrall, Minister of Health		
<b>Copy to:</b>	Hon Peeni Henare, Associate Minister of Health (Māori Health) Hon Barbara Edmonds, Associate Minister of Health (Pacific Peoples) [REDACTED]		

## Contact for Telephone Discussion

Name	Position	[REDACTED]
Karen Orsborn	Chief Executive	[REDACTED]
Tanya Maloney	Director, Mental Health and Addiction Sector Leadership	[REDACTED]

## Minister's Office to Complete

- |  |                                    |   |
|--|------------------------------------|---|
| <input type="checkbox"/> Approved            | <input type="checkbox"/> Decline   | <input type="checkbox"/> Noted              |
| <input type="checkbox"/> Needs change        | <input type="checkbox"/> Seen      | <input type="checkbox"/> Overtaken by event |
| <input type="checkbox"/> See Minister's note | <input type="checkbox"/> Withdrawn |   |

Comment:

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<b>To:</b>	Hon Ayesha Verrall, Minister of Health		

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## Purpose of briefing

1. The Lived experiences of compulsory community treatment orders (CCTO) report is scheduled to be published on 12 July 2023. This briefing informs you of the key findings.
2. A copy of the report is attached as Appendix 1.

## Summary of report findings and calls to action

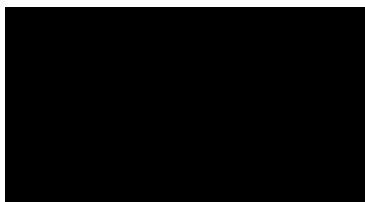
3. The use of CCTOs has increased from 60 people per 100,000 in 2005 to 90 people per 100,000 in 2020/21. There is persistent inequity in the use of CCTOs for Māori and Pacific peoples (in 2020/21, the rate for Māori subject to a CCTO was 307.3 per 100,000, the rate for Pacific peoples was 182.9 per 100,000, and the rate for other ethnicities was 89.8 per 100,000). There is also considerable variation in the use of CCTOs within and across health districts.
4. We found no international research to support clinical effectiveness or therapeutic benefits of CCTOs that would otherwise justify their use and the overriding of human rights.
5. Focus groups with people with lived experience including Māori, tāngata whaiora, whānau and family provided examples of exclusion and marginalisation in decision-making events. These illustrate the need for practice change before tāngata whaiora and whānau can be leading decisions on their own care and treatment.
6. Tāngata whaiora, whānau and family also provided suggestions for practice improvement under the current Mental Health Act, to protect mana and uphold rights to the greatest extent possible, in advance of the new law embedding Te Tiriti o Waitangi and international human rights.
7. Our findings raise questions about the involvement and meaningful participation of whānau and tāngata whaiora in CCTO decision-making processes. We highlight the opportunity to improve practices under existing law so that tāngata whaiora as well as whānau and family perspectives are heard, and tāngata whaiora make the decisions about their treatment.

8. We want to see:
  - a. the new mental health law based on supported decision making and embedding Te Tiriti o Waitangi and a Te Ao Māori worldview.
  - b. a reduction in the number of applications and outcomes granted for CCTOs, and a reduction in the rate of CCTO use.
  - c. a reduction in the inequitable use of CCTOs for Māori and Pacific.
  - d. services and courts implementing cultural and other practices that ensure tāngata whaiora as well as whānau and family perspectives are heard and tāngata whaiora lead in their decision making.
9. We will work with stakeholders to promote alignment of approaches that are effective in upholding rights and improving experience of services.

## Recommendations

Te Hiringa Mahara recommends that you:

a)	<b>note</b> the attached report Te Huringa Tuarua 2023: Lived experiences of compulsory community treatment orders	<b>Yes / No</b>
b)	<b>note</b> the attached communications plan for the report	<b>Yes / No</b>
c)	<b>note</b> that Te Hiringa Mahara intends to proactively release this briefing as part of our proactive release policy.	<b>Yes / No</b>



Karen Orsborn  
**Chief Executive**  
 Date: 30/06/2023

Hon Ayesha Verrall  
**Minister of Health**  
 Date:

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## Context

10. The CCTO report forms parts of Te Huringa Mahara's 2023 mental health and addiction services monitoring. This monitoring is collectively called Te Huringa Tuarua 2023 and comprises an overall report and three focus reports.
11. The report explores current use of CCTOs in practice, through the analysis of statistics, published research, and the voices of those most directly affected by CCTO use in practice.
12. The focus of the report is on people's experiences of the clinical review (application) and the court hearing (outcome) under the Mental Health Act.
13. The current Mental Health Act 1992 does not comply with international human rights obligations in Aotearoa New Zealand nor meet our commitments under Te Tiriti o Waitangi.
14. We note the Government's policy direction in mental health to move from substitute decision-making to supported decision-making as best practice. However, replacing the Mental Health Act 1992 and implementing changes is still many years away.

## Consultation

15. We have consulted with Te Whatu Ora and Manatū Hauora.
16. Te Whatu Ora and Manatū Hauora provided written feedback, which we have incorporated into the report.
17. We also engaged with Tāhū o te Ture | Ministry of Justice and offered them the opportunity to review the full report. It was their preference to only review the reference to the vision for the District Court Te Ao Mārama – enhancing justice for all. Following review of the relevant paragraph in the CCTO report, Tāhū o te Ture responded that they are broadly comfortable with a reference to Te Ao Mārama.

## Next Steps

18. We have attached a communications plan as Appendix 2. Our media release will be given to your office prior to publication.

## Attachments

Appendix 1 Te Huringa Tuarua 2023: Lived experiences of compulsory community treatment orders

Appendix 2 Communications plan

