



Te Hiringa Mahara Statement of Performance Expectations

2023 / 24



Te Hiringa Mahara
Mental Health and Wellbeing Commission

Te Kāwanatanga o Aotearoa
New Zealand Government

Presented to the House of Representatives pursuant to section 149 of the Crown Entities Act 2004.

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Board Responsibility

This document is the 2023/24 Statement of Performance Expectations (SPE) for Te Hiringa Mahara – Mental Health and Wellbeing Commission as required under the Crown Entities Act 2004.

This Statement of Performance Expectations (SPE) sets out our work programme for the period 1 July 2023 – 30 June 2024 and details how we will give effect to the Mental Health and Wellbeing Commission Act 2020.

The SPE provides a one-year view of what we will deliver and how our performance will be assessed and should be read alongside our Statement of Intent (SOI) 2022–2026.

In signing this statement, we acknowledge we are responsible for the information contained in the Statement of Performance Expectations for Te Hiringa Mahara.

The prospective financial statements have been prepared in accordance with the New Zealand generally accepted accounting practice (NZ GAAP), in agreement with the Crown Entities Act 2004 and to give effect to the Minister of Health’s expectations of Te Hiringa Mahara.

Signed on behalf of the Board:



Hayden Wano

Board Chair

20 June 2023



Kevin Hague

Deputy Board Chair

20 June 2023





Foreword from the Chair and Chief Executive

He mihi maioha atu kia koutou katoa i runga i ngā tuāhuatanga o te wā. Me mihi ki o tātau mate huhua o te motu whānui. Kua tangihia, kua mihia, no reira e ngā mate takoto mai rā, haere, haere atu rā. Ka hoki mai kia tātau te hunga ora, tēna koutou, tēnā koutou, tēnā tātau katoa.

Mental health and wellbeing is vital to people in Aotearoa. We will bring our leadership, monitoring, and advocacy roles to focus on areas that are important to people and where transformational improvement can be achieved.

The people of Aotearoa called for transformation of the mental health and wellbeing system in 2018. The cumulative impact of crises – COVID-19, cost of living challenges, floods, and Cyclone Gabrielle – has increased rates of distress and addiction and reduced wellbeing. We know too many people experience distress and too many people are not able to access the types and range of services they need. Populations who are already disadvantaged are impacted the most.

There has been progress; however, it has not kept pace with the growth of the size of the challenge we face. Further investment and action are needed to strengthen services and support for people who experience distress. The opportunity to embed new approaches and ways of working as envisaged in He Ara Oranga¹ through the health reforms cannot be lost.

Our leadership will focus the system on what is important to people. Our monitoring will track how the system is performing and the progress we are making. Our advocacy will focus on key areas for improvement and our connections with people, whānau and communities enable us to make progress.

During the year ahead, we will continue to develop our relationships with tangata whenua, our Te Tiriti o Waitangi partners, to enrich and consolidate our relationships and to support our advocacy for an increase in Kaupapa Māori services.

We will keep a focus on wellbeing for the people most disadvantaged, who often face the greatest challenges. Doing so involves addressing the contributors to wellbeing and advocating for community engagement and services.

¹ He Ara Oranga – Report of the Government Inquiry into Mental Health and Addiction
<https://mentalhealth.inquiry.govt.nz/inquiry-report/he-ara-oranga/>



Rangatahi Māori and young people are especially impacted, and we want to see greater action to understand youth wellbeing and improve services for young people who experience high rates of distress.

Wellbeing outcomes for Pacific peoples are a priority and we will collaborate with other agencies to gain insight into the factors that contribute to wellbeing of Pacific people in Aotearoa.

Strong leadership is needed, and Te Hiringa Mahara has a critical role. Our challenge is to fulfil our mandate and meet community expectations while operating within our constrained baseline resources. We have prioritised the work programme outlined in this SPE to the areas that are important to people, and where a difference can be made. The impact is a tangible reduction in activity and deliverables from 2022/23.

We are committed to fulfilling our mandate to have oversight of the mental health and wellbeing system.

Ngā manaakitanga,

Hayden Wano

Board Chair

20 June 2023



Karen Orsborn

Chief Executive

20 June 2023





An overview of Te Hiringa Mahara

We are an independent Crown entity established by the Mental Health and Wellbeing Commission Act 2020, as part of the Government's response to [He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction](#) (He Ara Oranga) (Government Inquiry into Mental Health and Addiction, 2018). The Mental Health and Wellbeing Commission Act 2020 was passed in June 2020, and we were established on 9 February 2021.

Objective of Te Hiringa Mahara

Our objective is to contribute to better and equitable mental health and wellbeing outcomes for all people in New Zealand.

Functions of Te Hiringa Mahara

- to assess and report publicly on the mental health and wellbeing of people in New Zealand
- to assess and report publicly on factors that affect people's mental health and wellbeing
- to assess and report publicly on the effectiveness, efficiency, and adequacy of approaches to mental health and wellbeing
- to make recommendations to improve the effectiveness, efficiency, and adequacy of approaches to mental health and wellbeing
- to monitor mental health services and addiction services and to advocate for improvements to those services
- to promote alignment, collaboration, and communication between entities involved in mental health and wellbeing
- to advocate for the collective interests of people who experience mental distress or addiction (or both), and the people (including whānau) who support them.

Te Tiriti o Waitangi

The Act makes clear that we must uphold Te Tiriti o Waitangi to ensure the Commission has the capability and capacity to uphold Te Tiriti o Waitangi and its principles and to engage with Māori to understand the perspectives of Māori.²

² Mental Health and Wellbeing Commission Act 2020



Te Tiriti o Waitangi Position Statement

We are an organisation committed to being grounded in Te Tiriti o Waitangi and improving mental health and wellbeing outcomes for Māori and whānau.

Te Tauāki ki Te Tiriti o Waitangi

We, Te Hīringa Mahara, recognise Te Tiriti o Waitangi as the legal instrument that allows Government to exercise kāwanatanga in Aotearoa New Zealand.

We acknowledge past failures to uphold Te Tiriti o Waitangi have had a harmful impact on the wellbeing of Māori as tangata whenua, and that alienation and racism have caused trauma. We commit to doing no further harm to Māori as tangata whenua and to being an organisation grounded in Te Tiriti o Waitangi. We support healing and the improvement of Māori mental health and wellbeing.

We will function as authentic partners with tangata whenua through all aspects of our work. We adopt Te Tiriti o Waitangi as the framework to use in regularly measuring and assessing our decisions, actions, and deliverables. Our goals and our way of working translate to each of the articles of Te Tiriti o Waitangi in the following ways.

Ko te Tuatahi - Article One Kāwanatanga

Mana Whakahaere –
Good Governance

We are established to monitor the mental health and wellbeing system of the kāwanatanga or government

We will actively monitor racism and discrimination across all mental health, addiction, and wellbeing services.

We will advocate for approaches and programmes across the system that address racism and discrimination in all its forms when it is identified.

Whakapuakitanga: Kupu Tauākī - Declaration - Ritenga Māori

Mana Māori - Cultural Identity and integrity

We will be explicit in our expectation that all mental health, addiction, and wellbeing services should be culturally competent, and we will actively monitor this. We acknowledge wairuatanga and spirituality as a key contributor to mental wellbeing and inclusiveness. We will advocate for access to traditional healing and treatment methods grounded in te ao Māori and celebrate inclusiveness.

Ko te Tuarua - Article Two Tino Rangatiratanga

Mana Motuhake - Te Iwi
Unique and indigenous

We embrace Mātauranga Māori as an evidence base. We actively support and advocate for more kaupapa Māori choices for whānau accessing mental health, addiction, and wellbeing services.

We support iwi approaches to mental health, addiction, and wellbeing service delivery based on their own mātauranga, pūkenga, and tikanga.

We will advocate for increasing access to rongoā and Māori healing methods across the mental health and wellbeing sector.

Ko te Tuatoru - Article Three Ōritetanga Mana Tangata

Fairness and Justice
Equity for Māori is a priority

We will be courageous in prioritising Māori through affirmative action.

We will challenge systems, structures, and services to address inequity and discrimination

Nōku te Hē - When we get it wrong

Being a Te Tiriti o Waitangi grounded organisation means knowing we will make mistakes, but being committed to learning from these, and making things right. We will collaborate with Māori partners to ensure we:

- correct our mistakes
- learn from our mistakes
- focus on moving forward to achieve shared goals in Māori mental health and wellbeing.



About us

Our objective is to contribute to better and equitable mental health and wellbeing outcomes for all people in Aotearoa New Zealand, through having oversight of the system, advocacy and monitoring. Our strategic direction: We are kaitiaki³ of mental health and wellbeing for people in Aotearoa New Zealand

Our vision: Tū tangata mauri ora – Thriving together

Whakawāteatia e tātou he ara oranga – clearing pathways to wellbeing for all

You can see our strategy and plans [on our website](#).

Lived experience

We are committed to being a genuine, courageous, and effective advocate for communities with lived experience of mental distress and addiction.

We have developed a Lived Experience Position Statement. We promise that, in all our work, we will prioritise the voices and interests of people who experience mental distress, substance harm, gambling harm, or addiction. Through our Lived Experience Position Statement, we commit to doing this by:

- privileging the experiences and aspirations of tāngata whaiora and tāngata mātau-ā-wheako Māori
- amplifying the voices of people who have experienced loss, harm, or exclusion in the mental health and addiction system
- monitoring the mental health and addiction system, and monitoring wellbeing, together with people with lived experience
- ensuring that each project or focus area of our work involves people whose personal experiences directly relate to that project or focus area
- valuing and using ‘lived expertise’ across our work, including lived experience research, wisdom, and leadership.



You can see our Lived Experience Position Statement in full [on our website](#).

³ Te Hīringa Mahara acknowledge the contribution of other agencies to improved mental health and wellbeing outcomes



Our role in the system

System leader

We provide system leadership for mental health and wellbeing. Our role involves thought leadership based on sound research and our understanding of mental health and wellbeing needs and system performance. We will encourage collaboration within the system to respond to inequity. Over time we will develop positions on emerging issues and take a public stance on important issues.

Advocacy

The goal of our advocacy is to accelerate transformation of wellbeing, mental health, and addiction systems. We undertake a range of intentional actions directed at decision-makers to influence policy, legislation, budgets and other decisions relating to the commissioning and provision of services. We also direct efforts to key influencers. Our advocacy engagement is more than sharing of information, it is about a call to action on the change we want to see in the system.

Monitoring

Our legislation gives us an important role to independently monitor the wellbeing, mental health, and addiction systems. The two frameworks we have developed are designed to work together and underpin our monitoring and reporting role.

- He Ara Oranga wellbeing outcomes framework describes what ideal wellbeing looks like for all people and whānau of Aotearoa.
- He Ara Āwhina (Pathways to Support) monitoring framework describes what an ideal mental health and addiction system looks like.

These frameworks will enable us to consider wellbeing, without losing sight of the need for improvement in mental health and addiction services.

Relationships

We will work with our partners to align and consolidate measurements of wellbeing. We will show how both He Ara Oranga wellbeing framework and He Ara Āwhina framework can be used to align and monitor services and whether the mental health and addiction system is functioning as needed to enable wellbeing.

We are building effective relationships with Māori and whānau, people with lived experience, priority population groups, the mental health and addiction system, and stakeholders across government in the wellbeing system.





Key external influences

We acknowledge mental distress and addiction continues to impact the wellbeing of people in Aotearoa. This has been evident through the COVID-19 pandemic, and more recently, the Auckland floods and Cyclone Gabrielle.

The SPE is written during a time of transformation of the health and disability system. It takes account of the broader environment we operate in, and the longer-term influences are outlined in our Statement of Intent 2022-2026 (SOI). The key external influences on this SPE 2023/24 are highlighted below.

Health and disability reforms

The health and disability system reforms will lead to broad changes in the approach to assessing needs and commissioning, delivering, and monitoring services. Te Whatu Ora - Health New Zealand, Te Aka Whai Ora - the Māori Health Authority have been established and Manatū Hauora maintains its important system stewardship role. Whaikaha - Ministry of Disabled People has also been established.

While Te Whatu Ora and Te Aka Whai Ora are primarily responsible for meeting the expectations set through the interim Government Policy Statement (iGPS), Te Hiringa Mahara will consider ways it can contribute to the iGPS priorities of:

- achieving equity in health outcomes
- embedding Te Tiriti o Waitangi across the health sector
- keeping people well in their communities
- developing the health workforce of the future
- ensuring a financially sustainable health sector, and
- laying the foundation for the ongoing success of the health sector.

WAI2575 – Health Services and Outcomes Kaupapa Inquiry

The Waitangi Tribunal is in Stage two (the final part) of the inquiry into historical claims relating to the health and disability system, specific services, outcomes, disabilities, mental health (including suicide and self-harm), alcohol, tobacco, and substance abuse. We maintain a watching brief pending the hearings and outcomes, directly through our effective working relationship with Manatū Hauora.

Whakamaua: Māori Health Action Plan 2020–2025

Whakamaua sets the government's direction for Māori health advancement over the next five years. We will contribute to the suite of objectives and priority areas with tangible actions that can be implemented to achieve high-level outcomes that will contribute to Pae ora (healthy futures) for Māori.



He Ara Oranga

He Ara Oranga set a baseline on issues identified for the mental health and addiction system in Aotearoa and outlined the way forward. We will monitor implementation of the government response to the He Ara Oranga recommendations as an integral part of our monitoring work. During the term of this SPE, we will see the milestone of five years passing since the release of He Ara Oranga.

Kia Manawanui Aotearoa

Kia Manawanui Aotearoa: Long-term Pathway to Mental Wellbeing (Ministry of Health, 2021), sets out the pathway to transform Aotearoa's approach to mental wellbeing. It is built on the agenda set by He Ara Oranga.

Cross-party interest in mental health and wellbeing

Cross-party political interest in mental health and wellbeing continues to be high as distress and addiction are experienced by many people in Aotearoa. This interest has become stronger with the impact of COVID-19 on the wellbeing of people.

Minister's Letter of Expectations 2023/24

The Minister of Health, through the Letter of Expectations, has highlighted the continued priority of mental wellbeing for the Government and expects to maintain momentum with the collective, whole-of-government approach to mental wellbeing outlined in **Kia Manawanui Aotearoa: Long-term pathway to mental wellbeing**.

We have been asked to work collectively and collaboratively with other entities as appropriate with our independent role to bring insights into system performance. We have also been asked to consider how the principles and intent of the Code of Consumer Expectations, including Te Tiriti o Waitangi, can be built into our work when engaging with consumers and whānau.⁴

The Minister notes we are uniquely placed to assess mental wellbeing outcomes and approaches across government and would like to see stronger emphasis on how we use our functions to advance and support a collective, whole-of-government approach to mental wellbeing. Acknowledging the breadth of our functions, we have been asked to prioritise our efforts towards areas with highest impact and where we are uniquely placed to contribute to system performance, while managing within the available resources. This includes identifying practical next steps that are feasible on the health system reforms and constraints on the system.

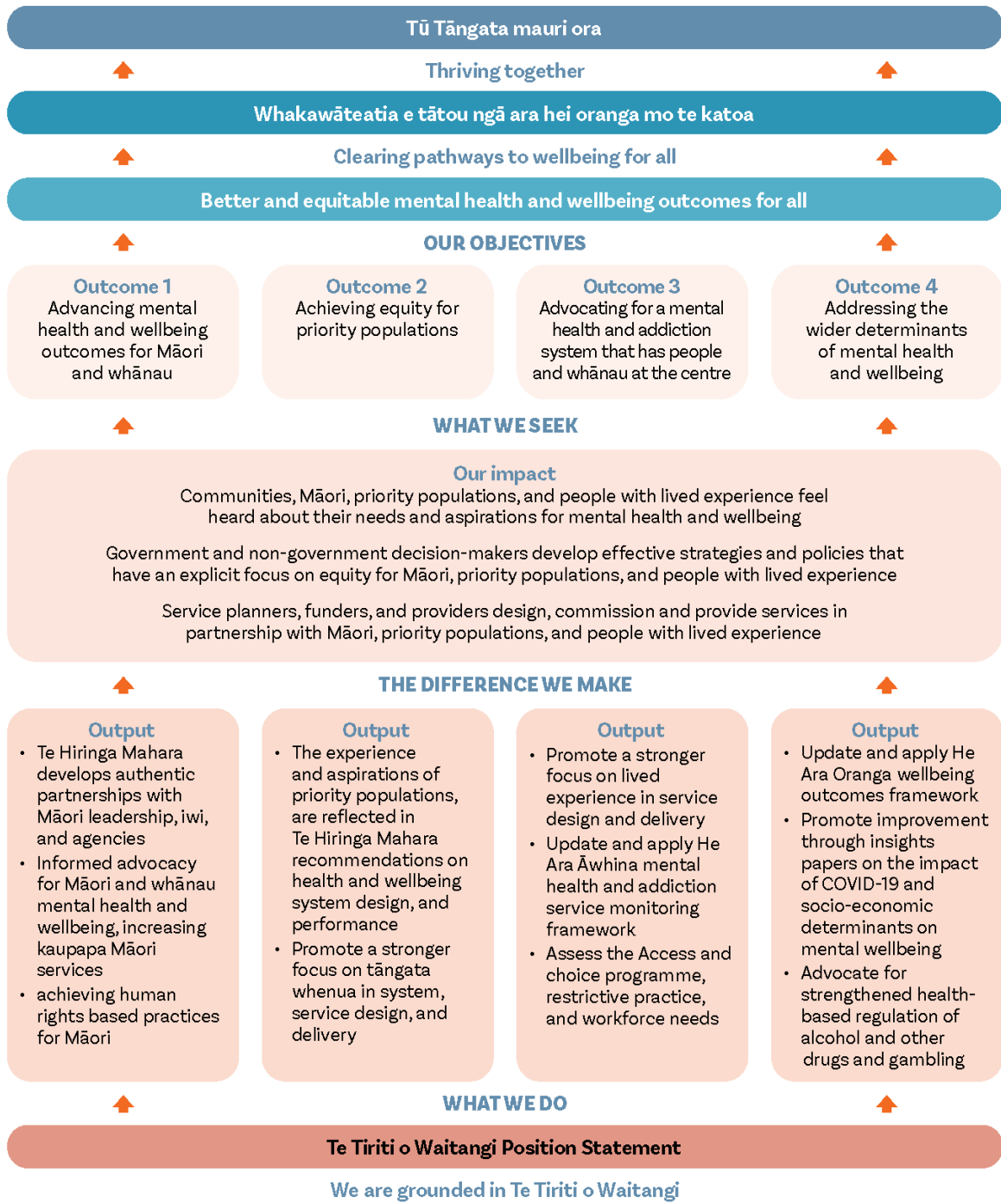
This SPE describes how we will deliver on our Statement of Intent 2022-2026 (SOI) and reflects the Ministers Letter of Expectations, 27 March 2023.

⁴ Taken from the Minister's letter of expectation 2023



Our strategic framework

Our strategic framework connects our deliverables (outputs), to the difference we make (impacts), our enduring priorities (outcomes), and our objective to contribute to improved mental health and wellbeing outcomes for all people in Aotearoa.



Priorities and deliverables

During the year we will have a greater emphasis on our advocacy role, utilising the insights from our 2022/23 work and what people have told us.

We have four enduring strategic priorities:⁵

1. Advancing mental health and wellbeing outcomes for Māori and whānau
2. Achieving equity for priority populations
3. Advocating for a mental health and addiction system that has people and whānau at the centre
4. Addressing the wider determinants of mental health and wellbeing.



Like individual harakeke (flax leaves) woven together to form a whāriki, our goals interconnect, overlap, and form a collective strength that is resilient and enduring.

Our plans for 2023/24 and measuring success

In the following section we outline the four enduring priorities, why they are important, what we have heard from people who we have engaged with and what we have learned from our work so far. We will build on our work to date for 2023/24.

For each deliverable we describe what we will do, how we will measure the output and the quality of the output.⁶

Through monitoring, assessing and reporting on the wellbeing of all people in Aotearoa and performance of the mental health and wellbeing system; we will track progress towards achieving the outcomes we are collectively seeking. Our two frameworks: He Ara Oranga Wellbeing Outcomes Framework and He Ara Āwhina (Pathways to Wellbeing) Framework underpin this reporting. We know it will take time to see a change in outcomes.

We will continue to work towards developing improved measures and the impact of our outputs as described in our strategic framework.

⁵ We describe these priorities in more detail in Section two

⁶ For 2023/24 we have not divided our work into output classes and costed them. This is because our total level of funding is small and dividing it into smaller components does not provide useful information



Priority

1

Advancing mental health and wellbeing outcomes for Māori and whānau



Why this is important

The entrenched systemic inequities Māori experience have impacted on their mental health and wellbeing outcomes.

Te Tiriti o Waitangi is the founding document that underpins the special partnership / relationship, responsibilities, and obligations between the Crown and tangata whenua Māori. Māori equity (a requirement of the Crown to commit to achieving equitable health outcomes for Māori) is one of five key principles in Te Tiriti o Waitangi framework as articulated by the courts and the Waitangi Tribunal.

What we have heard

Authentic relationships: We heard from mana whenua, tāngata whaiora and whānau in our engagements over the year. In wānanga, mana whenua said, “to establish trusting, enduring relationships and gaining credibility, then the long way is the short way.” They generously shared their advice that relationships are made between people, not organisations, authentic relationships include the recognition of imbalances of power and Taranaki Whānui, Te Atiawa and Ngāti Toa Rangatira are united as mana whenua.

From tāngata whaiora and whānau, being heard, prioritised, validated, and legitimised is truly valued in relationships, as the following kōrero reflects, “Ngā mihi aroha to you Commission, for hearing us and prioritizing, validating and legitimizing our voices over the generations, to make a Stand for Change, here and now”!

Māori mental health and wellbeing: He Ara Oranga identified the need for a commitment to equity as an expressed priority for Māori. Colonisation, racism, and discrimination have negatively impacted Māori for generations. A significant and sustained focus is needed to improve outcomes.

A view from whānau in recent hui on developing our kaupapa Māori insights report reflects the need to address inequities. “If we had equitable services, then we’d see true treaty partnership, the honoring of the treaty, so equity is whānau driven, whānau at the center and whānau at the decision-making table”.

What we will do in 2023/34

Relationships and engagement: We will continue to build and strengthen our relationship with mana whenua Te Atiawa and Ngāti Toa. We will work towards tākai here with mana whenua.



We will continue to grow our relationships with Māori through Te Aka Whai Ora, Māori Health Directorate Ministry of Health, Kōkiri roopū of Whatu Ora, Kaupapa Māori Networks and extend to other Māori leader forums.

We will increase our relationships and engagements to other areas, with recognised Māori leader forums.

Kaupapa Māori Services: We engaged with Māori as we developed our Kaupapa Māori Insights paper in 2022/23, surfacing vital information or viewpoints that can broaden the public conversation. This paper and our engagement with Māori will inform our advocacy actions in 2023/24.

We will know our work is having an impact when:

- relationships are enduring and authentic with iwi and Māori
- the voices of Māori, iwi, hapū, and whānau are heard ⁷
- Māori worldviews are reflected in mental health and wellbeing approaches (including learning from those with lived experience) to drive change ⁸
- health outcomes for Māori are highlighted as part of performance monitoring.

Outcomes

We will know our work is making a difference when we see positive change for Māori across the mental health, addiction, and wellbeing systems. Progress towards this will be measured using the He Ara Oranga and He Ara Āwhina frameworks (SPE 5 and 7).

Outputs

Deliverable	Quantity measure	Quality measure
1. We expand our relationships and engage with Māori system leaders.	We broaden our relationships and engage with other Māori system leaders by 30 June 2024.	Engagements and contributions are positively evidenced.
2. We advocate for an increase to Kaupapa Māori services that are informed by Kaupapa Māori Insights paper 2023.	We undertake at least 3 advocacy activities which may include publishing papers, presentations, making submissions and/or public statements, and intentional engagement with decision-makers.	Advocacy reflects the voices of people impacted and knowledge gained from engagement, monitoring and research. ⁹

^{7,8} SOI 2022-2026 p18

⁹ Refer to our role in the system page 10



Priority

2

Achieving equity for priority populations

Why this is important

While there have been specific initiatives to address health inequities, which have led to incremental improvements in reducing disparities, avoidable differences in access to, and experience of care and mental health and wellbeing outcomes between groups of people remain.

What we heard

Māori equity and equity for all: Māori are both a Tiriti partner (Māori equity) and a priority population (equity for all). We heard in recent focus hui with Māori whānau, tāngata whaiora and Kaupapa Māori providers that equity is inherent within Te Tiriti.

We acknowledge that Māori experience less access to health care, and often poorer-quality care when they receive it. The impacts of racism and social and economic determinants of health have long been recognised as contributors to the poorer health outcomes for Māori.

To achieve mental health and wellbeing equity for Māori, it is critical that we continue to address structural inequities.

Privileging the voices of priority populations: Some population groups experience poorer mental health and wellbeing than others. These population groups, which are identified in the Mental Health and Wellbeing Commission Act 2020, are at the centre of our mahi. Our advice will be grounded in these voices.

He Ara Oranga, government reporting, and our own reports over the last years have shown that Pacific peoples experience some of the worst wellbeing outcomes in Aotearoa, across a range of measures. The current system is not working for Pacific peoples, transformation is needed. We intend to better understand and elevate those concerns and calls for action.

In 2022/23 we heard from rangatahi Māori and young people, and undertook a review of academic literature, to understand youth wellbeing and barriers to better outcomes. Rangatahi Māori and young people have been clear about what they see as barriers to better wellbeing outcomes for them, and where action is needed.

What we will do in 2023/24

Pacific peoples: With our partners, including the Ministry for Pacific Peoples, we aim to further raise the profile of Pacific communities, and will focus on collating and presenting data and information to highlight the challenges faced and the self-determined paths to greater wellbeing for these communities.



Young People: We will build on our past year’s work, reflecting the insights and the voices of tāngata whaiora, rangatahi Māori and young people in our advocacy for change. We will weave in our insights from our Youth Insights 2023 to improve services for young people, rangatahi Māori and tāngata whaiora.

We will know our work is having an impact when

- priority populations and their whānau are actively involved in system design and service delivery design.¹⁰
- government and non-governmental decision-makers develop effective strategies and policies that have an explicit focus on equity for priority populations.¹¹

Outcome

We will know our work is making a difference when we see positive change for priority populations across the mental health and wellbeing system. Progress towards this will be measured using the He Ara Oranga and He Ara Āwhina frameworks (SPE 5 and 7).

Outputs

Deliverable	Quantity measure	Quality measure
3. We gain an understanding of the factors that contribute to the mental health and wellbeing of Pacific peoples in Aotearoa.	We publish insights about the wellbeing of Pacific peoples by 30 June 2024	The published report produces diverse perspectives, information, and analysis to inform public conversation.
4. We advocate to address the factors that adversely contribute to the wellbeing of rangatahi Māori and young people based on the insights gained through engagement with rangatahi, young people and the agencies that support them.	We undertake at least 5 advocacy activities which may include publishing papers, presentations, making submissions and/or public statements, and intentional engagement with decision-makers.	Advocacy reflects the voices of people impacted and knowledge gained from engagement, monitoring and research. ¹²

¹⁰ SOI 2022-2026 pg 21

^{11, 12} Refer to our role in the system page 10



Priority

3

Advocating for a mental health and addiction system that has people and whānau at the centre

Why this is important

He Ara Oranga outlined a future vision of a transformed mental health and wellbeing system. The Government responded through commitments to actions and investment and whilst progress has been made there is much more to be done.

We will continue our work to advocate for transformation of the system as envisaged in He Ara Oranga, and to monitor and report on the mental health and addiction system.

What we heard

Lived experience feedback shaped the development of our He Ara Āwhina system monitoring framework. Aspirations for the system include a paradigm shift to a holistic, wellbeing-focused approach.

We heard the importance of monitoring beyond services to encourage policy change, community development and empowered whānau who can support each other.

Lived experience communities have encouraged us to continue to report coercive practices and advocate for changes that respect the dignity and rights of all tāngata whaiora.

What we will do in 2023/24

Monitoring and reporting using He Ara Āwhina framework: We will use He Ara Āwhina to monitor the mental health and addiction system and services, including the services funded by the Access and Choice programme.

He Ara Āwhina will help us understand how well our mental health and addiction system is responding to the experiences, needs, and aspirations of tāngata whaiora and whānau. This understanding will inform our advocacy actions including recommendations and calls to action.

Expanding our engagement with lived experience communities, tāngata whaiora who experience mental distress, substance harm, gambling harm, and/or addiction:

This year we will increase our focus on relationships and expand our engagement to connect with people across the motu who experience distress, substance harm, gambling harm, or addiction. This will support us to privilege these voices and interests in our work plans, our monitoring, and our advocacy.



Advocating for a system aligned with human rights and Te Tiriti o Waitangi: The reform of the Mental Health (Compulsory assessment and Treatment) Act 1992 is an important focus. The use of the Act has significant and far-reaching impacts for people experiencing distress, particularly those who are subject to coercive practices. Further, it does so with inequitable impact on tāngata whaiora Māori.

Developing relationships with the sector – service providers, clinicians, and commissioners: We have begun to develop relationships with the mental health and addiction system, although this has been challenging through the peak of the COVID-19 pandemic. We will navigate relationships so we can influence the change we want to see and strengthen our leadership role – this will be a focus during 2023/24.

We will know our work is having an impact when:

- the voices of tāngata whaiora and whānau are heard ¹³
- advocating for a fairer mental health, alcohol and other drugs, and gambling policy to support positive change ¹⁴
- information we share generates public conversation on important matters concerning mental health policy, services, and support.

Outcome

We will know our work is making a difference when we see improved and equitable wellbeing outcomes for tāngata whaiora and whānau. Progress towards this will be measured using SPE deliverable 5.

Outputs

Deliverable	Quantity measure	Quality measure
5. Apply He Ara Āwhina monitoring framework in the monitoring of mental health and addiction services and system.	He Ara Āwhina underpins a published report on mental health and addiction services by 30 June 2024. ¹⁵ This will include monitoring of the Access and Choice programme, services and investment.	The published report produces diverse perspectives, information, and analysis to inform public conversation.
6. We will advocate for changes in practice and legislation that respects people’s rights to make decisions about their care and treatment and supports their capacity to do so.	We undertake at least 5 advocacy activities which may include publishing papers, presentations, making submissions and/or public statements, and intentional engagement with decision-makers.	People with lived experience expertise participate in our advocacy actions and provide input into advocacy issues we report on.

^{13,14} SOI p23

¹⁵ This deliverable aligns to Vote Health Estimates Assessment of performance ‘He Ara Āwhina underpins a published report on mental health and addiction services by 30 June 2024’



Priority
4

Addressing the wider determinants of mental health and wellbeing

Why this is important

Wellbeing, which influences mental health and addiction, is comprised of a range of factors (income, education, social connections, housing, food, security, building capacity for equity) and other health factors (affordable housing, transportation and neighbourhoods, racism, discrimination and violence), that a person experiences. The majority of these factors operate outside of health settings and systems. Addressing these factors enhances wellbeing and supports mental health.

What we heard

Communities continue to affirm the prior insight we have gained from our He Ara Oranga wellbeing outcomes framework. They remind us that, for wellbeing and mental health to be improved, people need their rights, dignity, and tino rangatiratanga fully realised. They need to feel safe, valued, and connected to their communities and their cultures. They need resources, skills, resilience, hope, and purpose for the future.

He Ara Oranga wellbeing outcomes framework: provides a picture of what holistic wellbeing looks like. From this foundation, the framework helps provide: a common wellbeing purpose; a way to measure whether wellbeing outcomes are improving, with a focus on improving equity; a way to align partnership efforts to achieve improved wellbeing; transparent accountability; and feedback loops to improve the way Aotearoa supports wellbeing.

Cross-government initiatives: We have legislated functions to promote alignment, collaboration, and communication between entities involved in mental health and wellbeing. This function is particularly important as we navigate our way through the health and disability system reforms.

What we will do

Assess and report on wellbeing: We will work with our partners to align and consolidate measurement of wellbeing, including elements of the implementation of Kia Manawanui, using domains of He Ara Oranga wellbeing outcomes and He Ara Āwhina frameworks.

We will be guided by He Ara Oranga; we will strengthen the relationships with government agencies and develop new relationships to better target system settings and existing investment.



Advocacy through submissions: We will continue to provide advice and encourage people’s participation in issues that affect mental health and wellbeing through our submissions process.

We will know our work is having an impact when:

- the voices of communities are heard, and policies and legislation altered to reflect them.¹⁶
- government decision-makers develop effective strategies and policies that have an explicit focus on addressing the broader view of social, economic, and commercial determinants of health and wellbeing outcomes.¹⁷
- we generate public conversation on important matters concerning mental health policy, services, and care.

Outcome

We will know our work is making a difference when we see collaboration within the system to respond to inequity, and there is positive change for the determinants of mental health and wellbeing. Progress towards this will be measured using He Ara Oranga wellbeing outcomes framework and He Ara Āwhina framework.

Outputs

Deliverable	Quantity measure	Quality measure
7. We will use He Ara Oranga wellbeing framework to assess wellbeing, including monitoring progress on the implementation of Kia Manawanui.	We will publish information to assess progress on Kia Manawanui (Long-term pathway).	The published report represents diverse perspectives and information.
8. We will provide advice through the submissions process on policies and legislation that will have a meaningful impact on the mental health and wellbeing of people in Aotearoa.	We provide advice on at least 5 proposed policies and items of new and changed legislation.	Our advice reflects the voices of people impacted and knowledge gained from engagement, monitoring, and research. We monitor submissions to see if our advice has been considered.

^{16,17} SOI p24





Organisation health and capability

We will develop the systems, processes, connections, and people to deliver on our core role and functions and achieve our goals.

Governance

The Governor-General appoints Board members of Te Hiringa Mahara following recommendations made by the Minister of Health. The Board (made up of seven members), provides guidance and stewardship to Te Hiringa Mahara on its strategy and delivery of its work programme.

Two sub-committees have been created to support the Board's work:

- the Finance, Audit and Risk Committee (provides independent assurance and assistance to the Board on our financial statements and the adequacy of systems of internal controls and legislative compliance) and
- the Appointments and Remuneration Committee (provides advice on senior management appointments and remuneration policy and strategy, recruitment appointment and remuneration of the Chief Executive).

Our people

We will ensure our people have the skills, abilities, and values they need to carry out the role and functions of Te Hiringa Mahara as this SPE outlines. We have a team that is capable, diverse, inclusive, and representative of Aotearoa. We will work hard to maintain that.

We will ensure their voices are heard through our 'Te Tūrama' and 'Pulse' Surveys. These surveys tell us what staff feel is important to their development in Te ao Māori worldview and te reo learning (Te Tūrama), and their take on what's working, what's not and where we can improve (Team Pulse).

Organisational capability

There are material constraints in our monitoring, Te Ao Māori and engagement with priority populations capability. We mitigate these constraints through focusing on the areas that are most important to people and where we can have the biggest impact.

Our workforce strategy will set out the key areas of focus in 2023/24 to develop our people.

We have already created a programme of learning ('Kā Māia, Kā Taea') to provide te reo, noho marae, history, kawa, and tikanga learnings to all staff. This will begin in late 2022/23 and continue through 2023/24. We are committed to increasing our



capability in these areas to reinforce our commitment to being grounded in Te Tiriti o Waitangi.

Systems and processes

We have fit for purpose corporate systems and processes, but we will ensure we continue to revise and update them to ensure they remain so.

We will continue to outsource some corporate support services, such as legal, human resources and information services.

Environmental sustainability

The Government's Climate Change Response (Zero Carbon) Amendment Act 2019 sets a clear requirement for Aotearoa to be net carbon neutral by 2025. We have an environmental sustainability action plan and we will report against this in our annual report.

Kia Toipoto – Closing Gender, Māori, Pacific, and Ethnic Pay Gaps: Action Plan

Our workplace is fair and equitable with a commitment to help employees close gender, Māori, Pacific, and ethnic pay gaps to create a fairer workplace for all.

In April 2023, we published our action plan with goals and targets to improve gender and equitable representation of the people we serve, in our workforce and in our leadership team. We will publish an updated action plan annually.

Risk management

There are a range of risks that we manage. We have a process for identifying and managing risk. The Board, Chief Executive, and senior management identify strategic and operational risks in consultation with their teams. Risk management is a standing agenda item at each Finance, Audit and Risk, and Board meeting.





Our financial framework

Prospective financial information

These prospective financial statements have been prepared in accordance with the New Zealand generally accepted accounting practice (NZ GAAP) for public benefit entities. Their purpose is to help Parliament to consider the planned performance of Te Hiringa Mahara. The use of the information in these statements for other purposes may not be appropriate.

Please note that actual results are likely to vary from the information presented and that the variation may be material.

Statement of underlying assumptions

The following assumptions have been used in preparing these prospective financial statements.

- Our statutory functions will not change.
- Our revenue of \$5,359,000 from the Crown will be available for the 2023/24 year.
- The Board have determined that \$300,000 of prior year surplus carried forward is used in 2023/24. This will be used to fund specialist fixed-term resource to deliver specific elements of our 2023/24 work programme.
- Equity of around \$1.5m is required to be maintained to manage large unforeseen one-off events and contractual liabilities if Te Hiringa Mahara is disestablished.
- No unexpected external events (such as a natural disaster) will occur that will require significant operating or capital expenditure.



Prospective statement of comprehensive revenue and expense for the period ended 30 June

	Forecast 2023 \$000s	Budget 2024 \$000s	Forecast 2025 \$000s	Forecast 2026 \$000s
Funding from the Crown (baseline)	5,071	5,359	5,359*	5,359*
Funding from the Crown (additional)	85	-	-	-
Interest income	28	25	25	25
Total revenue	5,184	5,384	5,384	5,384
Permanent and fixed-term staff	3,444	3,350	3,150	3,250
Other personnel costs	310	58	58	58
Total personnel costs	3,754	3,408	3,208	3,308
Board costs	303	300	300	300
Building costs	220	230	230	230
Consultants	178	200	200	200
Programme costs	943	698	598	498
Other costs	875	848	848	848
Total expenditure	6,273	5,684	5,384	5,384
Surplus / (deficit)	(1,089)	(300)	-	-
Total comprehensive revenue and expenditure	(1,089)	(300)	-	-

*This assumes current funding levels.



Prospective statement of financial position as at 30 June

	Forecast 2023 \$000s	Budget 2024 \$000s
Cash or cash equivalents	197	123
Term deposits	2,050	1,750
Other current assets	35	35
Total current assets	2,282	1,908
Property, plant, and equipment	200	300
Total assets	2,482	2,208
Creditors and payables	257	258
Other creditors	100	100
Employee liabilities	325	350
Total current liabilities	682	708
Net assets	1,800	1,500
Contributed capital	1,250	1,250
Accumulated surplus/deficit	550	250
Total equity	1,800	1,500

Prospective statement of changes in equity for the period ended 30 June

	Forecast 2023 \$000s	Budget 2024 \$000s
Opening balance	2,889	1,800
Total comprehensive revenue and expense	(1089)	(300)
Closing balance	1,800	1,500



Prospective statement of cashflows for the period ended 30 June

	Forecast	Budget
	2023	2024
	\$000s	\$000s
Receipts from the Crown	5,156	5,359
Interest received	28	25
Employees, suppliers, and other	(6,212)	(6,161)
Net GST	300	333
Net operating cashflows	(728)	(444)
Property, plant, and equipment purchased	(160)	(80)
Net receipts from investments	305	450
Net investing cashflows	145	370
Net change in cash position	(583)	(74)
Opening cash balance	780	197
Closing cash balance	197	123





Statement of accounting policies

Reporting entity

Te Hiringa Mahara – Mental Health and Wellbeing Commission is an independent Crown entity under the Crown Entities Act 2004. It was established by the Mental Health and Wellbeing Commission Act 2020 and is domiciled in New Zealand.

The Mental Health and Wellbeing Commission Act 2020 sets out the functions and responsibilities of Te Hiringa Mahara. The objective of Te Hiringa Mahara is to contribute to better and equitable mental health and wellbeing outcomes for people in New Zealand. It has designated itself as a public benefit entity for the purposes of the New Zealand generally accepted accounting practice (GAAP).

Measurement base and statement of compliance

We have prepared these prospective financial statements to comply with the requirements of the Crown Entities Act 2004. We prepared these financial statements on a historical cost basis for a going concern to comply with GAAP, which includes the Public Sector Benefit Entity (PBE) accounting standards that apply to a public sector PBE. The Commission authorised the financial statements for issue on 20 June 2023.

The prospective financial statements comply with PBE FRS 42 – **Prospective Financial Statements**. We are required to prepare a SPE, including prospective financial statements, at or before the start of each financial year to promote public accountability. The prospective financial statements may not be appropriate for any other purposes.

We have prepared the prospective financial statements based on best estimates and assumptions about future events that we expect to occur. As the financial statements are prospective, actual results will vary from the information presented. We will disclose and explain all material variations in the subsequent Annual Report.

Accounting policies

We have applied the following accounting policies, which significantly affect the measurement of financial performance and of financial position.

Revenue

Te Hiringa Mahara is primarily funded through revenue received from the Crown, which is restricted in its use for the purpose of Te Hiringa Mahara meeting its objectives as specified in this SPE. Revenue from the Crown is recognised as revenue when earned and is reported in the financial period to which it relates.



Goods and services tax (GST)

All items in the financial statements are stated as exclusive of GST, except for receivables and payables, which are stated as GST inclusive.

Taxation

Te Hiringa Mahara is a public authority in terms of the Income Tax Act 2004. For this reason, it is exempt from income tax.

Property, plant, and equipment

- Property, plant, and equipment asset classes consist of computers, furniture and fittings, and office equipment.
- Property, plant, and equipment are shown at cost, less than any accumulated depreciation and impairment losses.
- The cost of an item of property, plant, and equipment is recognised as an asset only when it is probable that future economic benefits or service potential associated with the item will flow to Te Hiringa Mahara and the cost of the item can be measured reliably.
- Gains and losses on disposals are determined by comparing the proceeds with the carrying amount of the asset. Gains and losses on disposals are included in the prospective statement of financial position.
- Costs incurred after initial acquisition are capitalised only when it is probable that future economic benefits or service potential associated with the item will flow on to Te Hiringa Mahara, and the cost of the item can be measured reliably.
- The costs of day-to-day servicing of property, plant, and equipment are recognised in the prospective statement of financial position as they are incurred.

Depreciation

Depreciation is provided using the straight-line (SL) basis at rates that will write off the cost (or valuation) of the assets to their estimated residual values over their useful lives. The useful lives and associated depreciation rates of major classes of assets have been estimated as follows:

- computers – three years 33% SL
- office equipment – five years 20% SL
- furniture and fittings – five years 20% SL.

Intangible assets

- Acquired computer software licences are capitalised based on the costs incurred to acquire and bring to use the specific software.



- Where software is purchased as a service, it is expensed over the period of the contract.
- Costs associated with maintaining computer software are recognised as an expense when incurred.
- Costs associated with developing and maintaining the website of Te Hiringa Mahara are recognised as an expense when incurred.

Amortisation

Amortisation begins when the asset is available for use and ceases at the date the asset is derecognised.

The amortisation charge for each period is recognised in the prospective statement of financial position. The useful lives and associated amortisation rates of major classes of intangible assets have been estimated as follows:

- acquired computer software – three years 33% SL.

Operating leases

Leases that do not transfer all the risks and rewards incidental to ownership of an asset to Te Hiringa Mahara are classified as operating leases. Lease payments under an operating lease are recognised as an expense on a straight-line basis over the term of the lease in the prospective statement of financial position.

Financial instruments

Te Hiringa Mahara is a party to financial instruments as part of its normal operations. These financial instruments include bank accounts, short-term deposits, accounts receivable, and accounts payable. All financial instruments are recognised in the prospective statement of financial position and all revenue and expenses in relation to financial instruments are recognised in the prospective statement of comprehensive income. All financial instruments are shown at their estimated fair value.

Accounts receivable

Accounts receivables are stated at their estimated realisable value after providing for doubtful and uncollectable debts.

Employee entitlements

Provision is made in respect of employees' annual leave. The provision is calculated on current rates of pay and expected to settle within 12 months of reporting date (or approval gained to carry forward leave) and is measured at nominal values on an actual entitlement basis at current rate of pay.



Glossary of te reo Māori terms

Kupu Māori	Meaning
Kāwanatanga	The term 'kāwanatanga' comes from the English word 'governor'. In modern times, it is taken to mean government.
Mana Motuhake	Māori self-determination, or tribal governance; more simply, autonomy over one's own affairs and destiny.
Mana Whakahaere	The authority, mandate, and power for Māori to exercise rights and responsibilities over themselves as people, or things to which they have a connection – for example, water, the environment.
Mana Māori	Enabling ritenga Māori that are framed by te ao Māori, enacted through tikanga Māori and contained within mātauranga Māori.
Mana tangata	Achieving equity in health and disability outcomes for Māori across the life course and contributing to Māori wellness.
Māori as tangata whenua	Normally used to emphasise that Māori are not just New Zealanders but indigenous and Te Tiriti o Waitangi partners.
Mātauranga Māori	Māori knowledge. It encompasses traditional concepts of knowledge and knowing passed down from Māori ancestors through all sort of means – e.g., storytelling, song, carving, tāmoko. However, all knowledge grows and develops. For this reason, mātauranga Māori also refers to the application of traditional knowledge to new contexts.
Nōku te hē	A common phrase in te reo Māori today, which is a translation of the phrase, 'That's my bad!'
Ōritetanga	Equality and equal opportunity for Māori.
Pou tikanga	In this sense 'pou' means 'post' or 'pillar', and is used metaphorically to describe the tikanga arm of the Iwi Leaders Group's organisation.
Pūkenga	Skills, knowledge, expertise within a field.
Ritenga Māori	As it appears in Te Tiriti o Waitangi (Māori version), customary practice. More recently, it also means religious and spiritual practices.
Rongoā	Traditional Māori medicines, treatment, remedies, and healing methods.
Tākai Here	A partnership agreement.
Tāngata Whaiora	People who are seeking wellness. Referring to people who have lived experiences of mental illness and are seeking wellness or one's recovery.
Te ao Māori	The Māori world or Māori worldview. It encompasses everything from tikanga Māori, to waiuatanga, from traditional forms of mātauranga Māori to more modern concepts.



Te Tiriti o Waitangi	In English, The Treaty of Waitangi. There are two versions of this document – one in English and the other in te reo Māori. When you talk about Te Tiriti o Waitangi, you are referencing the Māori version.
Tikanga Māori	Customs, process, habits, lore, and traditional values within a Māori context.
Tino rangatiratanga	Appears in Te Tiriti o Waitangi article 2 (Māori version). Often used to refer to absolute sovereignty for Māori.
Wairuatanga	Spirituality, or the act of expressing one’s spirituality. Wairua refers to the spirit or soul of a person that exists beyond death.



