

Meeting with Te Hiringa Mahara, the Mental Health and Wellbeing Commission

Date due to MO: 16/08/2022 **Action required by:** 24/08/2022

Security level: UNCLASSIFIED **Briefing number:** BN2022-009

To: Hon Peeni Henare, Associate Minister of Health Māori

Copy to: Minister of Health, Hon Andrew Little
[REDACTED] Ministry of Health

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[REDACTED]
Karen Orsborn
Chief Executive
Date: 16/08/2022

Hon Peeni Henare
Associate Minister of Health Māori
Date: 24/08/2022

Minister's Office to Complete

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| <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 Withdrawn | |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:

Meeting with Te Hiringa Mahara, the Mental Health and Wellbeing Commission

Security level: UNCLASSIFIED **Date:** 10/08/2022

To: Hon Peeni Henare, Associate Minister of Health Māori

Purpose of report

1. To brief you on the meeting that you will have with our Board Chair of Te Hiringa Mahara, Chief Executive, and Chief Advisor Māori.
2. On 24 August 2022 we would like to focus our discussion on the following key areas:
 - Launch of our te reo Māori name and branding
 - He Ara Āwhina – Pathways to support
 - Māori engagement, relationship and partnering
 - Advocacy approach for improving Māori mental health and wellbeing
 - Nau Mai te Ao
 - Covid-19 Impacts Insights programme.

Key Points

Launch of our te reo Māori name and branding

3. The launch of our te reo Māori name, Te Hiringa Mahara and associated branding, was held on 5 July 2020 at Wharewaka. Three key documents were also dedicated on the day. These were our Te Tiriti o Waitangi Position Statement, He Ara Āwhina framework and Strategy.
4. The event was made available via a live stream link <https://youtu.be/v1qrLfTpmHk> to enable a wider range of stakeholders and communities to join.
5. The launch represented an important step in our progress from an initial start-up organisation to being able to monitor and advocate for greater mental health, addiction, and wellbeing outcomes.
6. Key speakers were Te Ati Awa iwi representative Karepa Wall, Hayden Wano (Board Chair), Karen Orsborn (Chief Executive), [REDACTED] (Tātou Rangatira), [REDACTED] (Tātou CEO), Sharon Shea (Chair Expert Advisory Group) and Helmut Modlik (CEO, Ngāti Toa Rangatira).

He Ara Āwhina – Pathways to support

7. On 30 June 2022 we published He Ara Āwhina (Pathways to Support) Framework online. The framework was also included in the physical release and dedication at our launch on 5 July. He Ara Āwhina is a framework that describes what an ideal mental health and addiction system looks like from a tāngata whaiora and whānau perspective.

8. We will use He Ara Āwhina to:
 - Monitor mental health and addiction services
 - Advocate for improvements to the mental health and addiction system and services
 - Monitor changes as the mental health and addiction system transforms.
9. We heard the voices of whānau Māori on te ao Māori perspective of the framework. It received positive feedback and overall, people told us that He Ara Āwhina resonates with them, they like the first-person narrative, structure and concepts. The feedback guided us to strengthen and clarify content that is important to people. The final published He Ara Āwhina framework content reflects many changes that people asked for through the consultation process.
10. We will soon be publishing three submission summary documents received through the 260 submissions that were made during the consultation period. These summaries provide a te ao Māori perspective, shared perspective and a lived experience perspective. Collectively they will respectively reflect and provide a 'place and space' for feedback from the public consultation process completed in May 2022.
11. The feedback we received from Māori submissions were generally supportive of the draft framework and provided invaluable insight into how it could be improved. The main themes from this feedback included:
 - a. He Ara Āwhina aligns well with Kia Manawanui Aotearoa long-term pathway to mental wellbeing, Whakamaui Māori Health Action Plan
 - b. The framework looks positive for tāngata whaiora and aligns with Māori aspirations for; equity, being whānau-centred, community, trauma-informed support, and eliminating coercive and restrictive practices
 - c. A desire for a framework or model to clearly articulate the dimensions and aspirations through a Māori lens
 - d. A strong emphasis is needed on a culturally safe and competent workforce – a key enabler of the Mental Health and Addiction system
 - e. It will be important for the framework to be used across the entire health and social system as it cannot work in isolation.
12. Our next important mahi is to develop the methods and measures for how we will assess using He Ara Āwhina. Reporting against the framework will commence in March 2023.

Māori Engagement

13. Our fledgling relationship with mana whenua Taranaki whānui iwi, Te Āti Awa and Toa Rangatira continues to grow steadily and strongly. A second wānanga is planned around the 23 – 24 November 2022 with ngā iwi whānui o Taranaki Te Āti Awa on Te Tatau o te Pō marae.
14. We have had extensive engagement with Māori whānau and communities. Of particular note, our engagement with tāngata whaiora Māori and whānau is strengthening through our relationships via our own Māori whānau of Ngā Ringa Raupā with lived experience. Kaupapa Māori and rongoā Māori connections is held in high regard. We continue to

nurture and strengthen authentic engagement with whānau Māori, rongoā Māori providers, kaupapa Māori services and whānau ora organisations.

Relationship and Partnership

15. We continue to build high trust relationships with Te Aka Whai Ora with two regular monthly hui with both levels of rangatira leadership and operational management. Professional whanaungatanga through the work we do (past and present) plays a very positive role in relationship building.
16. Similarly, with te Manatu Hauora, John Whaanga Deputy Director General Māori Health. We have formed a respectful and trusting relationship both from a formal and informal perspective. From our recent quarterly hui to operational reciprocal support through the sharing of staff expertise on the work we all do, to improve Māori health outcomes for whānau, hapū, iwi and communities.

Advocacy approach for improving Māori mental health and wellbeing

17. Advocacy is about change. Advocacy of a system and advocacy of people are equally important as they both impact on each other.
18. Te Hiringa Mahara have identified three principal advocacy areas. They are designed to interface, be overlapping and mutually reinforcing. These are:
 - transforming from coercive to a choice-driven mental health system
 - improved services for youth wellbeing
 - Kaupapa Māori services.
19. The youth wellbeing agenda and advocacy project is underway. The goal of the project is to produce insights that highlight some key issues for youth wellbeing as defined by youth people. Key focus area for this project includes:
 - the impact of racism and discrimination on rangatahi
 - the role social media and online safety
 - intergenerational connection and support
 - young peoples' fears and aspirations for the future.
20. The Kaupapa Māori agenda for advocacy is in progress and it will include looking at:
 - increasing the availability of and access to Kaupapa Māori Services
 - increasing involvement of whānau, hapū and iwi and reflecting the value they bring through delivering a more holistic perspective
 - the overlap between all the different advocacy processes and how they interact or impact on each other, with a particular focus on Māori.

Nau Mai te Ao

21. We have consulted with lived experience communities and groups on a discussion paper called Nau Mai te Ao – 'Understanding, honouring and working with Lived Experience'. This discussion document and its name reflect an intention to provide clarity and illuminate a way forward in working with lived experience communities.

22. Insights from the consultation and subsequent community feedback are being collated and analysed and will form the foundation for drafting a position statement on understanding and working with lived experience communities and groups.
23. Once developed, we intend to share this resource with other government agencies and services to support good practice. We will keep you abreast of our progress in this area.

Covid-19 Impacts Insights Programme

24. Over the next 2022/23 year, we will publish eight short insights papers looking at Covid-19 impacts on our priority populations' mental health and determinants of wellbeing.
25. The Media Narrative Analysis project, the first in the programme, is underway. This project seeks to describe how the Covid-19 pandemic on mental health have been prominent, and how these themes have evolved over time.
26. This project will be our first completed: it will be a useful scene-setter for the remainder of the programme:
 - a. By outlining the 'existing public narratives' and how they have evolved, we can better challenge them and seek better outcomes
 - b. By highlighting which views are heard, and which facets of wellbeing are not generally observed, we can better shine a light on where improvement is required
 - c. By validating the timely news data with recently published academic research, we can observe facets of the Covid-19 impacts in near real time, rather than face the 12 months+ lag inherent in using survey data.
27. Initial analysis does not highlight a specific Māori angle to this project's findings. The subsequent projects will seek to understand and highlight Māori wellbeing against the backdrop of Covid-19.

Next Steps

28. In September, we will be publishing our first insights paper on the impacts of COVID-19 on mental health, addictions and wellbeing.
29. We will report back to you on our progress in our next meeting.

ENDS.