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Ministry of Health
PO Box 5013
WELLINGTON

Re Second National Mental Health and Addiction Plan 2005-2015

Attached is the submission from the Public Health Association of New Zealand.

The Public Health Association (NZ) is a non-party political voluntary association, which provides a major forum for the exchange of information and stimulation of debate about public health in New Zealand. Members take a leading part in advocating for public health through submissions, seminars, the annual conference and a communications and media strategy. PHA NZ is a member of the World Federation of Public Health Associations.

Membership of PHA NZ is open to all individuals interested in public health and covers more than 300 individual members from the public, private and voluntary sectors. Members include policy makers, providers, funders, epidemiologists, academics/researchers, health promotion and health protection professionals, public health nurses, public health physicians, managers of health services, consultants and community workers among others.

I am completing this response on behalf of the Public Health Association.

Your sincerely

G M Keating
Director

Public Health Association of New Zealand submission on the Second National Mental Health and Addiction Plan 2005 and 2015

General comments

We are very pleased to see that *Improving Mental Health* has identified opportunities to improve health across the whole spectrum of interventions, from prevention, through treatment services and including maintenance. Comprehensive approaches are needed to improve health.

We also welcome the inclusion of a specific chapter: More and Better Services for Maori.

However there is a lack of cohesion in the draft plan. There are too many inter-related but unconnected plans, documents and strategic directions. Most sections are seeking “more and better”. It is not clear if there is need to change direction, as well or instead of “More”.

It would be valuable if the ten-year plan was to more clearly:

- Identify the challenges that are facing the mental health sector in the next decade (most of these are referred to under “principles”)
- Propose a small number of strategic directions to meet those fundamental challenges that then drive all actions
- Build on the commitment and enthusiasms of the sector, as well as Ministry contractual relationships with DHBs
- Link objectives and actions across strategic directions in coherent ways

Specific examples of lack of cohesion across proposed “Strategic Directions” follow.

Maori and mental health

Clearly one of the challenges facing the mental health sector for the next decade is the disparities in mental health between Maori and other New Zealanders, and the responsibility of the Crown to Maori under the Treaty of Waitangi.

There is no clarity on the responsibility of mental health services under the Treaty of Waitangi.

While there is a chapter on More and Better Services for Maori, that chapter refers only to treatment and maintenance services, and does not cover promotion and prevention services. There is a section on responsiveness that relates to Maori, but the difference between responsiveness of services and “better” services is not clear.

The Chapter Mental Health Promotion and Prevention makes no focus on the needs for Maori for preventative services. As a result the importance of focus of prevention /promotion for Maori is missing.

It would be helpful if there was a coherent, linked approach for Maori that clearly flowed through all service areas.

Addictions

A review of the National Drug Plan proposed in the prevention/promotion chapter, however an increase in treatment services for alcohol and for other drugs is proposed elsewhere. It is hard to understand why there is a need for increased services if the review has not yet been completed. These work streams should be coherently linked. In the absence of an overall approach to alcohol and other drug addictions it is not possible to say if particular proposals for more addiction treatment services should be supported.

Despite the service increases proposed for the treatment of alcohol and other drug addictions, the only reference to gambling addiction is in the prevention/ promotion chapter. There is no reference to treatment of gambling addiction in the treatment chapter. In the absence of information it is not possible to identify if particular actions should be supported or not. If there is no need for increases in treatments services for gambling addiction it should be noted.

Prevention /promotion services

Building on Strengths is the approach to mental health promotion that has been adopted. Proposals to increase public awareness of depression, prevent suicide or reduce discrimination should be dealt with as part of the action plan to implement *Building on Strengths*.

It is not reasonable to give support to some preventive actions over others in the absence of a coherent assessment of priorities.

Systems development for mental health should include prevention/promotion.

Social and economic factors

Social and economic factors affect the risk of mental illness, the ability of people to access primary care and they can pose barriers to recovery. The plan does not identify why social and economic factors affecting recovery have been targeted, excluding the impact of social and economic factors on prevention/promotion and access to early intervention.

Support for intervention framework

Overall the PHA is very supportive of an intervention framework that covers the spectrum of interventions and seeks to enable people to take greater control over their lives.

Consultation Questions

Introduction (refer to page 1)

1. Do you agree with the proposed vision?

We support the intervention framework.

2. Have any key principles been omitted?

Yes No

The principles appear to be at difference with the Intervention Framework. The intervention framework includes prevention and promotion as part of the spectrum of mental health interventions. The proposed principles should reflect the principles for mental health promotion as described in *Building on Strengths*.

3. Should any of the 13 principles identified be modified to better reflect developments and trends in the health sector, mental health services and/or wider society?

Yes

If so, how should they be modified?

As noted above, the mental health plan should follow the intervention framework of mental health interventions and should reflect the principles for mental health promotion as described in *Building on Strengths*.

4. Are these principles reflected adequately in the rest of the Plan?

No

The principles appear to be a reframing of some of the key challenges facing the sector. It would be helpful to consider the ways in which the proposed actions will meet the challenges implicit in the principles.

5. What should the title of the Plan be?

National mental health and addiction control plan, 2005-2015.

Strategic Direction 1 (refer to page 14)

6. Do you agree with the objectives and actions proposed for Strategic Direction 1: More and Better Specialist Services?

Yes No

7. Which objectives or actions do you particularly endorse?

8. Which objectives or actions do you think need to change?

There needs to be better linkages between the sections on addiction services and the proposed revision of the National Drugs Policy (6.1.4).

Gambling addiction treatment services should be considered a specialised service and included here.

Strategic Direction 2 (refer to page 29)

9. Do you agree with the objectives and actions proposed for Strategic Direction 2: More and Better Services for Māori?

Yes No

10. Which objectives or actions do you particularly endorse?

11. Which objectives or actions do you think need to change?

As noted above, prevention / promotion services are part of the spectrum of mental health interventions, and specific actions in relation to prevention /promotion services need to feature in Strategic Direction 2. At present there are no specific actions identified in any of SD 2, 6 or 7 for more and better prevention/promotion services for Maori.

The specific actions on more and better prevention/promotion services for Maori should be cross referenced to Strategic Directions 6 and 7

Strategic Direction 3 (refer to page 33)

12. Do you agree with the objectives and actions proposed for Strategic Direction 3: Responsiveness of Services?

Yes No

13. Which objectives or actions do you particularly endorse?

14. Which objectives or actions do you think need to change?

The consultation document indicates that the needs of children of people with severe mental illness or alcohol and other drug service problems are covered elsewhere in the Plan. There is no cross-referencing to 'elsewhere' and it is not readily apparent what section is being referred to.

Children who have a parent with serious mental illness and/or who is a substance abuser are at high risk of mental illness themselves. Objective 3.2 does not appear to recognise the importance of the actions for prevention. Further work on the type of support that is most effective in building on strengths of children and whanau should be included, and cross referenced to SD 6.

Objective 3.3 should explicitly cross reference to SD2, and explain precisely what is the difference between "improved responsiveness to Maori" and "better services to Maori".

Re Objective 3.4, responsiveness to Pacific people. As noted above, prevention / promotion services are part of the spectrum of mental health interventions, and specific actions in relation to prevention /promotion services need to feature in Objective 3.4. At present there are no specific actions identified in any of SD 3, 6 or 7 for Pacific people.

Strategic Direction 4 (refer to page 40)

15. Do you agree with the objectives and actions proposed for Strategic Direction 4: Systems Development?

Yes No

16. Which objectives or actions do you particularly endorse?

The PHA strongly supports Objective 4.1 – ensuring a systems approach.

17. Which objectives or actions do you think need to change?

Prevention /Promotion services need to be considered as part or partner of the mental health services, and systems development, particularly workforce development needs to be considered and incorporated into either SD4 or SD6, preferably with cross-referencing.

Strategic Direction 5 (refer to page 49)

18. Do you agree with the objective and actions proposed for Strategic Direction 5: Mental Health in Primary Health Care?

Yes No

19. Which actions do you particularly endorse?

20. Which actions do you think need to change?

Action 5.1.5 – As written, this suggests that the small amount of PHO funding for health promotion will always include a component directed specifically towards mental health

promotion. Given the state of development of PHOs in relation to promotion in general this is unlikely to be realistic.

Strategic Direction 6 (refer to page 53)

21. Do you agree with the objective and actions proposed for Strategic Direction 6: Mental Health Promotion and Prevention?

Yes No

Agree with the objective, not with the actions as they are described.

22. Which actions do you particularly endorse?

One action is endorsed, as written - Develop an action plan for the implementation of *Building on Strengths*

23. Which actions do you think need to change?

Actions for this objective are disconnected.

Maintain the integrity of the framework in *Building on Strengths*

Work in relation to public understanding of depression, suicide prevention or anti-discrimination should be developed as part of *Building on Strengths* implementation. Preventive and promotion work on particular diagnostic categories should be managed through the generic framework. This would allow greater synergy based on recognition of the common risk and protective factors.

It is highly likely that further implementation of *Building on Strengths* will include work that will result in greater public understanding of depression and will have impact for people of all ages in relation to suicide and suicidal behaviour. However it is important that the integrity of *Building on Strengths* is respected.

Proposing to have work on depression or suicide prevention outside of *Building on Strengths* is confusing for communities and providers, and is contrary to the intent of *Building on Strengths*.

National Drug Strategy

As noted earlier, all actions relevant to the National Drug Strategy should be cross referenced, including improvements in treatment services. If however 6.1.4 is intended to reflect only preventive aspects of a national drug strategy then this should be explicit.

The preventive aspects of National Drug Strategy revision should also draw on *Building on Strengths*. Risks and protective factors for substance abuse (and risks to the mental health of others such as children of people who abuse drugs) are so similar to those for mental illness that a common approach should be used to increase effectiveness where relevant.

Gambling addiction

As written it appears that all aspects of services in relation to gambling addiction are categorised as promotion/prevention. This seems inappropriate.

Strategic Direction 7 (refer to page 57)

24. Do you agree with the objectives and actions proposed for Strategic Direction 7: Social Inclusion – Removing Social and Economic Barriers to Recovery?

Yes No

The PHA does NOT agree with the Strategic Direction as written. Social and economic factors not only pose barriers to recovery but also are risk and preventive factors for illness.

Strategic Direction 7 should be reshaped as “Social and Economic Barriers to Mental Health”.

25. Which objectives or actions do you particularly endorse?

26. Which objectives or actions do you think need to change?

There is a range of activity on intersectoral action that can be done by the mental health sector in addition to the Ministry of Health and DHBs. It would be valuable to work with a range of providers, both public health and mental health, to develop models and options. There is substantial scope for collaboration within the wider health sector.

27. Do you have any other comments about the second National Mental Health and Addiction Plan as a whole that you would like to make?

See “general comments” above.