



PSA Submission

Mental Health and Wellbeing Commission Bill

December 2019

About the PSA

The New Zealand Public Service Association Te Pūkenga Here Tikanga Mahi (the PSA) is the largest trade union in New Zealand with over 75,000 members. We are a bicultural and democratic organisation representing members in the public service, the wider state sector (the district health boards, crown research institutes and other crown entities), state owned enterprises, local government, tertiary education institutions and non-governmental organisations working in the health, social services and community sectors. Te Rūnanga o Ngā Toa Āwhina is the Māori arm of the PSA.

The PSA is a union for people working in mental health and addiction services, with a long and proud history of supporting and advocating for mental health workers in the health, community, social and justice sectors. Our members in mental health include nurses, psychiatric assistants, kaihaumanu / social workers, occupational therapists, psychotherapists, psychologists, drug and addiction counsellors, support workers, kaiawhina workers, team coaches, navigators, recovery facilitators, registered health professionals, whanau ora workers and others. The PSA has a Mental Health and Addictions Committee which meets regularly and was strongly involved in He Ara Oranga.

The PSA has been advocating for strong, innovative and effective public and community services since our establishment in 1913. People join the PSA to negotiate their terms of employment collectively, to have a voice within their workplace and to have an independent public voice on the quality of public and community services and how they're delivered.

The PSA is an affiliate of the New Zealand Council of Trade Unions Te Kauae Kaimahi (CTU).

The PSA's position

The PSA supports the Mental Health and Wellbeing Commission Bill with a few amendments. We fully support the Commission's objectives:

- to contribute to improved mental health and wellbeing
- to contribute to improved equity among disadvantaged and/or marginalised groups with poor mental health and wellbeing outcomes
- to hold the government to account for improving mental health and to perform at their best.

The PSA supports the establishment of the Commission as an Independent Crown Entity (ICE) as recommended by the Mental Health and Addiction (MHA) Inquiry He Ara Oranga. It should be made explicit that the Commission has the power to initiate investigations and inquiries on systemic issues. The Commission should function as a system leader for mental health and wellbeing with a strong oversight and monitoring role. It should also uphold and pro-actively promote the principles of te Tiriti o Waitangi: the Treaty of Waitangi in all its endeavours.

The PSA would like to highlight the importance of recognising the contribution of social determinants and systemic issues to mental distress. Focussing only on individual medical needs would fall short of improving mental health and wellbeing for all. Social needs and determinants such as providing for a living wage, decent working conditions, security and safety, housing, education, justice, workplace relations, social welfare, health and disability services, social attitudes, the eradication of poverty, exclusion and discrimination are all factors impacting on people's mental health and wellbeing.

We would like to point out the importance of adequate resources. The Commission needs stable and ongoing funding with a capable secretariat and access to data and expertise from across government and other state services agencies.

Reporting publicly and regularly on progress on the mental health and wellbeing of people living in New Zealand is crucial. Sharing of information, experiences, lessons learnt, and best practice examples creates awareness and agency; contributes to attitudinal change; and enables the wider system to better collaborate for good mental health and wellbeing for all regardless of a person's gender, age, ethnicity and other background.

Recommendation 1: Promotion of alignment, collaboration, and communication between government and non-government contributors to mental health and wellbeing

The Commission is intended to promote collaboration between a variety of contributors to mental health and wellbeing. In order to do so, the competitive funding model of mental health services needs to be changed. When (mental) health services providers compete for contracts, those who deliver the services such as nurses, psychiatric assistants, kaihaumanu / social workers, occupational therapists, psychotherapists, psychologists, drug and addiction counsellors, support workers, kaiawhina workers, team coaches, navigators, recovery facilitators, registered health professionals, or whanau ora workers are the ones who suffer. Their wages and salaries are stagnant, their work environment is not conducive to high-quality services, required training is not provided and their voice is excluded from decision-making processes. Funding collaboration between organisations rather than competition between organisations would contribute to an integrated, well-trained and stable workforce which is consistently enabled to provide high-quality services to those who need them.

Recommendation 2: Obligation to establish mechanisms to seek views

The Commission is intended to establish mechanisms to ensure that there are effective means of seeking views of different groups affected by mental distress to perform its functions and exercise its power.

The PSA strongly recommends including representation of MHA services workers in mechanisms enabling the Commission to seek views (mechanisms such as advisory committees or consultation forums). MHA services workers have direct insight and understanding of services, work environment and culture, equipment, systems and structure in their workplace. They can share important information which contributes to the Commission's oversight and monitoring function; upholding and promoting te Tiriti o Waitangi: the Treaty of Waitangi; reporting publicly on progress; advocating for the collective interest of people in mental distress; facilitating best practice; holding decision makers to account; and above all to drive change while bringing everyone along.

Thank you for considering our submission.

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