



25 March 2024

S24.05

## **Submission to the Health Select Committee on The Pae Ora (Healthy Futures) (Improving Mental Health Outcomes) Amendment Bill 291 - 1**

### **Introduction**

1. The National Council of Women of New Zealand, Te Kaunihera Wāhine o Aotearoa (NCWNZ) is an umbrella group representing around 60 affiliated organisations and 300 individual members. Collectively our reach is over 200,000 with many of our membership organisations representing all genders. NCWNZ has 13 branches across the country.
2. NCWNZ's vision is a gender equal New Zealand and research shows we will be better off socially and economically if we are gender equal. Through research, discussion and action, NCWNZ in partnership with others, seeks to realise its vision of gender equality because it is a basic human right.
3. This submission has been prepared by the NCWNZ Parliamentary Watch Committee drawing on existing NCWNZ policy and previous related submissions of NCWNZ.

### **Executive summary**

4. NCWNZ supports the purpose of the Bill to better enable the long-term planning and delivery that is required to improve mental health and addiction outcomes.
5. We endorse the inclusion of a mental health and wellbeing approach to the existing Act.
6. We commend the stipulated requirements for the Minister of Health to:
  - consult with the Mental Health and Wellbeing Commission in the preparation of strategic documents, including Health Strategies, the New Zealand Health Plan, and the Government Policy Statement; and
  - prepare and determine a Mental Health and Wellbeing Strategy.

## Background

7. NCWNZ has demonstrated an ongoing interest in the area of mental health through its advocacy over the years, with recent submission input provided to the following:
  - Government Inquiry into Mental Health and Addiction. 2018
  - Health Select Committee on the Pae Ora (Healthy Futures) Bill 2021
  - Ministry of Health on Transforming our Mental Health Law 2022<sup>1</sup>.
8. The Bill and Strategy are in alignment with our view of a holistic approach to health drawn from the Te Ao Māori concept of whānau (family health), tinana (physical health), hinengaro (mental health) and wairua (spiritual health). Pacific people also view health and wellbeing holistically, “encompassing the physical, mental, spiritual, social and economic wellbeing of the collective. One example of Pacific models of health is the Samoan Fonofale model, which includes whānau, culture, beliefs and values as the core elements, held up by the four aspects of wellbeing (spiritual, physical, mental, and socio-economic) and other factors.”<sup>2</sup>
9. NCWNZ’s view corresponds with the WHO definition of health that states: “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”
10. NCWNZ has concern for the mental health wellbeing of all in Aotearoa, and in particular for women and girls, wāhine Māori, Pasifika women, members of the disabled community, and people of diverse genders.
11. NCWNZ continues to advocate for a National Women’s Health Strategy acknowledging the unique health needs of women and girls, particularly in the areas of reproductive health and maternal health.

## Mental Health and the Disabled Community

12. NCWNZ acknowledges that mental illness is often an invisible disability, and is aware of the increasing percentage of the population who live with mental and psychosocial disabilities.
13. NCWNZ is aware of levels of severe mental stress suffered by members of the disabled community during the COVID-19 pandemic lockdowns when poor mental health outcomes were experienced by disabled people due to lack of continuing care and service.

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<sup>1</sup> <https://www.ncwnz.org.nz/submissions>

<sup>2</sup> <https://www.tewhatauora.govt.nz/publications/health-status-report/>

14. This knowledge, coupled with the anticipated increase in mental health distress following the Whaikaha - Ministry of Disabled People's announcement on 18 March 2024 of changes to Purchasing Rules and Equipment and Modification Services, makes it entirely appropriate for the next New Zealand Periodic Report to the UN Monitoring Committee for UNCRPD, to urgently seek to improve mental health outcomes for disabled people.
15. NCWNZ views this of particular importance for disabled women who frequently do not receive an equitable level of family care. Where disabled men are often cared for by their female partners, the opposite does not occur for disabled women who tend to live alone, without a male partner.
16. We are further aware that The Office for Disability Issues, the key government agency on disability issues and working towards a vision of New Zealand being a non-disabling society, is now incorporated into Whaikaha - Ministry for Disabled People. Its aim is to advance the rights of disabled people, being tasked with both implementing "The New Zealand Strategy 2016-2026" and endorsing Outcome 3: Health and Wellbeing, which clearly stipulates "Services that are specific to disabled people, including mental health and aged care services, are high quality, available and accessible." NCWNZ urges appropriate funding and targeted resourcing are applied in order for this outcome to be achieved<sup>3</sup>.
17. NCWNZ has an expectation that the proposed Strategy will ensure all of the matters relating to the disabled community in Aotearoa New Zealand detailed above will be addressed, adequately resourced, and advanced as appropriate.

## **Wāhine Māori and Pasifika Women**

18. Te Whatu Ora's 2023 health Status Report reveals a persistent gap in health outcomes for Māori and Pasifika compared with other population sectors. Mental Health is listed as a priority for Māori health gain in the report. Ola Manuia, the Interim Pacific Health Plan July 2022 – 24 outlines the health priorities for Pacific Peoples. These include mothers and babies, children and youth, older people, disabled people, and mental health and wellbeing<sup>4</sup>.
19. Wāhine Maori are disproportionately represented in negative mental health statistics<sup>5</sup> (1), and wāhine Māori are three times more likely than Pākehā to die by suicide during pregnancy or within six weeks of birth<sup>6</sup>. (2)

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<sup>3</sup> <https://www.odi.govt.nz/nz-disability-strategy/> <https://www.ombudsman.parliament.nz/IMM-Disability-Rights-report>

<sup>4</sup> <https://www.tewhātuora.govt.nz/publications/health-status-report/>

<sup>5</sup> <https://www.hrc.govt.nz/resources/research-repository/interpretation-anomalous-experiences-implications-wahine-maori>

<sup>6</sup> <https://helencClark.foundation/publications-and-medias/ahurutia-te-rito-it-takes-a-village/>

## Maternal Mental Health

20. The unique health needs of women are highlighted in their reproductive years when it is critically important to ensure equity and excellence in maternal health service for all mothers, especially mental health. The risk of mental illness onset or recurrence for women is particularly high during pregnancy and childbirth with an estimated 15-20% of women affected by maternal mental health and addiction. Mental health and addiction issues during pregnancy or following childbirth can have a detrimental impact on the mother-infant relationship, emotional attachment with the child (both from the mother and the wider family and whānau), and ability to provide adequate care<sup>7</sup>.

## Mental Health and Gender Diverse People

21. NCWNZ is aware of the high level of mental illness among the LGBTQI+ community. The Counting Ourselves survey and report was the first survey of its kind in Aotearoa New Zealand, led by trans people. The findings showed stark health inequities between trans and non-binary people and the general population, especially in the areas of mental health and wellbeing, including very high rates of psychological distress and suicide attempts<sup>8</sup>.

## Clauses

22. Clause 6. NCWNZ supports the amendment to Section 35 that requires consultation with Health New Zealand, the Māori Health Authority, and the Mental Health and Wellbeing Commission, and to have regard to the views of these contributing organisations. We further urge the inclusion of Whaikaha - The Ministry of Disabled People in this Clause.

23. Clause 7. NCWNZ commends the insertion of Section 46A that clearly outlines the purpose and requirements of the Mental Health and Wellbeing Strategy, including assessment of the current state of, and performance of the health sector in relation to mental health and addiction outcomes. We further approve of the proposed analysis of future (medium and long-term) trends that will affect mental health and addiction outcomes, and the setting of priorities for improving mental health and addiction outcomes.

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<sup>7</sup> <https://www.health.govt.nz/system/files/documents/pages/mothers-fathers-and-babies-service-forecast-report.pdf>

<sup>8</sup> <https://countingourselves.nz/>

## Recommendations

24. NCWNZ wishes to see included in the Strategy, a focus given to the mental health of women and girls, and in particular, wāhine Māori, Pasifika women, members of the disabled community, and people of diverse genders.
25. NCWNZ urges targeted resourcing at a level sufficient to meet the goals of the proposed Mental Health and Wellbeing Strategy.

## International Human Rights Obligations

### CEDAW

26. The proposed Bill and Strategy have the potential to make a significant contribution to meeting Aotearoa New Zealand's obligations under the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). In their Concluding Observations on the 2018 New Zealand report, the Committee on the Elimination of Discrimination against Women states: *39 Health. Recommendation to State party to: (d) Take the steps necessary to improve the availability and quality of accessible mental health-care services, including addiction treatments, targeting primarily Māori women and women with disabilities.*

### UN Convention on The Rights of Persons with Disabilities (CRPD)

27. The proposed Bill and Strategy have the potential to make a contribution to meeting Aotearoa New Zealand's obligations under the Convention on The Rights of Persons With Disabilities, and address the following two Articles:
  - **Article 6: Women with disabilities:** 1. States Parties recognize that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms. 2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.
  - **Article 25: Health:** States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation.

28. NCWNZ notes the 2022 review and report of New Zealand’s progress towards the goals of UNCRPD, *Disability Rights: How is New Zealand Doing?*, which reports as follows on progress in the area of mental health: “The government needs to ensure that any new mental health legislation is compliant with Article 12 of the Disability Convention. The Mental Health (Compulsory Assessment and Treatment) Act repeal consultation document included considerations inconsistent with the Disability Convention within (such as whether and when compulsion and seclusion could be permitted).”

## UN Sustainable Development Goals

29. We acknowledge the contribution the Bill will make to achieving the UN Sustainable Development Goals, in particular:

*3.4 By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being;*

*3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.*

## Te Tiriti o Waitangi

30. NCWNZ acknowledges the inclusion in Part 1, Section 6 of the Pae Ora (Healthy Futures) Act 2022 of the Government’s intention to give effect to the principles of Te Tiriti o Waitangi, by requiring “the Minister, the Ministry, and all health entities to be guided by the health sector principles, which, among other things, are aimed at improving the health sector for Māori and improving hauora Māori outcomes.”

31. This section of the Bill aligns with NCWNZ’s policy ratified in 2018: “NCWNZ is committed to the rights and obligations articulated in Te Tiriti o Waitangi and the Treaty of Waitangi as the founding documents of Aotearoa. NCWNZ demonstrates a visible and tangible commitment to honouring the tikanga of tangata whenua and ensuring the fulfilment of rights and responsibilities of both Tiriti partners.”

32. NCWNZ is therefore deeply disturbed and concerned by the recent enactment of legislation to disestablish Te Aka Whai Ora, The Maori Health Authority.

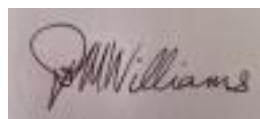
## Conclusion

33. NCWNZ wholeheartedly supports the purpose of the Bill and endorses the inclusion of a mental health and wellbeing approach to the existing Act.
34. NCWNZ urges resourcing at a level sufficient to meet the goals of the proposed Mental Health and Wellbeing Strategy.
35. NCWNZ urges clear reference in the proposed Mental Health and Wellbeing Strategy to the particular mental health needs of women and girls, wāhine Māori, Pasifika women, members of the disabled community, and people of diverse genders, with a view to addressing the significant health inequities experienced by these sectors of the population.



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