

Mental Health and Wellbeing Commission Bill

Health Select Committee

The Salvation Army New Zealand Fiji Tonga and Samoa Territory Submission

Executive Summary

1. Overall, The Salvation Army strongly supports the various provisions of this Bill.
2. We welcome, with this Bill, the fulfilment of another recommendation from the *He Ara Oranga: Inquiry into Mental Health and Addiction* report. We also acknowledge the work of the new Interim Commission, announced in September 2019.
3. Although our submission supports this Bill, there are some specific aspects of the Bill that we wish to comment on further below. The Salvation Army also made a submission to *He Ara Oranga* which can be found here - www.salvationarmy.org.nz/article/submission-government-inquiry-mental-health-addiction

Background

4. The Salvation Army is church and social services organisation that has worked in Aotearoa New Zealand for over one hundred and thirty years. It provides a wide range of practical social, community and Christian faith-based services, particularly for those who are suffering, facing injustice or those who have been forgotten and marginalised by mainstream society. We are passionately committed to our communities as we aim to fulfil our Territorial Mission Statement; **caring for people, transforming lives and reforming society by God's power.**
5. The combined services of The Salvation Army provided support to around 120,000 people in 2018. The main social service areas are Community Ministries (CM), Salvation Army Social Housing (SASH), and Addictions, Supportive Accommodation and Reintegration Services (ASARS). These services included over 62,000 food parcels to more than 30,000 families and individuals, providing some 2,400 people with short- or long-term housing, nearly 7,000 families and individuals supported with social work or counselling, just over 17,000 addictions counselling sessions, more than 5,500 families and individuals helped with budgeting, other practical assistance to over 6,000 families and individuals, 6,500 hours of chaplaincy support, and some 9,000 victims, defendants and families supported at court.
6. This submission has been prepared by the Social Policy and Parliamentary Unit (SPPU) of The Salvation Army. The SPPU works towards the eradication of poverty by encouraging policies and practices that strengthen the social framework of New Zealand. The SPPU have also sent this submission to the Addictions, Supportive Accommodation and Reintegration Services

(ASARS) of The Salvation Army for feedback to ensure their important views are included in this document. This submission has been approved by Commissioner Andrew Westrupp, Territorial Commander of The Salvation Army's Aotearoa New Zealand Fiji Tonga and Samoa Territory.

Specific comments on the Bill

7. Addictions and Mental Health – The Salvation Army Perspective

- a. In this Bill, there is some reference to the critical connection between addictions and mental health e.g. clauses 3(c)(iii) and 11(c) and (e). The Salvation Army strongly supports the inclusion of the addiction aspect of mental health into the main body of this Bill.
- b. However, we believe there is a valid argument for this addictions aspect to have a separate section and/or reporting line in the Bill. The concepts (and realities also) of mental health and wellbeing are very broad, covering a wide range of important areas. Our view is that addictions issues might be lost or subsumed in the extensive functions and objectives of the new Commission.
- c. Clearly, we have a strong view on this. The Salvation Army is **not** specifically involved in providing mental health services but is one of the leading providers of publicly funded programmes in the addictions sector. These programmes are delivered through ASARS which operates nationally from 30 sites. ASARS delivers the Bridge programme which works primarily with people with alcohol and other drug addictions and the Oasis programme which supports people experiencing gambling harms. ASARS also offers reintegration programmes for recently released prisoners.
- d. In addition to these publicly funded programmes, with its own resources The Army also facilitates Recovery Church as part of our Christian mission to people recovering from addiction and their whanau. Recovery Church is an open and voluntary programme running from 13 sites nationally and offers Christian spiritual support and opportunities for fellowship to anyone and particularly those on a journey of recovery from addiction
- e. In our submission to *He Ara Oranga* in 2018, we consistently advocated that there are clear links, but also significant differences, between mental illness and addictions. Our view is that **addictions and addictions treatment are not a sub-set of mental health treatment** and care and it is important to acknowledge significant variances here. Some of the key relevant factors here are;
 - i. The most common addictions are to alcohol, nicotine and gambling which are legal normalised commodities which cause harm to hundreds of thousands of

New Zealanders and their families - there are no equivalent risk factors in the sphere of mental health.

- ii. Addictions and addictive behaviours have strong support within New Zealand culture especially around our still prevalent binge culture – there are no equivalent cultural practices which normalise mental illnesses.
 - iii. While addictions have health impacts on those affected, they also have other impacts including violence, corruption, poverty and social disruption – these wider impacts are much less prevalent with health illnesses.
 - iv. Treatment approaches for those with mental illnesses and those with addictions are much different - mental illness treatments are based on care and protection from risk while addictions treatment is based on self-responsibility around pervasive risks.
- f. There is a risk too that mental health care and addictions treatment are seen as rival or competing programmes in budgetary terms perhaps with an outcome that one is funded at the other's expense. Again, while there clear and proven connections between mental illness and addiction, addiction and addiction treatment are distinct factors that fall within the broad range of mental health and wellbeing. **Therefore, we propose that an additional separate function be included in clause 11(1) and 12 for the Commission. These new reporting lines would be primarily focussed on addiction and addictions treatment. Additionally, this new function should include the relevant promotional, advocacy, reporting and research actions necessary to strengthen and improve addiction treatment services, thereby enhancing overall mental health and wellbeing in our country.** This additional provision could likely affect and modify other parts of this Bill.

8. Board of Commission

- a. We believe the provisions for the permanent Board of the Commission are strong. Again, we believe a stronger focus on addictions issues and treatment needs to be reflected in this section, particularly as the role and functions of the Commissioners themselves are so important. The addictions link to mental health and wellbeing should not be under-estimated in this Bill. Therefore, the composition of the Board is crucial for this new Commission. **We propose that there a unique role for an addiction expert should be included in clause 8.** There are references related to addiction in subsections (2)(a)(iii) and (2)(c). But we submit these references should be made clearer and more explicit in the legislation.

9. Seeking views of people

- a. We definitely support clause 13 of the Bill. However, we have some reservations about government entities and their engagement with various groups in the community. We understand that 'lived experience' is currently a very trendy buzz word in government circles and policy development. This approach makes sense. But crown entities and government departments must be aware that communities,

especially those listed in clause 13(1), do experience **consultation fatigue**. The Salvation Army often becomes aware of various consultation programmes by government through our community and government relationships. Perspectives from these groups are critical for the Commission. But not at the expense of tired communities and community leaders who have their views constantly sought across a myriad of issues.

- i. **Connected to this, The Salvation Army wants to advocate for some sort of appropriate remuneration or payment mechanism as views are sought under this clause.** In 2018, it was reported that Government spent over \$550 million on external consultants and contractors.¹ Will this Commission ensure that these community experts and voices from these groups will be adequately compensated for their consultation services? Our view is that the expert knowledge and real life-stories from the community sector and everyday people and whanau have at times been taken advantage of in the past by government departments. These views and stories, particularly from those community leaders who undertake a lot of this type of work, should be compensated and valued appropriately in the same professional and just way that government departments spend so much for external consultants and contractors for other pieces of work.

10. Extra layers of bureaucracy

- a. Finally, The Salvation Army submits that although we support this Bill overall, we sincerely hope that more levels or layers of bureaucracy are not created with the formation of this Commission. Our primary concern here is that people and whanau with mental illness and addictions issues can quickly and easily find the support they need in their communities. Specifically, we want to ensure that mental illness connected to addictions issues are addressed appropriately within this framework. Therefore, we submit that a core function of this new Commission should be to **reduce the bureaucracy and obstacles people face when trying to secure help**. Many of our Salvation Army clients, from various social service programmes we offer, constantly struggle in dealing with the layers of administration they face with different government departments. With this new Commission, there should be a strong focus on exercising functions and services enshrined in this Bill that will regulate and enforce quick, appropriate and effective help for those who need it.

¹ <https://www.stuff.co.nz/business/104922841/cap-on-public-servants-saw-spending-on-consultants-almost-double-to-550m-a-year>