

DEAF MENTAL HEALTH PROGRAMME HOSTED BY PLATFORM

Summary

The purpose of this paper is to give context of Platform's involvement and role, and our aspirations for the Deaf mental health and addiction work programme.

Some background

Platform's interest in this area of work began in 2002 when we co-located with other organisations in Education House on Willis Street. This was where Kites was located, as well as the Wellington base of the Deaf support workers who were employed by Richmond (as it was called then).

Local purchasing for national issues

Early 2000s was a time of major change in the way that the health system was organised. In this time, 20 District Health Boards (DHBs) were created and mental health and addiction support funding was moved from regional funding agencies to local DHBs. This meant that services were purchased locally by each DHB based on the needs of their local population. When a DHB only has a small number of people affected, it becomes harder to receive funding for services. This creates disadvantage for these groups and also for populations within these groups (e.g. Māori and Pasifika). The Deaf community is an example of this and highlights how a small number of people who may have high needs can miss out on services being developed because they live spread out throughout New Zealand.

In 2020, funding still needs to come from 20 DHBs and with such small numbers it was impossible to expect funding.

We thought the best way to achieve support for change was to collaborate and decided to explore the rights-based approach. As a result, we started to connect with Deaf Aotearoa who are also the Disabled Persons Organisation mandated under the United Nations Convention of the Rights of Disabled people to which New Zealand is a signatory.



Working with Deaf Aotearoa

Together as national bodies, we wanted to take advantage of our unique positions and our shared concerns about the unmet mental health and addiction needs of Deaf people. We needed to ensure that our advocacy for Deaf mental health and addiction issues were aligned. We had a memorandum of agreement that described our roles and agreed "that representatives will meet 2-3 times a year to establish and maintain a functional relationship based on optimising outcomes for Deaf people with a mental health diagnosis." This has long past its functional use, however it was important to pave the way we would progress. We believe the development of a collegial relationship with shared purpose will make it easier for Deaf people to get the mental health and addiction help they need.

What we have done

In 2014 there was a major tragedy in the Waikato DHB that drew attention to the issues for Deaf mental health clients. The following year the Ministry of Health asked Te Pou o te Whakaaro Nui to provide an overview of Deaf mental health services. Some of the recommendations of Te Pou's report have shaped Platform's ongoing approach and direction.

In 2016, after a few national meetings that included other interest groups, Platform and Deaf Aotearoa wrote a proposal to the Ministry of Health. This was focused around making the mental health system more accessible to Deaf people. I understand there was a counter proposal that proposed a stand-alone Deaf mental health service. The Ministry of Health were unable to proceed with either of this as there were restructuring changes and we saw no progress.

There were many meetings between Deaf Aotearoa, the Ministry of Health and Platform between 2016 and 2020. The mental health and addictions needs of Deaf people was raised regularly by Platform as part of our ongoing relationship with the Ministry but it was clear that at that time there was nobody who was prepared to action our suggestions.

He Ara Oranga

In 2017, the incoming Labour led coalition Government agreed to an inquiry into Mental Health and Addiction. The inquiry started in February 2018 and presented its report to the Minster of Health in November 2018. Submissions from various contributors to the inquiry raised the issues of the Deaf mental health and addiction community. Subsequently, *He Ara Oranga*, the final report talked extensively about the current gaps and the need to broaden the services, and increase access and choice.



Early 2020, Platform and Deaf Aotearoa followed up with another proposal to the new Mental Health Directorate within the Ministry of Health. This proposal made recommendations about how the mental health system could be influenced specifically using the "enablers" that He Ara Oranga described (Chapter 4 ,4.5).

Working together, the Ministry of Health and Platform have created a high-level plan to respond to some of the areas where changes can be made in the existing system to improve access and choice for Deaf people.

What we will deliver

Platform has agreed with the Ministry to deliver a work plan that looks at the following areas:

- Leadership and engagement
- Service development
- MH&A promotion, literacy and awareness in the Deaf community
- MH&A workforce development

The Covid-19 emergency has put on hold the usual contracting process, however on the reassurance of senior officials we have proceeded in good faith and are in discussions with the Ministry of Health about formalising the processes.

This work programme is managed by Platform and we have appointed Jo Wiko to lead it. The role focuses on how all the parts of the current mental health and addiction system work for Deaf people who have chronic and enduring mental health and addiction issues. This requires understanding of how all the different parts of the health system can work to deliver to Deaf people. We expect that if we want change and improvement this will take time and work in areas such as workforce development, contracting, reporting, data collection, training and recruitment. Jo's understanding of both the health system and the Deaf community, her willingness to take on a fixed term contract and capacity to start quickly makes her an ideal appointment.

We will of course continue to work with the wide range of interested groups in mental health, addiction and the Deaf community. This includes the mental health and addiction peer workforce leadership and the Disabled Persons Organisations, including Balance NZ.



How will we deliver this programme of work?

Platform acknowledges the advocacy, research, workshops and conferences that have been organised by many organisations and groups over the years including the Deaf Mental Health Development group, the Coalition of Deaf Mental Health Professionals, Deaf Aotearoa New Zealand, Kites and Capital and Coast District Health Board. We are looking forward to working with all organisations and understanding all views. One way to hear these views will be through the advisory group. Other ways of hearing from people will also be developed.

We have an opportunity. For the first time in over 20 years the Government recognises the unmet needs of Deaf people who experience mental health and addiction issues and is willing to invest a small amount of money at this time. This is the beginning. Platform's role and strengths as an organisation are the strong links and relationships formal and informal, it holds with the government and the mental health and addiction sector. We are in a position to use these relationships with all parts of the mental health and addiction sector (helplines, primary, secondary, tertiary and the NGO sector) to create responsive systems for Deaf people experiencing mental health and addiction issues.

We look forward to working with you on this programme of work. Please get in touch with Jo Witko on <u>deafmha@platform.org.nz</u> if you would like to discuss this in person.

Marion Blake 29 April 2020