

AGM Report

October, 2020

2020 is a year that will now remain significant in global history. On 25 March, New Zealand moved into a full lockdown; essentially, usual commercial and social life “closed down” while we endeavoured to contain and then eliminate the COVID-19 virus in this country. As a “team of 5 million” we achieved this, not just once, but (as of writing), twice. While the economic cost has been extreme, we have avoided the catastrophic infection and mortality levels recorded in countries like the United States, United Kingdom, Brazil, Europe and many other countries.

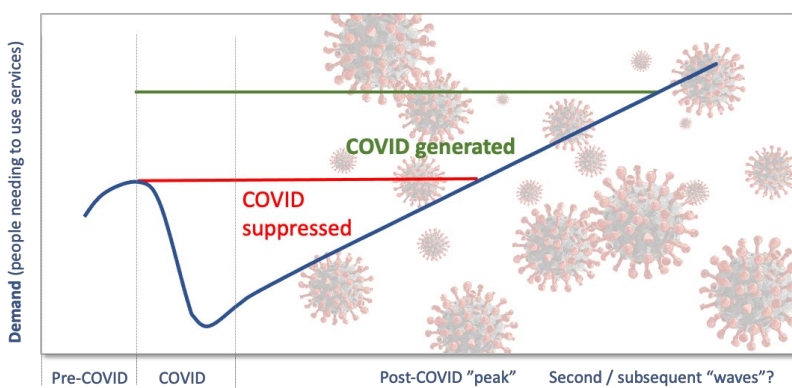
The response by WALSH Trust staff in ensuring continuity of responses to the support needs of people using services, as well as ensuring their own, and community safety and wellbeing, was remarkable and inspirational. The way they adapted speaks volumes to their professionalism and commitment. Virtually all our services continued, despite the huge practical and emotional challenges involved.

It has not at all been plain sailing, either for staff or for those who we work with; the learning we have taken from this time however has also been immense and re-shaped our sense of possibility.

The COVID-19 pandemic has clearly created economic, health and social uncertainty. We have not experienced a global pandemic since 1918. This severely limits the experience on which to draw in thinking about the future.

That said, we can with some confidence assume that the on-going impact of this catastrophe will remain with us into 2021 – and probably beyond. The “ripple effects” will extend well into our future.

Forecasting Future Demand for Mental Health Support



COVID-suppressed

People who are known to services who have currently ceased / postponed their engagement with these services. It is assumed that these people will return to services over time, however their mental health could be changed from pre-COVID state.

COVID-generated

People who are not yet known to services, whose experiences of COVID, both direct and indirect, have caused them to develop a degree of poor mental health - or exacerbated previously mild episodes of poor mental health.

COVID-altered support

People using mental health services have remained in contact with services, but have received changed or modified forms of support, eg. telephone and/or video calls, letterbox chats... For some, this may result in a change to their mental health and well-being.

Many countries are reporting that bereavement, isolation, loss of income, fear and anxiety, are triggering mental health conditions or exacerbating existing ones for people. Many people may also be experiencing increased levels of alcohol and drug use, insomnia, and anxiety. The impact of this event (and subsequent “waves”) on our mental health and the need for mental health services is challenging to forecast. The illustration above presents some “broad strokes” around which we might base our thinking.

Earlier this year, we finalised our draft Strategic Plan, 2020-2023. This document will guide both service provision and development through these years. Some of the current highlights include:

‘Equally Well’... this has been both a priority and challenge for WALSH Trust for some years. The reality that poor mental health is inextricably linked to poor overall outcomes in health and wellbeing has been well evidenced. While responses to these can seem daunting (where to start?), our approach has been more gradual and persistent; doing one thing at a time. We have approached ‘Equally Well’ with a person-centred focus – considering people who use services *and* people who deliver services (i.e. employees). Particular initiatives have included: ensuring availability of fresh fruit in residential houses and workplaces; supporting access to free flu vaccinations and free gym/pool membership; provision of Tai Chi classes, baby massage, nutritional advice, participation in local environmental initiatives (e.g. Waitakare Twin Streams project), Pink Shirt Day, participation in the annual Round the Bays event...

This year, to further promote a holistic consideration of people’s lives, we have integrated Te Whare Tapa Wha into our assessment and planning processes.

Service provision that is ‘Equally Well’ still represents a challenge to WALSH Trust; and we think this is how it should be!

Social housing... social determinants of health are key indicators of health and wellbeing. The ability to access and retain affordable housing is a fundamental determinant of health and wellbeing. To this end WALSH Trust has engaged Kay Fletcher (former CEO, Comcare) to guide our development as a provider of social housing for people whose lives have been disadvantaged by the experience of poor mental health. We are now registered with the Community Housing Regulatory Authority as a social landlord. WALSH Trust is also now contracted by the Ministry of Housing and Urban Development to support people in sustaining/retaining tenancies.

Development of a workforce with lived experience of poor mental health... in 2016, we embarked upon the strategic goal of growing our peer-led support options. This decision recognised the growing volume of evidence that indicated the effectiveness of supports offered by people with their own lived experience of poor mental health and wellbeing. The decision was also a response to our need to grow a critical mass of thinking, momentum, vision and energy.

For the purposes of this framework, lived experience roles are defined as people employed specifically to:

- *use their personal understanding of life-changing mental health challenges, service use and periods of healing/personal recovery, to assist others*
- *use their life-changing experience of supporting someone through mental health challenges, service use and periods of healing/personal recovery, to assist others.*
- *use their personal understanding of life-changing mental health and well-being challenges, service use and periods of healing/personal recovery, to add value to other roles they are designated to carry out (e.g. Manager, Board member...)*

We now employ 8 full-time equivalent Wellbeing Facilitators, applying an eclectic array and combination of support models – fundamentally led by the support needs and preferences of people needing to use support services.

During 2019, 24% of support hours delivered were provided by people with lived experience of poor mental health and wellbeing.

We are looking forward to building this workforce to 12 FTEs.

Transformation of our responses to poor mental health and addictions...

It is now two years since He Ara Oranga (the Report of the Ministerial Inquiry into Mental Health and Addiction) was published.

The report proposed a "*once in a generation opportunity*" to transform how we respond to poor mental health and addiction in New Zealand. The report noted two conclusions:

- 1) "New Zealand's mental health and addiction problems cannot be fixed by government alone, nor by the health system."
- 2) "We can't medicate or treat our way out of the epidemic of mental distress and addiction..."

He Ara Oranga provoked much support, energy, enthusiasm – and expectation.

Now, two years later, reflecting on where we have arrived at, we believe it is completely forgivable to feel some real frustration with the slow progress in its implementation. We know some great minds, rich experience, and determined "travellers on this road" are working hard to breathe He Ara Oranga into a system that is seemingly in arrest.

The services we offer in Aotearoa/New Zealand however are struggling to retain their relevance. Our structures, our thinking, our practice models are failing to stay connected to people living, and sometimes struggling with, their lives. It is essential we now move away from the paradigm of predominantly seeing medical problems with social implications, to understanding that these are *predominantly social problems with medical implications*.

That said, we should not overlook the magnitude of the challenge. In 1952 the first Diagnostic and Statistical Manual of Mental Disorders (DSM) detailed 106 disorders across 130 pages. DSM 5 now describes 297 disorders across 947 pages.

Nearly 60 years ago, Enoch Powell a former UK Minister of Health, demonstrated prophetic insight in a speech he presented to the National Association for Mental Health in 1961:

"...the transformation of the mental hospitals is not only a matter of buildings, the change of a physical pattern, it is also the transformation of a whole branch of the profession of medicine, of nursing, of hospital administration.

Politics apart, let us admit that we all have a great deal of the conservative in our make-up, and find it easier to envisage things going on much as at present - or with small or gradual modifications - than deliberately to choose and favour the unaccustomed, the drastic and voluntarily to bring about a pattern of organisation in which new tasks will be performed in a new and wider setting.

With all these built-in tendencies to perpetuate the old, I am certain of this, that it is the duty of a Minister of Health... to lean with all their might in the opposite direction: to choose and to favour wherever they have the choice, the course of more drastic and fundamental change..."

The Trust Board has continued to meet, adding 'zooming' to communication skills. In August we welcomed a new Board member, Don Anton. Our focus has been to maintain a strategic focus while navigating uncertainty and recognising there is going to be a new normal. Our Vision and Values ground us and our role has remained to make the choices that create the future for the communities we serve.

The Finance Committee meets monthly and we thank the Chair, Madhavan Raman and committee members for the production of this year's excellent annual financial report.

We thank all our Trust Board Members for their brave and committed work this year. The organisation has come together to give a new meaning to 'community service', providing good governance and leadership .

"Simply by sailing in a new direction you could enlarge the world" – Alan Curnow



Suzanne Sinclair
WALSH Trust Board Chairperson



Rob Warriner
Chief Executive

20 October 2020