



ENIGMA

Otago Mental Health Support Trust News and views on mental health

WINTER 2018 EDITION

This newsletter was put together by the staff of the Otago Mental Health Support Trust. Editor: Grant Cooper

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OTAGO MENTAL HEALTH SUPPORT TRUST

- Peer Support
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- Information

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DISCLAIMER

The opinions and articles expressed in this newsletter do not necessarily represent the views of the Otago Mental Health Support Trust or anyone associated with the organisation

We welcome your feedback on our newsletter. See above for contact details.

Like Enigma by email? Let us know.

Making Your Voice count

The Mental Health Inquiry team were in Dunedin recently and I was fortunate enough to be able to attend 3 meetings. OMHST had 10 minutes with them to give some of our views. I have attached our two-page submission. This submission was based on a two-hour workshop with people who access our service to gain their ideas on what they needed the inquiry to know.

40 or so people who access mental health services attended a one-hour meeting with the Inquiry team. What impressed me was that people did convey their own experiences and that the panel members did listen. Sir Mason Durie from the panel summarised the views at the end of the time.

In the evening there was a public meeting in which a number of people with lived experience of mental distress told their stories.

I take this opportunity to thank people in Otago (and throughout the country) for having the courage to tell their story to the inquiry in person, by phone, email or in writing.

At the two hour workshop with people who access our service I was impressed that people talked about solutions and not just the problems. One of the solutions that gained a lot of support from the workshop was the Wellbeing Manifesto which is described briefly in the next pages. The Manifesto promotes a “Big Community” approach that I believe is much more holistic than our current bio medical dominated approach. If you agree with the Wellbeing Manifesto, put your name to the petition which will go to the Inquiry team in August. You can make your voice count!

Grant Cooper



GOVERNMENT INQUIRY INTO

Mental Health and Addiction

Oranga Tāngata, Oranga Whānau



Sign up to the Wellbeing Manifesto

The Government Inquiry into Mental Health and Addiction gives us a rare opportunity to restart the transition from Big Psychiatry to Big Community. New Zealand can lead the world in giving its people open access to a full menu of resources and services to sustain and restore wellbeing.

Please support the Wellbeing Manifesto by signing up to it as an individual or as an agency at

<https://our.actionstation.org.nz/p/wellbeingmanifesto>

Visit the Wellbeing Manifesto Facebook page at <https://www.facebook.com/wellbeingmanifesto>

This open submission will be presented to the Inquiry panel at a public meeting in early August. All people who sign up will be invited

Big Community

Big Psychiatry

<ul style="list-style-type: none"> • Mental distress is viewed as a recoverable social, psychological, spiritual or health disruption. 	<ul style="list-style-type: none"> • Mental disorder is viewed primarily as a health deficit.
<ul style="list-style-type: none"> • A wellbeing system with multiple entry points led by multiple sectors and communities. 	<ul style="list-style-type: none"> • A mental health system with a health entry point led by medicine.
<ul style="list-style-type: none"> • Resources are used for a broad menu of comprehensive community-based responses. 	<ul style="list-style-type: none"> • Most resources are used for psychiatric treatments, clinics and hospitals.
<ul style="list-style-type: none"> • Employs a mix of peer, cultural and traditional professional workforces. 	<ul style="list-style-type: none"> • Employs predominantly medical and allied professionals.
<ul style="list-style-type: none"> • Has a commitment to partnerships at all levels and to human rights. 	<ul style="list-style-type: none"> • Has a legacy of paternalism and human rights breaches.
<ul style="list-style-type: none"> • Focused on equity or access, building strengths and improving long term life and health outcomes. 	<ul style="list-style-type: none"> • Focused on compliance, symptom reduction and short-term risk management.
<ul style="list-style-type: none"> • Responds to people at risk with compassion and intensive support. 	<ul style="list-style-type: none"> • Responds to people at risk with coercion and locked environments.
<ul style="list-style-type: none"> • A bi-cultural system that embraces many world views. 	<ul style="list-style-type: none"> • A colonising medical system that excludes other world views.

Commitment to the seven wellbeing priorities

The government needs to commit to seven wellbeing priorities across the spectrum – to prevent, respond to, and lessen the impact of mental distress and addiction. All people:

1. Live in social conditions that enable them to look after their own and each other's wellbeing.
2. Know how to recognise and respond to stress, distress and addiction.
3. Can easily find services and supports for people with distress and addiction.
4. Get timely, respectful and helpful responses from them.
5. Have access to a comprehensive range of community-based services and supports.
6. Are supported by people who have 'walked in their shoes', as well as professionals.
7. Are enabled to reconnect with themselves, their whānau and valued roles in their communities.

What is the evidence that our current mental health system is not working?

Improving equity and outcomes

There is ample evidence that people with mental distress, addiction and loss of wellbeing often experience inequitable responses from services as well as poor life and health outcomes. Big Community must give the highest priority to benchmarking and improving the following types of inequities and outcomes:

Use of services and welfare benefits

- Around 50% of people with disabling mental distress do not or cannot access services.
- Māori make up 15% of the population and 25% of people who use mental health services.
- In 2017, 45% of people on Jobseeker Support (for a health condition) and 35% of people on Supported Living Payment had a mental health condition.

People with 'serious mental illness'

- 77% experience social isolation compared to 25% with no 'mental illness'.
- 27% are employed compared to 67% of people with no 'mental illness'.
- 43% live in hardship compared to 13% of people with no 'mental illness'.
- They die up to 25 years younger than average.
- Recovery outcomes for people with a diagnosis of schizophrenia are better in low income countries than high income countries.
- There has been no sustained change in recovery outcomes for populations with a diagnosis of schizophrenia since longitudinal studies began in the 1880s.
- In 2014, the cost of the 'burden of serious mental illness' and opioid addiction in New Zealand was \$17 billion (7.2% of GDP).

Compulsory treatment

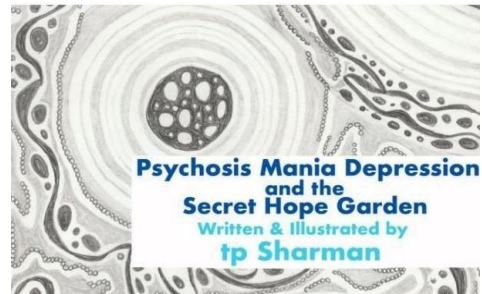
- Community treatment orders 'do not result in better service use, social functioning, mental state or quality of life compared with standard voluntary care'. In 2014:
- 103 people per 100,000 were on inpatient or community treatment orders on any given day³ – this rate is extremely high by New Zealand historical standards and international standards.
- There was 6-fold variation in the use of community treatment orders and a 15-fold variation in the use of inpatient orders, between District Health Boards.
- Māori were 3.5 times more likely to be subject to a community treatment order than non-Māori.
- Māori were secluded almost four times more than non-Māori.

Suicide

- New Zealand has the highest youth suicide rate for adolescents aged 15–19 across 37 OECD and EU countries (15.6 per 100,000) – nine times higher than Portugal, the country with the lowest rate.
- In 2012, 17.6 per 100,000 of the Māori population completed suicide, compared with 10.6 per 100,000 of the non-Māori population.
- In 2014, the suicide rate among people who had been in contact with mental health services in the year prior to death was 136.2 per 100,000 compared with 6.3 per 100,000 for the rest of the population.

Love is... by Colleen Boyd

Love is being there.
Playing fair.
Two start to think like one.
Life begins to seem more fun.
Little things mean a lot.
Makes you appreciate what you have got.
Consideration plays a big part
When you have the person in your heart.
It comes naturally.
Effort is well and truly natural and is a blessing.
Everything that is given is given without
hesitation.
Within time everything is emotionally renewed or
explored.
Then everything is shared by those adored.
A smile, a hug, just being there with someone who
Makes your day worth more than gold.
Then it is like your life is being retold.
A new chapter that brings many new choices
To be made, probably with them in mind.
They are kind. Life can be hard and not plain
sailing.
We will survive with love prevailing.



Tp Sharman's beautiful book is still available for only \$30. Enquiries to OMHST office. Cash only

WELCOME to **Alan Shanks** who has joined the Board of Otago Mental Health Support Trust. Alan brings a wealth of experience in the Not for Profit sector and we all look forward to the contribution he will make to our work.

Helplines

- Need to talk? ([1737](tel:1737) – free call or text)
- The Depression Helpline ([0800 111 757](tel:0800111757))
- Healthline ([0800 611 116](tel:0800611116))
- Lifeline ([0800 543 354](tel:0800543354))
- Samaritans ([0800 726 666](tel:0800726666))
- Youthline ([0800 376 633](tel:0800376633))
- Alcohol Drug Helpline ([0800 787 797](tel:0800787797))



THE OTAGO MASONIC CHARITABLE TRUST

A Big Thank You to the Otago Masonic Charitable Trust for providing us a grant of \$3500 so that we can upgrade our phones and replace old computer equipment.



Many thanks to the staff and admin teams at Farmlands. They recently held a mufti day and raised \$121.30 that they have donated to the Otago Mental Health Support Trust.

Women's Group is held on the last Friday of every month (although not December).

This is a friendly informal meeting giving an opportunity for women to make new friends, and share experiences.

1-3pm meet at our rooms, Queens Building, 109 Princes Street Dunedin.

We wish to thank the following for their financial support:

Bendigo Valley Trust, COGS Coastal Otago/Waitaki, Dunedin Casino Charitable Trust, Dunedin City Council, HealthCare Otago Charitable Trust, Lotteries Otago/Southland Community, Ministry of Social Development, Otago Community Trust, Otago Masonic Charitable Trust, Southern District Health Board

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