Reflections 2022 - 2023

CHANGING MINDS HE MANA TŌ TE MĀTAU Ā-WHĒAKO

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WHAKATAU AARYN NIUAPU (Changing Minds Board Member)



BOARD INTRODUCTIONS

THOUGHTS FROM THE CHAIR



AGM BUSINESS

- Apologies
- Presentation and approval of financials
- Annual Report

CEO REFLECTIONS



LIVED EXPERIENCE ADVOCACY

Jodie Bennett – Kaiwhaihua



Representing our community perspectives and voices, and destigmatising experiences of mental distress and addiction within service design and delivery.



Lack of cross over = conduit

Deaf community Perinatal Mental Health Womens Health Strategy

LIVED EXPERIENCE

Lived Experience introduces a new way of knowing that can complement and at times, disrupt, the clinical world view.

WHAT DOES LIVED EXPERIENCE ADVOCACY LOOK LIKE FOR US?

Representing our community perspectives and voices, and destigmatising experiences of mental distress and addiction within service design and delivery.

BEST-PRACTICE CAPABILITY

01 CHANGING MINDS IN THE DEAF COMMUNITY

O2 AHURUTIA TE RITO | IT TAKES A VILLAGE How better support for perinatal mental healt

How better support for perinatal mental health could transform the future for communities in Aotearoa New Zealand





- Some of you might not have heard of the Code of Expectations.
- For those who don't or aren't quite sure what it is. The code of expectations sets the expectations for how health entities must work with consumers, whānau and communities in the planning, design, delivery and evaluation of health services.
- This code is required by the Pae Ora (Healthy Futures) Act 2022 and is underpinned by the health sector principles.

• All health entities must act in accordance with the code and are required to report annually on how the code has been applied.

CODE OF EXPECTATIONS

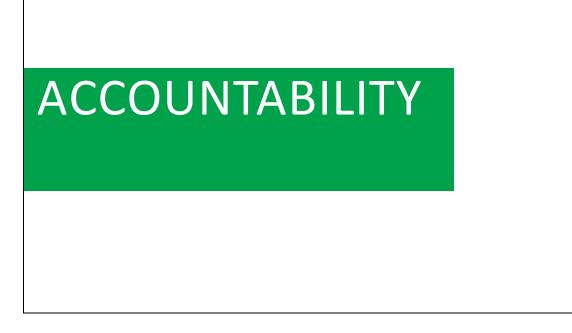
The Code of Expectations for health entities' engagement with consumers and whānau (the code) sets the expectations for how health entities must work with consumers, whānau and communities in the planning, design, delivery and evaluation of health services.

This code is required by the Pae Ora (Healthy Futures) Act 2022 and is underpinned by the health sector principles. All health entities must act in accordance with the code and are required to report annually on how the code has been applied.

It includes things like co-design and shared leadership - knowledge and expertise drawn from lived experience are valued equally alongside clinical and other knowledge.

Consumers, whānau and communities are experts by experience, often holding solutions to make improvements to the health system.

Te Tahū Hauora have all the information on their website – but it prioritises equity, engagement, quality and safety and whānau Māori including effective codesign.



- I was fortunate enough to be invited to the launch event at Parliament and spent much of it reflecting on our mahi.
- As a result of some team collaboration Changing Minds will voluntarily hold ourselves accountable to meeting the Code of Expectations and this begins with being transparent about how we currently meet it in our present position.
- We are doing this to lead by example not just to our community, but to the wider sector who could also voluntarily uphold the Code.
- It is a signal to bigger, broader organisations on how to get started all it takes is an openness to measuring yourself against what the code outlines.

| How the code says health entities must meet the expectations | What Changing Minds are doing currently | What Changing Minds are working towards |
|---|---|---|
| | Co-design services with consumers, whānau an | d communities. |
| 2.1 co-designing with consumers, whānau and communities so there is collective development of organisational priorities, processes and evaluation, and consumers, whānau and communities are involved at all levels. | Co-designing Rākau Roroa with more than 700 individuals around Aotearoa. | Ensuring our commitment to co-design is informed by current best practice in the Lived Experience community. |
| | Continuing to co-design updates and changes to Rākau Roroa to meet the needs of specific communities. | Broadening our co-design approach to include whânau and wider communities. |
| | Partnering with the Deaf Community to develop mental health literacy campaigns, Rākau Roroa Training and mental health resources with, for and by the Deaf Community. | Using our knowledge of what makes Lived Experience engagement feel values, meaningful and respected to reach a broader segment of the Lived Experience community. |
| | Drawing on community wisdom as subject matter experts, project advisors and in paid positions within Changing Minds. | Recognising and compensating our community for their contributions to co-design to the extent of our abilities as a very small organisation. |
| | Ongoing research and engagement with the community to check in on what they wand from Changing Minds, and creating feedback loops | Ensuring körero about projects is ongoing, and extends beyond the initial co-design phase. Community led körero that informs direction of |
| | on projects. | projects before co-design phases. |

So how are we doing it?

A 'stocktake' measuring ourselves against the Code of Expectations shows we are performing strongly in some areas and others provide opportunity for improvement.

We intend to implement our obligations to the Code of Expectations by telling our community how we are meeting the code, and how we are seeking to improve in other areas. This will include a working document uploaded to a dedicated page on our website that will regularly update on our performance and work we are committing to completing.

This also involves holding other organisations to account, through our systemic advocacy mahi – Our engagement work positions us as champions for the Code of Expectations to be upheld and this includes our work with Te Whatu Ora, Manatū Hauora (Ministry of Health), Te Tāhū Hauora (Health Quality and Safety Commission) and Te Hiringa Mahara (Mental Health and Wellbeing Commission).



Kia ora everyone. I know I can talk a lot so I'm going to do my best to keep to five minutes today, but I'm more than happy to have a more detailed korero afterwards.

We ask a lot of questions of our community.

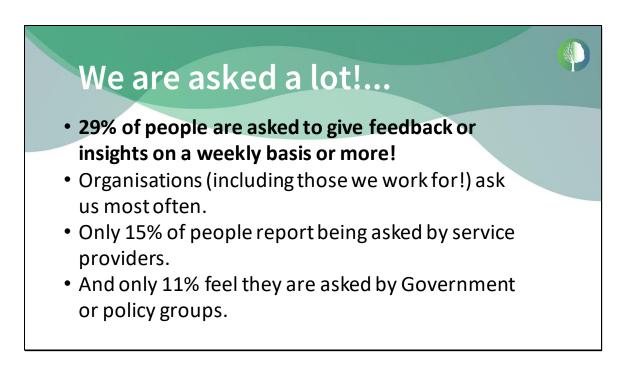
We do this because Lived Experience isn't a single view. The variety of our experiences and our insights add up a whole which is louder and stronger.

Recently we've asked some big questions, like

- What does positive health system transformation look like for Tangata Matau a-wheako?
- What are the experiences of health for women with Lived Experience? And
- What does our community want from the General Election 2023?

And we want to keep asking. Because of this, we needed to ask the most important question we could:

What makes Lived Experience engagement feel valued, meaningful and respected.

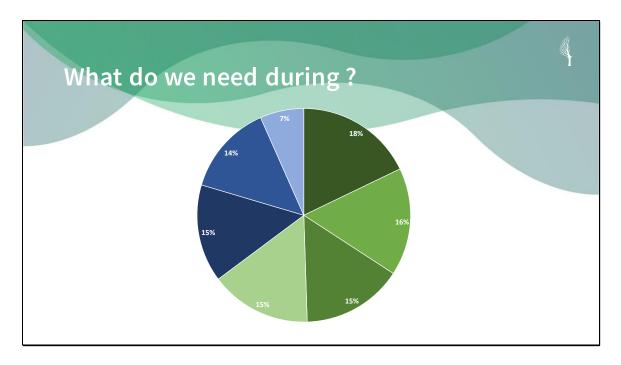


Who is asking?

- If we are being asked by organisations we work or volunteer for, do we have a choice? Do we feel in control? Are we equals?
- If Government policies affect everyone with Lived Experience – why are so few of use included?
- This is everyone's data.
- We did look at Tall Trees and the wider community individually as well because our

Rākau Roroa programme is for people who feel ready to share their stories AND we know have support systems in place.

• We know Tall Trees engage more in policy and media than others.



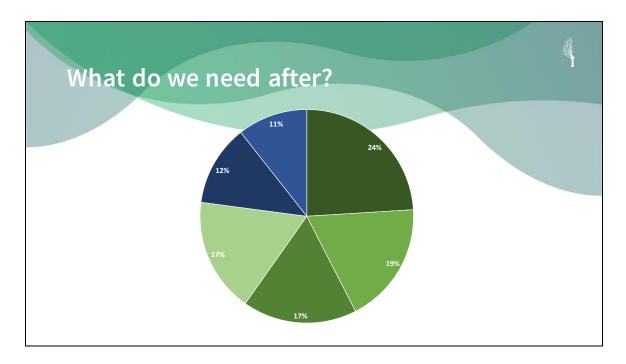
- I understand how my data and information will be used
- I am sharing with a person with similar experiences to me
- I can chose how to give feedback
- I am offered putea aroha, paid or compensated for my time
- I know I can withdraw at any time
- I can chose when to give feedback
- I can share in a culturally appropriate way

How we are asked matters too.

Tall Trees (people with more support, and feel ready to ask) were more likely to favour methods that were:

- Collaborative
- Online
- In a group setting

Other people in the community felt safer sharing in individual or 1-1 settings. The wider community also placed more emphasis on the need for putea aroha, and knowing they can withdraw at any time.



- I receive a copy of the report/project I contributed to
- I can see my feedback in the project
- I have the opportunity to ask questions
- I know who to contact if I have questions
- I have information and resources to support my wellbeing
- I receive a copy of my data

Having multiple channels to give feedback and flexibility based on peoples needs has a small burden on organisations but has huge benefits for the community.





Rākau Roroa and Community of Learning

Rākau Roroa

• Training programme for those with Lived Experience of mental distress and/or addiction.

 Facilitators hui - refreshed view of the kaupapa. Tall Tree and Kaiako, Vicky-Jean Stephens (Ngāti Rangi ki Ngāwhā, Ngāpuhi), led us on a journey looking at our kaupapa through a Te Ao Māori lens.





Co-design with Deaf community

- One day workshop, Deaf friendly(3 locations, 1 online).
- Key outputs: 9 new NZSL signs for Mental Health.
 Trained 3 new Deaf facilitators.
- Liaison with Ko Taku Reo Deaf School, proposed staff training.

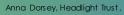
Including: Lived Experience Discrimination Self-stigma Prejudice



Rākau Roroa Queenstown: 2-day workshop, October.

- In partnership with Headlight Trust.

"I felt that this workshop really helped us all to shift the way we view mental health, not just through a medical lens, but more so seeing it as a part of the human condition and finding hope and value in all our experiences, wherever we are on our journey,"





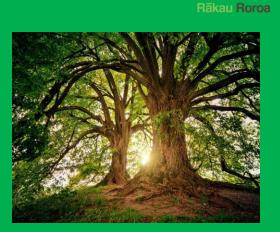




Te Tai Tokerau, Rākau Roroa (Nōku te Ao social action grant). Workshop delivery by end June 2024 (Lotteries). Commercial development Tall Tree/community connection "Ka taea te tatau ngā kākano o tētahi pua kauri, ēngari tē taea te tatau ngā rākau o āua kākano"

We can count the seeds of one kauri cone, However, we can never count the trees that come from those seeds.

Developed by **Rākau Roroa** facilitators and Tall Tree and Kaiako, Vicky-Jean Stephens (Ngāti Rangi ki Ngāw hā, Ngāpuhi), hui, Sept 2024.



Thank you for joining us!