



22 June 2020

Via email: MHAD-responses@health.govt.nz

Dear Sir / Madam,

**KIA KAHA, KIA MĀIA, KIA ORA AOTEAROA:
COVID-19 PSYCHOSOCIAL AND MENTAL WELLBEING RECOVERY PLAN**

Thank you for the opportunity to present a submission on the Kia Kaha, Kia Māia, Kia Ora Aotearoa: COVID-19 Psychosocial and Mental Wellbeing Recovery Plan. Queenstown Lakes District Council (QLDC) broadly supports the proposed plan, in particular the need to act decisively while providing an immediate and evolving response. QLDC welcomes the opportunity to be part of a coordinated effort across national, regional and local levels to support wellbeing, with a particular focus on prevention and early intervention.

The Queenstown Lakes District is experiencing significant economic and social stressors in response to the COVID-19 pandemic. From a community that has had high tourism and population growth over the past decade, the Queenstown Lakes District is now one of the hardest hit communities in New Zealand in relation to job losses and economic contraction. Unemployment is a key driver of mental and social distress, and the psychosocial effects of this economic crisis on the community is of significant concern to QLDC, and a focus area within the local Strategic Recovery Plan. As the district moves into winter, the mental wellbeing of the community will also be put under additional pressure due to typical winter challenges such as paying for home heating, staying connected and avoiding seasonal illness.

A unique aspect of the Queenstown Lakes District is the high number of migrant workers within the community, many of whom are now unemployed but without a means to return to their home countries. QLDC has worked closely with Civil Defence and local service providers since the start of the pandemic to respond to the significant welfare needs within the community in particular for the migrant community, but also for a growing number of kiwi citizens.

There has been lack of investment in health, mental health, and social service provision in the Queenstown Lakes District in recent years. This underinvestment, along with a dramatic increase in welfare and psychosocial needs within the community, is placing significant pressure on social services and community networks. A key aspect of ensuring an effective psychosocial programme of support for the Queenstown Lakes District must include a rapid scaling up of services, including support for those delivering social services to prevent staff burnout.

QLDC supports a community-led approach which empowers communities to develop innovative ways to support mental wellbeing, including collaborative information and messaging led by the Ministry of Health, Southern DHB, in partnership with QLDC, and social and business sectors.

Thank you again for the opportunity to comment on this, the first iteration of the COVID-19 Psychosocial and Mental Wellbeing Recovery Plan, and QLDC looks forward to continuing to feedback and comment on the plan as it is developed.

Please note that this submission reflects the standpoint of officers and has not been ratified by Council's elected members.

Yours faithfully,

A handwritten signature in black ink, appearing to be 'Mike Theelen', with a long horizontal flourish extending to the right.

Mike Theelen
Chief Executive

1.0 Economic impacts of COVID-19 on the Queenstown Lakes economy

1.1 Over the last decade the district has experienced strong growth in both tourist numbers and population, driving substantial construction activity. However, economic reliance on international tourism has made the district particularly vulnerable, and the construction sector may also experience significant contraction. Recent analysis predicts a range of challenging effects on the Queenstown Lakes District¹, including:

- Employment is projected to fall by 25.3% between March 2020 and March 2021, a total loss of 7,900 jobs; in terms of job losses this makes Queenstown Lakes the fifth hardest hit district in the country, behind the main centres.
- Overall unemployment level is forecast to rise from 1.1% in the March 2020 quarter, to 18.5% in March 2021. This will be double the forecast national rate of 9.0%.
- Job losses are expected at all skill levels, however low-skilled workers will bear the brunt of job losses. Low-skilled occupations in the accommodation and food services industry such as hospitality workers, food trades workers and cleaners are among the worst affected.

1.2 The Queenstown Lakes District Council welfare registration form was launched on 24 March 2020 in response to the level 4 lockdown. The following data provides a snapshot of the data from the welfare registration form as at 19 June 2020²:

- 20,943 Welfare requests (7,166 unique individuals; multiple requests can be made)
- 5,196 Welfare requests from those on employment or short stay visitor visas
- 46% Unemployment rate of those registering for welfare
- 10% Current unemployment rate of the working age population
- A total of 116 welfare registrations have been received from Māori.
- Summary of requests per type:
 - Accommodation 1,556 requests
 - Essential shopping 6,377 requests
 - Financial support 1,991 requests
 - Mental Health 123 requests
 - Animals (help with pets) 92 requests
 - Other support 1,079 requests (includes cultural requirements, help with using online services, heating, job hunting and loneliness/friends).

2.0 Mental Health and social sector service provisions in Queenstown Lakes

2.1 As noted in the proposed plan, community-based organisations and networks will play a key role in assisting people to connect with health and social support services in their communities. While there are a range of high functioning social services within the Queenstown Lakes District, the level of services provided has not maintained pace with growth.

¹ Economic Impacts of COVID-19 on the Queenstown-Lakes Economy – Early Estimates, Infometrics, May 2020
<https://www.qldc.govt.nz/media/03tbmmzn/impact-of-covid19-on-queenstown-lakes-economy-v6.pdf>

² Queenstown Lakes District COVID-19 Intelligence Report. Week ending 19/6/2020
https://www.qldc.govt.nz/media/otng3rpt/qldc_recovery-team_welfare-report_19june20.pdf

2.2 The New Zealand Index of Multiple Deprivation (IMD) is a set of tools for identifying concentrations of deprivation in New Zealand, across 7 domains of deprivation (Employment, Income, Crime, Housing, Health, Education and Access to services). The IMD 2013 maps rank each community area from the least deprived to the most deprived). The Queenstown Lakes District is recorded as across all categories being Q1 – Least Deprived. However, if you drill down into particular mesh blocks and deprivation categories some parts of the district show as areas of high deprivation. In particular, all of the five main areas of the district recorded in the IMD show as high deprivation for Access to Services.

2.3 Key social service from the 2018 Quality of Life Report includes:

- Mental health (62%) and maternity services (60%) are the main services residents identify needing more of in the district.
- A further 19% of residents also mention the need for more community services, specifically more support for families (9%) and retirees (8%).
- Mental health services (25%), education and training (23%), child care services (21%), and maternity services (18%) are also the services residents mention they have accessed, or tried to access, in the past 12 months. Twenty percent of residents mention they were unable to access the services they were looking for at a time and/ or location convenient to them.

3.0 Responses to submission questions

3.1 Question 1: Do the vision, principles and focus areas in the plan resonate with you?

Response: QLDC supports the proposed vision, principles and focus areas of the plan, in particular the need for a people and whānau centred, and community-led approach. QLDC supports a collective and integrated approach to meeting the psychosocial wellbeing needs of communities, with clear leadership from the Ministry of Health and Southern DHB in the district. While the focus areas indicate a need to strengthen mental health and addiction services, further clarity is needed to understand how barriers to access will be reduced, along with how funding for service contracts and workforce plans will directly and appropriately respond to the needs in the Queenstown Lakes District.

3.2 Question 2: In what ways does your organisation see itself contributing to the focus areas in the plan?

Response: In May 2019 the Local Government Act was amended to reinstate the four aspects of community wellbeing. The purpose of local government is: “to play a broad role in promoting the social, economic, environmental, and cultural well-being of their communities, taking a sustainable development approach”. QLDC will contribute to this plan by providing local leadership, advocacy and facilitation to ensure an effective collective approach to meeting the psychosocial wellbeing needs of the community.

As a leader in the community QLDC will implement a recovery plan that builds economic and social recovery, with a focus on empowering community-led solutions to current challenges. QLDC will work the health sector, social services and businesses to ensure people are equipped to look after their own mental wellbeing, in particular sharing current information and resources and facilitating a collective approach to meeting community need, including building a comprehensive local dataset. The consistency and reliability of this

information will be important for the development of partnerships with iwi, regional organisations and central government agencies. QLDC will advocate for strengthened mental health and addiction supports, and specialist services for local communities.

QLDC delivers services that will directly support the psychosocial wellbeing of the community through providing good quality sport and recreation facilities and programmes, parks and reserves, and libraries. These services offer opportunities for learning, social connection, exercise, and connecting with nature.

3.3 Question 3: What do you think are the critical factors to ensure success of this plan?

Response: QLDC considers the following factors critical to ensuring the success of the plan:

- Rapid response to immediate need, particularly within the next 12 months when the local economic impact, and related psychosocial effects may be significant. A proactive response now is essential to minimise long-term harm. This could include fastracking the new Access in Choice primary care navigator model within GP services. This service is due to be rolled out in the district by the end of 2020 however this implementation timeline is now too slow for the current crisis being experienced within the community.
- Flexibility and the willingness to test innovative ideas
- Appropriate funding
- Local empowerment to develop a response that meets the unique needs of the community
- Long term commitment/investment into developing mental health and addiction support services, along with a wider collective programme to build resilience within the community (the plan needs to look out at least 5 years, rather than 12 to 18 months).
- Reducing barriers for all members of the community to access mental health services
- Ensure services are flexible, appropriate and responsive
- Support for the mental health and social sector workforce to maintain organisational and personal resilience for those working with the community
- Ensure the scale and complexity of need likely to be experienced by the Queenstown Lakes District community is acknowledged in local level planning and response.
- Clear and transparent leadership, and a collaborative approach, provided by the Ministry of Health and Southern DHB.

3.4 Question 4: What positive examples of actions to support mental and social wellbeing are you aware of?

Response: QLDC is aware of the following positive actions to support mental and social wellbeing:

- Improved local social sector collaboration to respond to immediate needs, including as part of the QLDC/Civil Defence Emergency Management (CDEM) welfare response.

- Current local networks planning a local response to psychosocial needs, including:
 - Interagency networks in Queenstown and Wānaka
 - Central Lakes Mental Health and Addictions Network
 - Local Education COVID response group
- Strong relationships within all levels of the local mental health continuum
- Central Government mental health support programmes e.g. 1737 phone line and online self-support tool Melon.
- Mens shed being built in Arrowtown
- Programmes that could support psychosocial needs in the community e.g. Mates in Construction and Farm Strong
- Wraparound service models delivered locally including Whanau Ora and Strengthening Families
- Kia Kaha Queenstown Lakes Hub: led by QLDC this service was started in Queenstown on 4 June 2020, with the goal of developing a collaborative cross-agency and community-led response to meeting the needs of the Queenstown Lakes community (including welfare, wellbeing, immigration, education and employment).

3.5 Question 5: Do you think there is anything missing from the plan?

Response: Aspects of the plan that need further consideration include:

- Barriers to service and appropriate pathways to access e.g. at the moment brief intervention service referrals must be made by GPs. This is cost prohibitive for many people and often adds an extra step to the process, thereby delaying the immediate response to need. Make it as simple as possible for people to get the support they need.
- Local service capacity to meet need
- Ensuring local service providers are considered partners in the service delivery model and their input is sort when developing a local response plan; trust local providers and their local knowledge.
- Appropriate funding invested into local services that reflects the likely long-term needs in the Queenstown Lakes District. Southern DHB has recently advertised an Expression of Interest to increase funding for two months to local addiction services; while this provides some acknowledgement from the DHB that there is likely to be increasing need, this short term funding response does not allow for the development of a sustainable response.