

Youth-Informed Transformation

2019



Opening Karakia

Kia hora te marino
Kia whakapapa pounamu te moana
Kia tere te kārohirohi i mua i tō huarahi
Hei huarahi mō tātou i tēnei rangi
Aroha atu, aroha mai
Tātou i a tātou katoa

May calm spread
Till the sea glistens like greenstone
And shimmering light guides your way
A pathway for us all for this day
Transmit love, receive love
For each and everyone

This karakia carries our gratitude to everyone who has supported us on this journey, and particularly honours the people who had joined us and have since passed.

Acknowledgements

Thank you to the team at Werry Workforce Whāraurau, who handed us the pen.

Thank you to the rangatahi we met, who shared not only the darkness and light that they knew well, but also the pathway by which they traversed from one to the other, in the hope that sharing their experience would make things easier for the rangatahi that followed.

Thank you to those who have passed, for sharing so much of your brief time on this earth with us.

And finally, thank you to you, dear reader, for what you will go on to do with what you have learnt.

Ngā mihi nui ki a koutou katoa,

Nā Manisha Morar (with support and guidance from James Boyd, Sammie Dudley, and Romy Lee)

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Introduction

In 2019, we¹ were privileged to work alongside thirty-four rangatahi from around the country in two workshops held in Auckland and Dunedin. Together, we reimagined our mental health system. This was a new task, and not one any of us had embarked on before. As a result, we learnt as we went, and are now thrilled to be able to share both our process and what we learnt. This report attempts to convey not just what was said, but the spirit in which it was intended. We hope that as Youth Consumer Advisors continue to produce these reports, spending each year reflecting on the last, we will edge closer toward that intention.

Our focus in 2019 was to compile young people's perspectives to support transformation in Mental Health Services. As a result, much of this report focuses on the types of services we need and how different services can work together to create pathways of care that ensure all rangatahi get support that works for them. In addition to this focus, this report contains ideas and opportunities for all services and practitioners, irrespective of their current budget or scope.

This report is written in the hope it will be used as a resource to guide service and workforce development in the mental health sector. Considering this, it provides little explanation of the determinants of mental ill health. These are well known; our discussions reinforced established mechanisms, touching on the importance of love and support, as well as the key role of economic security. We echo the recommendations of both the authors of [He Ara Oranga](#) and the relevant [United Nations Special Rapporteur](#) to say that without action on the broader social determinants of health, attempts to treat our way out of a mental health crisis will prove insufficient (Paterson, Durie et al. 2018, United Nations 2019). Beyond the health sector, we must actively work to create connected communities, ensure access to meaningful education and employment, and give everyone the resources they need to thrive.

¹ 'We' refers to the Youth Consumer Advisors employed at Werry Workforce Whāraurau in 2019.

Our Process

We began by talking to taiohi whai ora², or young people who had experienced mental health challenges. They were our friends, our colleagues, and young people involved in local Youth Councils. They became our Leadership Group. This group advised our planning process. They provided guidance on everything; from the venue and catering, to how to create a safe space, what to talk about, and how to connect with young people. They called the workshops we designed DMCs (deep and meaningful conversations) and supported us to create branding. With their guidance in hand, we organised two DMCs; one in Auckland and another in Dunedin.

The DMCs began with karakia (a prayer) and whakawhānaungatanga (activities to get to know each other). We took the time to learn names, pronouns and the reasons people came along³, before breaking off into smaller groups (between 5-8 people) for discussions. The day was split into three sections:

1. A Shared Vision

During this session, we identified the many things that contribute to mental health and wellbeing. We asked rangatahi what 'filled their cup' and reflected on how our services could embed these things into



² Taiohi whai ora translates to 'young people in search of wellness'

³ To learn more about who came along, flip to Page 17.

their practice. In starting with this broad brief, we were able to look beyond the existing system toward one that acted preventatively and holistically to meet our needs.

2. Design A Service

Here we investigated what the ideal service would be, and quickly realised that different people needed access to different things. Despite this, there were some fundamental aspirations that we all shared for the places we turned to for help. Our designs often crept a little further than the confines of what usually comes to mind when people think of mental health services, looking more like youth one-stop shops, and publicly funded community spaces.

3. Let's Do This

We devoted the final session of the day to designing projects. This time was spent reflecting on what we learnt and devising ways in which we could contribute toward the change we wanted to see. Our aspiration was that this session would allow us to give back to the rangatahi that had spent the day sharing their aspirations with us. We helped them build their ideas and find like-minded peers.

This report follows the format of the DMCs, laying out what we learnt in each of these sections.

A Shared Vision

Our Components of Healing

A growing focus on wellbeing asks us all to step away from framing mental health as a problem. It urges us to actively build a society where everyone leads a happy, healthy and meaningful life. But what is wellbeing, really? During this journey, we heard about the importance of connection. As a result, the definition of relational wellbeing has proved particularly poignant; relational wellbeing is when people are connected to what they intrinsically value. This section highlights the things rangatahi told us they intrinsically valued and identifies how services can incorporate increased connection to these things in their practice.

Whānau

“Ki te kotahi te kakaho ka whati, Ki te kapuia e kore e whati”

Alone we can be broken. Standing together, we are invincible.

Whānau are the community that makes up a person’s system of support. Whānau may consist of family (immediate and extended), friends, teachers, and even pets. Feeling proud and connected to whānau is complementary to connection to whakapapa (ancestry) and culture.

The rangatahi we spoke to centred whānau in their healing journey for two reasons. The first was the **importance of whanaungatanga**; they sought support and comfort in times of distress from people they already knew. The second was driven by their **understanding that their time in services was finite**; at the end of it, they’d return to their own communities for care and support. They wanted their whānau to be supported to support them, and for services to gift to both them and their friends and family the tools to begin to build sustainable communities of healing.

Whānau Ora can support us as a sector to better awahi entire whānau, while retaining our commitment to the outcomes experienced by rangatahi. As we look to strengthening mental health competence in our communities, **parenting programmes** give whānau additional tools to raise happy and healthy rangatahi, while programmes like [LifeKeepers](https://www.lifekeepers.nz/)⁴ equip communities to recognise acute distress. **Partnerships between**

⁴ LifeKeepers is a suicide prevention training programme by LeVa. It's like first aid, but for suicide. To learn more, visit <https://www.lifekeepers.nz/>

schools and services that lead to teachers (or others in mentorship roles) to feel safe and confident to build strong relationships with rangatahi and address distress are also essential. Tools like [Tūturu](#) can support this⁵.

Finally, rangatahi expressed interest in **peer-led school-based initiatives**, where the rangatahi that attend a school (and recent graduates) are given both the resources to support their peers and make decisions that instigate cultural shifts. We see this taking three forms, all of which currently exist in pockets. Initially, this involves providing **wellbeing and mental health education**, so young people can identify distress in themselves and their friends and provide and seek support appropriately. Secondly, this entails **establishing a leadership group**, not unlike a school council, that specifically considers the wellbeing of students through a health promotion framework and designs and leads interventions. Thirdly, graduates would return over time to **share the lessons** they wish they'd learnt with students, while also providing their reflections and advice to school leaders (both student groups and teachers) so their experiences both within and beyond school inform future development. Numerous models across the globe use some of the proposed approaches (e.g. the Sheffield Anti-Bullying Project) but we were unable to find a comprehensive example that encapsulated all three.

Nature

“Te toto o te tangata he kai, te oranga o te tangata, he whenua, he oneone”

While food provides the blood in our veins, our health is drawn from the land.

The connection between people and nature is inextricable. We heard time and time again about the role of the sea and of land, of streams and of mountains in people's healing journeys. These spaces allowed them to escape things that caused them distress. These spaces allowed them to reconnect with themselves.

As inhabitants of colonised land, it would be irresponsible of us to highlight the importance of our natural environment without acknowledging the connection between Māori and Aotearoa. The relationship between tangata whenua (people of the land) and whenua is a deeply spiritual one, as the nature, ecology, environment and even culture of this whenua contains both life, and history. For Māori rangatahi, healing may rest in **finding their place within this history** and in reclaiming their ancient role as kaitiaki (guardians of the sea, sky, and land).

⁵ Tūturu is a programme design by the New Zealand Drug Foundation that schools undertake with the support of a local service. It aims to help students develop critical thinking about drugs and alcohol and begins by strengthening the sense of community within a school. To learn more, check out <https://www.tuturu.org.nz/>

We also note that tauiwī⁶ rangatahi may find it challenging to connect to their heritage prior to migration. The journey to reconnect with ones' culture, when it feels alien, can be a long and confronting one. By contrast, connecting to nature (and learning from Mātauranga Māori to do so) may prove a universal way to feel **part of something larger than ourselves**, and steel us for more challenging journeys ahead.

Rangatahi imagined services that either took them out of the confines of four walls, or ones that brought the outside indoors. In the short term, this might look like designing spaces with natural lighting, green (living) walls, and water features to help rangatahi feel comfortable within services. A more radical shift from treating ailments to facilitating recovery would involve incorporating nature walks, tree plantings, and lessons about the history of the land into group sessions.

Identity

“He tina ki runga, he tāmōre ki raro”

To flourish above - one must be firmly rooted below.

We all embark on a lifelong journey of self-discovery. The time we spend healing is no exception. Clinicians who embrace and celebrate diversity make services a safe space to traverse some of the more difficult legs of this journey. For every service to achieve this, we must train and support **practitioners from all walks of life**.

As we support rangatahi to transition out of services, we should be prepared to connect them to communities, and mentors that can continue to support their journey. Sometimes what's needed is someone who understands you, and helps you imagine a future where you belong. Mentors could be people that share their ethnicity and connect them to whakapapa, or peers who share another part of their journey. Mahi a Atua⁷ offers a formidable model for how services can reconnect rangatahi to their whakapapa.

Giving Back

“Nā tō rourou, nā taku rourou, ka ora ai te iwi”

With your food basket and my food basket the people will thrive.

⁶ Tauiwī refers to a person from afar and is used to reference all who are not Indigenous to Aotearoa

⁷ Mahi a Atua is a narrative-based programme used by Te Kuwatawata in Tairāwhiti (Rangihuna, Kopua et al. 2018).

Identity is not just who we are, but what we do. Our actions influence who we are and how we see ourselves. The rangatahi we spoke to talked about reclaiming their identity through service. Giving back allowed them to feel like they were part of something larger than themselves. Joining tree plantings and contributing to a community kitchen can be powerful ways to help rangatahi construct positive narratives about who they are and what they're capable of.

Incorporating reciprocity into our services is also an important way to challenge the existing imbalance of power. One way to do this is through establishing a **Youth Advisory Group (YAG)**. YAGs allow young people using a service to come together to talk about their experiences and consider how the service could be improved. Having a YAG demonstrates to rangatahi that their perspectives and experiences are valued, while allowing a service to continually improve in ways driven by the people it serves.

Wairua

“Ko au te taiao, ko te taiao, ko au”

I am the ecosystem, and the ecosystem is me.

While compiling these findings, we were struck by a common thread of wairua (spirituality), or the understanding that we all belong to something bigger than ourselves. In contrast to the sector-wide focus on 'person-centred care', we heard about the importance of care that centred community and connection. We exist within systems, and our healing is contingent upon the healing of these systems. Many of the young people we spoke to described this as a 'holistic' or 'kaupapa Māori' model. We've shied away from those labels, not because we disagree with them, but because vastly different approaches currently go by these names. As you'll see in the 'Design a Service' section, rangatahi described services that can only exist after a paradigm shift. For this reason, we propose that services work toward *wairua-centred care*.

While many of us can identify wairua-centred care when we experience it, it can seem difficult to explain how to get there. We also acknowledge that as Tangata Tiriti, in using the word wairua, we are borrowing a concept that we do not whakapapa to⁸, to describe a common human experience. This choice is made to highlight the importance of both co-designing models of care, and of the reverence the rangatahi we met had for Mātauranga Māori. As a result, while this document lays down an aspiration, and suggests tentative

⁸ While some of the rangatahi we talked to did have Māori whakapapa, the facilitators of DMC events in 2019 and author of this report do not.

steps, we acknowledge that these will only come to life through **co-leadership** between services and the rangatahi, their whānau, and the tangata whenua that make up a community.

Creating Ecosystems of Care

Wairua-centred care involves acknowledging the ecosystem in which we all live. Establishing this within our existing system entails ensuring that young people can get the care they need, irrespective of what that looks like. There is a gulf between the mental health system we (the people that work within the system, and the people that we support) have, and the one we need. We also acknowledge that not every service can do everything for everyone. Something that every service can do, however, is to **connect rangatahi to other organisations** equipped to meet their needs. In doing so, we work toward creating ecosystems of care that can be agile and meet the diverse needs of diverse rangatahi. This process aligns well with the Choice and Partnership Approach⁹ (CAPA) and we encourage services to explore this model as they consider their role within their local ecosystem of care.

The following rubric was designed to help services gauge their current ability to provide wairua-centred care, and to provide a clear path to follow to improve that capacity. Not all young people will want these things, but for the ones that do, having these options will go a long way to ensure they get what they need from their time with services, as well as to develop the skills and networks to continue their recovery journey.

Transitioning between services

There is one caveat we must raise when proposing this model. Many of the rangatahi we spoke to had poor experiences of moving between practitioners or services. There are a few reasons for this. For one, moving from one service to another was often something they had little say in; they were moved when their practitioners decided they were no longer a match for the service based on the severity of their symptoms. Rangatahi felt the relationship they built with a practitioner was vital to recovery and begrudged having to build a relationship with someone new. Overcoming this requires the decision to move to be made *with* rangatahi, not *for* rangatahi. We must also give thought to the transfer of records and give rangatahi the option to share notes with their next practitioner, so they don't have to retell their story.

Above all, it is vital that **rangatahi feel they are an active participant** in every step of the process. To achieve this, we must cultivate strong relationships between practitioners both within and between services. For this model to succeed, the transfer of a young person from one service to the next must be warm, and on the young person's terms.

⁹ For more information on CAPA, pop over to <https://werryworkforce.org/CAPA>

Creating Ecosystems of Care

<i>Component</i>	Level 1	Level 2	Level 3	Level 4	Level 5
<i>Whānau</i>	A young person is never invited to bring a support person to their appointments.	<p>Connection with friends and whānau is on a checklist.</p> <p>A young person is advised to invite their family to appointments.</p> <p>The young person might be encouraged to explore this further on their own.</p>	<p>Building strong relationships and receiving support from people beyond a clinician is part of a care plan.</p> <p>The young person feels safe and informed about inviting a support person to their appointments.</p> <p>The young person is supported to identify activities, tools or organisations that could further support them.</p>	<p>We can provide a warm handover to an organisation or community group that actively supports young people to build their support network.</p> <p>The young person is eager to build and strengthen their support networks, and comfortable working with the new organisation.</p>	<p>Our service confidently and innovatively works with young people and their whānau. This involves going to them, running community events, and ensuring decisions are on the young person's terms.</p> <p>We collaborate through co-design to ensure our practice aligns with the needs and expectations of our community.</p>
<i>Nature</i>	A young person is never asked about their connection to the natural environment.	<p>Time spent outdoors/in nature is on a checklist.</p> <p>The young person might be encouraged to explore this further on their own.</p>	<p>We implement biophilic design¹⁰ principles in our space, including letting in natural light and having potted plants where possible.</p> <p>Spending time in nature is part of a care plan.</p> <p>The young person is supported to identify specific activities, tools or organisations that could support them to do this.</p>	<p>We can provide a warm handover to an organisation or community group that actively supports young people to connect to the natural world.</p> <p>The young person is eager to explore their surroundings, and comfortable working with the new organisation.</p>	<p>We offer care and treatment beyond the confines of our physical service. We confidently and innovatively work with young people outdoors when they indicate they'd like to do so.</p> <p>We collaborate through co-design to ensure our practice aligns with the needs and expectations of our community.</p>

¹⁰ Design that uses or mimics nature

<p>Identity</p>	<p>A young person is never asked about whether they feel comfortable with or proud of who they are.</p> <p>OR</p> <p>We attribute their mental health to aspects of their identity (e.g. their ethnicity or sexuality) despite them saying that they're happy with those things and don't want to unpack them in their sessions.</p>	<p>Feeling confident in, proud of, or happy with yourself is on a checklist.</p> <p>The young person might be encouraged to explore this further on their own.</p>	<p>Spending time exploring your whakapapa, or other elements of your identity is part of a care plan.</p> <p>The young person is supported to identify specific activities, tools or organisations that could support them on this journey.</p>	<p>We can provide a warm handover to an organisation or community group that actively supports young people to connect to the community they're interested in.</p> <p>The young person is eager to explore to build their sense of self, and comfortable working with the new organisation.</p>	<p>We offer care that draws upon many models of healing and employ practitioners that enjoy learning. These practitioners reflect the worldviews and lived experiences of our community and are comfortable working with Māori, Pacific and LGBT+ young people and their whānau.</p> <p>We collaborate through co-design to ensure our practice aligns with the needs and expectations of our community.</p>
<p>Giving Back</p>	<p>A young person is never asked about whether they'd like the opportunity to give back as part of their care.</p>	<p>Volunteer work is on a checklist.</p> <p>The young person might be encouraged to explore this further on their own.</p>	<p>Volunteering or doing kind things for others is part of a care plan.</p> <p>The young person is supported to identify specific activities, tools or organisations that could support them to find meaningful work.</p>	<p>We can provide a warm handover to an organisation or community group that actively supports young people to get involved in their community.</p> <p>The young person is eager to explore how they can contribute, and comfortable working with the new organisation.</p>	<p>While co-creating a care plan, we include the option to receive group therapy, where young people can work together to do something meaningful for their community.</p> <p>We collaborate through co-design to ensure our practice aligns with the needs and expectations of our community.</p>

Design A Service

When we asked rangatahi to design services, we received a range of answers as diverse as the rangatahi we met. While this section tries to distil down to the key messages, the best way to really know what local rangatahi are after, is to ask them.

Somebody To Lean On

Many of the aspirations laid out in this document may feel out of reach for services that find themselves under-resourced. If this resonates, we suggest a focus on core business: the work of connecting. There is no substitute for someone that walks alongside rangatahi as they experience distress.

We asked rangatahi who they turn to when they need help. Many identified people they knew, from teachers and parents to friends. Others preferred someone who wasn't part of their day-to-day life.

Everyone wanted people who were:

- Authentic
- Passionate
- Compassionate
- Willing to listen and learn
- Non-judgmental
- Culturally safe
- Understanding
- Skilled at doing things *with* young people, rather than *to* young people

We imagine most people would probably produce a list like this one. However, while these aspirations are not new, consider how they look in practice at the service you work at:

1. How many of these skills are on the job descriptions of:
 - a. Practitioners?
 - b. Reception staff?
2. How do you currently identify if a potential employee has these skills?

3. Do local young people agree with recruiters about what these skills look like in practice?

If not, how could you change your employment practices to account for this?

We recommend:

- Co-designing interview questions with taiohi whai ora.
 - Having taiohi whai ora at the interview.
 - Employing a young person to simulate an appointment and share how they felt, as part of the employment process.
4. Are practitioners at your service able to further develop these skills in a safe and supportive environment?
 5. Would they use these traits to describe their service, colleagues and managers?

A Safe Space

As we think of engaging rangatahi, we sometimes forget the ways in which our workplaces are built to look more like hospitals or offices than they are homes or schools. The layout of a modern school is vastly different from the feel of a workplace or hospital. Similarly, the look and feel of the places we choose to spend time are also often very different to the places where we must spend time but might not choose to. Our services should look and feel like safe spaces for rangatahi, and safe spaces for healing. What this looks like will be different for different services, but all services should consider having:

Wifi

Being able to access comforting or familiar resources and activities while waiting for an appointment can go a long way to helping a young person feel at home in a service. Providing access to wifi and making outlets and phone chargers available lets young people turn a service into a safe space for themselves.

Some of the young people we spoke to also appreciated having books, magazines and puzzles at their services. If you have the capacity to make these available, feel free to do so.

Sensory tools and spaces

Stock up on things rangatahi can fiddle with in waiting rooms and during their appointment. Ideas include kinetic sand, sensory balls, and sequined cushions. If the waiting space is quite large, consider creating spaces that feel different. One section may have a couch and be a relatively quiet space, while another might have bean bags with some music.

Consider using art produced by rangatahi to decorate the space. If there are important public health messages that need to be displayed, commission local rangatahi to design a poster or brochure.

Biophilic Design

We talked about the ways in which plants, water features, and natural lighting can transform a space. Using natural elements in the design of a space is called biophilic design, and it's an area with a growing body of evidence (Gillis and Gatersleben 2015). We recommend:

1. Incorporating plants into the healing space. We talked about pot plants, green walls, and even outdoor therapy.
2. Finding ways to let in natural light. Some services are lucky to have windows straight to the outside. Others should consider installing daylight spectrum lights, which look like natural light and change to reflect the time of day.
3. Making use of water. Many people find water calming. Our services can make use of this effect by using wall art with water, installing a water feature or working near a body of water.

House calls

When a young person struggles to come into a service, their whānau become responsible for identifying and overcoming barriers to accessing care. Some whānau have the time and capacity to do this, while others do not. Ensuring that we're providing everyone the care they need, irrespective of the resources they currently have, requires house calls. If there's a young person in your region that needs help, but cannot get to your service, are there other ways for them to access help?

- Online solutions can seem promising in times like this, but they won't be right for everyone. A good way to find out what someone needs is to ask.
- If they'd like an online tool, what would you recommend?
 - Have these tools been recommended or approved by both clinicians and young people?
- If they'd like to chat with a clinician they know, could they call or text?
- If they would prefer to see someone in person, are there any services that will go to them?
 - If not, how can we resource practitioners that will?

One Place For Everything

In a world without stigma, mental health support would be available to everyone. If any level of distress is sufficient to receive support, there would be no reason for people to feel shame or fear when asking for help. In its simplest sense, this looks like a youth-one-stop-shop (YOSS). As we delved deeper however, our greatest aspirations were not just for spaces for rangatahi, but community spaces for entire whānau. Spaces we share and grow in over the course of our lives.

These spaces looked a lot like a YOSS, with access to:

- A range of health/wellbeing practitioners
 - Tohunga, and other Holistic Healers
 - Youth and Peer Workers
 - Doctors, Nurses, Physiotherapists, Dentists, and Optometrists
 - Counsellors, Psychologists, and Psychiatrists
 - Social Workers, Work and Income, and Kainga Ora Case Workers
 - Citizens Advice Bureau and YouthLaw

- A youth space, providing:
 - A Home Away From Home
 - Homework Help
 - Workshops
 - Community Events

But they were also community spaces, that looked a little like this:



The aim of this design is two-fold. For one, all of the services and facilities in this community centre would be within walking distance, and practitioners would be skilled at working in any of these spaces. This, in turn, would lend itself to holistic ways of working as practitioners made use of the tools around them. Secondly, by placing health and social services within a community space we've grown up in, people not only know where to access help, but consider doing so to be as stigma-free as going to the library when you need a book. Finally, to ensure it meets the needs and aspirations of the community it serves, this community centre would be designed and governed by the community, for the community. A local example of this model is Victory School in Nelson.

Let's Do This

To finish the day, we asked rangatahi what projects they'd be interested in starting or supporting. The descriptions here are comparatively sparse as these projects naturally build upon many of the aspirations outlined earlier in this report. If any of these pique your interest, drop us a line at YCA@auckland.ac.nz and we'll get you in touch.

We heard about the need for:

1. Youth Spaces

- Spaces for young people that can serve as a home away from home.
- Designed by youth, run by youth and used by youth

2. Healthier Schools

- A holistic curriculum
 - Allowing rangatahi to grow emotionally, spiritually, and socially, as well as academically
- Wellbeing education, including topics like:
 - Mindfulness
 - [Mates & Dates](#)
 - Forging a healthy relationship with yourself
- Youth-led Health Councils that:
 - Organise events
 - Advocate for systemic change
 - We heard from many rangatahi who worried that their schools shied away from conversations about mental health. They said that it's better to openly talk about mental health and give all rangatahi the tools to have these conversations, instead of shying away from them.
- Counselling
 - Ensuring the counsellor is known to all students
 - Normalising seeing a counsellor when students need to chat
 - Ensuring appointments with the school counsellor are confidential and discrete

3. Service Noticeboard

- One place to find all the wellbeing activities, services and support groups nearby
 - In real life (e.g. in libraries) and online

4. Life Skill Classes

- An opportunity to learn 'how to adult' from someone a little older. Classes could include:
 - How to cook
 - Financial literacy
 - Civics and democratic participation

5. Youth-focused non-violence programmes

- Programmes that supported perpetrators of violence and abuse to heal and change their behaviours

6. Regional Trans Support Guides

- A directory of safe places for trans folk in the community
 - Listing everything from LGBT+ friendly hairdressers to psychologists

7. An Asian Lived Experience Movement

- Increased opportunities for young people with Asian heritage to share their experiences with each other and the world, to combat stigma.

Toolkit

This section contains resources and advice designed to support services. They were made in response to the questions we were asked when presenting our findings, so if there's a resource or guidance on a topic you'd like to see on our website, let us know!

Working With Whānau

Not all young people will leap at the opportunity to have their whānau involved in their care. Our conversations suggest this hesitation has more to do with young people not understanding what that would entail than it does with them wanting to receive care alone. When inviting a young person to bring someone along to their appointments, explain:

1. Why that's useful
 - You'd like for them to be supported when they're not at a service.
 - You'd like to help them build a community of support around them.
2. Who they can bring
 - They might not realise they can bring a friend. Make it clear that they can bring anyone that they're happy to have there.
3. That you're happy to see them and their whānau separately
 - Some young people may realise that their whānau need support but may still want to see you alone.
 - This means you won't be sharing anything with their family that they've asked to keep private. Confidentiality can be novel as a young person. Often telling one adult something can mean all the adults in your life find out. If your relationship with them is going to be different, you may need to make this explicit.
4. That you're there for *them*.
 - For some young people, it can be hard to imagine that they'll still be able to make decisions once other people are part of the process. To avoid this, it can be helpful to explain:
 - i. Why it could be helpful to bring a support person
 - ii. What their care will look like with another person involved

Conclusion

This report was written to share the aspirations of rangatahi for mental health in Aotearoa, and to contribute to the conversation about what transformation should look like. To increase our chances of achieving the first aim, this entire project was led by rangatahi. Not only did we hold the power, but we shared it with all the rangatahi that attended the DMCs. Subsequently, when this report was finished, it was shared with them for their feedback and guidance. The second aim, to guide transformation, proves more elusive. To ensure the content of this document is relevant to all who read it, we shared ideas that ranged from the immediately implementable, such as inviting rangatahi to bring a support person along to appointments, to a more radical shift that calls for diverse services to collaborate to create community-led ecosystems of care. We hope you, whoever you are, have found inspiration and motivation in the aspirations we have been privileged to share.

Above all the recommendations of this report, we highlight the value of working alongside not just rangatahi, but with all for whom our services are intended. To realise the aspirations of this report, we: tangata whenua, rangatahi, service leads and community stakeholders, must work together as equals to create local solutions. We must share power, not only in our appointments or when deciding what colour to paint the waiting room, but also while deciding what is worth researching, and what service models receive funding. When people are harmed by our system, that hurt is felt by rangatahi, whānau, and clinicians, alike. As such, it only makes sense that we must also share the responsibility of rebuilding our system: rangatahi, whānau, and clinicians, alike.

Closing Karakia

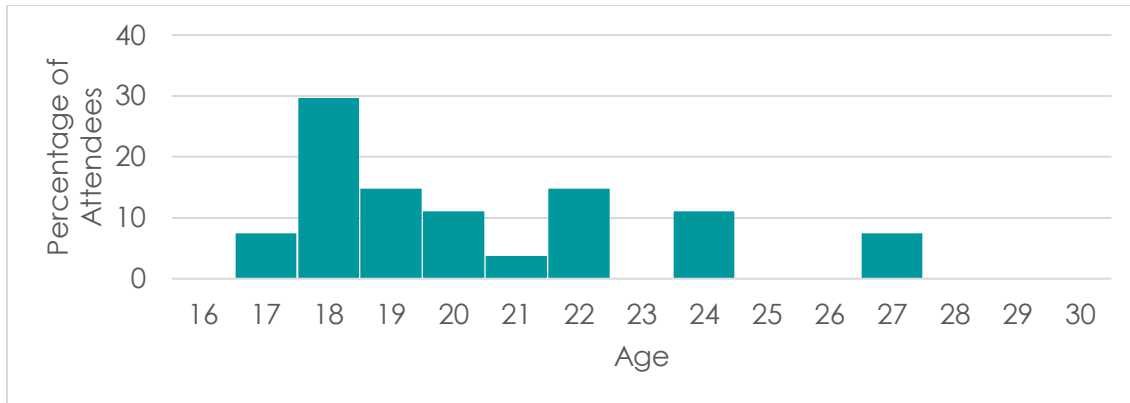
Kia tau iho ki a tātou katoa
Te rangimārie, te manaakitanga, me te aroha
Tūturu whakamaua kia tina... Tina!
Haumi ē! Hui ē! Tāiki ē!

Now settles upon us all
Peace, blessing, and love
Hold on to them fast and sure... For Sure!
Aligned! Together! Make it so!

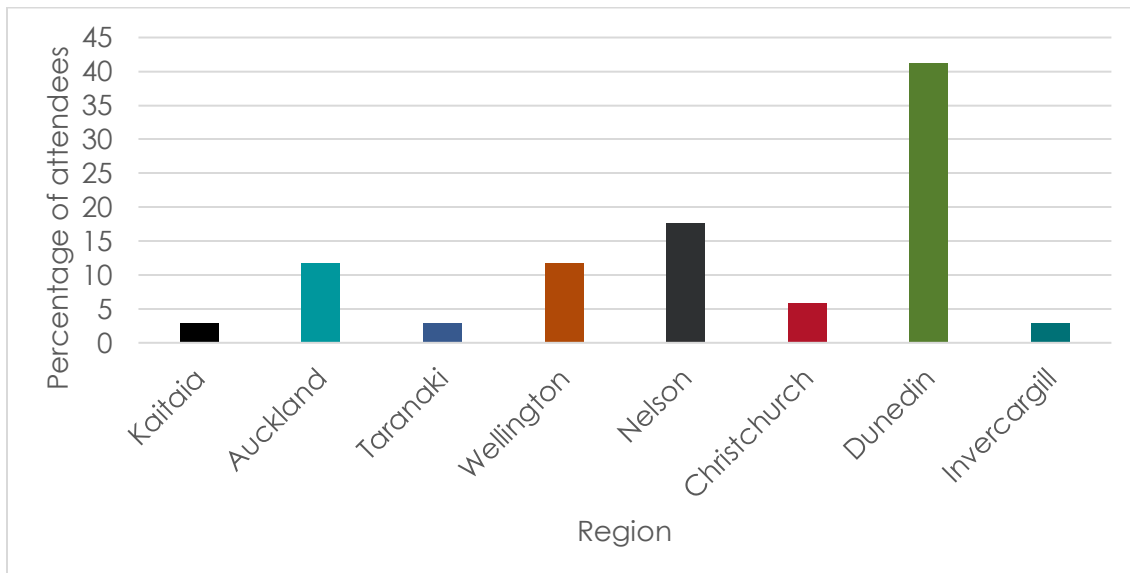
The Numbers

This section shares what we learnt about the rangatahi that came along.

1. Participants were aged between 17 and 27, with a median age of 19.

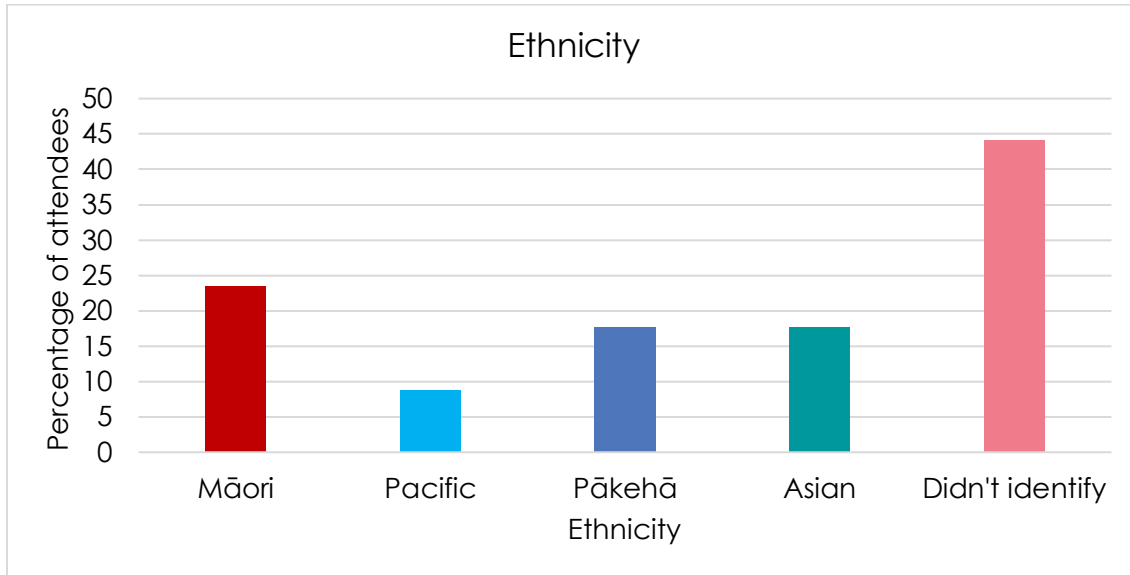


2. They came from across the country, with most residing in Dunedin, the location of our second DMC. Their high attendance is likely due to the support we received from local student associations, who actively promoted the workshop on our behalf.

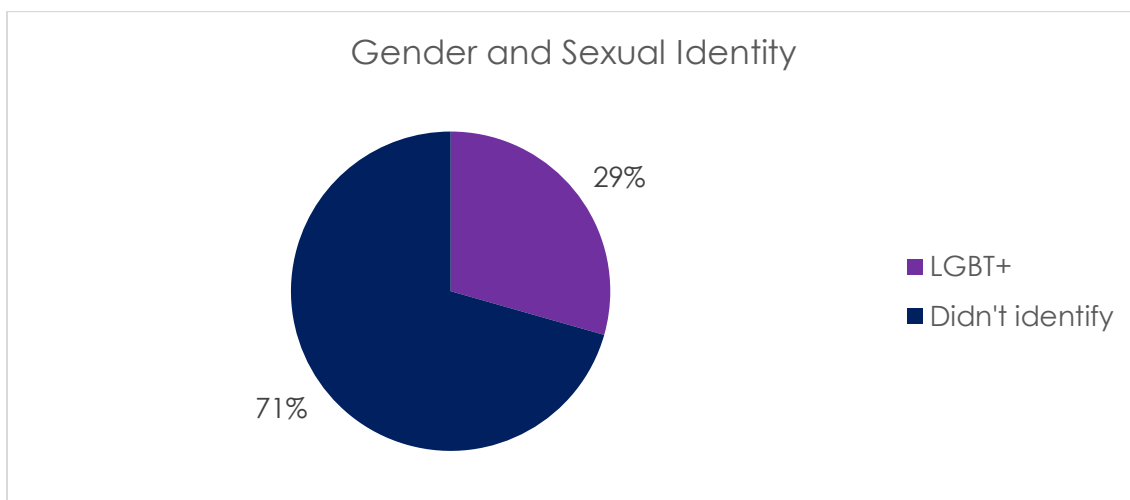


To learn about how the rangatahi that came along saw themselves, we asked them “How would you describe yourself?” Their responses told us that:

3. Almost 1 in 4 participants identified as Māori. Nearly half of all attendees did not mention their ethnicity when describing themselves.



4. 38% of participants told us about their gender and sexual identity when describing themselves. 29% shared that they were either not cis-gendered (their gender did not align with the one assigned at birth) or heterosexual.



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