

Te Hau Toka

SOUTHERN LAKES WELLBEING GROUP

Stronger Together Mental Wellbeing Hui

Future-proofing community mental wellbeing and resilience: What works, where and why?

Summary notes from the hui 2 May 2023

Overview

More than 75 healthcare, social service and local government representatives from across the Southern Lakes region attended Te Hau Toka Southern Lakes Wellbeing Group's *Stronger Together Mental Wellbeing Hui* on 2 May 2023.

A key focus of the hui was to share the work undertaken by Te Hau Toka Southern Lakes Wellbeing Group, in partnership with local communities, to promote mental wellbeing.

With its COVID-related MBIE funding coming to an end, Te Hau Toka also wanted to encourage key agencies to work cohesively on prioritising mental health to better support community wellbeing, build resilience and improve social cohesion.

Queenstown Lakes District Council Mayor Glyn Lewers and Adell Cox, the Chair of Te Hau Toka, set the context for the hui – recapping the mental health impacts Covid-19 had on our communities, the importance of community-led solutions, and the value of working together to promote wellbeing.

Keynote speaker Dr Sarb Johal provided an enlightening summary of the emerging challenges of AI technologies and spoke of loneliness as a societal vulnerability. Dr Johal's presentation (recording and PowerPoint slides) is available on the [Te Hau Toka webpage](#).

Dr Delwyn Goodrick, an external evaluator who has been working with Te Hau Toka to evaluate the implementation and outcomes of its initiatives, spoke about the power of the partnerships with and across our communities, profiling evidence and stories from the evaluation to illustrate mental wellbeing initiatives that have been undertaken over the past 2 years. Her presentation (recording and PowerPoint slides) is available on the [Te Hau Toka webpage](#).

Following this, discussion time provided an opportunity for attendees to share their own experiences and expertise about what more can be done to:

- Strengthen the social, cultural and economic foundations for mental wellbeing
- Foster community led solutions
- Equip whānau and individuals to look after their mental wellbeing.

Summary of group discussion

After morning tea and some kai, attendees re-grouped at their tables to discuss two key questions.

Question 1: What have we learned over the past 3 years about what works to support mental wellbeing in the Southern Lakes region?

Question 2: What are some key actions to continue the focus on mental wellbeing in our region? [How can we keep this focus on wellbeing alive?]

Key messages synthesised from the workshop and documentation from the small group activities are presented below. Action statements are presented as bullet points.

Q1: What have we learned about what works to support mental wellbeing in our region?

Build on what works

There are a range of groups, agencies and individuals that are doing good work in our community to promote social inclusion, mental wellbeing, and resilience. Rather than reinvent the wheel, it is important to *identify what works in our context and our communities* to promote wellbeing. We need to build on effective approaches that show promise in promoting wellbeing and increasing our resilience.

Collaborate well

We need to work together to promote community wellbeing and resilience. Collaboration across sectors brings diverse perspectives, resources, and expertise, and allows us to maximize resources. A *shared vision* provides a solid foundation for collaboration. We need to be transparent in our communication, address conflicts or challenges as they arise, and continually review the effectiveness of our collective efforts.

Support peer learning and sharing

Mental wellbeing is everyone's business. We are aware that in some instances people will require specialist support, but we know there is a lot we can do to support our own, and others', mental wellbeing. We have learned that sharing stories, experiences and knowledge individuals can promote a more inclusive and supportive community. Community events and initiatives have encouraged people to share their own experiences, how they manage their own mental wellbeing, and increased people's knowledge of strategies that promote mental wellbeing (for example, the Five Ways to Wellbeing).

Connection counts

Opportunities that promote connection - whether formal or informal – are helpful in strengthening community resilience and promoting wellbeing. We have learned that kitchen kōrero, group-based activities and whole-of-community events foster connection. One of our challenges is to understand how we 'connect with the disconnected'.

One size does not fit all

We have learned that one size does not fit all. Each community has its own character and successful initiatives that work in one community may need to be adapted to work in other communities. Local community leaders within the community are often knowledgeable about the

interests, concerns and needs within their community. They can strengthen relationships, bridge divides, and create opportunities for collective action that promotes wellbeing in ways that are appropriate for that context.

Make information and activities accessible

We have learned that we need to make initiatives and activities accessible to our communities. One of the implications is that we may need to offer low or no cost activities to attract attendance. But accessibility is not only about cost. Our communities are diverse, and we need to understand the needs of our communities and ensure that we know the best ways to reach them.

Adapt and respond to the community

Adaptability is essential if we are to effectively meet evolving community needs. We have learned that our approaches need to stay relevant and appropriate to our communities. Responsiveness to our communities helps build trust and credibility and increases community engagement and buy-in.

Sustainability matters

A lot of initiatives in our communities are one offs. They get short-term funding, which is helpful, but they are not sustained as there is limited or no ongoing funding. Good things can be achieved through short-term initiatives, but there is a need to build towards sustainability. For example, funding that allows activities and resourcing to continue over time to promote wider impact.



Q2: What are some key actions to continue the focus on mental wellbeing in our region?

- Keep the focus on mental wellbeing. This is about community wellness. Continue to invest in the community to keep momentum going.
- Continue focusing on promoting mental wellbeing and commit to better coordinate mental wellbeing activities/actions.
- Keep telling the stories and sharing what we are doing within our communities, and monitor and evaluate the impact on our communities.
- Continue to check the pulse of the community. Make sure that plans reflect what the community values and needs. Be adaptive to needs. Keep it local.
- Identify the most cost-effective, value for money initiatives for those groups in most need.

- Maintain a coordinator or community navigator role, similar to the Te Hau Toka mental wellbeing navigator position.
- Continue development and strengthening of peer support groups.
- Local leadership is important, but we need to make sure we look after our leaders to prevent burnout from unsustainable workloads or demands.
- Seek and attain funding from a charitable trust with values that align with the promotion of mental wellbeing. A couple of useful resources re sustainable funding: [HuiE Community Aotearoa](#) and [Mātāwai](#) (how funding systems could be shifted to create change and equity).
- Host an interactive platform to share the work of groups and organisations and foster knowledge sharing and collaboration.
- Develop a community calendar with all wellbeing-related events in the district. Local communities have their own calendars, but there is potential to have a wellbeing calendar for the whole area.
- Ensure wellbeing and measurable objectives remain a priority for local government in strategy and planning documentation. For example, 'Welcoming communities' plans implemented and feeding into overall community plan.
- Councils need to take leadership in promoting and supporting the mental wellbeing of their communities.

APPENDIX 1: Raw notes taken from each table

Q1: What have we learned over the past 3 years about what works to support mental wellbeing in the Southern Lakes region? Each table to present their most important point to report back to the wider group.

- Focus on user experience.
- Effective leadership - collaboration.
- Being adaptive and using different approaches.
- "Just do it". Co-create.
- Wrap around support: accessible; free; connected.
- Connection and collaboration leads to belonging.
- Communication, connection, and collaboration.
- Grass-roots are awesome.
- Different approaches and local leadership.
- Consistency in structures, and persistence.

Q2: What are some key actions to continue the focus on mental wellbeing in our region? [How do we keep this focus on wellbeing alive]? Each table to present their most important point to report back to the wider group.

- Continued community collaboration and co-creation
- Dedicated local resource, structure etc.
- Continue korero between everyone.
- Ask the community: reinforce connections; taking ownership.
- Do-is, not huis; continued funding – our leaders don't have time to do this.
- Support for LT and ST initiatives, burnout.
- Planning: overall community plan; mental wellbeing lens.

- Caring for carers: burnout issues; support.
- Recognise loneliness is an issue; council leadership.
- Storytelling – keep telling the stories; workforce plan.

Transcription of notes per table for each question

What have we learned over the past 3 years about what works to support mental wellbeing in the Southern Lakes region?	
Table 1	<p>“Wrap-around” support. Easily accessible, free, connected, directory. No barriers. Groups to connect people together. Leaders – trustworthy and consistent. Resources – updated regularly. Slow and trusted communication. Succession planning with locally based people. No judgement.</p>
Table 2	<p>Leadership, governance and collaboration. Te Hau Toka Coordinated silos to tackle mental health together. Filter through the lens of the vision of what worked about connectivity. Being positive. Willing to try new things. Strong communications, range of means. Normalise conversation. Trusted information source. Being “real”, giving facts of what is going on. One voice, one concept. Health:</p> <ul style="list-style-type: none"> - Across the whole team, working out a plan of operation. - People into ED, change triage planning. - People being reassured that there were options for extra support. - Networks grew stronger. Still remain connected. - Cross-sector collaboration eg., housing, having food while in isolation. - “Greatest Need Fund” to support all those to access healthcare eg., migrants. - “Isolated” from tertiary, rural community, increased collaboration and connection. - All voices counted, plus continual reviewing of processes. <p>Systems and frameworks to coordinate connection, eg., children to school and play. Understanding community needs. Identifying niche groups that needed specific response. Meaningful connection/networks across the sector. Integrating new concepts/tools to reduce fragmentation within service delivery. Being kind is powerful and available. Simple using 5 ways of wellbeing. Sports and community events. Libraries.</p>
Table 3	<p>Just do it and co-create. Don’t need permission. You need local leadership and energy. Just do it. Connect, talk, listen, learn. Be brave. Keep talking; build networks. Ride the frustrations. Hearing the stories.</p>

	<p>Linking with local government. Across the community. Visioning – a shared purpose and vision. Evidenced. Coherence to a planned approach. Community wellbeing is everyone’s business.</p>
Table 4	<p>Connection and collaboration = sense of belonging. Communication. Collection of knowledge. Navigators of communities. Key people. Opportunity. Communications. Clear kaupapa. Training. Knowledge sharing. Communication, a purpose. Place to meet/be. Range of support available. Arts, creativity. Get the basics right. Safety. Accommodation and transport funding. Connect with groups – how and why.</p>
Table 5	<p>Having dedicated resource. Relationships – face to face, inter-group. Raising awareness. Being able to join the dots. Need different approaches. Adapting and responding to differing needs is essential. Listening and not making assumptions. Listening for understanding. Small initiatives can make a big difference. Different groups and places have different challenges. Creating a group that can umbrella and area to gather the information and address the issues. Supporting wellbeing can be done “indirectly” rather than labelling an event as being “mental wellbeing” orientated. Have to be action-orientated and give things a go.</p>
Table 6	<p>Different approaches. Building on what we have. Collaboration with local leadership. Inclusive of all. Not one-size-fits-all. Ensure inclusive strategies. Not reinventing the wheel. Sustainable resourcing. Identify the gaps. Reward collaboration. Flexibility of funding.</p>

	<p>Destigmatizing mental health. Normalising mental health conversations. Local community leadership, eg. migrant ethnic communities. Funding – joining up funding. Release of power to the communities. Outreach. Newcomer groups. NGOs, migrants, Te Kakano.</p>
Table 7	<p>Asking and listening; not telling. Moving beyond the money. Consistency in messaging and message delivery. It can be 2 years for Fiordland, and perseverance is therefore required. Give it time to gain traction. Mental wellbeing = community wellbeing. Destigmatizing events. Not advertised as mental wellbeing but as library, vintage museum, Mums’ night out, cricket. Positive community activities are required that have no financial barriers. Anything that brings people into the same space should be encouraged. Connection. Small is fine, but it needs to be repeatable to forge connection.</p>
Table 8	<p>Mental health – you don’t know what you didn’t know. There are different ways to talk about mental health. It doesn’t need to be scary, weird or foreign (or kumbaya). We need to keep going; increasing and growing the support for each other. Mental health is more than feelings. It’s connectedness, shared problems. Te Hau Toka helps address and support. Honesty to share; trusted spaces; no negative impact to your reputation or career. Hitting the wall safely. Psychosocial issues can happen delayed after the actual event. What’s coming could be harder. Ongoing support needed even more. Tailored groups. More than one option. Find your tribe. Shared goals and values. Safe spaces. Face to face connections. Touch hungry. Navigating the change to parenting in a new world. What strategies your tamariki may need. Youth resilience.</p>
Table 9	<p>Demystifying Sign posting Celebrations. Communication. Actions. Collaboration. How do you connect with the unconnected? Gift of giving. Don’t disregard the small things. Globalisation.</p>

	<p>Look at experiences, not just outcomes.</p> <p>Normalising.</p> <p>Diversification.</p> <p>Active listening.</p> <p>Empowerment.</p> <p>Acknowledgement.</p> <p>Individual experiences.</p> <p>Options.</p> <p>Layers.</p> <p>Opportunity to show we care.</p> <p>Build on what we know works.</p> <p>Accessibility.</p> <p>Dollar resources.</p> <p>Community opportunities to be involved.</p> <p>Connection.</p> <p>5 ways of wellbeing.</p> <p>Recognition.</p> <p>Acceptance.</p> <p>Hearing from what's happening on the ground.</p>
Table 10	<p>Shared common cause, purpose, reason to care.</p> <p>Willingness to collaborate, try new things (eg., access & choice)</p> <p>Supporting grassroots community movements and groups (eg., great migrant brainstorm).</p> <p>Feeding back data and information to the community.</p> <p>Community leaders going above and beyond, and leadership training.</p>

What are some key actions to continue the focus on mental wellbeing in our region? [How do we keep this focus on wellbeing alive]?

Table 1	<p>Continue funding to keep wellbeing group together. Time for leaders to represent. Look after the leaders. Empower people to help themselves and others. Keep fighting for equity. Be accountable. Group work – powerful tool. Do-i not hui.</p>
Table 2	<p>Continue with collective messaging. Unite big players and smaller than have “one stop shop” for mental wellbeing needs. Business helping business. Storytelling. What good work we are doing so more can know and join. Reprioritisation of what is important for us to focus on. Wider spectrum of wellbeing. Services available for older people, need more people in our locality. Advocacy in local services, not based out of regional centres like Dunedin. Focus on building workforce for “hands on” care. Huge gap, eg., support workers for older people, personal carers. Recruitment and retention locally. A lot of people with basic needs not being met. Building more “think” places for connection. Un-siloing. Comparing values to actions. Turning values into actions through effective leadership. Wellbeing: collaboration, communication, and integration.</p>
Table 3	<p>Keeping this alive. Keeping the vision. Allowing for adaptation and growth. Building mental wellbeing and literacy. Council leadership in welfare space and supporting that resource. Make loneliness in the community a priority and facilitate connection. Navigators supporting and building connections – all community resources “community navigators”. Council leadership and recognising loneliness is a community priority.</p>
Table 4	<p>Peer to peer. Key groups to work together. Continual investment. Governance group. Purposeful projects. Innovation. Boundaries. Security of employment. Funding sustainability – resources, contract certainty. Sustainability of practices.</p>

	<p>Compassionate practice model. Shared, not siloed. Wellbeing for everyone, not just the group. Support for long-term and short-term initiatives to avoid burnout and to continue to build towards vision. Coordinator for action groups, share the burden. Achieve more together.</p>
Table 5	<p>Keep a dedicated resource and maintain structure and ownership. Where does it sit? Governance and Advisory. Keep it local. Address volunteer burnout and the wellbeing of those dealing with the mahi. Be mindful of the changing landscapes. Maintain and continue building situational understanding across all stakeholder groups. Continue messaging where help is available. Continue to reduce the stigma. Equipping everyone working in this space with the skills to work with others in this space (“higher level”).</p>
Table 6	<p>Keep decisions local. Measure impact: data, stories. Mental wellbeing lens across all mahi (eg., connection, whanaungatanga). “Welcoming communities” plans implemented and feeding into overall community plan. Keep all groups at the table including migrants, disabled, older people, youth. Increase equity – ethnicities, disability, migrants, rural. Peer support across life course to increase capacity. Risk is delay in establishment of localities here, and funding connectors.</p>
Table 7	<p>Consistency and perseverance. Not a short-term kind of issue. Community building = community wellbeing. Attachment. Ask the community, not tell the community. Reinforce connectedness at a community level. Community ownership. Generate and initiate face to face opportunities. Empower individuals to be self-sufficient. Encourage people to help others. Reinforce connectedness and community ownership. Meeting people’s basic needs – financial, housing, activity. Explore other avenues for ideas and funding.</p>
Table 8	<p>Support sustainability of community groups. Support connecting groups to the community. Navigation to service (connectors). Services that are bespoke to the user. User-centric service.</p>

	<p>Keep messaging. Fundraising to ensure resource – people, practical. Replicate elsewhere (Murihiku) Priority in local organisational strategy and policy. Priority in local, central, and national government. Care for the carers. Don't wait for crisis but keep it high level. Know your lane and who has the Uber. Celebrate and share the news. Storytelling. Community collaboration hubs as “bumping spots”. Maslow’s hierarchy of needs.</p>
Table 9	<p>Continuing to listen. Pathway forward. Continued focus on advocacy. Diversification. Normalisation to reduce stigma. Continue to learn what works. Continued community collaboration and co-creation. Fundraising, other sources of funding. Enabling risk taking. The stories – how to create an environment for experiences to happen, for the stories to be told. Raising profile. Balance. Nurture innovation. Remove barriers.</p>
Table 10	<p>Integration between businesses, organisations, community groups. Having programmes tailored to each group and their needs. Offering resources and training to deliver. Sub-groups – different sectors have different needs and key mental health issues. Identifying barriers to access. Making good things visible. Encouraging people to articulate and share their interest in wellbeing and public health at all levels. Continued korero between everyone; good ways to communicate useful information. Bringing new people into/connecting with existing groups, projects, and wider happenings. Placing work into existing structures. Knowing and trusting what we know, works. People vote with their feet. Supporting spaces that facilitate waka whanaungatanga.</p>