

POST-CABINET PRESS CONFERENCE: TUESDAY, 23 JANUARY 2018

PM: OK. Welcome back, everyone. Thank you to those of you who made the effort to come and join us at Martinborough. We had a very successful and enjoyable away-caucus. Today, though, we returned for Cabinet to meet for the first time for 2018. As I flagged with many of you at our caucus away couple of days, we predominantly considered items that related to the 100-day plan.

Before I discuss today's announcement on the mental health inquiry, I'll just update everyone again on the week ahead. So, tomorrow, we'll all be heading to Rātana, which we're all very much looking forward to. Thursday, we're looking to spend a bit of time talking in more detail about our employment legislation, which was flagged as part of our 100-day plan. At the time that we flagged that within our 100-day plan, we did make clear that we did not have an intention at that point for the fair pay agreements, or any work relating to that, to be part of the 100-day plan. That is not new. That was because we knew that that would take a longer time frame. So I just wanted to put some clarity around that. We've always acknowledged the need to work collectively on that piece of new work. I've also always been very, very explicit that strike action will not be a part of those agreements. Some of you may remember that issue being canvassed during the election campaign. On Friday, I'll be travelling to Dunedin to visit, and also open, the refurbished courthouse.

I want to come now, though, to the mental health inquiry, particularly the announcement of both the terms of reference and the membership of that inquiry. I want to thank the Minister, Dr David Clark, for joining me today for that announcement and also for the work that he's put in, since we formed Government, on this incredibly important piece of work. This is a very personal issue for many, many New Zealanders, for those who experienced mental health issues and the family of those who have experienced mental health issue. And many of you will know, from my time as Opposition MP having spoken on this issue before, that it's something I feel strongly about, as do all of the members of this Government. Each party that makes up this Government, either in confidence and supply or as a coalition partner, campaigned and agreed with the need for an inquiry into mental health services, and as a part of our 100-day plan that is what we will be announcing today.

Our suicide rate, I do not need to tell you, is shameful, but we also know that there has been a huge stretch on services in terms of demand. It's increased rapidly over the past few years. In 2016 and 2017, more than 170,000 people used both our mental health and our addiction services. That is up by 71 percent on a decade earlier. You see I've also mentioned addiction services. One thing I do want to acknowledge is that in the course of consulting on the terms of reference for this inquiry, it became clear that people wanted us to also include addiction services in this inquiry. There are interlinked issues, and so we have agreed to include that in the terms of reference, and that will make up the inquiry as a whole.

I want to hand over to Dr Clark now, to speak to the membership of the group who will be undertaking the inquiry and the experience that they bring to the table.

Hon Dr David Clark: Thank you, Prime Minister. Well, I feel very privileged to be here as these terms of reference are announced. It is a very exciting time. This group has a task to hear the voices of the community, and particularly to hear from those we don't hear from so often—rangatahi, children, and those who are not currently accessing services—and that will be a big challenge for them. They also have the task of kind of forming a baseline of what services are available now and what the current situation is, and of recommending specific changes. So the group needs to have a set of skills that is broad and a membership that's broad, that reflects those who are accessing services and those who are not currently.

The members: the inquiry will be headed by Professor Ron Patterson. He will be the inquiry chair. He will be well known as a former Health and Disability Commissioner with experience in inquiries. Obviously, as commissioner, he's led investigation into things that haven't worked in the system before. Dr Barbara Disley is a former executive chair of the Mental Health Commission and currently the chief executive of Emerge Aotearoa, and she works in the mental health sector currently. Sir Mason Durie is a professor of Māori studies and, again, will need little introduction. He's someone with a deep experience in Māori health and culture and Māori well-being. Dean Rangihuna is a Māori consumer advocate with lived experience that he himself has talked about as a mental health consumer, and he will bring a valuable expertise to that panel. The youngest member is Josiah Tualamali'i—excuse me—who is winner of the Prime Minister's Pacific youth leadership award in 2016, with particular leadership experience in Pasifika mental health and suicide. And Dr Jemaima Tiatia-Seath, who is the co-head of the school of Pacific studies at the University of Auckland, who has suicide prevention and postvention expertise. So a broad panel that will have a challenging job.

They will also be supported, though, by a lived experience advisory group and a youth advisory group, and there is money in the budget for engagement with technology, because we want to find new ways of reaching out to those who would not normally access a panel like this so that we do hear the full picture of what is going on in the community. And we expect also, of course, to hear from those who are interacting directly with the system. Thank you, Prime Minister.

PM: Thank you, Dr Clark. I do want to, before I conclude that item, just acknowledge those who are working in our mental health and addiction services sector. They do an incredible job. What this inquiry is an acknowledgment of is that, for a long time, both those who've tried to access services and even those who work within the sector have seen the need for improvement, for those who have lived experience to have a much-improved experience, and so our goal is to make sure that we meet those needs but do it in a timely way. We have said that we would like this inquiry to report back to Government by the end of October 2018. The balance we're trying to strike there is our ability to both hear from consumers and the sector but also act as quickly as we are able once we have done so. It is an ambitious time line, but one I'm very hopeful that we can achieve.

Happy to take any questions.

Media: Bill English says this inquiry, basically, is just kicking the issue down the road. He says they've already taken initiatives—\$100 million—last year. He said, "What happens to that?"

PM: I would totally disagree. Having spoken to a number of families, users, and, during the course of the campaign, sadly, bereaved families, the stories just mounted. This is a response to what has been a strong call, from people both within the mental health sector but also people who have experienced it, to juggle both making sure we know what the problem is but also being very resolute and committed to fixing it.

Media: Are you going to—

PM: Oh, in terms of the \$100 million, though, I'll hand over to Dr Clark.

Hon Dr David Clark: Yes, if I could just say a few words about the \$100 million. As health Minister, I've been looking at those initiatives. Some of them have been progressed; other ones are in their absolute infancy. I mean, after nine years, it's a little bit embarrassing what sits in that contingency situation now. We will progress those things that were in the contingency that have merit. Those that were just simply politically expedient we will leave by the wayside. So we'll look seriously at the bits of work that have been done, and are looking seriously at them, but the previous Government's response was woefully inadequate. We've said we will get on with some other initiatives—we've talked about nurses in schools, and so on—that will ensure that mental health is being progressed even while this inquiry takes place.

PM: You'll see that in the terms of reference we have made specific mention of those initiatives that we campaigned on that would continue alongside the work of the inquiry, and, as has been mentioned, that would include nurses in schools, because there's already evidence to suggest that that would make a significant difference, particularly to young people and their mental health needs.

Media: Can you guarantee that everyone who wants to have their say will be able to submit to the inquiry?

Hon Dr David Clark: That is one of the big challenges. There will be a lot of people wanting to tell their story. The intention of the inquiry is to have a look at the whole-of-community experience and at the system itself, and not at individual cases, but, inevitably, some people will have stories that they want to tell for illustrative purposes. And, as we all know, everybody—and I'm sure that's true for everybody in this room—has some experience with people, friends, family who have mental health conditions or experience. We will not be able to hear every story, I think that's the reality, but we want to make sure that there is a strong sample that gives us a very real and granular picture of what's going on across New Zealand, what community response is needed, and also how the system can best respond to that.

PM: I think it's fair to highlight—important to highlight, as well—that's why we have people with lived experience who will be advising the inquiry, as well. And also, many people have told their story already. There's a long list of reports in this area, some of them on different parts of the system, all of which this inquiry will be looking at, as well. I don't want people to feel—they may have put their story forward to the people's mental health inquiry, for instance—that suddenly their story is lost; it's not.

Media: Will you look at a suicide reduction target? Do you think there should be one?

PM: We've already talked about that openly before. You will have heard me say that the idea of having any tolerance for suicide in New Zealand just won't feel right, I'm sure, to most people. Every single suicide is a tragedy is a tragedy, so, of course, you would hope that everyone's goal is to eventually have an environment where suicide isn't part our communities, isn't part of our lives. So we haven't explicitly spoken to things like targets in the terms of reference. If people start bringing it up, or the inquiry raises it, I'd be interested to hear their views, but our current view is that to suggest that we should tolerate any suicide just doesn't feel right.

Media: What's the Government prepared to do when you receive the report in October, in terms of the funding available? I mean, there's been a lot of discussion about how much money is needed. Do you have the budget and the resources to actually, you know, meet the recommendations of this report?

Hon Dr David Clark: Well, the timing is not accidental, as well, in the sense that it will give time to feed into a Budget process. There are some who are of a view that a whole lot more funding is needed, and certainly, with the increased uptake, that might be a starting point for consideration. But there's also a view that some of the money's not being spent as well as it could be, and it may be a matter of reallocating resource. So we'll take the recommendations from the inquiry very seriously and look at what the response needs to be to ensure that there is real change, because this is not about tinkering; it needs to be significant change. We've heard that time and time again as we've campaigned and, you know, in ordinary conversations at kitchen tables around the country. All of us have heard stories about things that haven't worked, so we know there needs to be change, and that may require resource. We'll look at it when we get the recommendations.

Media: Can you just tell us a little bit more about addiction services—why that's been included and what sort of things you would expect the inquiry to look at in terms of, you know, the existing services and what should happen with them?

Hon Dr David Clark: Well, with addiction services, you know, we do know that there have been funding cuts in different areas around the country and that that's had a real effect on

people's ability to access those services. So I think we'll hear something of that. We know that this is also partly just to lay out—part of what the task will be will be to lay out a baseline of where services are now, so that, as we invest, and when we invest, in mental health and addiction services in the future, people will be able to see the progress, because, you know, people are going to want to know that their money is being well spent. We need a credible path laid out from the expertise that will be gathered by this panel, and we need to be able to see progress, because the current situation is not adequate.

PM: And also, just to add to that, obviously, there has been—it has been raised during the course of establishing these terms of reference and consulting on them the link that exists for some who experience mental health issues and also have issue with addiction. And that made sense to make sure that we were able to canvass access to both services in response to that concern.

Media: What do you think you'll be able to do about those areas of the mental health system which are under-resourced, which have suffered funding cuts over the past year—for example, the CAT team in Wellington, which is minus staff. Are you going to be able to do anything in the Budget to plug those holes, or will you have to wait until the report comes in?

Hon Dr David Clark: We know that the previous Government underfunded health by, you know, billions, and putting that money back into the system will take some time, and, you know, you're actually going to have to build workforces again. It's not as simple as just tipping all of the money straight back in, but we have pledged to put money back in, and that was part of the—I think the story of the election was that we actually promised to adequately fund healthcare over time. So we will do that. We will be, in the Budget, funding health better than it's been funded previously, and I expect that that will deliver better services.

Media: If there's \$100 million just sitting there that might be reallocated to areas you think are more beneficial, what sort of level of urgency are you going to be, you know, applying to spending that money?

Hon Dr David Clark: Well, we're going through a Budget process now. We need to be—let's not forget there are lots of services in play now—

Media: But you don't need to go for it. But that's—

Hon Dr David Clark: —\$100 million in terms of the health budget is a portion of it. There are a huge amount of—

PM: You're assuming it was real!

Hon Dr David Clark: And of course it hasn't been fully appropriated yet—that Government hadn't even got that far with it. They hadn't developed the initiatives properly; they hadn't appropriated the money fully. We're moving, I think—you won't see—in summary, it won't take us nine years to make progress in mental health.

Media: Is Budget 2019 soon enough for that money to funnel through the system when, as the Prime Minister said, the demand is up so much? The people that are waiting now, can they wait for that funding to come through?

PM: And that's why you'll see in the terms of reference we've already acknowledged the areas where we're going to continue with work to make sure that we can deliver services, particularly to young people, while this inquiry is going on. And, as the Minister has said, there are other areas where he's looking at where there are initiatives that we know there is an evidence base behind that will make a difference. So it is a bit of a dual track, but predominantly the big work in mental health will follow on from what people feed back to us.

Media: So if we see mental health services crying out for money over the next year and a half, they won't get the answer from the health Minister that they have to wait until the inquiry is finished and that Budget 2019 process is dealt with?

Hon Dr David Clark: Well, I mean, we have said we're going to progress some of these things, and the things that have the research, you know, I mean, behind them—the nurses in schools has clear academic research, so of course we want to progress that. We've said we'll lower the cost of access to primary care, because we know that's a barrier for some people. So there are very concrete measures that have been recommended that of course we're going to take up straight away and get on with, but there are also bits of the system that are not working as well as they could be, and that we need people to have a good hard look at this, not to respond to one story we've heard here or there but to have a good hard look at what's going on across the country in terms of well-being, and across the system formally, to get the recommendations which present a clear path forward to making sure that the investment that we are making in mental health and well-being is the best that it can be, because the current situation is clearly not adequate.

Media: Are you happy with the balance that's been struck by the terms of reference in terms of not just focusing on services but the wider drivers of demand?

Hon Dr David Clark: Absolutely. From the start, I have pushed for an inquiry that does look more broadly. I don't think we can have an inquiry that doesn't look at the determinants of health and well-being, and doesn't at least take them into consideration as it looks at the picture that we've got. But we also need to look at the primary and secondary services. So it is deliberately broad, and that is to make sure we're getting a full picture, not just a neat, tidy picture at the end, which might be more convenient for a Government that didn't want to do things. We do want to do things; we do want to see a better system, so we're making it deliberately broad enough that we can actually look at that bigger picture.

Media: What's the process for re-establishing the Mental Health Commission? That was obviously a separate coalition commitment. Can you talk about that?

Hon Dr David Clark: Yeah, the Mental Health Commission I expect to come out of the inquiry, and, in fact, the inquiry to inform its terms of reference as an organisation—you know, its mandate at the end of this. It is a pledge that we've made and that our partners have made. We all want to see that happen, but we want to see it given a clear task, and so, again, with an inquiry that has until the end of October, it means that we won't be too far away from establishing the Mental Health Commission, which will have that independent oversight that is needing to be strengthened.

Media: Will there be any focus on reaching rural communities in the inquiry?

Hon Dr David Clark: Absolutely.

PM: Yep. Yeah. In fact, we've had a discussion about that as a team, making sure that the needs of rural communities—particularly, we've seen a number of tragedies in our rural community around the issue of suicide, and that needs to be picked up by this inquiry. Keeping in mind, as well—I believe there was a specific report around mental health issues in rural communities, which we've directly asked the inquiry to take into account and to make sure they're across.

Media: Given you've acknowledged a lot of what the problems are already in place, and that you know the Mental Health Commission is set up as a result of it, why is the inquiry needed? Why not just get on and do some of this stuff?

Hon Dr David Clark: Well, if you talk to different parts of the sector, they all say—those who are active say—they know what the answers are. They actually have slightly different views, some of them, as to what those answers are. And this is the opportunity to bring everything together and to map out a path that we can all agree is the best way ahead. So it provides the opportunity to really synthesise the expertise that's out there, the studies that have been done in the past that have come up with recommendations, many of which

haven't been picked up by previous Governments—to look and update them and to make sure that we're all agreed on what the best-value investments are that can be made. You know, this is serious. This is people's lives. This is people's well-being. And that's why this inquiry needs to do the job that's been laid out in the terms of reference, so that we all, as a country and community, are committed to a path that will see an improvement in our mental health and well-being.

PM: I think it's really important, as well, to acknowledge that we are ultimately answering a call, and that call came from the community. It came from family members who had experienced loss, it came from people who had tried to access mental health services, and it came, often, from people in the workforce. We're answering that call. We're acknowledging all of the concerns that have been raised, and we're hoping to find the answers they're looking for.

Media: Logistically, how's it going to work in terms of whether the submissions are going to be public or they'll be heard in private? How do you see that working?

Hon Dr David Clark: So I expect many, if not most, will be heard in public, but the inquiry has subpoena powers, because we have heard from some people working in the sector that they feel vulnerable and that speaking the truth of their experience might be difficult in terms of their employment situations. So the subpoena powers, that the committee will use, I expect, sparingly, will provide for anonymity for those witnesses that want to tell the story of what's going on inside the system, or others who've had experiences where they fear that exposing themselves might be in some way detrimental. So they do have the ability to do things in private where required.

Media: So could it sort of look like almost a select committee inquiry in terms of the form of it, so that the panel's inviting submissions, hearing public submissions, but with the ability to go into private where needed.

Hon Dr David Clark: When required, yep. And we do expect them to travel and to hear from different communities around the country.

Media: There had been some calls for a royal commission of inquiry, in the *People's Mental Health Report* and other trusts. Do you think this will have the rigour that the people advocating for that want?

Hon Dr David Clark: Absolutely. The independent nature of it means that they have licence to be critical of Government if required. It means that they have these subpoena powers. In fact, they're required to be independent. The Minister cannot direct them. So that gives the public confidence, and it's right that it is that way—that this will be an independent inquiry of experts with integrity who will then report back, and the Government will take their recommendations very seriously.

Media: Did the Government give any consideration to whether this did merit a royal commission?

Hon Dr David Clark: Of course that was one of the considerations. We looked at—or I looked at—a range of different inquiry options, and decided that the length of time that it would require for a royal commission was not something that I wanted to see when I do really want to have some findings back and some clear direction. You know, that sense that many of the answers are out there but need to be properly collated and worked through—that's something we want to work with and find a way forward sooner rather than later, for those things that we don't already have evidence on.

PM: When you look at the differences between the different forms of inquiry you'll find that actually, at that upper level, what you're able to achieve with this level of inquiry is quite similar, regardless, for the royal commission.

Media: Will the inquiry look at the latest drivers for mental health, particularly around research on technology, social media?

Hon Dr David Clark: Yep, I would expect them to be looking at that. You know, it's up to them at this point, but they have a budget for looking to engage on technology, through technology. So I expect their scope will be broad, and that evidence that's coming to light I am sure will be presented by people attending the panel. And, you know, I take this opportunity to encourage people around the country to present to the panel: those with expertise; those in the emergency services—that's another group that brings in experience that's really important; those that work with children, with youth, families, whānau; and the consumers themselves, as well as academics. We want to hear from all those people, and I expect we will. And that latest research will be an important input, because some of that won't be covered in previous inquiries.

PM: I certainly hope, as well, that some of our advisory panels think about that as well, as well as those who have expertise who might like to submit. But also hoping for a very strong voice and representation from that LGBTQI community, particularly rangatahi, as well. We know that they're overrepresented in these statistics, and we certainly need a strong voice from them.

Media: Why are there no actual practitioners on the panel?

Hon Dr David Clark: We wanted—I mean, it does need to be independent of the system. I expect that we will have—the challenge of putting together a panel like this is quite incredible. I had a lot of recommendations—some solicited, many unsolicited. And putting together a panel that is of the right size, has some lived experience, that has Māori and Pasifika representation and so on, you know, is a challenge. But I think we've got the mix right. I think we have a variety of people there, and I think that those who have academic experience and clinical experience will present and are known to present to these kinds of committees.

PM: I believe Dr Disley works in this area.

Hon Dr David Clark: And, sorry, yes, Dr Disley works—

PM: I believe Dr Disley works in the sector.

Hon Dr David Clark: Yep, and Professor Patterson and others have qualifications and experience and engagement with the sector. There is sector experience on there.

Media: Prime Minister, Bill English says getting rid of Better Public Services targets will result in lazy, dumb government, with the Public Service putting its feet up. Do you have any response to that?

PM: Oh, look, I imagine that Bill English won't be surprised that this Government has its own priorities that will differ from the last Government's. Where I do agree with Bill English is that having goals and clear aspirations that you make transparent with the public are a useful tool both to drive the activities of Government but also to drive the agenda within the Public Service. So I do agree that tools like that are useful. We will just happen to have different targets than Bill English and the last Government.

Media: Will your targets kind of end with one person? Will one person be responsible for achieving that target?

PM: No, I mean—actually, this has been one of my criticisms with one of the targets that actually was dumped by the last Government, I think, in the last round, and that was around rheumatic fever. It was a target that was driven by health, but rheumatic fever is a disease, an illness, that is further exacerbated by poor quality, overcrowded housing. So if you have these goals that simply sit with one department, often you get perverse outcomes that don't solve the underlying issue. We're looking at ways that we can drive more cross-Government work, more work across the public sector, but, again, these are things that we'll be talking about further down the track. There's a little bit of work we need to do first, but what I wanted to flag early on: that whilst I agree with mechanisms like that, we're going to have different priorities than the last Government. Most people would expect that.

Media: Do you intend to have just as specific goals, in terms of percentage—

PM: Yeah, and we're going through that at the moment. I mean, an example that you will have heard us discussing already are things like child poverty targets. So they are broad in the sense that we are actually targeting a systemic, core fundamental issue, but with some specificity around the outcomes we hope to achieve. That's a big contrast to the things like you saw from the last Government around things like rheumatic fever, individual referrals for children who would be classified as obese, and NCEA qualifications. So we are looking at some pretty chunky issues with some of the targets we're setting ourselves.

Media: Prime Minister, have you received any official information to suggest that there are people-smuggling boats trying to get to New Zealand? Could you comment on this one?

PM: Yeah. Look, I don't want to comment on specific intelligence briefings or reports, but what I am happy to say, as I have done before, is that chatter amongst people-smugglers has ebbed and flowed for many, many years—keeping in mind, of course, that *Tampa* was over 15 years ago. So that's not a new issue, and I've certainly acknowledged in the past that that chatter does ebb and flow. I have certainly—I'm advised that none of the activity that we've seen in recent times is unusual.

Media: Do you regard it as a political act, the leaking of this information?

PM: That's a question for political agents in Australia, rather than for me. I consider myself to be an observer.

Media: There is a view within Australia that your comments about this issue have been unhelpful and you're not helping them with their border protection policy. Do you agree that if the chatter is continuing or gets worse that you're not helping Australia?

PM: As I say, I'm advised that nothing we're seeing is unusual, that chatter ebbs and flows, and keeping in mind that actually the offer specifically, which is being referenced lately in media, has been Manus Island—that was an offer that was made in 2013. So that's not new either.

Media: If the Australian Government asked you if you had a message for the asylum seekers who said they were trying to get to New Zealand, what would your message be?

PM: My message, in fact, would be for people-smugglers. As I've said many times before, I consider them to be parasites. They prey on people's vulnerability. They manipulate situations and use any propaganda they can to take money from vulnerable people. They are, ultimately, the ones that everyone is targeting, and for good reason, and the clear message to them is that just as with Australia, we're working alongside them to try and put an end to people who are risking other people's lives for monetary gain.

Media: What would be your message, though, to people who are vulnerable to be targeted by people-smugglers—the would-be asylum seekers?

PM: We've always had the same message: that the manipulation of people-smugglers, ultimately, is an endeavour to take money away from vulnerable people and put their lives at risk. And that's been a message that's been sent for a very long time, both by New Zealand and Australia.

Media: Can I ask, on forestry, given the Government's aspirations in that area and the fact that Juken is, effectively, going to halve the workforce at their existing plant, is there a case for the Government to become actively involved in that issue?

PM: Yeah, I mean, keeping in mind that Juken, and acknowledging that any job loss, particularly in a region like the East Coast and Gisborne, is hugely disappointing and upsetting for the region—particularly, that's an area where we want to do a lot of work—but Juken does have some specific circumstances. They were producing—an international company—producing a product for the international market that was quite specific, that they've now claimed there's not the demand for. There is still a case for processing in New Zealand, absolutely, and it still remains an area this Government wants to work on.

Media: You're going to Rātana tomorrow—

PM: I am.

Media: —for the first time as both Labour leader and Prime Minister.

PM: Yep—not the first time, but the first time as leader.

Media: What will your message be to the Mōrehu?

PM: Yes, well, I don't want to ruin the surprise, but I will be acknowledging the history of Rātana, particularly given the historic nature of this year; the long-standing relationship, particularly, between Labour and Rātana; but also, at a practical level, the ways that we can work together on some of the priorities I know are shared between us and the people of Rātana.

Media: Do you think there might be some expectations on you now you're back in Government?

PM: I think there's expectations on us from whole range of quarters, and I welcome that. Expectations are what keep driving you harder.

Media: Do you expect the tone will be different this year, given the change of Government?

PM: Actually, I've always found Rātana to be hugely welcoming. Great, I'll see you all tomorrow. Thanks, everyone.

conclusion of press conference