Budget 2019 to Budget 2022

investment in mental health

and addiction report

August 2024



### **Budget 2019 to Budget 2022 investment in mental health and addiction**

A report issued by Te Hiringa Mahara—the New Zealand Mental Health and Wellbeing Commission (Te Hiringa Mahara).

Authored by Te Hiringa Mahara.

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Te Hiringa Mahara—the New Zealand Mental Health and Wellbeing Commission—was set up in February 2021 and works under the Mental Health and Wellbeing Commission Act 2020. Our purpose is to contribute to better and equitable mental health and wellbeing outcomes for people in Aotearoa New Zealand.

For more information, please visit our website: [www.mhwc.govt.nz](http://www.mhwc.govt.nz)

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# Kupu Whakataki | *Foreword*

In 2019, in response to the report of the Government Inquiry into Mental Health and Addiction (He Ara Oranga), the Government invested over $1.9 billion into mental health and wellbeing as part of the landmark 2019 Wellbeing Budget. There was recognition of the need for a new approach to mental health and addiction in Aotearoa New Zealand and the Wellbeing Budget laid down the foundations for transformation.

In the years since, we have welcomed new and expanded services, newly established entities – including our own organisation – and a much-needed focus on improving the mental health and addiction system.

There is significant public interest and commentary about the $1.9 billion. It is important to monitor this investment and to have transparency as to how the funds have been used to improve mental health and wellbeing.

The 2019 Wellbeing Budget prioritised how to distribute the $1.9 billion investment to a range of initiatives across government that contribute to better and equitable wellbeing outcomes for tāngata whaiora and whānau. Most of this investment supported new initiatives and has been spent in the anticipated areas. As a result, many more people are getting the support they need, and we welcome the focus on wellbeing beyond services.

While this significant investment is welcome, it is not a magic wand. When we look at the range of initiatives as a whole, it is clear that Aotearoa needs a systemic and long-term approach to investment in mental health and addiction services and supports. We need to have sustainable funding for both new and current initiatives in priority areas, so that new initiatives are sustained and scaled up across the country.

We will continue to monitor investments in mental health and addiction services and wellbeing initiatives. We urge the Government to hold onto the long-term vision, invest in strong foundations, and keep people and whānau at the heart of all decisions.

Karen Orsborn

*Chief Executive, Te Hiringa Mahara*

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# Whakamōhiotanga whānui | *Overall summary*

**This Budget 2019 to Budget 2022 investment in mental health and addiction report focuses on** **where key mental health and addiction investments have been spent as of 30 June 2023.**

This report shows where the Budget 2019 investment in the Government’s priority *Taking mental health seriously* was allocated to [each initiative](#_Initiatives_by_Priority_1) and the expenditure on each of those initiatives for the four years from 1 July 2019 to 30 June 2023. It describes each initiative in terms of what it set out to achieve and its status as of 30 June 2023.

As of 30 June 2023, $1,797.6 million (92 per cent) of Budget 2019 had been spent on or committed[[1]](#footnote-2) to the intended initiatives. $163.8 million (8 per cent) remained unspent, however, for several initiatives, remaining funding was committed to ongoing service delivery or implementation in 2023/24.

Budget 2019 $1,961.4 million

Of the total investment package on mental health and wellbeing, 57 per cent went to Health, which includes key initiatives such as the $455.1 million Access and Choice programme. The rest of the package went across social and justice sectors.

Most initiatives funded by this investment package are new; however, some funding was allocated to cost pressures or to ensure continued operation of programmes in progress. $1,542.1 million (79 per cent) has been allocated to new initiatives such as expanding access and choice of primary mental health and addiction support, suicide prevention services, and transitional housing. Of this total, $1,378.3 million (89 per cent) has been spent or committed.

Another $225.2 million (11 per cent) of the investment package has been allocated and spent to support cost pressures or continued operations. Most of this funding, $213.1 million, was added to the ringfenced funding for mental health and addiction (MHA) specialist services (delivered in hospital and community settings).

The remaining $194.1 million (10 per cent) of the investment package was allocated to and spent on a combination of funding to maintain the current level of Housing First places and support services, and to expand the Housing First programme by 1,044 places.

Proportion of new investment $ million

*Taking Mental Health Seriously*—supporting mental wellbeing for all New Zealanders, with a special focus on under 24-year-olds—was one of five priorities of the Wellbeing Budget 2019. This priority included 29 initiatives across 12 portfolios[[2]](#footnote-3) and focused on the areas identified in the following chart.

The first of these areas, ‘Mental health—a new frontline service’, includes $455.1 million for the priority initiative ‘Expanding access and choice of primary mental health and addiction (MHA) support’. This priority initiative shows a $41.9 million (9 per cent) underspend as of 30 June 2023.[[3]](#footnote-4) Another area, ‘Strengthening existing mental health services’, includes capital funding of $235.0 million for mental health facilities upgrades, which is currently $62.0 million (26 per cent) underspent.[[4]](#footnote-5)

There are key reasons for the Budget 2019 underspend as of 30 June 2023. Significant large-scale shifts have occurred over the last five years that have affected the pattern of New Zealanders’ mental health demand, as well as the mix, capacity, capability, and performance of services to respond. These shifts are:

* Shift One—the system response to a landmark review of the mental health and addiction system
* Shift Two—the societal impact of a once-in-a-century global pandemic
* Shift Three—a fundamental restructuring of the publicly funded health services of Aotearoa.

These shifts have had both positive and negative impacts on the Budget 2019 initiatives. Positively, Shift One has provided the much-needed investment in mental health and addiction services, which is the focus of this report. However, the information that agencies have provided for this report shows that the COVID-19 pandemic (Shift Two) has held back several initiatives by delaying their implementation, slowing referral pathways, and reducing enrolments into services in 2020 and 2021. It also caused difficulties with recruiting staff to new roles. Under Shift Three, responsibility for funding the health initiatives shifted over the 2019–2023 period from the Ministry of Health (1 July 2019 to 30 June 2022) to Health New Zealand and Te Aka Whai Ora (1 July 2022 to 30 June 2023).

In addition to its focus on Budget 2019, this report covers key mental health and addiction initiatives from Budget 2020 to Budget 2022. As of 30 June 2023, $56.8 million (89 per cent) of the $63.8 million funds allocated within this period were reported to have been spent or committed. The majority of these funds went to initiatives specific to children and youth, such as the COVID-19 fund for mental wellbeing support for tertiary students and Mana Ake for primary and intermediate school students. Such initiatives comprised $46.2 million of the budget allocated, of which $41.8 million has been spent or committed.

Budget 2022 has a focus on increasing the availability of specialist mental health and addiction services. This report includes $9.4 million allocated for this purpose, as part of a $100.0 million multi-year Health process that includes $14.7 million for 2023/24, $25.9 million for 2024/25, and $50.0 million for 2025/26.

# Kupu arataki | *Introduction*

**The purpose of this report, Budget 2019 to Budget 2022 investment in mental health and addiction, is to answer the question, ‘Where has the funding gone?’.**

The Initial Mental Health and Wellbeing Commission, which became Te Hiringa Mahara—the Mental Health and Wellbeing Commission in February 2021, was set up in November 2019 in response to [He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction](https://mentalhealth.inquiry.govt.nz/inquiry-report/he-ara-oranga/) (He Ara Oranga) and was funded from Budget 2019 (Government Inquiry into Mental Health and Addiction, 2018). One of our key functions is monitoring and reporting. To this end, this report focuses on our findings about the Wellbeing Budget 2019 initiatives in response to He Ara Oranga and later key mental health and addiction investments up to 30 June 2023.

Following the release of He Ara Oranga in 2018, the Government responded with a significant investment of over $1.9 billion into mental health and wellbeing, particularly to significantly enhance support available to people with mental health and addiction needs in the community. *Taking mental health seriously*—supporting mental wellbeing for all New Zealanders, with a special focus on under 24-year-olds, was one of five priorities for the Wellbeing Budget 2019 (Government of New Zealand, 2019b). This priority included 29 initiatives across 12 portfolios.

The $1.9 billion mental wellbeing package was committed over the four-year period from 1 July 2019 to 30 June 2023. Since the Budget 2019 investment, three budgets (Budget 2020 to Budget 2022) have made other key investments in mental health and addiction initiatives, which this report also covers.

In March 2021, the Initial Mental Health and Wellbeing Commission published [Mā Te Rongo Ake](https://www.mhwc.govt.nz/assets/Reports/Ma-Te-Rongo-Ake/Mental-Health-and-Wellbeing-Ma-Te-Rongo-Ake.pdf), a report assessing progress of the Government’s response to He Ara Oranga (Initial Mental Health and Wellbeing Commission, 2021). This report included an overview of the Vote[[5]](#footnote-6) Health Budget 2019 mental health and addiction initiatives (appendices 3 and 4) and data on the funding allocated over the four-year period 2019/20 to 2022/23 (all Votes), and the funding committed as of 31 October 2020 (Vote Health only).

Five years on, public and media interest in the $1.9 billion Wellbeing Budget 2019 remains significant and the mental health and addiction system is still under pressure. The following are examples of other reports in this landscape that have either monitored or evaluated the progress of the Budget 2019 initiatives.

* The Department of the Prime Minister and Cabinet completed a mid-term review, [published in September 2021](https://www.dpmc.govt.nz/publications/implementation-unit-mid-term-review-2019-mental-health-package); a Year three stocktake of the Budget 2019 Mental Health and Addiction Package, [released in March 2023](https://www.dpmc.govt.nz/publications/proactive-release-progress-report-implementation-units-2022-assignments-18-august-2022); and a further Rapid assessment [released in November 2023](https://www.dpmc.govt.nz/publications/proactive-release-implementation-unit-review-implementation-unit-work-programme-31-december-2023-and-progress-report-assignments-20-june-2023).
* The Ministry of Health reported quarterly to the Cabinet Priorities Committee on Budget 2019 progress. It releases these reports proactively on the [Ministry of Health’s website](https://www.health.govt.nz/about-ministry/information-releases/release-ministerial-decision-making-documents?year=2023), including the [quarterly mental wellbeing report as at 30 June 2023](https://www.health.govt.nz/about-ministry/information-releases/release-ministerial-decision-making-documents/quarterly-mental-health-report-quarter-4-2022-2023).
* Te Hiringa Mahara independently completed monitoring on the progress of the Access and Choice Programme implementation in its [2021](https://www.mhwc.govt.nz/news-and-resources/access-and-choice-programme-progress-report-2021/) and [2022](https://www.mhwc.govt.nz/news-and-resources/the-access-and-choice-programme-report-on-the-first-three-years-2022/) reports.
* Agencies responsible for initiatives have in many cases commissioned independent evaluations of programmes.

While these reports provide detail on the progress and performance of key initiatives, none has given an overall picture (across all portfolios) of every initiative in terms of its funding allocation, actual expenditure, and status. This report provides a single source of information covering all the initiatives that were included in the *Taking mental health seriously* section of Budget 2019.

This information-focused, technical report details the budget initiatives by priority area. It does not assess whether the investment was allocated to the right places; nor does it evaluate the effectiveness of the investment – whether it made a difference to improve mental health and wellbeing outcomes for people.

Investment data shown in this report are not comparable with the data in [Kua Tīmata Te Haerenga | The Journey Has Begun](https://www.mhwc.govt.nz/our-work/mental-health-and-addiction-system/mental-health-and-addiction-service-monitoring/), our 2024 monitoring report. Kua Tīmata Te Haerenga (Te Hiringa Mahara, 2024) includes data on all Vote Health mental health and addiction expenditure (new and existing). This report includes data on additional investment since Budget 2019 and provides more detail on where this funding is allocated and whether it has been fully spent. A large portion of the new investment was allocated to initiatives to improve mental wellbeing (such as housing, social development, and the justice sector).

## Data collection

We have sourced details on mental health and addiction initiatives and their funding allocations from the Treasury’s [Summary of Initiatives in Budget 2019](https://www.treasury.govt.nz/publications/summary-intiatives/summary-initiatives-budget-2019), [Budget 2021](https://www.treasury.govt.nz/publications/summary-intiatives/summary-initiatives-budget-2021), and [Budget 2022](https://www.treasury.govt.nz/publications/summary-intiatives/summary-initiatives-budget-2022) (Government of New Zealand, 2019a, 2021, 2022). We also submitted information requests to the 13 agencies responsible for delivering the initiatives, seeking data on funding allocated, funding committed, and actual expenditure as of the end of June 2023. We also asked them to describe what the initiative set out to achieve and its status as of June 2023. The information from the agencies forms the basis for the summary in Table 4.

It took some time to ensure the information provided was complete and consistent across the agencies. Before publishing this report, we gave a copy of it to all agencies that provided information to review so we could ensure its accuracy. It is important to note that some of the initiatives, such as the [Royal Commission of Inquiry into Historical Abuse in Care](https://www.abuseincare.org.nz/reports/whanaketia), span a longer timeframe than the years that are the focus of this report and their total funding goes beyond the Budget 2019 funds shown due to multi-year funding appropriations.

## Ngā mihi | Acknowledgements

Taking a system-wide approach, this report drew on information provided by the many agencies responsible for delivering the Budget 2019 initiatives. We thank the staff in these agencies for their timely supply of information and for assisting with clarifications to ensure this report was complete. These agencies are Health New Zealand | Te Whatu Ora; Ministry of Health; New Zealand Police | Ngā Pirihimana o Aotearoa; Te Tūāpapa Kura Kāinga | Ministry of Housing and Urban Development; Ministry of Social Development | Te Manatū Whakahiato Ora; Ara Poutama Aotearoa | Department of Corrections; Te Tari Taiwhenua | Department of Internal Affairs; Ministry of Justice | Tāhū o te Ture; Te Tāhuhu o te Mātauranga | Ministry of Education; Te Kawa Mataaho Public Service Commission; New Zealand Defence Force; Oranga Tamariki; and the Crown Response Unit.

Using the information received from other agencies is essential for our role in monitoring and improving mental health and addiction services.

# Ngā Kitenga | *Findings*

**In this section, we present the key findings on the mental health and addiction investments over four years from Budget 2019 to Budget 2022.**

## Budget 2019

The Budget 2019 total used for this report is $1,961.4 million and covers the funding period from 1 July 2019 to 30 June 2023. This is comprised of $1,584.9 million for operating funding[[6]](#footnote-7) and $376.5 million for capital funding.[[7]](#footnote-8) Treasury’s Budget 2019 for the *Taking mental health seriously* initiatives is $1,384 million for operating funding. To this total, we have added $213 million of district health board[[8]](#footnote-9) (DHB) funding ringfenced for specialist MHA services, and we have excluded $12 million[[9]](#footnote-10) that was reprioritised in the 2018/19 fiscal year when the Budget was announced. Capital funding includes *Taking mental health seriously* initiatives $142 million and $235 million for DHB mental health facilities upgrades.

As of 30 June 2023, $1,797.6 million (92 per cent) had been spent on ($1,649.1 million) or committed to ($148.5 million) the intended initiatives. Another $163.8 million (8 per cent) remained unspent; however, several initiatives indicated remaining funding was committed to ongoing service delivery for 2023/24.

Budget 2019 $1,961.4 million

### Funding allocation

Of the total investment package, 57.0 per cent went to Health, which includes key initiatives such as the $455.1 million Access and Choice programme. The rest of the package went across social and justice sectors, including 24.3 per cent to Housing and Urban Development, 7.3 per cent to Social Development, 6.6 per cent to Corrections, 3.5 per cent to Internal Affairs, and the remaining 1.3 per cent to various government initiatives (see chart below). Table 1 presents the funding allocation to the initiatives in each portfolio.

Table 1: Funding allocated to each initiative by portfolio

|  |  |  |
| --- | --- | --- |
| **Initiatives by portfolio** | **Funding allocated** **$ million** | **Percentage of Budget 2019** |
| **Health** | **1,118.4** | **57.0%** |
| Expanding access and choice of primary mental health and addiction support | 455.1 |  |
| Expanding and enhancing school-based health services | 19.6 |   |
| Expanding telehealth and digital supports for mental wellbeing | 20.8 |   |
| Improving support for people experiencing a mental health crisis | 8.0 |   |
| Intensive parenting support—expanding the Pregnancy and Parenting Service | 7.0 |   |
| Mental wellbeing support for parents and whānau | 10.0 |   |
| New Mental Health and Wellbeing Commission | 8.0 |   |
| Preventing suicide and supporting people bereaved by suicide | 40.0 |   |
| Promoting wellbeing in primary and intermediate schools | 2.2 |   |
| Enhancing primary addiction responses | 14.0 |   |
| Enhancing specialist alcohol and other drug services | 42.0 |   |
| Te Ara Oranga—continuing the methamphetamine harm reduction programme in Northland | 4.0 |   |
| Uplift to DHB funding ringfenced for specialist MHA services  | 213.1 |   |
| Enhancing forensic mental health services for adults | 15.0 |   |
| Enhancing forensic mental health services for young people | 19.0 |   |
| Mental health facilities upgrades | 235.0 |   |
| Support for Christchurch: continuation of funding for primary care and community-based mental health workers | 5.5 |   |
| An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care  | 0.2 |   |
| **Housing and Urban Development** | **477.4** | **24.3%** |
| Transitional Housing: funding for the continued provision of transitional housing to support those in need  | 283.3 |   |
| Maintaining and strengthening the Housing First programme as a response to ending homelessness  | 194.1 |   |
| **Social Development** | **143.4** | **7.3%** |
| Historical abuse while in State care: resolving claims  | 95.2 |   |
| Maintaining and strengthening the Housing First programme as a response to ending homelessness  | 2.9 |   |
| Disabled people and people with health conditions: improving employment and wider wellbeing outcomes  | 26.3 |   |
| Housing Support Products: expansion to help more people access and maintain tenancies  | 18.9 |   |
| **Corrections** | **129.5** | **6.6%** |
| Enhancing specialist alcohol and other drug services | 2.0 |   |
| Increasing access to mental health and addiction support through Hāpaitia te Oranga Tangata—Safe and Effective Justice programme | 127.5 |   |
| **Internal Affairs** | **67.8** | **3.5%** |
| An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care  | 1.4 |   |
| Establishment of the Royal Commission of Inquiry into Historical Abuse in State Care and in the Care of Faith-Based Institutions  | 66.4 |   |
| **Oranga Tamariki** | **6.7** | **0.3%** |
| An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care  | 6.7 |   |
| **Justice** | **6.4** | **0.3%** |
| Support for victims: ensuring safe and effective justice and improved mental health outcomes | 6.2 |   |
| Alcohol and Other Drug Treatment Court: operational support 2019/20  | 0.2 |   |
| **Education** | **6.1** | **0.3%** |
| Sensitive claims of abuse: funding to resolve and acknowledge historical abuse in the schooling system  | 5.6 |   |
| An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care  | 0.5 |   |
| **Defence Force** | **4.1** | **0.2%** |
| Promoting and supporting the health and wellbeing of veterans and their families  | 4.1 |   |
| **Police** | **1.0** | **0.1%** |
| Increasing access to mental health and addiction support through Hāpaitia te Oranga Tangata—Safe and Effective Justice programme | 0.8 |   |
| Alcohol and Other Drug Treatment Court: operational support 2019/20  | 0.3 |   |
| **Courts** | **0.4** | **0.0%** |
| Alcohol and Other Drug Treatment Court: operational support 2019/20  | 0.2 |   |
| An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care  | 0.2 |   |
| **Public Service Commission** | **0.2** | **0.0%** |
| An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care  | 0.2 |   |
| **TOTAL BUDGET 2019 INITIATIVES** | **1,961.4** |   |

### Proportion of new investment

Most initiatives are new as shown in the chart below. However, as the [Initiatives by priority](#_Initiatives_by_Priority_1) section identifies, some initiatives are to address cost pressures or to ensure continued operation of work in progress.

Proportion of new investment $ million

Among the initiatives aimed at existing programmes, some are time limited, such as the support for Christchurch, and others, such as the Alcohol and Other Drug Treatment Court, have received further funds in subsequent budgets.

For analysis purposes, we have included initiatives in the ‘new’ category where they are described as including funding increases both to ensure continued operations and for expansion. The one exception is the significant $194.1 million Housing First programme, which we note below as a ‘combination’.[[10]](#footnote-11)

The following is the breakdown of the funding allocations for these different categories.

* Of the total investment, $1,542.1 million (79 per cent) has been allocated to new initiatives. Among new initiatives, $1,378.3 million (89 per cent) has been either spent or committed.
* $225.2 million (11 per cent) has been allocated to and spent on supporting cost pressures or continued operations, which includes:
	+ $213.1 million for the DHB ringfence for MHA specialist services
	+ $2.0 million for improving the sustainability of alcohol and other drug (AOD) residential services through meeting existing cost pressures
	+ $0.7 million for the Alcohol and Other Drug Treatment Court for one year to continue operating
	+ $4.0 million for continuing the joint initiative between Northland DHB and Police to reduce harm from methamphetamine
	+ $5.5 million for continuing time-limited support for Christchurch established after the Canterbury earthquakes, to provide support following the 15 March 2019 terror attacks.
* $194.1 million (10 per cent) has been allocated to and spent on a combination of funding to maintain the current level of Housing First places and support services, and funding to expand the Housing First programme by 1,044 places.

### Reducing harm from alcohol and other drugs

Initiatives specifically to reduce AOD harm comprise $62.7 million (3 per cent) of the Budget, of which $55.5 million has been spent or committed. Most of this funding went to Health; however, a number of these initiatives involve Corrections, Police, Courts, and Justice.

### Priority population view

Initiatives specific to children and youth comprise $124.3 million (6 per cent) of the Budget, of which $97.4 million has been spent or committed. We recognise that many of the other initiatives serve Aotearoa’s general population, meaning that they also include a children and youth component. However, we cannot isolate this spending within the data.

As part of the Access and Choice programme, $61.8 million (3 per cent) has been allocated and $53.3 million spent or committed to develop and expand community-based Kaupapa Māori mental health and addiction services.

Also, as part of the Access and Choice programme, $24.7 million (1 per cent) has been allocated and $19.6 million spent or committed to develop nine community-based Pacific mental health and addiction services. These services are targeted at the nine districts with the highest Pacific populations.

Some other initiatives have a particular focus on Māori, Pacific peoples, and young people. Examples are initiatives for enhancing school-based health services; expanding and improving suicide prevention efforts and improving responses to the needs of people bereaved by suicide; enhancing primary addiction responses; and Hāpaitia te Oranga Tangata—Safe and Effective Justice programme.

Another initiative will support an additional 2,600 disabled people and people with health conditions, including those with mental health needs. The Oranga Mahi programme will support them to find and stay in meaningful employment, increase their knowledge and skills, and improve their health and wider wellbeing. For this programme, $26.3 million has been allocated (1 per cent) and $25.7 million spent or committed.

The New Zealand Defence Force was allocated $4.1 million and has spent it on promoting and supporting the health and wellbeing of veterans and their families.

### Workforce development

For targeted workforce development, $77.1 million has been allocated (4 per cent) and $61.7 million spent or committed. These initiatives are aimed at growing existing workforces, developing new workforces, and supporting, upskilling, and retaining existing workforces.

It is important to recognise that many of the other initiatives contribute to workforce growth by funding additional full-time equivalent (FTE) staff and/or workforce development, such as through supporting further study. However, such contributions cannot be quantified for the purposes of this report.

### Some initiatives have funds unspent as of 30 June 2023

Budget 2019 had an underspend of $163.8 million (8 per cent) as of 30 June 2023. Table 2 lists the initiatives that contributed the most to this underspend.

Table 2: The main initiatives contributing to the underspend in Budget 2019

|  |  |  |
| --- | --- | --- |
| **Budget 2019 – overall underspend** |  **$ million 163.8[[11]](#footnote-12)**  | **Percentage****8%** |
| Health | Expanding access and choice |  41.9  | 9%[[12]](#footnote-13) |
|  | Expanding telehealth and digital supports |  7.4  | 36% |
|  | Mental wellbeing support for parents and whānau |  3.4  | 34% |
|  | Preventing suicide and supporting people bereaved by suicide |  8.4  | 21% |
|  | Enhancing primary addiction responses | 3.0 | 22% |
|  | Enhancing specialist alcohol and other drug services |  4.2  | 10% |
|  | Mental health facilities upgrades (capital) |  62.0  | 26% |
| Corrections | Increasing access to MHA support: Hāpaitia te Oranga Tangata—Safe and Effective Justice programme | 28.7  | 22% |

Health initiatives accounted for 84 per cent of the overall underspend, and 45 per cent of this related to the mental health and addiction facilities upgrade projects that have a longer timeline. Expanding access and choice of primary mental health and addiction support was a key priority, with $664 million allocated for its roll-out over a five-year period from 2019/20 to 2023/24. The underspend for this initiative relates to the period 1 July 2019 to 30 June 2022. The COVID-19 pandemic impacted the implementation of the programme by slowing the process of contracting providers, recruitment, and making it more difficult for people to access the new services. Health New Zealand fully committed the available annual funding for the Access and Choice programme in 2022/23.

The mental health and addiction facilities upgrade shows a $62.0 million (26 per cent) underspend as of 30 June 2023. This initiative supports five mental health and addiction infrastructure projects in Waitematā, Lakes, MidCentral, Waikato, and Tairāwhiti. As of 30 June 2023, the projects at Waitematā, MidCentral, and Tairāwhiti had construction works under way while the projects at Lakes and Waikato were undertaking activities to award main contracts to companies to do the work.

The Department of the Prime Minister and Cabinet completed a Year three stocktake of the Budget 2019 Mental Health and Addiction Package, [released in March 2023](https://www.dpmc.govt.nz/publications/proactive-release-progress-report-implementation-units-2022-assignments-18-august-2022). This stocktake advised “progress in delivering the Mental Health Infrastructure Programme (MHIP) is concerning and would benefit from a more in-depth project by project assessment using infrastructure experts”. The slow progress of MHIP was the focus of recommendations to Government from the stocktake.

The Department of Corrections’ initiative Hāpaitia te Oranga Tangata—Safe and Effective Justice is a significant, ongoing programme of work. While it shows a significant underspend (22 per cent), Corrections has indicated that mental health services are on track and continue to exceed referral targets. Establishment of AOD programmes has been problematic and timeframes for some services were extended. The COVID-19 pandemic and operational issues limited Corrections’ ability to establish and deliver services. The information provided also shows some challenges with recruiting to new roles established. However, further progress has been made in 2023/24.

## Budget 2020 to Budget 2022 key mental health and addiction initiatives

It is important to note that this report includes only key mental health and addiction initiatives from Budget 2020 to Budget 2022. We have excluded wider Wellbeing initiatives from the scope, and with them the additional funding for significant initiatives, such as the Royal Commission of Inquiry into Historical Abuse in Care. The total funding for initiatives we have included for this report comes to $63.8 million. For the initiatives that are multi-year, with funding beginning from 1 July 2022, this report provides only a partial view given it covers the period to 30 June 2023.

Budget 2022 has a focus on increasing the availability of specialist mental health and addiction services. This report identifies only $9.4 million allocated in the 2022/23 year for this purpose, which is part of a $100.0 million multi-year Health process that includes $14.7 million for 2023/24, $25.9 million for 2024/25, and $50.0 million for 2025/26.

As of 30 June 2023, $56.8 million (89 per cent) of the funds allocated within the period of this report had been spent or committed. The majority of this funding is for initiatives specific to children and youth, such as the COVID-19 fund for mental wellbeing support for tertiary students and Mana Ake for primary and intermediate school students. Such initiatives comprise $46.2 million of the budget allocated, of which $41.8 million has been spent or committed.

# He Raupapatanga o ngā Kaupapa| *Initiatives by priority*

This section describes in more detail the initiatives under the Wellbeing Budget 2019 and later key mental health and addiction initiatives under the following three budgets (Budget 2020 to Budget 2022), including the status of their investment as of 30 June 2023. The initiatives are ordered by the budget priority areas, with the main focus on Budget 2019. Table 3 summarises the investment for Budget 2019 by priority area and for the key initiatives in total under the following three budgets, including expenditure made and committed as of 30 June 2023.

Table 3: Summary of investment by Budget 2019 priority area and for Budget 2020 to Budget 2022, as of 30 June 2023

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Funding allocated $m** | **Actual expenditure $m** | **Further funds committed $m** | **Variance—under or (over) $m** |
| **Budget 2019** | **1,961.4** | **1,649.1** | **148.5** | **163.8** |
| *Priority area* |
| Mental health—a new frontline service | 570.7 | 494.8 | 10.5 | 65.4 |
| Treating drug and alcohol addiction | 58.0 | 50.8 | 0.0 | 7.2 |
| Supporting mental health within the justice sector | 139.1 | 106.9 | 3.6 | 28.6 |
| Strengthening existing mental health services | 487.6 | 302.1 | 120.7 | 64.7 |
| Investing in social determinants of mental health | 529.6 | 528.5 | 0.5 | 0.6 |
| Supporting mental wellbeing | 176.4 | 165.9 | 13.2 | (2.8) |
| **Budgets 2020–2022 initiatives** | **63.8** | **51.6** | **5.2** | **7.1** |

Table 4 brings together further detail (provided by the responsible agencies) on what each initiative set out to achieve, what has been delivered to support each of the mental health and wellbeing priorities, and where the Budget funds have been spent as of 30 June 2023 (where agencies provided this information). The total funding allocation and total actual expenditure shown cover the four years from 1 July 2019 to 30 June 2023. The ‘further funds committed’ column identifies commitments in place to spend the funds after 1 July 2023. The ‘variance’ column is calculated as the funding allocated, less actual expenditure and further funds committed, and shows whether the initiative was on budget, overspent, or underspent. Overspend is denoted in brackets.

Table 4: Detailed description of Budget 2019 to Budget 2022 investment by initiative

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Budget** | **Initiative** | **What the initiative set out to achieve and its status as of 30 June 2023** | **Portfolio** | **Funding allocated** **$m** | **Actual expenditure** **$m** | **Further funds committed** **$m** | **Variance—under or (over)** **$m** |
| **Budget 2019—covers funding allocated from 1 July 2019 to 30 June 2023** |
|  | **Mental health—a new frontline service** |  | 570.674 | 494.785 | 10.532 | 65.356 |
| **2019** | **Expanding access and choice of primary mental health and addiction (MHA) support—in particular, for New Zealanders with mild to moderate needs**This initiative is detailed in the following 7 lines of the table, up to and including Enablers funding. | **Health** | **455.074** | **405.752** | **7.389** | **41.932[[13]](#footnote-14)** |
| **2019** | Integrated Primary Mental Health and Addiction (IPMHA) services | MHA services delivered as an integrated part of the general practice team, by a collaborative of primary health organisations, non-governmental organisations (NGOs), and Health New Zealand in each district. **Status update:** IPMHA services are in 512 general practice sites, which equates to an enrolled population coverage of 3.1 million people. It is intended that IPMHA coverage will expand to an enrolled population of 3.5 million people by the end of the roll-out, and at the end of June 2023 we were at 89% of that target. As of 30 June 2023, 767,200 sessions[[14]](#footnote-15) were delivered and 83% of newly contracted full-time equivalent staff (FTE) were in place.  | **Health** | 185.988 | 203.222 | 0.000 | (17.234) |
| **2019** | Kaupapa Māori services: whānau-centred services delivered by Māori, for Māori | These services for all ages are delivered in the community outside of general practice. The service design has enabled Kaupapa Māori health partners to better meet the needs of tāngata whaiora and their whānau and positively contribute to changing their lives. **Status update:** There are now 32 services, ensuring full coverage across the country. In many cases there is no wait time as support is available at the time that a need is identified. | **Health** | 61.750 | 45.938 | 7.389 | 8.423 |
| **2019** | Pacific services: Pacific-led services incorporating Pacific values, beliefs, languages, and models of care | These services for all ages are delivered in the community outside of general practice. **Status update:** There are nine Pacific services targeted at the nine districts with the highest Pacific populations, and a total of 48,100 sessions have been delivered. There is ongoing recruitment into contracted roles, with 64% of FTE in place as of 30 June 2023, against a target of 60–80% for this stage of the roll-out. Most vacancies are with one provider, which is servicing three districts, and workforce solutions are being explored. | **Health** | 24.700 | 19.577 | 0.000 | 5.123 |
| **2019** | Youth services: flexible services delivered in spaces that are acceptable and accessible to young people | Primary MHA services for young people aged 12–24 years—these services are delivered in the community outside of general practice.**Status update:** There are 22 youth services across the country and a total of 88,500 sessions have been delivered. In addition, funding is in place for the Youthline Help Line (national phone, web, and text counselling service). There is ongoing recruitment into contracted roles with 79% of FTE in place as of 30 June 2023, against a target of 60–80% for this stage of the roll-out. | **Health** | 66.469 | 47.398 | 0.000 | 19.071 |
| **2019** | Hospital chaplaincy mental health component | Budget 2019 provided a small increase for existing hospital chaplaincy services delivered to staff, patients, and their whānau experiencing distress in public hospitals across the country. | **Health** | 0.000 | 2.900 | 0.000 | (2.900) |
| **2019** | Workforce development investment to grow and upskill existing workforces and develop new workforces | This has funded a range of initiatives aimed at growing existing workforces, developing new workforces, and supporting, upskilling, and retaining existing workforces.**Status update:** In the 2023 academic year, this investment funded: 26 additional psychology internships, 4 new psychology training hubs, 16 additional youth addiction and 2 additional child and youth cognitive behavioural therapy (CBT) postgraduate places, 148 nurse entry to specialist places (NESP) nursing places, and 51 NESP allied health places. In the 2022/23 financial year, this investment: funded 11 new scholarships for Muslims studying towards MHA careers, established an Eating Disorders Advisory Group and a Perinatal Mental Health Workforce Development Programme, saw 187 counsellors accredited under Health NZ accreditation initiative, and began the establishment of 5 peer support specialist initiatives to fund 26 FTE in 2023/24 into specialist services multidisciplinary teams. | **Health** | 77.067 | 61.698 | 0.000 | 15.369 |
| **2019** | Enablers funding  | Enablers funding was provided to facilitate implementation of the Access and Choice services. Investment included the internal implementation costs of implementing Access and Choice services, IT costs, design costs, evaluation costs, and implementation support to put the services in place. **Status update:** Funding has enabled near complete implementation of all four workstreams. | **Health** | 39.100 | 25.020 | 0.000 | 14.080 |
| **2019** | Enhancing School Based Health Services (SBHS—nurses in schools) in decile 1–4 schools and expanding to decile 5 schools | This funding was to expand SBHS to publicly funded decile 5 secondary schools and launched an enhancement programme. The SBHS enhancement programme has a particular focus on improving services for populations not well served by the current system, including rangatahi Māori, Pacific young people, rainbow young people, care-experienced young people, and disabled young people. **Status update:** The roll-out of SBHS to decile 5 secondary schools was completed in June 2020. As of 30 June 2023, 354 education settings around Aotearoa had SBHS available, covering more than 120,000 eligible students and delivered by a total of 167 FTE. | **Health** | 19.600 | 17.498 | 0.000 | 2.102 |
| **2019** | Increasing people’s access to MHA support over the phone and online  | This funding was to increase capacity in MHA telehealth services delivered by Whakarongorau; and to support two whole-of-population digital wellbeing tools—Headstrong for young people and Groov for adults/whole population. **Status update:** Both of these initiatives are completed. MHA telehealth volumes via Whakarongorau lines have uplifted, and there have been 1,922 new registrations for Headstrong and 135,191 new registrations for Groov. | **Health** | 20.800 | 13.386 | 0.000 | 7.414 |
| **2019** | Improving support for people experiencing a mental health crisis | This funding was used for two initiatives: peer support service based in the crisis hub in Hawke’s Bay; and additional FTE across all districts to support the development and implementation of district crisis capability to better support people in crisis in EDs. **Status update:** The peer support crisis hub He Tāwharau has seen a significant growth in peer contacts, from 271 in quarter 3, 2022/23 to 470 in quarter 4, 2022/23 (73.4% increase). District teams have 94.4% of the newly funded FTE in place as of 30 June 2023. | **Health** | 8.000 | 7.286 | 0.000 | 0.714 |
| **2019** | Intensive parenting support—expanding the Pregnancy and Parenting Service | Expanding the Pregnancy and Parenting Service, an intensive outreach service for parents experiencing problems with AOD, to two additional sites—Bay of Plenty and Whanganui. **Status update:** This work has been completed. | **Health** | 7.000 | 7.112 | 0.000 | (0.112) |
| **2019** | Mental wellbeing support for parents and whānau | Pilots of a new model of Well Child support in Counties Manukau, Lakes, and Tairāwhiti to provide enhanced support for parents and whānau who have MHA needs during pregnancy, in the first two years of a child’s life, or following a stillbirth. **Status update:** Evaluation of the pilots through to June 2022 for the Lakes and Counties Manukau sites showed that the services reached 109 mothers and 62 fathers, and potentially influenced 463 whānau members. The pilot in Tairāwhiti was in the early stages of implementation during the evaluation period but is now fully implemented. Budget 2022 provided separate funding to continue the three pilot sites.  | **Health** | 10.000 | 6.637 | 0.000 | 3.363 |
| **2019** | Establish a Mental Health and Wellbeing Commission  | Funding is for the initial establishment and ongoing operation of a new Mental Health and Wellbeing Commission to strengthen leadership and oversight of mental health and addiction in Aotearoa to ensure there is sustained transformational change. **Status update:** Completed. Over three years on, Te Hiringa Mahara—Mental Health and Wellbeing Commission contributes to better and equitable mental health and wellbeing outcomes for all people in Aotearoa by independently:* monitoring assessing, reporting, and sharing findings on mental health and addiction services.
* monitoring and advocacy to address determinants of improved individual and whānau mental health and wellbeing outcomes.
* advocating for communities with lived experience of mental distress and addiction.
* prioritising focus areas for advocacy work.
 | **Health** | 8.000 | 8.000 | 0.000 | 0.000 |
| **2019** | Preventing suicide and supporting people bereaved by suicide | Expanding and improving suicide prevention efforts and responses to the needs of people bereaved by suicide. **Status update:** The investment has funded:* Māori and Pacific Suicide Prevention Community Funds
* Aoake te Rā, a national service to support people bereaved by suicide
* capacity building for suicide prevention coordinators
* the establishment of a National Wellbeing and Resiliency Service for Asian communities
* the establishment of two rainbow wellbeing and resiliency services.

Alongside Budget 2019 investment, Te Aka Whai Ora co-designed and commissioned enhanced Kia Piki Te Ora services to provide national coverage across Aotearoa. | **Health** | 40.000 | 28.479 | 3.143 | 8.378 |
| **2019** | Promoting wellbeing in primary and intermediate schools | Making resilience-building resources available to primary and intermediate schools and teachers across the country through funding Sparklers—a range of web-based mental wellbeing resources for primary and intermediate school teachers. Funding includes recent work to align these resources with the New Zealand Curriculum. **Status update:** Across the 2022/23 financial year, Sparklers had over 62,000 new visitors and over 200,000 unique page views. There is also a Facebook page for teachers that as of 30 June 2023 had 5,571 members and a weekly newsletter was going out to over 8,000 recipients.  | **Health** | 2.200 | 0.635 | 0.000 | 1.565 |
| **2019** | **Treating drug and alcohol addiction** |  | 58.000 | 50.787 | 0.000 | 7.213 |
| **2019** | Enhancing primary addiction responses | Expanding the range of primary support available to people with mild to moderate AOD issues through developing and/or expanding primary-level AOD services in Taranaki, Auckland, Counties Manukau, Capital, Coast and Hutt Valley, South Canterbury, Christchurch, Eastern Bay of Plenty, and National (TalkTime Online and P-Pull). **Status update:** Some NGOs have been slower than others to initiate services. The remaining funding is committed to ongoing service delivery.  | **Health** | 14.000 | 10.960 | 0.000 | 3.040 |
| **2019** | Enhancing specialist alcohol and other drug services | Improving the sustainability of AOD residential services by meeting existing cost pressures, which are primarily related to AOD residential care and detoxification services. This funding was a mixture of funding increases for existing contracts and funding for expansion of services. Corrections funding was to meet existing cost pressures for community residential AOD services accessed by people under Corrections management.**Status update:** As of 30 June 2023, over 90% of Health’s funding was fully committed. The remaining funding is now committed to ongoing service delivery and continuing care.  | **Health** | 42.000 | 37.827 | 0.000 | 4.173 |
| **Corrections** | 2.000 | 2.000 | 0.000 | 0.000 |
| **2019** | **Supporting mental health within the justice sector** |  | 139.144 | 106.942 | 3.553 | 28.649 |
| **2019** | Alcohol and Other Drug Treatment Court (AODTC): operational support 2019/20  | Funding the AODTC for one year to continue operating with dedicated police prosecutors, court coordinators, and lawyer team leaders at the two pilot sites (Auckland and Waitakere) until the pilot ended on 30 June 2020. A further two years’ time-limited funding was provided for three courts through the Proceeds of Crime Fund in June 2022. **Status update:** AODTC received additional and ongoing investment in Budget 2022, enabling the AODTCs in Auckland, Waitakere, and Waikato to continue on a permanent basis. | **Police** | 0.250 | 0.239 | 0.000 | 0.011 |
| **Courts** | 0.200 | 0.200 | 0.000 | 0.000 |
| **Justice** | 0.200 | 0.200 | 0.000 | 0.000 |
| **2019** | Increasing access to mental health and addiction support through Hāpaitia te Oranga Tangata—Safe and Effective Justice programme | This initiative was to improve the health, wellbeing, and quality of life of vulnerable people in Corrections care by providing funding for mental health and addiction interventions. This includes funding for: mental health services for up to 2,310 additional people; family and whānau support services for 275 additional families and whānau per year; and the establishment of additional addiction programmes. **Status update:** Mental health services are on track and continue to exceed referral targets. AOD programmes have had some challenges, including operational issues, recruitment, and COVID-19. Further progress had been made by April 2024 by establishing four more AOD programmes and contracting 22.5 more mental health and AOD roles. | **Corrections** | 127.486 | 95.579 | 3.241 | 28.666 |
| **2019** | Increasing access to mental health and addiction support through Hāpaitia te Oranga Tangata—Safe and Effective Justice programme | This initiative is connected to the above initiative led by the Department of Corrections. Funding was approved for Police as part of the broader initiative to enable an AOD testing pilot to prevent and reduce AOD harm, improve accountability among people completing community-based sentences and bailees to maintain abstinence, increase motivation to access AOD treatment, and improve overall health and wellbeing while reducing reoffending, particularly among Māori, Pacific peoples, and young people.**Status update:** Testing commenced in November 2019. Costs incurred by Police include the resourcing to enable the engagement with The Drug Detection Agency, policy setting, and the overall running of the testing scheme. (Testing costs are paid by Corrections.) | **Police** | 0.782 | 0.470 | 0.312 | 0.000 |
| **2019** | Support for victims: ensuring safe and effective justice and improved mental health outcomes through Hāpaitia te Oranga Tangata—Safe and Effective Justice programme | This initiative funded Victim Support to employ specialist caseworkers to support families bereaved by homicide in their recovery and help them navigate the criminal justice system. The Homicide Caseworker Service offers tailored wraparound support during this extremely traumatic time. Whānau can also access funded trauma counselling through the Victim Assistance Scheme. These families have a single, consistent, professional point of contact until they no longer need it, or their engagement with the criminal justice system ends. **Status update:** As of 1 July 2023, all funding had been allocated. In 2022/23, the Homicide Caseworker Service supported 1,984 people.  | **Justice** | 6.226 | 6.226 | 0.000 | 0.000 |
| **2019** | Te Ara Oranga—methamphetamine harm reduction programme in Northland | Continuing the successful joint initiative between Northland DHB and Police to reduce harm from methamphetamine. | **Health** | 4.000 | 4.028 | 0.000 | (0.028) |
| **2019** | **Strengthening existing mental health services** |  | 487.568 | 302.139 | 120.705 | 64.724 |
| **2019** | Uplift to DHB funding ringfenced for specialist MHA services  | All funds were allocated to former DHBs for specialist mental health and addiction services. | **Health** | 213.088 | 213.088 | 0.000 | 0.000 |
| **2019** | Enhancing forensic services for adults, including additional FTE and training courses for staff with wraparound support | Most of the funding has been allocated to additional FTE and beds for both existing and new adult community-based forensic step-down services in the five areas where the regional forensic services are based. **Status update:** Funding is committed to four of these services as of 30 June 2023, with further work on the fifth area (Waikato district) to follow in 2023/24. Service delivery is on track for the other four step-down services, with 87% of FTE in place as of 30 June 2023. A small amount has also been used for workforce development and prison in-reach services. | **Health** | 15.000 | 13.091 | 0.000 | 1.909 |
| **2019** | Enhancing forensic services for young people, including additional FTE and training courses for staff with wraparound support | Most of the funding has been allocated to additional community-based FTE to support the five regional youth forensic services. A small amount has also gone to workforce support for clinical staff to complete postgraduate studies. **Status update:** The funding has been allocated to new services as well as to expanding capacity in existing services. Recruitment into these roles was slower than anticipated: 66% of FTE are in place for four regional services (but not Waikato) as of 30 June 2023. | **Health** | 19.000 | 18.160 | 0.000 | 0.840 |
| **2019** | Mental health facilities upgrades | This initiative supports five mental health and addiction infrastructure projects in Waitematā, Lakes, MidCentral, Waikato, and Tairāwhiti. As of 30 June 2023, total funding of $463.7 million was allocated across the projects, $235 million of which was funded through the Budget 2019 package. **Status update:** As of 30 June 2023, the projects at Waitematā, MidCentral, and Tairāwhiti had construction works under way while the projects at Lakes and Waikato were undertaking activities to award main contracts. | **Health** | 235.000 | 52.320 | 120.705 | 61.975 |
| **2019** | Support for Christchurch  | Continuation of time-limited funding for support from primary care and community-based mental health workers, which was established after the 2010–2011 Canterbury earthquakes and continued to provide support following the 15 March 2019 terror attacks. | **Health** | 5.480 | 5.480 | 0.000 | 0.000 |
| **2019** | **Investing in social determinants of mental health** |  | 529.629 | 528.482 | 0.534 | 0.613 |
| **2019** | Transitional Housing: funding for the continued provision of transitional housing to support those in need  | Improve housing and social outcomes through the Transitional Housing programme by reducing homelessness through the provision of warm, dry, and safe short-term accommodation for individuals and families in insecure housing. **Status update:** This was done through the expansion of the Transitional Housing programme by 1,000 places and was completed in February 2021. Families and individuals stay in transitional housing on average for around 12 weeks but can stay longer if necessary. | **Housing and Urban Development** | 283.331 | 283.331 | 0.000 | 0.000 |
| **2019** | Maintaining and strengthening the Housing First programme as a response to ending homelessness  | This initiative is to continue to improve the social and housing outcomes of chronically homeless people. It provides additional funding to maintain the current level of Housing First places and support services, as well as expanding the Housing First programme by an additional 1,044 places to a total of around 2,700. Housing First is an initiative that houses and supports people who have been homeless for a long time, or who are homeless and face multiple and complex issues.**Status update:** This target was achieved a year early, with 1,126 additional places established as of 30 June 2022.  | **Housing and Urban Development** | 194.065 | 194.065 | 0.000 | 0.000 |
| The Ministry of Social Development portion of this funding went solely to funding an anticipated increase in spending on the Accommodation Supplement under the Accommodation Assistance appropriation. Funding to this appropriation is intended to achieve social outcomes by providing targeted financial support to help eligible people meet the costs of accommodation. | **Social Development** | 2.935 | 2.935 | 0.000 | 0.000 |
| **2019** | Disabled people and people with health conditions: improving employment and wider wellbeing outcomes  | This funding is to support, through the Oranga Mahi programme, an additional 2,600 disabled people and people with health conditions, including those with mental health needs, to find and stay in meaningful employment, increase their knowledge and skills, and improve their health and wider wellbeing. **Status update:** From 1 July 2019 to 30 June 2023, the Oranga Mahi programme supported 2,021 people. COVID-19 heavily impacted enrolments into services between 2020 and 2021, as referral pathways into these programmes were primarily through health agencies. From 2022 onwards, volumes increased to the extent that 73% of the total target volume for this period was achieved. | **Social Development** | 26.332 | 25.185 | 0.534 | 0.613 |
| **2019** | Housing Support Products: expansion to help more people access and maintain tenancies  | This initiative set out to improve housing outcomes through providing increased funding for Housing Support Products, which are financial and non-financial products aiming to address barriers to accessing or retaining housing by meeting needs not covered by other forms of assistance. The additional funding provided a new recoverable rent arrears product to the Housing Support Products programme to help people who were unable to access other forms of assistance to meet rent arrears. This new assistance aimed to help people in rent arrears who would otherwise not be entitled to assistance to retain their tenancy and so avoid entering social housing, needing emergency housing, and/or becoming homeless.**Status update:** The Budget 2019 funding for this initiative has been spent and Budget 2022 has provided further funding for the programme (but is not included in this table). | **Social Development** | 18.900 | 18.900 | 0.000 | 0.000 |
| **2019** | Promoting and supporting the health and wellbeing of veterans and their families  | The funding was provided to enhance direct services to veterans, such as health and wellbeing assessments, capital investment to develop the payment and rehabilitation plan management system supporting veterans, and additional staff and legal costs. **Status update:** The work is complete, and targets have been met. | **Defence Force** | 4.066 | 4.066 | 0.000 | 0.000 |
| **2019** | **Supporting mental wellbeing** |  | 176.378 | 165.914 | 13.224 | (2.760) |
| **2019** | An effective, timely Crown response to the Royal Commission of Inquiry into Historical Abuse in Care (Royal Commission) | This initiative aimed to ensure the Crown engaged with the Royal Commission in a full, timely and joined-up manner to:* help the Royal Commission complete its investigations and deliver on its terms of reference
* receive and consider the Royal Commission’s findings and recommendations.

**Status update:** The focus of the Crown’s response to the Royal Commission was initially on:* responding to the Royal Commission’s requests for information and evidence. This has included agencies providing more than 650,000 documents to the Royal Commission; and location and digitisation of records held by Archives New Zealand to support agencies in providing material to the Royal Commission
* coordinating Crown witnesses, attendance at, and monitoring of Royal Commission hearings
* responding to survivor and media requests for information.

The Royal Commission delivered its final report and recommendations to the Governor-General in June 2024. Its findings were made public on 24 July 2024 when its final report, [Whanaketia—Through pain and trauma, from darkness to light](https://www.abuseincare.org.nz/reports/whanaketia) (Abuse in Care—Royal Commission of Inquiry, 2024), was presented to Parliament. The Crown’s focus is on the careful consideration of and appropriate response to the full suite of recommendations. | **Oranga Tamariki** | 6.748 | 6.748 | 0.000 | 0.000 |
| **Internal Affairs** | 1.418 | 1.418 | 0.000 | 0.000 |
| **Education** | 0.464 | 0.464 | 0.000 | 0.000 |
| **Courts** | 0.200 | 0.200 | 0.000 | 0.000 |
| **Public Service Commission** | 0.200 | 0.200 | 0.000 | 0.000 |
| **Health** | 0.150 | 0.150 | 0.000 | 0.000 |
| **2019** | Establishment of the Royal Commission of Inquiry into Historical Abuse in State Care and in the Care of Faith-Based Institutions  | This funding established, and supported, the operation of the Royal Commission to examine and report on the historical abuse of children, young people, and vulnerable adults in State care and in the care of faith-based institutions. The Royal Commission, established in 2018, is the largest statutory inquiry undertaken to date in Aotearoa.**Status update:** By 30 June 2023, the Royal Commission had produced four interim reports and completed its programme of public hearings and evidence gathering. The Royal Commission delivered its final report and recommendations to the Governor-General in June 2024. Its findings were made public on 24 July 2024 when its final report, [Whanaketia—Through pain and trauma, from darkness to light](https://www.abuseincare.org.nz/reports/whanaketia) (Abuse in Care—Royal Commission of Inquiry, 2024), was presented to Parliament.Note: The Royal Commission received funding from multiple budgets, with multi-year appropriations from 2018/2019 until 30 June 2023. Therefore, amounts shown in this report do not provide a complete picture of its total funding and actual spend. | **Internal Affairs** | 66.376 | 66.376 | 0.000 | 0.000 |
| **2019** | Historical abuse while in State care: resolving claims  | The Historic Claims process provides an alternative way for people who have experienced abuse or neglect while in the care of the State to resolve their claims without needing to resort to civil litigation. The Historic Claims process, as one part of responding to claims, assists claimants to access counselling and link them in with other services where necessary. Where Accident Compensation Corporation or community support options are not appropriate for the claimant to access, Historic Claims will fund a limited number of counselling sessions for claimants. It also has integrated a wraparound navigation service that links claimants to existing services.**Status update:** The funding has been spent and Historic Claims received further funding from 1 July 2023 to continue to deliver services. | **Social Development** | 95.184 | 81.963 | 13.224 | (0.003) |
| **2019** | Sensitive claims of abuse: funding to resolve and acknowledge historical abuse in the schooling system  | This funding is to ensure the resolution of claims against the Crown for allegations of historical physical, psychological, and sexual abuse that occurred at a school, including residential special schools, by way of apology and, where warranted, a payment or other support in recognition of mistreatment. **Status update:** At the time of the Budget 2019 bid, Education had 33 unresolved claims and 19 unresolved joint claims with the Ministry of Social Development. There are 363 claims as of 30 April 2024. | **Education** | 5.638 | 8.395 | 0.000 | (2.757) |
|   | TOTAL BUDGET 2019 INITIATIVES |  | 1,961.393 | 1,649.049 | 148.548 | 163.796 |

|  |
| --- |
| **Budget 2020 to Budget 2022 mental health and addiction initiatives** |
| **From 1 July 2020** | COVID-19 Response and Recovery Fund: $25 million over four years to mental wellbeing support for tertiary students | A joint initiative delivered by Education and Health. This is in addition to funding made available to Te Pūkenga. This joint initiative funds a mix of mental wellbeing promotion, and direct group and individual services for students—expanding on supports funded through the tertiary education institutes. The funding increases each year over a four-year period: $2 million in 2020/21, $5 million in 2021/22, $8 million in 2022/23, and $10 million in 2023/24 and outyears. **Status update:** As of 30 June 2023, service delivery continues. In 2022/23, services delivered 20,875 sessions and saw over 13,600 new people. | **Health** | 15.000 | 14.384 | 0.000 | 0.616 |
| **From 1 July 2020** | Ongoing funding for the new Mental Health and Wellbeing Commission | Funding the ongoing operation of the new Mental Health and Wellbeing Commission, as recommended by He Ara Oranga, the report of the Government Inquiry into Mental Health and Addiction. See the Budget 2019 section of this table for detail. | **Health** | 11.173 | 11.173 | 0.000 | 0.000 |
| **From 1 July 2021 to 30 June 2022** | Mana Ake—Stronger for Tomorrow | Reprioritisation of $12 million in one-off funding to enable the continuation of the existing Mana Ake initiative in 2021/22 to make mental health support available to all primary and intermediate school students in Canterbury and Kaikōura. This funding also enables the co-design of mental wellbeing supports in primary and intermediate schools in five new DHB areas: Northland, Counties Manukau, Lakes, Bay of Plenty, and the West Coast. **Status update:** This initiative is completed. The funding supported ongoing service delivery in Canterbury and Kaikōura to 30 June 2022, after which Budget 2022 funding supported the continuation of these services. | **Health** | 12.000 | 9.097 | 0.000 | 2.903 |
| **From 1 July 2022** | Piki—continuation of integrated primary mental health and addiction support for young people in Greater Wellington | This funding is to continue the Integrated Psychological Therapies Pilot, now known as Piki. This will enable continued access to free integrated primary mental health and addiction support for young people aged 18–25 years in the Greater Wellington area. This initiative is part of the multi-year Health process. **Status update:** Service delivery is on track and continues at existing levels, with 26.75 FTE across 10 providers in the Greater Wellington region. | **Health** | 1.750 | 1.750 | 0.000 | 0.000 |
| **From 1 July 2022** | Mana Ake—expansion of mental wellbeing support for primary and intermediate school students | This funding is to enable ongoing delivery of Mana Ake in Canterbury and Kaikōura and the commencement Mana Ake for primary and intermediate school students in Northland, Counties Manukau, Bay of Plenty, Lakes, and West Coast areas. This is a joint initiative of Health and Education. **Status update:** As of 30 June 2023, the programme was well established across Canterbury and Kaikōura, where it was available to all eligible schools. The programme had also commenced in the West Coast and at a small scale in Lakes, Bay of Plenty, and Northland, and had started engaging with schools to build relationships and promote services. All areas are expected to have their total contracted FTE in place by 1 July 2025 but will continue to roll out and expand to new schools right through to June 2026. | **Health** | 14.333 | 10.725 | 3.608 | 0.000 |
| **Education** | 0.165 | 0.165 | 0.000 | 0.000 |
| **From 1 July 2022** | **Increasing availability of specialist mental health and addiction services** | **Health** | **9.400** | **4.291** | **1.557** | **3.551** |
| **2022** | Eating disorders services  | This initiative is part of the multi-year Health process and expands the four existing regional eating disorders services. This component will fund 12.5 additional FTEs by the end of 2025/26 across all regional eating disorder services. At the end of the roll-out, the extra FTE are expected to support approximately 200 additional people per year. **Status update:** Recruitment is under way in all four districts but there have been delays due to workforce shortages. | **Health** | 0.700 | 0.599 | 0.000 | 0.101 |
| **2022** | Maternal and infant specialist MHA services | This funding is for additional FTE to expand existing community-based specialist maternal mental health services and home-based supports (packages of care) for whānau with higher needs. At full scale from the end of 2025/26, this initiative is intended to fund approximately an additional 21 FTEs per year and a minimum of 97 packages of care per year. **Status update:** Additional FTE and packages of care were funded in Waitematā, Hawke’s Bay, Bay of Plenty, Counties Manukau, Tairāwhiti, Nelson Marlborough, and Southern districts; and packages of care only in Taranaki, Whanganui, and MidCentral. Workforce constraints have resulted in slower than expected expansion of services. However, phased service expansion continues with ongoing recruitment into contracted roles. The funding was also used to conduct a one-off environmental scan of maternal mental health services in each region to inform future investment decisions and contribute to Health New Zealand’s work to establish maternal mental health and wellbeing pathways of care. | **Health** | 1.000 | 0.268 | 0.479 | 0.253 |
| **2022** | Community-based crisis services | By the end of 2025/26, this component will fund seven community-based crisis initiatives across a mix of small, medium, and large areas identified as having the lowest level of existing investment in crisis services while also having high-needs populations. This funding will be targeted at a mix of expanding existing services and developing new services. Depending on each area’s needs, service models could include a mix of intensive supports, e.g., residential crisis respite services, co-response services with the New Zealand Police, expanding community-based crisis teams, home-based respite care, and/or including peer-led services or introducing peer support specialists into these teams.**Status update:** Service-level agreements have been signed covering six districts (Lakes, West Coast, MidCentral, Southern, Bay of Plenty, and Capital, Coast and Hutt Valley). The initiative is underspent due to delays with procurement and contracting NGO providers to deliver the new services. | **Health** | 2.500 | 0.305 | 0.708 | 1.487 |
| **2022** | Child and adolescent specialist MHA services | This funding will increase the capacity of existing specialist infant, child, and adolescent mental health and addiction services (ICAMHS). This will enable approximately 1,300 additional children and young people to be seen by the end of 2025/26. Funding will support a mixture of clinical and non-clinical FTE. **Status update:** The funding is allocated to provide increased capacity in the ICAMHS with the lowest level of investment per capita (MidCentral, Northland, Hawke’s Bay), Oranga Tamariki social workers in mental health child and youth inpatient units (co-funded by Oranga Tamariki), and additional specialist mental health and addiction support in Oranga Tamariki care and protection facilities (Hutt Valley and Southern). In 2022/23, $750,000 of the funding spent was reprioritised to support the psychosocial response to the severe weather events in the North Island in early 2023. | **Health** | 2.000 | 1.350 | 0.000 | 0.650 |
| **2022** | Kaupapa Māori specialist MHA services | Whakahohoro Te Hau—in 2021, He Waka Tapu and Purapura Whetū proposed a project to develop an alternative pathway to support whānau Māori experiencing acute mental distress within a community context. **Status update:** Te Aka Whai Ora and Health NZ jointly agreed to fund the service for a further 12 months to 30 June 2024. The intention is to undertake an evaluation of the service to determine the impact on achieving better outcomes for whānau experiencing acute mental distress.He Kete Whaiora—this new initiative will trial the development and expansion of cultural packages of care to assist in tāngata whaiora recovery journeys. This will enable tāngata whaiora to explore self-determined solutions to heal from experiences of acute distress and fund uniquely tailored strategies to maintain oranga hinengaro through Te Ao Māori approaches.  | **Health** | 1.000 | 0.630 | 0.370 | 0.000 |
| **2022** | Workforce development (WFD) | This initiative is to provide skills and knowledge growth and early career retention in specialty areas. **Status update:** Funding went to a range of initiatives including:* maternal mental health WFD support
* national advanced training framework and support for eating disorder services
* parent–child interaction therapy (PCIT) training in the infant, child, and youth sector
* development of WFD plan for ICAMHS working with Oranga Tamariki rangatahi and tamariki
* increasing Mātauranga Māori knowledge for eating disorder practitioners working with Māori.
 | **Health** | 1.000 | 0.530 | 0.000 | 0.470 |
| **2022** | Enablers | This is to fund the infrastructure to support implementation of these initiatives, including operational costs associated with commissioning and oversight of the initiatives and any evaluations or IT development. **Status update:** Funding has supported a range of operational, project management, and reporting initiatives. | **Health** | 1.200 | 0.609 | 0.000 | 0.591 |
|   | TOTAL BUDGET 2020 TO BUDGET 2022 INITIATIVES |  | 63.821 | 51.585 | 5.165 | 7.071 |

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1. ‘Funds committed’ accounts for funding from 2019/20 to 2022/23 that may have been committed in a contract to be spent after 1 July 2023. This funding is in addition to the actual expenditure incurred (paid) up to 30 June 2023. [↑](#footnote-ref-2)
2. Portfolios refer to areas of responsibility held by Ministers. [↑](#footnote-ref-3)
3. The underspend relates to the period 1 July 2019 to 30 June 2022. Health New Zealand fully committed the available annual funding for the Access and Choice programme in 2022/23. See the discussion on the restructuring of the health services of Aotearoa (Shift Three). [↑](#footnote-ref-4)
4. Capital expenditure covers a 10-year total to 2027/28. [↑](#footnote-ref-5)
5. Generally, a Vote groups similar or related funding appropriations together (e.g., Vote Health includes all health-related appropriations administered by the Ministry of Health). Although one or more Ministers may have responsibility for different appropriations in a Vote, only one department administers a Vote. [↑](#footnote-ref-6)
6. Operating funding is for spending that does not result in an asset on the Government’s books. Examples of operating expenditure for these initiatives are wages and accommodation costs. Operating expenditure is managed on a four-year basis for Budget allowance purposes. [↑](#footnote-ref-7)
7. Capital funding is for spending that results in an asset on the Government’s books. An asset is expected to generate economic benefit and must be controlled by the Government. Capital expenditure includes purchasing physical assets (e.g., building hospital facilities). Capital expenditure is managed on a 10-year basis for Budget allowance purposes. [↑](#footnote-ref-8)
8. The restructure of public health services during this reporting period disestablished DHBs. [↑](#footnote-ref-9)
9. The majority of this was $11.147 million in funding for the Royal Commission of Inquiry into Historical Abuse in Care in 2018/19. [↑](#footnote-ref-10)
10. We do not have the detail to disaggregate to new versus cost pressures for this initiative, which is part of an ongoing programme of work. [↑](#footnote-ref-11)
11. The initiatives listed in the table add to less than the overall underspend of $163.8 million. We have only shown the amounts over $3million. See Table 4 for a complete list. [↑](#footnote-ref-12)
12. Shows the underspend as a percentage of each initiative’s total funding. [↑](#footnote-ref-13)
13. The underspend relates to the period 1 July 2019 to 30 June 2022. Health New Zealand fully committed the available annual funding for the Access and Choice programme in 2022/23. See the discussion in the [Overall summary](#_Overall_summary) on the restructuring of the health services of Aotearoa (Shift Three). [↑](#footnote-ref-14)
14. Kua Tīmata Te Haeranga reported the ‘number of people seen’ as 95,250 in 2021/22 and 136,260 in 2022/23, towards the expectation of up to 248,000 people seen per year (Te Hiringa Mahara, 2024, p.33). [↑](#footnote-ref-15)